

TECHNICAL PROPOSAL - ORIGINAL

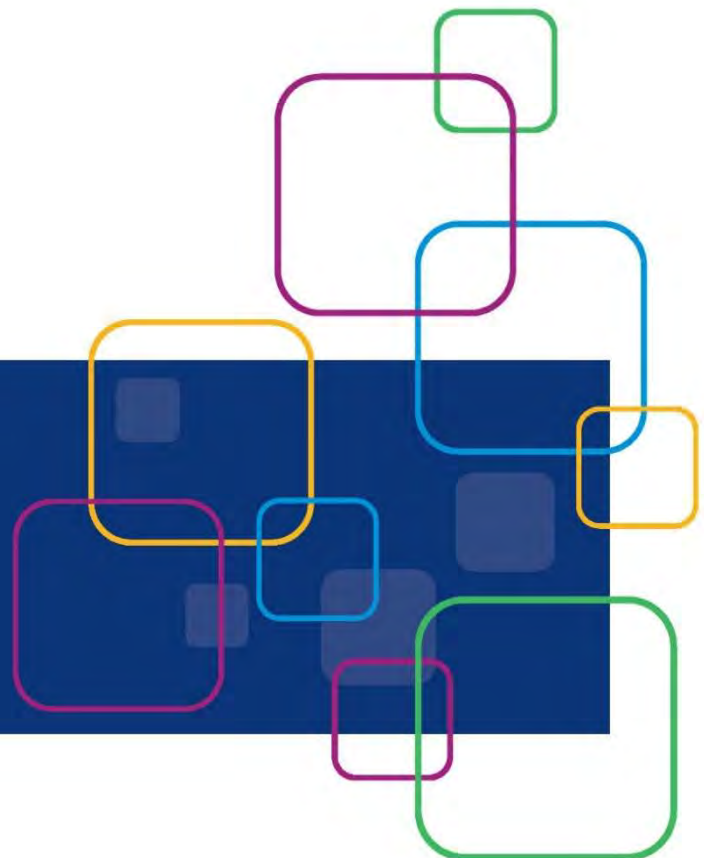
State of Arkansas Department of Human Services

Independent Verification and Validation Services
for the
Integrated Eligibility and Benefit Management Solution

Bid No. 710-19-1021R

October 1, 2019 | 2:00 PM Central

Arkansas Department of Human Services
ATTN: Office of Procurement
700 Main Street Slot W345
Little Rock, AR 72201



FINAL TECHNICAL PROPOSAL PACKET 710-19-1021R

Note: Updates to this final Technical Proposal Packet are designated by red font.

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PROPOSAL SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION				
Company:	Public Consulting Group, Inc.			
Address:	621 Capitol Mall, Suite 1425			
City:	Sacramento	State:	CA	Zip Code: 95814
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"/> Asian American <input type="checkbox"/> Service Disabled Veteran <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Pacific Islander American <input type="checkbox"/> Women-Owned			
AR Certification #:		* See Minority and Women-Owned Business Policy		
PROSPECTIVE CONTRACTOR CONTACT INFORMATION				
Provide contact information to be used for bid solicitation related matters.				
Contact Person:	Lynda Hefner	Title:	Proposal Manager	
Phone:	(916) 565-8090	Alternate Phone:	Not Applicable	
Email:	services@pcgus.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.				
<p><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 Bid Solicitation for additional information.</i></p>				
ILLEGAL IMMIGRANT CONFIRMATION				
By signing and submitting a response to this <i>Bid Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.				
ISRAEL BOYCOTT RESTRICTION CONFIRMATION				
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.				
<input checked="" type="checkbox"/> Prospective Contractor does not and will 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 *Bid Solicitation* will cause the Prospective Contractor's proposal to be disqualified.

Authorized Signature:  Title: Practice Area Director

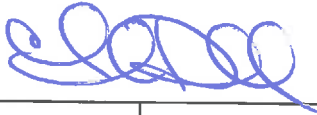
Use Ink Only.

Printed/Typed Name: Mitchell Dobbins Date: September 26, 2019

SECTION 1 - 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.

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



Vendor Name:	Public Consulting Group, Inc.	Date:	September 26, 2019
Authorized Signature:		Title:	Practice Area Director
Print/Type Name:	Mitchell Dobbins		

SECTION 2 - 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.

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



Vendor Name:	Public Consulting Group, Inc.	Date:	September 26, 2019
Authorized Signature:		Title:	Practice Area Director
Print/Type Name:	Mitchell Dobbins		

SECTIONS 3, 4, 5 - VENDOR AGREEMENT AND COMPLIANCE

- *Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.*

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



Vendor Name:	Public Consulting Group, Inc.	Date:	September 26, 2019
Authorized Signature:		Title:	Practice Area Director
Print/Type Name:	Mitchell Dobbins		

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
Not Applicable		

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



Vendor Name:	Public Consulting Group, Inc.	Date:	September 26, 2019
Authorized Signature:		Title:	Practice Area Director
Print/Type Name:	Mitchell Dobbins		

SIGNED ADDENDA

Addendum 1

Page 1 of 3

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: Chorsie Burns, Buyer
DATE: August 12, 2019
SUBJECT: 710-19-1021R Independent Verification and Validation Services for the Integrated Eligibility and Benefit Management Solution (IV&V for IEBM)

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

CHANGE OF SPECIFICATIONS

- Replace 1.7 Response Documents item C 1a with the following:
 - a. Five (5) completed hard copies (marked "COPY") of the Technical Proposal Packet.

ADDITIONAL SPECIFICATIONS

- Please add the below to Section 1 of the RFP:

1.33 INTERGOVERNMENTAL/COOPERATIVE USE OF PROPOSAL AND CONTRACT

In accordance with Arkansas Code §19-11-249, this proposal and resulting contract is available to any State Agency or Institution of Higher Education that wishes to utilize the services of the selected proposer, and the proposer agrees, they may enter into an agreement as provided in this solicitation.

- Please add the below chart at the end of the following section: 4.5 PERFORMANCE BONDING

Service Criteria	Acceptable Performance	Damages
PERFORMANCE BONDING	Acceptable performance is defined as one hundred percent (100%) compliance with Service Criteria at all times throughout the contract term as determined by DHS.	The Vendor will be fined five hundred dollars (\$500) per day for each day Vendor fails to meet the Performance Bonding Requirements specified in Service Criteria.
A. The Contractor shall be required to obtain performance bonds to protect the State's interest as follows:		In addition, Vendor's continued failure to meet Service Criteria, may result in a below standard Vendor Performance Report (VPR) maintained in the vendor file and contract termination.
1. The amount of the performance bonds shall be one hundred percent (100%) of the original contract price, unless the State determines that a lesser amount would be adequate for		

<p>the protection of the State.</p> <p>2. The State shall require additional performance bond protection when a contract price is increased or modified.</p> <p>3. The performance bond must be delivered to the Arkansas Department of Human Services Chief Procurement Officer within fourteen (14) days of contract execution.</p> <p>4. The contractor shall notify the State of any changes, modification, or renewals for the performance bond during the term of the contract. The performance bond documentation must be provided to the State with each required notice.</p> <p>5. Failure to provide is a breach of contract and may result in immediate contract termination.</p> <p>6. The Contractor shall submit documentation to the satisfaction of the State that a performance bond has been obtained. The contractor shall notify the State of any changes, modification, or renewals for the performance bond during the term of the contract.</p>		
--	--	--

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 Chorsie Burns at chorsie.burns@dhs.arkansas.gov or (501) 682-6327.



Vendor Signature

Practice Area Director

August 13, 2019

Date

Public Consulting Group, Inc.
Company

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

ADDENDUM 2

TO: All Addressed Vendors
FROM: Chorsie Burns, Buyer
DATE: September 6, 2019
SUBJECT: 710-19-1021R Independent Verification and Validation Services for the Integrated Eligibility and Benefit Management Solution (IV&V for IEBM)

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

CHANGE OF BID OPENING

Bid Opening Date and Time: October 1, 2019 at 2:00pm CST

OTHER

Response to Written Questions: September 11, 2019 by close of business.

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 Chorsie Burns at chorsie.burns@dhs.arkansas.gov or (501) 682-6327.


Vendor Signature _____ Practice Area Director _____
Date _____
Public Consulting Group, Inc.
Company _____

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

Contract Number

Attachment Number

Action Number

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

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.

SUB-CONTRACTOR NAME:

☐ Yes ☒ No PUBLIC CONSULTING GROUP, INC.

IS THIS FOR:

Goods? ☐ Services? ☒ Both? ☐

TAXPAYER ID NAME: 04-2942913

YOUR LAST NAME: DOBBINS

FIRST NAME MITCHELL

MAIL:

ADDRESS: 621 CAPITOL MALL, SUITE 1425

CITY: SACRAMENTO

STATE: CA

ZIP CODE: 95814

COUNTRY: U.S.

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	To		
General Assembly	<input type="checkbox"/>	<input type="checkbox"/>					
Constitutional Officer	<input type="checkbox"/>	<input type="checkbox"/>					
State Board or Commission Member	<input type="checkbox"/>	<input type="checkbox"/>					
State Employee	<input type="checkbox"/>	<input type="checkbox"/>					

☐ 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	To	Person's Name(s)	Ownership Interest (%) Position of Control
General Assembly	<input type="checkbox"/>	<input type="checkbox"/>					
Constitutional Officer	<input type="checkbox"/>	<input type="checkbox"/>					
State Board or Commission Member	<input type="checkbox"/>	<input type="checkbox"/>					
State Employee	<input type="checkbox"/>	<input type="checkbox"/>					

☒ 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 PRACTICE AREA DIRECTOR

Date AUGUST 26, 2019

Vendor Contact Person LYNDIA HEFNER

Title PROPOSAL MANAGER

Phone No. (916) 565-8090

Agency use only

Agency

Name

Department of Human Services

Agency
Contact Person

Contact
Phone No.

Contact
or Grant No.

PCG EQUAL OPPORTUNITY POLICY

Staff Handbook
General Policies

Non-Discrimination and Non-Harassment

PCG is committed to a work environment free from all forms of discrimination and unlawful harassment, including sexual harassment. This policy applies to the working relationships between PCG employees and applicants, contractors, customers, vendors, or others for whom contact is necessary for employees to perform their job duties and responsibilities.

Policy Statement

It is the policy of PCG to provide a workplace which gives every employee an equal opportunity to succeed, regardless of race, color, religious creed, sex, gender, marital status, age, sexual orientation, gender identity, national or ethnic origin, citizenship status, military service, disability or disabling conditions, or any other protected status. This policy applies to all aspects of employment, including work environment, hiring, training, performance reviews, promotions, discipline, and termination.

This policy also applies to all work-related settings, activities and communications (to include electronic, written and oral) whether inside or outside the workplace, and includes client sites, business trips, and business-related social events. PCG's property (telephones, copy machines, facsimile machines, computers, and computer applications such as e-mail and Internet access) may not be used to engage in conduct which violates this policy. PCG's policy against harassment covers employees and other individuals who have a business relationship with the firm, such as subcontractors and vendors.

PCG will not tolerate any form of unlawful discrimination or harassment in the workplace.

PCG reserves the right to view or monitor other internet forums such as social networking Web sites, blogs and other online communication tools to ensure that employees are not in violation of this policy. PCG also has an expectation that employees will represent themselves, other employees and PCG in an appropriate and professional manner. Employees are expected to express workplace issues through designated internal channels to reach an appropriate resolution.

While this policy sets forth PCG's goal of promoting a workplace that is free of unlawful discrimination and harassment, it is not designed or intended to limit PCG's authority to discipline or take remedial action for workplace conduct which the company deems unacceptable, regardless of whether that conduct violates the policy.

Sexual Harassment

Sexual harassment is offensive, affects morale, and, as a result, interferes with our work as a team. Sexual harassment can result from sexual conduct directed towards either male or female employees and can include sexual advances, requests for sexual favors, or verbal or physical conduct of a sexual nature. Sexual Harassment also includes situations when:

- submission to such conduct is made either explicitly or implicitly a term or condition of employment; or
- submission to or rejection of such conduct is used as the basis for employment decisions affecting an individual; or such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

OTHER DOCUMENTATION

Per RFP requirements, PCG provides the following documentation beginning on the next page.

- Attachment D, Terms and Conditions Acceptance
- Bondability Letter
- Independent Auditor's Report and Audited Financial Statements for the last three years

Attachment D

PROFESSIONAL SERVICES CONTRACT
GENERAL TERMS AND CONDITION FOR NON-STATE AGENCY

Except upon the approval of DHS, the terms and conditions set out in this section are non-negotiable items and will be transferred to the contract as written. DHS has determined that any attempt by any vendor to reserve the right to alter or amend the terms and conditions via negotiation, without the approval of DHS, is an exception to the terms and conditions that will result in rejection of the proposal. A statement accepting and agreeing to the terms and conditions set out in this section, or to alternate terms and conditions upon approval of DHS, is required to be submitted with the respondent's proposal.

PCG accepts and agrees to the terms and conditions set out in Attachment D.

Letter of Bondability



All Together. Certain.

August 22, 2019

Arkansas Dept of Human Services

Hays Companies
IDS Center, Suite 700
80 South 8th Street
Minneapolis, MN 55402

612.333.3323 phone
612.373.7270 fax
www.hayscompanies.com

Re: Public Consulting Group, Inc. - Letter of Bondability Bid Number 710-19-1021R

It is our understanding that you are considering the services of Public Consulting Group, Inc. Hays Companies is the Surety Agent for Public Consulting Group, Inc.

We are pleased to have this opportunity to recommend Public Consulting Group, Inc. to you. We are familiar with the principals of Public Consulting Group, Inc. and we highly value our relationship with them. Great American Insurance Company has been the Surety for Public Consulting Group, Inc. for several years. The surety bond program for Public Consulting Group is currently in excess of \$30 Million Dollars.

If a contract is awarded to Public Consulting Group, Inc., we will be pleased to work with them to arrange for performance and payment bonds to guarantee the contract. Such guarantee would be contingent upon the underwriter's satisfactory review of the contract documents; and, Public Consulting Group, Inc. continuing to satisfy underwriting considerations.

We feel very confident in the abilities of Public Consulting Group, Inc. and recommend them for any project that they wish to undertake.

Please feel free to contact me if you should require any additional information.

Sincerely,

Michele L. Grogan, Attorney-in-Fact
Great American Insurance Company
Direct: 612.486-4718
mgrogan@hayscompanies.com

PCG Audited Financial Statements

The attached Audited Financial Statements for Public Consulting Group, Inc. (PCG) are proprietary and confidential. The Statements contain a CONFIDENTIAL watermark and are accessible on a limited and controlled basis. If they are made available to anyone except the government agency that has specifically requested them, sensitive and confidential PCG business information could become available to PCG competitors and partner companies and provide them with an unfair competitive advantage.

To avoid any such risk, we ask that you comply with the following safeguards:

1. Print out and distribute only the minimum number of copies that you need to fulfill the request.
2. Immediately shred all additional hard copies of the document(s).
3. Immediately delete the document from the files that you store electronically, and
4. Do not distribute the electronic document to anyone else, either internally or externally.

For control purposes, access to the statements is managed through a log maintained by the PCG Finance Department.

If you have questions about these required steps, please contact PCG Vice President of Finance Rolf Ruben.

- 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.

Public Consulting Group, Inc. (PCG) has provided independent verification and validation (IV&V) services for more than 100 design, development and implementation (DDI) projects across the United States supporting clients as they implement complex information technology (IT) solutions, responding to changing environments and new legislative requirements. Our consulting work in the Medicaid space includes health care policy, healthcare financing, healthcare information systems, information security, healthcare IT, behavioral health, and managed medical assistance programs.

We've worked with numerous states and their system integrators to provide IV&V services for the development of new integrated eligibility systems, the modification of existing eligibility systems, and enterprise Medicaid solutions. As a recognized IV&V service leader for Medicaid systems, our **Eclipse IV&V®** training program and certification, created in 1997, provides extensive and continuous staff training to make sure our clients have the strongest team possible. Our clients see immediate benefits from PCG's mature Eclipse IV&V® Methodology and Center of Excellence (CoE), as well as our ongoing collaborative relationship with the Center for Medicaid & Medicare Services (CMS) and industry vendors.

Figure 1 illustrates PCG's Medicaid and complex IV&V projects across the nation.

Figure 1: Map of PCG Services

Figure 1 is a map of the United States showing the locations of PCG's Medicaid and complex IV&V projects. The map uses colored dots to indicate the type of service provided: blue for Complex System IV&V, red for Medicaid, dark blue for System and Acceptance Testing, yellow for Procurement Support, and orange for MITA. States with services include WA, MT, ID, NV, CA, AZ, NM, CO, KS, MN, IA, MO, IL, IN, OH, PA, NY, VT, NH, ME, MA, RI, CT, DE, VA, WV, KY, TN, MS, AL, GA, SC, NC, and HI.

PCG is dedicated to the IV&V discipline, demonstrated through our IV&V business model:

- **Our Mature Eclipse IV&V® Practice** – Our practice includes over 100 certified staff equipped with IV&V tools, training and proven best practices, based on our proprietary 22-year-old Eclipse IV&V® Methodology. We've continually invested in and matured our IV&V practice creating our IV&V Center of Excellence (CoE), providing integrated methodologies and best-in-class tools to effectively assess technical processes and components of IT systems, as well as manage the IV&V work effort.
- **Our Mature Eclipse IV&V® Training and Certification Program** – Our proprietary program is built on national standards, including Institute of Electrical and Electronic Engineers (IEEE), Project

Management Institute (PMI®), capability maturity model integration (CMMI™) plus a set of core values designed to assure the delivery of high-quality IV&V services. Our certification is based continuing education requirements to make sure our IV&V consultants maintain their IV&V skills and knowledge.

- **Our Mature Eclipse IV&V® Toolkit** – Our proprietary toolkit was created to make sure our IV&V consultants apply our Eclipse IV&V® Methodology in a repeatable and predictable process. Your IV&V team will use a set of checklists, including agile-related checklists as applicable, to thoroughly assess your IV&V services. We make sure to identify project issues based on written requirements while also making sure your project is delivering what is *required*, not just what is documented.

We bring over 30 years of health and human services programs and Medicaid enterprise systems knowledge, as well as actual experience with Medicaid Eligibility and Enrollment Life Cycle (MEELC), Medicaid Eligibility and Enrollment Toolkit (MEET), Medicaid Enterprise Certification Lifecycle (MECL), and Medicaid Enterprise Certification Toolkit (MECT) checklists. PCG brings to you our IV&V provider experience and lesson-learned from several enterprise-wide modernization projects in other states. Arkansas can rely on our overarching view and perspective of Medicaid enterprise projects for early risk and opportunity identification.

PCG has conducted numerous MEET and MECT checklist assessments, state self-assessments (SS-A), and validated CMS Seven Standards & Conditions compliance and Medicaid Information Technology Architecture (MITA) 3.0 on our Medicaid IV&V projects beginning from project conception to implementation. Our experience includes California, one of the largest, most complex states, as well as smaller states such as Delaware, Louisiana, and Georgia. We have earned credibility with CMS, our partner states, and the many stakeholders that surround these Medicaid improvement initiatives. We've also remained flexible to make sure we continue learning and incorporating lessons-learned along the way. We've applied our lessons learned from our CMS life cycle and checklist assessments to our newest clients in Louisiana, Hawaii, and Michigan. Through our work, the CMS central office and the regional offices have come to know and respect our work and judgment. This strength provides Arkansas with the confidence that PCG's observations, advice, and guidance navigating CMS requirements and relationships is well founded, defensible, and will fit your project needs.

Our strength as an IV&V vendor is further based on our focus on success, not on inconsequential shortcomings. Many IV&V vendors focus on minutia or inconsequential shortcomings or spend valuable time identifying where the project falls short of *completely* meeting industry standard compliance. While these shortcomings may exist, focusing on them has little benefit when such findings are made without consideration of what is practicable or appropriate for the project to achieve success.

All our activities, while conducted in a spirit of technical independence, must be and will be focused on the success of the project and the achievement of your objectives. We build relationships with your project's solution vendors, project management office, state project staff, and executive sponsors, and work collaboratively with the entire project team to provide timely and relevant guidance and oversight. We focus on the project issues and risks that, when practically mitigated or remediated, bring the greatest possible improvements for success. More than one client has expressed to us that "*Having PCG here made a difference.*" PCG looks forward to bringing our positive IV&V experience to Arkansas as well.

Table 1 lists our IV&V projects over the last five years, demonstrating our broad scope IV&V services for project similar in size, complexity or scope of work identified in this solicitation.

Table 1: IV&V Engagements

STATE	CUSTOMER NAME	PROJECT NAME	FUNCTIONALITY
AL	Department of Health Services	Integrated Eligibility and Enrollment System	SNAP & MAGI
CA	Department of Health Care Services	MMIS Replacement	SNAP & MAGI
CA	Department of Social Services	Child Welfare Services New System CWS-NS	
CA	Department of State Hospitals	Personal Duress Alarm System (PDAS)	

CA	Office of the Chief Information Officer	California Financial Information System (Fi\$CAL)	
CA	Office of the Chief Information Officer	21 st Century Project	
CA	Employment Development Department	Automated Collection Enhancement System (ACES)	
CA	Employment Development Department	Unemployment Insurance Modernization (UIMOD)	
CA	Department of Social Services	Case Management Information & Payrolling System (CMIPS) II	
CO	Department of Corrections	Electronic Health Records	
CO	Department of Natural Resources	Integrated Parks & Wildlife System	
CO	Department of Labor & Employment	Workers Compensation Mainframe Migration & Modernization	
CO	Department of Public Safety	Port of Entry Business Systems Replacement	
CO	Office of Information Technology	Financial Reporting System Modernization	
CO	Office of Information Technology	Automated Child Support Enforcement System (ACSES) Migration	
DE	Department of Health & Social Services	Medicaid Eligibility Modernization	MAGI
DE	Department of Health & Social Services	Medicaid Enterprise System (DMES)	SNAP & MAGI
GA	Georgia Technology Authority Department of Corrections	Electronic Health Records	
GA	Georgia Technology Authority Department of Community Health	Healthcare Integrated Eligibility System (Gateway)	SNAP & MAGI
HI	Department of Human Services	Kauhale Online Eligibility Assistance (KOLEA) Solution	SNAP & MAGI
IA	Department of Human Services	Medicaid Integrated Eligibility System	SNAP & MAGI
LA	Department of Health & Hospitals	Medicaid Enterprise Modernization	SNAP & MAGI
MI	Department of Health & Human Services Public Health Institute	MMIS Cloud Enablement & Migration	SNAP & MAGI
MI	Department of Health & Human Services Public Health Institute	Eligibility System (Bridges) Maintenance and Operations	SNAP & MAGI
MI	Department of Health & Human Services Public Health Institute	Statewide Automated Child Welfare Information System (SACWIS)	
MT	Department of Public Health & Human Services	Affordable Care Act (ACA) Implementation	
NV	Silver State Health Insurance	Health Insurance Exchange	
NV	Department of Health and Human Services	Integrated Eligibility Engine	
N/A	The Partnership for Assessment of Readiness for College & Careers (PARCC)	PARCC Consortium	
WA	Department of Social & Health Services	Eligibility Service & ACES Remediation (ESAR)	SNAP & MAGI
WA	Health Benefit Exchange (HBE)	HBE Implementation	SNAP & MAGI
WA	Department of Social & Health Services	Background Check System	
WA	Department of Transportation, Toll Division	Customer Service Center Back Office System	

Describe your company's level of experience with IV&V services provided for SNAP (Sec 2.1)	5																																							
<p>States have increasingly worked to integrate human service programs, including Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), childcare, Low Income Home Energy Assistance Programs (LIHEAP), and others across the Medicaid platform to provide better quality services to their citizens. PCG has performed IV&V services on several state projects including SNAP.</p> <p>Table 2 identifies our IV&V engagements over the past five years that incorporated significant SNAP functionality.</p> <p style="text-align: center;"><i>Table 2: IV&V Engagements Incorporating SNAP</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">State</th> <th style="width: 40%;">Customer Name</th> <th style="width: 50%;">Project Name</th> </tr> </thead> <tbody> <tr> <td>AL</td> <td>Department of Health Services</td> <td>Eligibility and Enrollment System</td> </tr> <tr> <td>CA</td> <td>Department of Health Care Services</td> <td>MMIS Replacement</td> </tr> <tr> <td>DE</td> <td>Department of Health & Social Services</td> <td>Medicaid Eligibility Modernization</td> </tr> <tr> <td>DE</td> <td>Department of Health & Social Services</td> <td>Medicaid Enterprise System (DMES)</td> </tr> <tr> <td>GA</td> <td>Georgia Technology Authority Department of Community Health</td> <td>Healthcare Integrated Eligibility System (Gateway)</td> </tr> <tr> <td>HI</td> <td>Department of Human Services</td> <td>Kauhale Online Eligibility Assistance (KOLEA) Solution</td> </tr> <tr> <td>IA</td> <td>Department of Human Services</td> <td>Medicaid Integrated Eligibility System</td> </tr> <tr> <td>LA</td> <td>Department of Health & Hospitals</td> <td>Medicaid Enterprise Modernization</td> </tr> <tr> <td>MI</td> <td>Department of Health and Human Services Public Health Institute</td> <td>MMIS Cloud Enablement & Migration</td> </tr> <tr> <td>MI</td> <td>Department of Health and Human Services Public Health Institute</td> <td>Eligibility System (Bridges) Maintenance and Operations</td> </tr> <tr> <td>WA</td> <td>Department of Social & Health Services</td> <td>Eligibility Service and ACES Remediation (ESAR)</td> </tr> <tr> <td>WA</td> <td>Health Benefit Exchange</td> <td>Health Benefit Exchange</td> </tr> </tbody> </table>		State	Customer Name	Project Name	AL	Department of Health Services	Eligibility and Enrollment System	CA	Department of Health Care Services	MMIS Replacement	DE	Department of Health & Social Services	Medicaid Eligibility Modernization	DE	Department of Health & Social Services	Medicaid Enterprise System (DMES)	GA	Georgia Technology Authority Department of Community Health	Healthcare Integrated Eligibility System (Gateway)	HI	Department of Human Services	Kauhale Online Eligibility Assistance (KOLEA) Solution	IA	Department of Human Services	Medicaid Integrated Eligibility System	LA	Department of Health & Hospitals	Medicaid Enterprise Modernization	MI	Department of Health and Human Services Public Health Institute	MMIS Cloud Enablement & Migration	MI	Department of Health and Human Services Public Health Institute	Eligibility System (Bridges) Maintenance and Operations	WA	Department of Social & Health Services	Eligibility Service and ACES Remediation (ESAR)	WA	Health Benefit Exchange	Health Benefit Exchange
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Describe your company's level of experience with other IV&V services (Sec 2.1)	5																																							
<p>PCG recognizes that IV&V is not just “checking the boxes” to achieve a list of compliances with federal requirements. Rather, IV&V is recognized in the public and private sectors as an effective tool to accomplish successful projects. As such, effective IV&V must provide a broad set of services tailored to the program's entire ecology. To Arkansas, we bring our IV&V experience in the range of Integrated Eligibility including:</p> <ul style="list-style-type: none"> • Child Support Enforcement (CSE) • Childcare Assistance • Children's Health Insurance Programs (CHIP) • Comprehensive Child Welfare Information System (CCWIS) • LIHEAP • Medicaid (traditional and MAGI) • Food Stamps (SNAP) • TANF • Veteran's Services • Women, Infants and Children (WIC & eWIC) <p>Traditionally, states have developed systems that are bounded by federal funding streams and state agency responsibility. States are moving toward citizen-centric systems that provide integrated services. PCG's IV&V projects have regularly followed this trend under which SNAP is integrated with other eligibility and benefit systems.</p> <p>Table 3 identifies PCG IV&V engagements over the last five years for projects involving other services such</p>																																								

as SNAP.

Table 3: IV&V Engagements Incorporating Other Services

STATE	CUSTOMER NAME	PROJECT NAME
AL	Department of Health Services	Eligibility and Enrollment System
CA	Department of Health Care Services	MMIS Replacement Project
DE	Department of Health & Social Services	Medicaid Eligibility Modernization
DE	Department of Health & Social Services	Medicaid Enterprise System (DMES)
GA	Georgia Technology Authority Department of Community Health	Healthcare Integrated Eligibility System (Gateway)
HI	Department of Human Services	Kauhale Online Eligibility Assistance (KOLEA) Solution
IA	Department of Human Services	Medicaid Integrated Eligibility System
LA	Department of Health & Hospitals	Medicaid Enterprise Modernization
MI	Department of Health & Human Services Public Health Institute	MMIS Cloud Enablement & Migration
MI	Department of Health & Human Services Public Health Institute	Eligibility System (Bridges) Maintenance and Operations
WA	Department of Social & Health Services	Eligibility Service and ACES Remediation (ESAR)
WA	Health Benefit Exchange	Health Benefit Exchange

Describe your company's knowledge or experience with the Deloitte NetGen Solution IEBM. (Sec 2.1)

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PCG brings national experience providing IV&V services to states alongside Deloitte's implementation of their NextGen Solution. We are intimately familiar with NextGen and everyone on our proposed team has worked on multiple, successful, Deloitte NextGen implementations. We've analyzed NextGen throughout entire lifecycles from requirements through R3 (MMIS Certification Final Review). Our team brings checklists, tools, risk and issue logs, and best practices specific to NextGen projects. Most recently, PCG was the IV&V vendor for Deloitte's NextGen engagements in Georgia, Louisiana and Tennessee.

Georgia

PCG has been a part of Georgia's Integrated Eligibility System (IES) project team since January 2012. Core IES is a Deloitte NextGen implementation. Our IV&V services assisted the CMS and Georgia to make sure a solid foundation of requirements was established, followed by the effective and efficient DDI of the system. PCG's team provided IV&V review and support to the IES project on all deliverable development related efforts beginning with aiding in establishing preliminary product formats through the successful completion of the statewide implementation. PCG's independent oversight reliably verified that the system integrator's commitment to the project was continuous, constructive, and producing value.

PCG maintained continued collaboration with Georgia and brought an array of background and experience in system development lifecycles, including the support that assisted in deliverable and milestone development and review, including:

- System Requirement Validation
- Detailed System Design
- Coding and Unit Testing
- System Integration Testing
- User Acceptance Testing
- Training
- Conversion
- Implementation

- Risk and Issue Management
- Organizational Change Management
- Change Control
- Scope Management
- Federal Approval and Certification

During the Georgia IES project, PCG worked with the project teams from Deloitte, the State, and other stakeholders to evaluate each deliverable for completeness and accuracy. Identification of deficiencies resulted in actionable recommendations for resolution. We participated in joint activities to help clarify and plan implementation strategies associated with the recommended resolutions.

The IES project successfully delivered the Gateway system, which provides eligibility determinations, worker access and customer access for Medicaid, Food and Nutrition Services (FNS) SNAP, TANF, DECAL (Child Care and Early Learning) and WIC programs.

Along with the Gateway IES, the project teams performed business process reengineering, trained 6,000 state users, established multiple technical environments, developed user and technical documentation, performed outreach to state citizens, applied MITA, CMS, and FNS standards and directives, rigorously tested and confirmed all functionality, implemented more than 30 interfaces to other state and federal systems, and deployed the system across the state.

PCG was responsible for IV&V services for all the additional work above and analyzed plans, deliverables, work products, and supporting tools; directly tested and measured key project metrics; and reported to management at the state and federal levels. PCG's reporting included identifying issues and risks along with mitigations and recommendations. The PCG team successfully piloted revisions to the latest CMS methods, tools, and checklists for the MEET. During the pilot, we helped CMS and MITRE identify inconsistencies and gaps. As a result, we are directly familiar with the intent and content of the process.

Louisiana

In Louisiana, PCG is the IV&V vendor with Deloitte implementing NextGen on the State's extensive modernization program involving multiple projects covering the integrated architecture, eligibility, and benefits management. Louisiana, along with other states, is working to comply with CMS requirements. The State has successfully taken advantage of the Office of Management and Budget (OMB) A-87 Cost Allocation Waiver under the ACA to develop an enterprise architecture platform to support, not just Medicaid, but other Louisiana and federal programs. Louisiana also successfully garnered enhanced federal funding at a 90% match rate to develop a new eligibility and enrollment system for Louisiana's Medicaid, SNAP and Family Independence Temporary Assistance (FITAP) programs.

PCG provides IV&V services for these initiatives as well as their SNAP and TANF projects on the E&E projects. During this suite of projects, Louisiana transitioned from a waterfall approach to an agile methodology. PCG's IV&V team assisted the State in the transition and provided IV&V services seamlessly using our Eclipse IV&V® Framework, agile tools, checklists, and best practices.

We leveraged our proprietary Framework, complete with our CoE and library of checklists to create, deliver, and manage IV&V activities and reports. PCG has an established working relationship with Louisiana, the system integrator, Deloitte's NextGen team, and Louisiana's PMO for implementing, reviewing, and maintaining the deliverables.

Tennessee

In Tennessee, PCG is the State's Strategic Project Management Office (SPMO) over Deloitte's implementation of NextGen with PCG to providing oversight for:

- CMS MEET and MECT checklists and milestone reviews
- MITA and Seven Conditions & Standards Requirements
- DDI Contractor Performance Monitoring (Deloitte)

- MMIS Modular Modernization Project elements
- Schedule and multi-vendor, multi-phase/project efforts, integration

The Division of TennCare retained PCG as the SPMO service provider for the Division's multi-year E&E and MMIS takeover and redeployment plan. This multi-year approach required the coordination of multiple procurements, funding sources, vendor agreements, and State programs. Tennessee was a pilot program for what CMS would later rebrand as MEET. PCG supported the Division's successful implementation of their Tennessee Eligibility Determination System (TEDS) in early 2019. This deployment is a first step in the State's roadmap for its MMIS modular modernization effort still underway with PCG as the SPMO.

Describe your company's prior experience with Deloitte.

5

PCG has extensive, national experience working with Deloitte helping states achieve their Medicaid goals. Our experience with Deloitte is one of collaboration and mutual respect while maintaining strict independence for the benefit of the state and federal stakeholders. PCG has most recently provided services to Deloitte-implemented projects in Georgia, Louisiana, and Tennessee.

Table 4 lists the PCG IV&V projects in the past five years involving Deloitte-provided system integrations services.

Table 4: IV&V Engagement with Deloitte

STATE	CUSTOMER NAME	PROJECT NAME
AL	Department of Health Services	Eligibility and Enrollment System
CA	Department of Health Care Services	MMIS Replacement Project
DE	Department of Health & Social Services	Medicaid Eligibility Modernization P
DE	Department of Health & Social Services	Medicaid Enterprise System (DMES)
GA	Georgia Technology Authority Department of Community Health	Healthcare Integrated Eligibility System (Gateway)
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IA	Department of Human Services	Medicaid Integrated Eligibility System
LA	Department of Health & Hospitals	Medicaid Enterprise Modernization
MI	Department of Health & Human Services Public Health Institute	MMIS Cloud Enablement & Migration
MI	Department of Health & Human Services Public Health Institute	Eligibility System (Bridges) Maintenance and Operations
WA	Department of Social & Health Services	Eligibility Service and ACES Remediation (ESAR)
WA	Health Benefit Exchange	Health Benefit Exchange

Describe five (5) examples of projects similar in size, complexity and scope to this RFP your company has completed within the past five (5) years. Response must include the following information: Project name and brief detail of provided services, client name, client contact person(s) name, email address and current phone number of contact person(s), project timeframe and the projected amount. (Sec. 2.3-D)

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PROJECT 1: Hawaii Department of Human Services (DHS), Med-QUEST Division

PROJECT NAME: Kauhale Online Eligibility Assistance (KOLEA) Solution

SNAP & MAGI

PROJECT SUMMARY:

The Hawaii Department of Human Services replaced their legacy Medicaid eligibility system with a commercial off-the-shelf (COTS) solution to modernize its system and support the ACA requirements. The KOLEA project was multi-phased with a first release that went live on October 1, 2013. The initial release converted all the Medicaid functionality from the legacy system to KOLEA and creating a Department enterprise platform to first support the benefits, employment and support services programs such as SNAP, TANF, and LIHEAP, followed by social services programs including child

welfare, adult protective services, and others to offer well-coordinated holistic consumer services. The remaining releases, launched in December 2016, added enhanced functionality such as CRM, to KOLEA. These initiatives were analogous to being “modular,” in that the designed enterprise platform, which was managed by the enterprise system integrator (ESI) provider, hosted multiple applications.

The project required two system integrators—the Application System Integrator (ASI) and the ESI. Initially, KPMG served in both capacities, but Unisys was eventually hired as the ASI provider. PCG served as the IV&V service provider on both efforts and worked well with all the partners.

PCG’s assessments were successfully performed and encompassed the following areas: Project Management; Quality Management; Requirements Management; Change Management; Configuration Management; Source Code Review; Database Design; System Design; Data Conversion; Test Plan; System and Acceptance Testing; Training Plan; User Manual Review; Implementation Plan; and Maintenance and Operations.

CLIENT CONTACT PERSON:	Randy Chau, DHS System Officer			EMAIL ADDRESS:	rchau@dhs.hawaii.gov	
PHONE:	(808) 692-7951	PROJECT TIMEFRAME:	Apr 2012 – Dec 2016	PROJECT AMOUNT:	\$ 6.7 million	

PROJECT 2: Michigan Department of Health and Human Services & Public Health Institute

PROJECT NAME: Eligibility System (Bridges) Maintenance and Operations	SNAP & MAGI
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PROJECT SUMMARY:

The goal of the Department was to modernize and integrate their information systems to improve service delivery to their clients and meet federal and Michigan legislative requirements. Work included modernizing their MMIS and migrating the solution to the cloud for state-tenant accessibility; implementing a series of program management offices to standardize activities including project management, release management, quality management, and capacity management across their health and human services systems; modernizing their eligibility system to better support their health and human services programs; and implementing an integrated service delivery approach to shift from siloed programs to a person-centric model to make it easier for individuals to apply for and receive services.

Deloitte served as the system integrator for this engagement, with PCG performing IV&V services on behalf of the State. Deloitte and PCG established a strong, effective working relationship to help ensure a successful outcome of the project. In addition to performing the procedures involved in verifying the project scope’s requirements, PCG also:

- Developed the pricing model and tool leveraging the MMIS solution to other states as a shared system
- Assessed testing activities and identified a series of process improvement initiatives, which were implemented through the Michigan Test Center of Excellence

PCG performed project and system processes in areas including: Project Management; Modular Development; Project Governance; Quality Management; Requirements Management; Operating Environment; Development Environment; Software Development; System and Acceptance Testing; Training; Data Management; System Security; and Operations Oversight

CLIENT CONTACT PERSON:	Brant Cole, Director Medicaid Systems Operations Div.		EMAIL ADDRESS:	ColeB3@michigan.gov	
PHONE:	(517) 241-0288	PROJECT TIMEFRAME:	Aug 2015 - Present	PROJECT AMOUNT:	\$ 6.1 million

PROJECT 3: Delaware Department of Health and Social Services

PROJECT NAME: Medicaid Eligibility Modernization	SNAP
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PROJECT SUMMARY:

The Division of Medicaid and Medical Assistance replaced their legacy MMIS to comply with federal

guidelines and regulations. The new system provides the flexibility to enable Delaware to respond quickly to federal and Delaware legislative changes such as ACA and the HITECH Act includes the scalability to develop into a multi-payer system to support other State programs; drives innovation for new capabilities and services such as web-based, self-service tools; provides State health managers with near-real-time healthcare trend data to identify emerging needs; and reduces reliance on paper claims and documents. In all, the State implemented Modified Adjusted Gross Income (MAGI) rules, an applicant self-service portal, integration of childcare provider and other human services programs, and benefit overpayment collections.

During the project, the state replaced the initial IV&V vendor by bringing in PCG to work with the system integrator, Deloitte and other project vendors to perform project IV&V services.

PCG's successful assessment provided DHSS with confidence that evidence was sufficiently evaluated and supported for each of the oversight areas: Planning Oversight; Project Management Oversight; Quality Management Oversight; Training Oversight; Requirements Management Oversight; Operating Environment Oversight; Development Environment Oversight; Software Development Oversight; System and Acceptance Testing Oversight; Data Management Oversight; and Operations Oversight.

CLIENT CONTACT PERSON:		Michael A. Smith, Director DHSS IRM		EMAIL ADDRESS: Michael.Smith@state.de.us	
PHONE:	(302) 255-9162	PROJECT TIMEFRAME:	Dec 2014 – Sep 2018	PROJECT AMOUNT:	\$ 1.1 million

PROJECT 4: Louisiana Department of Health and Hospitals (currently Department of Health)

PROJECT NAME: Medicaid Systems Modernization	SNAP & MAGI
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PROJECT SUMMARY:

The Department established a goal to better support their Medicaid, SNAP and FITAP programs, to replace their legacy Medicaid systems for an enterprise-like solution, modernize E&E, MMIS, enterprise architecture, and enterprise governance. The State selected PCG to verify these systems followed their enterprise architecture, met business and technical scope, were compliant with CMS Seven Conditions and Standards, as well as requirements for MITA, ACA, and Health Insurance Portability and Accountability Act (HIPAA).

PCG established very good working relationships with the Department, Deloitte as the system integrator (NextGen Solution), Cambria Solutions as the PMO, and Verisys as the DDI vendor implementing, reviewing, and maintaining the deliverables. Our team focused on providing IV&V services based on IEEE 1012-2012 as well as other industry standards, best practices, and our own extensive experience providing IV&V services, throughout the DDI and SDLC to ensure successful CMS certification.

PCG services included analysis of: Project Management Activities; Evaluate Project Progress, Resources, Budget, Schedules, Workflow and Reporting; Configuration Management (CM); Project Deliverables; System Documentation; Software Architecture, Application, Networking, Hardware and Software; Operating Platform Performance; and Data Center needs.

CLIENT CONTACT PERSON:		Shannon Duplessis, Section Chief Medicaid Systems		EMAIL ADDRESS:	Shannon.Duplessis@la.gov		
PHONE:	(225) 342-6917		PROJECT TIMEFRAME:	Jun 2016 - Present		PROJECT AMOUNT:	\$ 11.1 million

PROJECT 5: Georgia Technology Authority & Department of Community Health

PROJECT NAME: Healthcare Integrated Eligibility System (Gateway)	SNAP & MAGI
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PROJECT SUMMARY:

The Georgia Technology Authority sought an enterprise-wide solution to support an integrated, streamlined and efficient delivery of health care and human services. The resulting project required

business process reengineering, training of 6,000 state users, establishment of multiple technical environments, development of user and technical documentation, outreach to citizens, applied MITA, CMS, and FNS standards and directives, rigorously tested and confirmed all functionality, implemented more than 30 interfaces to other state and federal systems, and deployed the system across the state.

PCG provided IV&V consulting services in the domains of TANF, SNAP, Medicaid, and CHIP, as well as the eligibility modules. PCG's team oversaw and verified that the system integrator's commitment to the project was continuous, constructive, and produced value. Additionally, our team participated in the MEELC pilot to revise the latest CMS methods, tools, and checklists for the MEET.

PCG maintained continued collaboration with the State to bring an array of background and experience in system development lifecycles, including assisting in deliverable and milestone development and review such as: System Requirement Validation; Detailed System Design; Coding and Unit Testing; System Integration Testing; User Acceptance Testing; Training; Conversion; Implementation; Risk and Issue Management; Organizational Change Management; Change Control; Scope Management; and Federal Approval and Certification.

CLIENT CONTACT PERSON:	John McCray, Retired			EMAIL ADDRESS:	Jmccray01@gmail.com	
PHONE:	(770) 846-7682	PROJECT TIMEFRAME:	Mar 2011 – Sep 2017	PROJECT AMOUNT:	\$ 12 million	

Technical Solution and Scope of Work

Maximum Available RAW Score

Provide in detail your company's knowledge of the Arkansas DHS System Integrator (SI) RFP (# SP-17-0012)

5

PCG has carefully followed Arkansas' progress in deploying an integrated eligibility and benefit management solution, including reviewing the RFP when it was released and reviewing Deloitte's winning proposal. Additionally, our key personnel have specifically focused on how they can leverage their individual and collective knowledge and experience with integrated eligibility systems, E&E, benefit management, IBM Cúram, human services programs, the NextGen Solution, all phases of systems integration, CMS certification, working with Deloitte, and their Arkansas knowledge to hit the ground running.

The SI RFP reflected the refined business objectives of the DHS to adopt a modern, person and family-centric model of practice away from the traditional application and funding stream models. The technology stack at all levels is expected to support this model and to provide support for future needs. In short, the technology is to benefit people: citizens, workers, and governance.

- Citizens benefit from this approach by having a streamlined and efficient eligibility and benefits model centered on their needs, using no-wrong-door across multiple channels that appear as a unified system of care without dealing with multiple applications, offices, and conflicting processes.
- Workers benefit from this approach by having efficient, consistent, integrated systems that are easy to use, support efficient and well-informed decision making, and are in synch with models of practice, now and into the future.
- Governance bodies benefit by having reliable, up-to-date information to support reporting and data-informed decision making.

Our proposed IV&V team will perform a formal presentation summarizing our understanding of the IEBM Solution, including the SI RFP, within 60 calendar days of the start of the IV&V project.

Arkansas Experience

In late 2014, PCG served as the PMO supporting the Arkansas Health Insurance Marketplace (AHIM) established to provide a Small Business Health Options Program (SHOP) to serve the State. We supported AHIM's implementation of this program, working with AHIM and the Department of Human Services to establish and include the MAGI rules set into the Cúram rules engine. An imperative process for AHIM, the rules set was needed to formulate the Medicaid eligibility against MAGI to support SHOP and potentially an

individual marketplace benefits allocation under the new provisions of the ACA.

Now, half a decade later, the Deloitte NextGen Solution is slated to replace your existing IEBM, to continue supporting the AHIM in the same manner as required by the previous system. PCG's history and institutional knowledge and perspective on these projects provides us with an understanding, not only of the potential impacts to Arkansas, but to one of its key external stakeholders, AHIM, as well. Our history and knowledge of your earlier projects give PCG a unique insight and understanding of the necessity for integration and system integrity in support of both entities.

Additionally, our proposed IV&V Lead was the system integrator project manager for the Arkansas Children's Reporting and Information System (CHRIS) child welfare project.

National Experience

PCG has extensive national experience in eligibility, enrollment, IV&V, benefit management, Deloitte's NextGen Solution, IBM Cúram, all phases of systems integration, and CMS certification. Our multifaceted knowledge based on hands-on experience with each allows us to appreciate the complexity of your IEBM solution. PCG has served as both systems integrator and IV&V vendor for numerous projects; we understand the key role Deloitte plays in your project, how to work with your project vendors without impeding their progress, and how to provide you with exemplary IV&V services.

As project managers, PCG also understands the need for predictable delivery within the boundaries set by an RFP; function, scope, quality, schedule, and cost.

Describe your company's understanding of MEELC and MEET (Sec 2.4.B. 1.d)

5

PCG has over 30 years of knowledge of health and human services programs and Medicaid enterprise systems, over 20 years of IV&V experience and hands-on experience with the CMS MEELC, MEET, MECL, and MEET checklists.

PCG was one of the first firms in the nation to use the MEET and MEET checklists as well as the MECL and MEELC to assist our clients in demonstrating compliance with MEET and MEET criteria. We've provided MEET services to 15 states for their E&E and integrated eligibility projects, and MEET services to seven states for their MMIS projects since we participated in the 2017 MEELC pilot with CMS for the Georgia Healthcare Eligibility (Gateway) system.

PCG's Understanding of MEET

A major CMS goal is to transform the way that State Medicaid Agencies (SMA) think about and develop systems in support of the Medicaid enterprise. This transformation journey has been punctuated with initiatives such as the MITA Framework and architectures, and more recently the shift to modularity. To both encourage states and to hold them accountable, CMS began to tie the approval of enhanced federal funding (90 percent) to the state's compliance with CMS S&Cs. Despite states' commitment to the S&C, Medicaid Enterprise development projects continued to fail – sometimes falling short of meeting the S&Cs or other critical success factors, other times resulting in full project failures. For those Medicaid enterprise projects that reached implementation and transition to operations, certification was sometimes delayed or rejected because the system did not include compliance with one or more system criteria. The non-compliance was not recognized early enough in the development life cycle to have mitigated the risk to certification and thus to enhanced federal funding.

With the passage of ACA and the temporary extension of enhanced federal funding for ACA-related systems, CMS determined to better protect their investment in eligibility and enrollment systems through the Exchange Life Cycle, later replaced by the Expedited Life Cycle (XLC). The XLC inserted CMS oversight through a series of gate reviews with the goal of increasing project transparency and predictability of success. CMS gate reviews occurred at key points in the SDLC and provided early warning to CMS and to states that a system under development was at risk of failing to meet critical success factors, including the S&C, project schedule dates, or regulatory objectives. The XLC was considered successful in increasing project transparency for CMS and the states and was used as a model to construct a similar process for CMS oversight of MMIS development projects. By combining the oversight aspects of the XLC with the CMS

criteria and critical success factors contained in the MEET checklists, the MECL was developed. After some refinement of the MECL process, the XLC was retired in favor of a virtually identical process to the MECL. The replacement for the XLC, the MEELC, was released Aug. 10, 2017.

Both the MEELC and MECL are adaptations of the XLC. Like XLC and its incorporation of gate reviews, the MEELC incorporates milestone reviews at key junctures of the E&E project life cycle. The MEELC is focused on the goal of protecting CMS investment in E&E projects by assuring that CMS criteria and two types of critical success factors (CSFs), programmatic and E&E, are “baked in” to E&E projects from the beginning. Evaluation of how well the E&E system meets MEET criteria and CSFs occurs through early (beginning with procurement activities) and periodic IV&V assessments described in E&E IV&V Progress Reports.

The introduction of two key facets of the MEELC, Milestone Reviews and E&E IV&V Progress Reports – provide the early feedback and progress reporting necessary to support the MEELC goal. CMS leveraged lessons learned from the MEELC/MEET pilots and updated the approach to include milestone reviews throughout the project life cycle so that CMS and states receive early feedback about risks or issues that may impede meeting critical success factors, and thus impede CMS approvals. The role of IV&V service providers was expanded to include a focus on the state’s progress toward meeting the critical success factors. As a result, IV&V teams complete periodic E&E IV&V Progress Reports and send these simultaneously to CMS and to the state. The E&E IV&V Progress Reports include a summary of the project’s status and an evaluation of programmatic critical success factors.

Because of PCG’s experience with MITA, MEELC and MEET, MECL and MEET, and participation in industry-influencing groups and events such as Health Information Management Systems Society, the Private Sector Technology Group, and Medicaid Enterprise Systems Conference (MESCC), we have gained a significant understanding of the MEELC. The goal of the MEELC is to assure that the E&E system will meet critical success factors and obtain CMS approvals. This is accomplished using quarterly and milestone review E&E IV&V Progress Reports that describe the progress the state has made toward meeting critical success factors, as determined by evaluating relevant MEET checklist requirement evidence.

The MEELC consists of four phases and three milestone reviews. E&E IV&V Progress Reports are to be submitted simultaneously to CMS and the state quarterly and preceding each milestone review. E&E IV&V Progress Reports (produced using the CMS provided E&E IV&V Progress Report template) report on the project status within five primary topics of the project. The five primary topics are Project Management Office (PMO) status, Life Cycle status, Risk summary and status, Recommendation summary and status, and Programmatic Review. CMS also reviews each IV&V progress report and may provide its own recommendations to the state.

- MEET checklists embody CMS requirements in the form of critical success factors and related criteria. The criteria and critical success factors are based on requirements such as:
- Code of Federal Regulations (CFR) 42
- State Medicaid Manual (SMM)
- CMS Standards and Conditions
- MITA 3.0 framework capability maturity objectives, among others

The MEET checklists are aligned with MITA and have been updated to reflect current regulations, MITA architectures (business architecture, information, and technical), and the S&C for Medicaid IT.

PCG leverages the Eclipse IV&V® framework and methodology to provide IV&V services in support of the MEELC. The Eclipse IV&V® framework is described in Section B.1.4 of this Proposal.

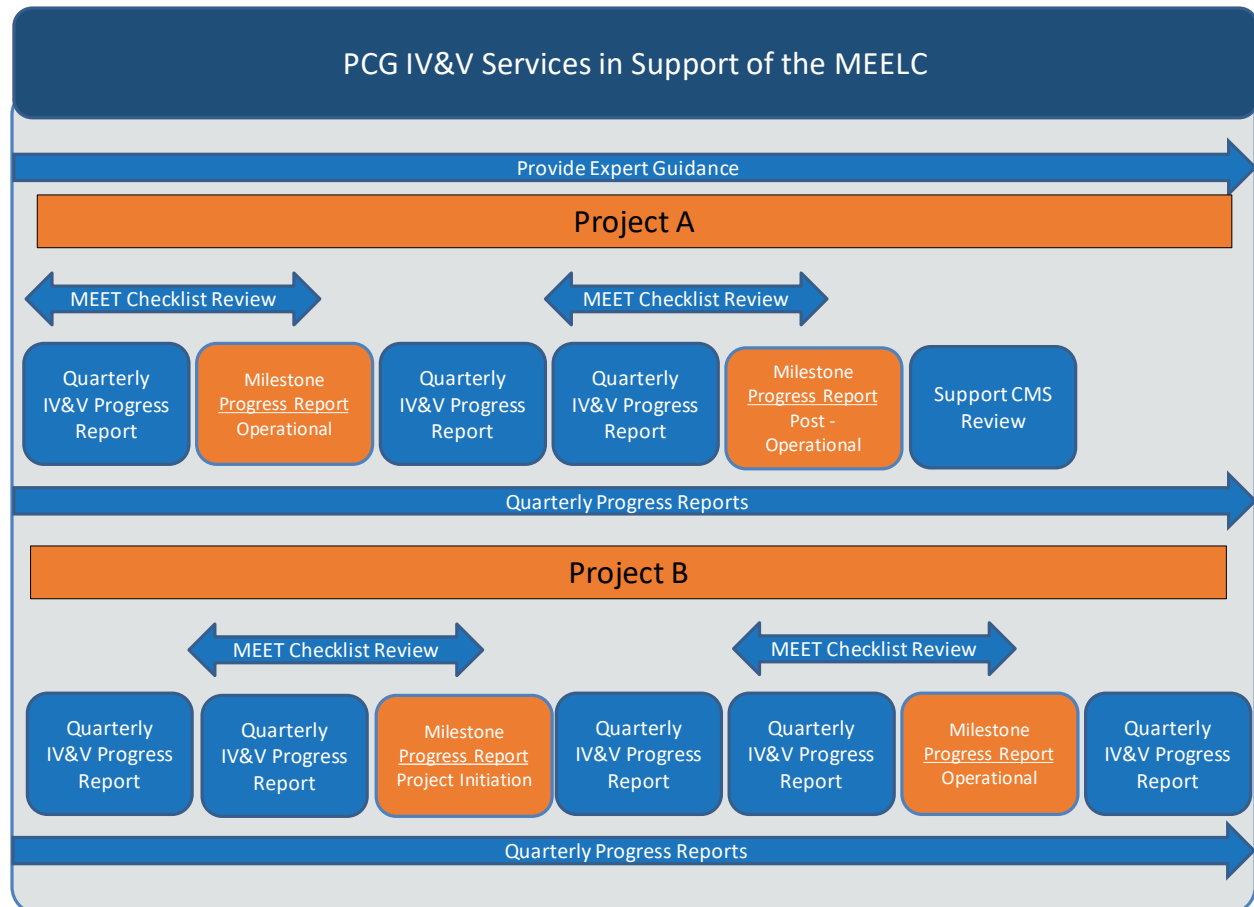
PCG supports CMS and DHS through the MEELC life cycle by participating collaboratively with the project team, providing expert guidance in the milestone review preparedness activities, evaluating programmatic and E&E CSFs, and completing E&E IV&V Progress Reports and MEET checklist reviews. These are completed in accordance with the MEELC milestone review guidance, found detailed in the CMS MEET Medicaid Eligibility and Enrollment Life Cycle and MEET Appendix B Required Artifacts List documents.

Evaluation of the MEET checklists is a primary effort in preparation for milestone reviews. The state (or the

state's designee, such as the solution vendor, or business support vendor) completes the MEET checklist set as appropriate for the specific milestone review. IV&V then reviews the completed checklists to provide an assessment of the preparedness of both the state and the module or enhancement for the milestone review, as appropriate for the life cycle phase. The progress report details what, if any, issues the state should address before the CMS review team conducts the next Project Milestone Review. The inputs to the preparedness activities are the requirements repository/traceability tool (if used for the MEET effort), CMS MEET certification checklists, supporting evidence and documents, including project management artifacts, and the CMS E&E IV&V Progress Report template. The outputs are an E&E IV&V Progress Report and completed MEET checklists, which are appended to the report, and culminate into one of the three MEELC milestone reviews.

Each E&E Modernization Project will have its own schedule and timeline, which may result in overlapping MEELC milestone reviews. The State may choose to combine E&E projects on the same timeline into one set of MEET checklists and milestone reviews or may choose to approach each E&E project separately. PCG will provide expert guidance to DHS in determining the most beneficial approach and will work with DHS in communicating with CMS to clarify expectations. A conceptual depiction of PCG' IV&V services in support of the MEELC is shown Figure 2.

Figure 2: IV&V Services Supporting MEELC



PCG has conducted numerous MEET and MEET checklist assessments, SS-A, and validated CMS Seven Standards & Conditions compliance and MITA 3.0 on our Medicaid IV&V projects beginning from project conception to implementation. We've applied our lessons learned from our CMS life cycle and checklist assessments to our newest clients. Through our work, the CMS central office and the regional offices have come to know and respect our work and judgment. This strength provides Arkansas with the confidence that PCG's observations, advice, and guidance navigating CMS requirements and relationships is well founded, defensible, and will fit your project needs.

CMS requires a Quarterly Report from Medicaid IV&V vendors each active quarter of the project. PCG provides Quarterly Reports for all CMS involved projects by providing summary of progress as shown in detail in the Monthly Report below. PCG has complied and is well versed in their customary improvements over time. Each Quarterly Report includes sections:

- Life Cycle Status and Schedule
- Risks
- Recommendations
- Programmatic Checklists
- CMS Responses

Upon submission of Quarterly Reports to CMS, PCG plans for and conducts a meeting with CMS, the state, and the system integrator to discuss the Quarterly Report to address comments and questions.

Sample 1 of 2 of a CMS Quarterly Report begins below.

General Information							
Instructions: This section includes the general information for the progress report. <u>IV&V Contractor</u> to fill out <u>all sections</u> of this tab. Provide the state name, project name, program name (select from drop-down menu), and the progress report date. Also, include POC information for the state and the submitter of this report. Provide the dates for the initial consult, IV&V RFP, IV&V on-board, and next progress report. For all dates, please use MM/DD/YYYY format.							
State		State Primary POC		Submitter Email		Target or Actual Date IV&V on Board	6/1/2016
Project Name	Eligibility and Enrollment, Enterprise Architecture	State Primary POC Email		Submitter Phone		Next Progress Report Date	3/31/2018
Program Name	Medicaid Systems Modernization	Submitter Name		Activity 1 Consult Date			
Progress Report Date	11/20/2017	Submitter Title / Role		Target or Actual IV&V RFP Release Date	11/13/2015		
Executive Summary							
Instruction: Summarize the state's status and its progress below.							
In May 2017, the Project determined it was in the State's best interest to extend the E&E project timeline. The extended timeline was due, in part, for the need to incorporate various design enhancements considered critical for Release 1. Ultimately the implementation date was extended to July 2018, with development for enhancements and defect resolution continuing to the end of October, and followed by SIT on October 30, 2017. Development efforts, including creation of related test cases and test scripts, are organized into sprints. While							
Project Management Office Status							
Instruction: Provide budgetary and schedule measurements below (either earned value or some other industry-accepted metrics). Variances are calculated against the budget and schedule in approved IAPD. If the IAPD has not yet been approved, enter N/A.							
Total Budget		Earned Value (EV)		Budget Variance (%)		Schedule Variance (%)	103.00
Other (if not using EV)	Turn-Down Charts: 103%						
Life Cycle Status and Schedule							
Instructions: For the Life Cycle Status column, use the drop-down menu to indicate what milestone review was last <u>completed</u> for each module that is, or will be developed. -- If a legacy module has been approved in the past and there are no plans to update it, choose R3 completed. -- If a state is transitioning into the MEELC between R1 and R2 and its E&E analyst has stated that no R1 will be necessary, then mark R1 and complete and indicate N/A for the R1 date. -- For the other columns, enter the anticipated dates for each milestone. Do not enter a date range. -- After a milestone review has <u>actually occurred</u> , update the entry to show the last date of the milestone review meeting and be sure to update the Life Cycle Status column.							
	Life Cycle Status	Target or Actual IAPD Approval Date	Target or Actual Development Start Date	Target or Actual Date for R1	Target or Actual Date for R2	Target or Actual Go-Live Date	Target or Actual Date for R3
Eligibility & Enrollment	R1: Proj. Initiation M.R. Completed		12/1/2015	2/1/2017	5/30/2018	7/30/2018	2/1/2019
Comments	Transitioning to MEELC between R1 and R2. Field for R1 date (cell H31) will not allow N/A. Date entered is date of Planning Review and Design Gate Review. Target date for R2 is based on 60 days prior to Implementation Date. Total Budget amount and Budget Variance to be revised pending recent IAPD submission and approval.						

Risks							
Instructions: List important risks, including any programmatic risks or technical risks arising from the IV&V Contractor's review of checklists and evidence. Use a unique Risk ID, and provide the risk title and description. Pick an appropriate value (from 1 to 5) from the probability and impact drop-down menus. Based on your selection, the risk score will be calculated automatically. Provide the resolution date and plan for mitigation (include details) for this risk in the Target or Actual Resolution Date column and in the Status column.							
Risk ID #	Risk Title	Description	Probability	Impact	Risk Score	Target or Actual Resolution Date	Status
18	E&E and IE have no software Configuration Management Plan	There is no software configuration management plan.	4	5	4-5		
24	Non-Compliant Solution Architecture Documentation	There is no solution architectural documentation that adequately describes the E&E system, nor does what exists meet TOGAF architectural	4	4	4-4		
45	E&E R1 SIT Test Results Lack Proper Proof of Testing	Improper and incomplete evidence to substantiate passed test cases increases the risk that unanticipated defects will then be found during UAT, resulting in delays in completion of UAT. Without reliable testing information upon which to assess the results of SIT, LDH cannot be reasonably assured of the quality of the product that will be migrated for UAT. Poor product quality introduced to UAT will ultimately delay or prevent completion of the UAT phase. This poses a risk to meeting the Project			4-4	1/31/2018	
49	E&E R1 Poorly Formed Test Cases	Test cases are formatted inconsistently and do not follow best practices — for example, Long Term Care (LTC) eligibility test cases contain one step with only one expected overall result. Industry best practice recommends that each test contain a detailed step-by-step process of execution with an expected result for each step through to the end result. This provides more visibility into how the entire system, including business rules for the particular process, is working and functioning, and pinpoints where defects are occurring	3	2	3-2	10/27/2017	
54	E&E Converted Applicant Records missing data items	Applicant records from the legacy system are missing data, and cannot be converted.	3	4	3-4	7/31/2018	

Recommendations					
<i>Instructions: List any recommendations for the state. These include any programmatic recommendations or technical recommendations arising from IV&V contractor's review of checklists and evidence.</i>					
Recommendation #	Date of Recommendation	Recommendation	Resolved?	Comments / Resolution	
18	9/8/2016		No		
24	9/9/2016		No		
45	3/28/2017		No		
49	3/28/2017		No		
54	4/19/2017		No		
TA.FR.5	The system of interest provides online assistance to users to support effective use of data query, data analysis, and report formatting capabilities.	8/21/2017		Not Assessed	
TA.LG.3	The system of interest provides services that manage the delivery of event messages to several business services and people / roles / contexts interested in a condition and change of behavior of interest.	8/21/2017		Not Assessed	
S&C.RC.5	The SMA has a process for identifying errors and promptly correcting them. The SMA is capable of producing audit trails of decisions.	8/21/2017		Not Assessed	
TA.BPM.2	The SMA aligns business workflows for Medicaid and Exchange business operations and requirements using BPM standards (e.g. Business Process Execution Language (BPEL)).	8/21/2017		Not Assessed	
TA.CM.1	The SMA implements software configuration management practices and identifies intrastate configuration items and baselines.	8/31/2017		Not Assessed	
TA.CM.3	The SMA uses build management, process management, and environment management through the SDLC.	8/31/2017		Not Assessed	
TA.DAM.6.1	The SMA performs data management storage optimization and consolidation techniques.	8/21/2017		Not Assessed	
TA.UT.1	The system of interest introduces versioning, mediation, and distributed systems.	8/21/2017		Not Assessed	
MES.PR.1	In preparation for a milestone review, SMA has provided all artifacts required for that review (see Required Artifact List in the MECT). If the names of the artifacts differ from what they are named in the Required Artifacts List, the SMA has provided a mapping between the Required Artifacts and what the state calls the artifacts.	8/21/2017		Not Applicable	

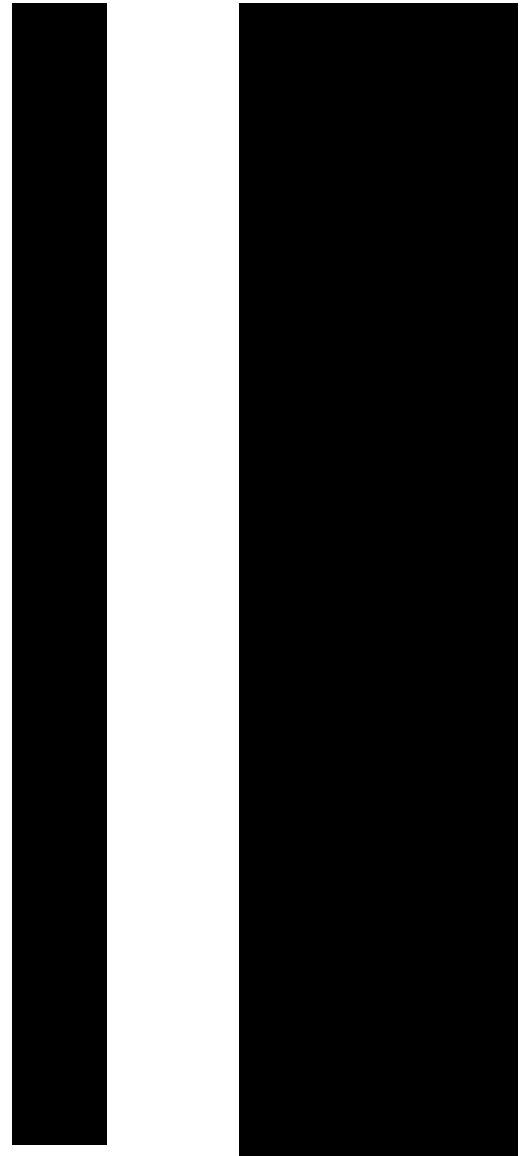
S&C.LC.1	SMA participates in a multi-state effort and shares (or provides a method to share) it's reusable components, to promote sharing, leverage, and reuse of Medicaid technology and systems.	8/21/2017		Not Assessed	
S&C.LC.5	SMA identifies and evaluates commercial or open-source solutions and plans for cloud computing.	8/21/2017		Not Applicable	
S&C.LC.8	SMA minimizes need for ground-up or customization solutions.	8/21/2017		Met	
IA.DS.4	As Per SMM Part 11: State documents and follows RFP development process, contract development process, and proposal evaluation plan.	8/21/2017		Met	
S&C.BRC.1 2	The SMA has service level agreements (SLAs) in place and evaluates system and contractor performance against those SLAs. When SLAs are not met, the SMA creates and executes plans of action with milestones (POAMs).	8/21/2017		Not Applicable	
S&C.MS.5	Modularity is adequately accounted for in the SMA acquisition process.	8/21/2017		Not Applicable	
S&C.MS.6	RFP does not impose technology specific solutions and will allow for evolving requirements.	8/21/2017		Met	
TA.SP.64	The system of interest conducts user authentication using public key infrastructure in conformance with MITA Framework, industry standards, and other nationally recognized standards.	8/21/2017		Not Assessed	
TA.SP.65	For the system of interest's use of Public Key Infrastructure (PKI), the solution follows standard practices such as the use of accepted certification authorities, documented Certificate Policy (CP), and Certification Practice Statement (CPS), which includes key escrow strategy. The System of Interest's PKI implementation uses foundational technical standards such as X.509 Certificate format and Public Key Cryptography Standard (PKCS).	8/21/2017		Not Assessed	
TA.SP.75	The system of interest employs malicious code protection mechanisms at IT system information system entry and exit points and at workstations, servers, or mobile computing devices on the network to detect and eradicate malicious code. The system of interest utilizes network scanning tools, intrusion detection and prevention systems, and end-point protections such as firewalls and host-based intrusion detection systems to identify and prevent the use of prohibited functions, ports, protocols, and services.	8/21/2017		Not Assessed	
TA.SP.78	The system allows only authorized staff members to do manual deletes and overrides of alerts/edits.	8/21/2017		Not Assessed	

General Information					
Instructions: CMS team member to provide CMS response for the state progress report submitted by the IV&V Contractor. In this section, select an appropriate choice from the drop-down menu for the reason for response, and enter the date of the response. For all dates, please use MM/DD/YYYY format.					
Response to a quarterly progress report or to a milestone review?			Date		
Milestone Review Team					
Instructions: Leave blank if this is not given in response to a milestone review. Use dropdown menu to select/update Milestone Review Team.					
	Name	Organization		Name	Organization
Review Team Lead					
Overall RFP / Procurement / Funding					
Overall MITA					
Access / Security					
If "Other," please provide additional info.:			<Insert additional information here.>		
CMS Comments					
Instructions: This section can be used for both quarterly report responses and milestone review summaries. Provide executive summary or high level comments in the free form text below.					
Executive Summary / General Comments					
<Include executive summary / general comments here>					
Instructions: The sections below are for milestone review responses regarding specific checklists. For each, first select a header for each YELLOW box from its drop down menu. These correspond to checklist names. Then, enter CMS comments for the checklist you selected.					
Eligibility & Enrollment					
Observations	< Enter CMS comments here for the item selected above, in yellow>				
Findings	< Enter CMS comments here for the item selected above, in yellow>				
Corrective Actions	< Enter CMS comments here for the item selected above, in yellow>				
Recommendations	< Enter CMS comments here for the item selected above, in yellow>				

Sample CMS Quarterly Report from 2018 begins below.

General Information							
Instructions: This section includes the general information for the progress report. <u>IV&V Contractor</u> to fill out <u>all sections</u> of this tab. Provide the state name, project name, program name (select from drop-down menu), and the progress report date. Also, include POC information for the state and the submitter of this report. Provide the dates for the initial consult, IV&V RFP, IV&V on-board, and next progress report. For all dates, please use MM/DD/YYYY format.							
State		State Primary POC		Submitter Email		Target or Actual Date IV&V on Board	1/1/2018
Project Name	Integrated Eligibility Project	State Primary POC Email		Submitter Phone		Next Progress Report Date	9/30/2018
Program Name	Medicaid Systems Modernization	Submitter Name		Activity 1 Consult Date			
Progress Report Date	7/31/2018	Submitter Title / Role	IV&V Project Manager	Target or Actual IV&V RFP Release Date	11/13/2015		
Executive Summary							
Instruction: Summarize the state's status and its progress below.							
The revised project plan and budget, are in process of being accepted and are being worked. Current issues are known and are being actively addressed by the project. These issues include interfaces, conversion, pilot preparedness, and DSNAP dependencies. The revised timeline was presented on March 27, 2018 and included revised dates of August 2019 for the Pilot and November 2019 for Go-Live. This report incorporates unapproved dates and costs.							
Project Management Office Status							
Instruction: Provide budgetary and schedule measurements below (either earned value or some other industry-accepted metrics). Variances are calculated against the budget and schedule in approved IAPD. If the IAPD has not yet been approved, enter N/A.							
Total Budget		Earned Value (EV)		Budget Variance (%)		Schedule Variance (%)	
Other (if not using EV)	EV is not calculable on a fixed price contract						
Life Cycle Status and Schedule							
Instructions: For the Life Cycle Status column, use the drop-down menu to indicate what milestone review was last <u>completed</u> for each module that is, or will be developed. -- If a legacy module has been approved in the past and there are no plans to update it, choose R3 completed. -- If a state is transitioning into the MEELC between R1 and R2 and its E&E analyst has stated that no R1 will be necessary, then mark R1 and complete and indicate N/A for the R1 date. -- For the other columns, enter the anticipated dates for each milestone. Do not enter a date range. -- After a milestone review has <u>actually occurred</u> , update the entry to show the last date of the milestone review meeting and be sure to update the Life Cycle Status column.							
	Life Cycle Status	Target or Actual IAPD Approval Date	Target or Actual Development Start Date	Target or Actual Date for R1	Target or Actual Date for R2	Target or Actual Go-Live Date	Target or Actual Date for R3
Eligibility & Enrollment	R1: Proj. Initiation M.R. Completed		12/1/2015	2/1/2017	10/1/2019	11/18/2019	5/18/2020
Comments	R1 date based on overall E&E XXXXXX Project. A separate R1 for the IE project was not conducted. The dates reflected for R2, Go-Live, and R3 are based on the revised, approved schedule. R2 is approximately 6 weeks prior to Pilot. R3 is six months after Go-Live.						
Risks							
Instructions: List important risks, including any programmatic risks or technical risks arising from the IV&V Contractor's review of checklists and evidence. Use a unique Risk ID, and provide the risk title and description. Pick an appropriate value (from 1 to 5) from the probability and impact drop-down menus. Based on your selection, the risk score will be calculated automatically. Provide the resolution date and plan for mitigation (include details) for this risk in the Target or Actual Resolution Date column and in the Status column.							
Risk ID #	Risk Title	Description	Probability	Impact	Risk Score	Target or Actual Resolution Date	Status
76	IE-5265 Strategic plan for IE M&O needs to be operationalized		1.00	1.00	1-1	2/18/2019	
84	IE-6040 5265/6 Database Design documentation lacks CMS'-expected details	Database design in the database life cycle includes a variety of processes and activities: Data Analysis and Requirements, Entity Relationship Modeling and Normalization, and Data Model Verification. CMS developed guidance for documenting database design in the form a "Database Design Document" template, which indicates the type of information and level of detail expected. CMS' guidance lists the main subject areas.	3.00	3.00	3-3	9/1/2018	

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Programmatic Checklist

Instructions: The IV&V Contractor to fill out all information for IV&V Columns for this Programmatic Checklist. Review the state's compliance with each criterion and complete the IV&V Columns. For all dates, please use MM/DD/YYYY format.

			IV&V Columns			
Category	Ref #	Review Criteria	Review Date	Reviewer Name	Reviewer Assessment	Reviewer Comments
Governance	S&C.MS.15	The state uses an SDLC.	6/30/2018	XXXXX	Met	The project follows hybrid-Agile approach for Design, Configuration, and Functional testing phases. System Integration and
Governance	S&C.MC.1	State Medicaid Agency (SMA) develops it's MITA Roadmap and uses a completed MITA SS-A for evaluation of its As-Is and identification of its To-Be capabilities for Business, Information, and Technical Architectures and the Standards and Conditions for Medicaid IT.	6/30/2018	XXXXX	Not Assessed	This criteria is not assessed for Release 3 -IE Impelementation for XXXXXX
Governance	IA.DMS.1	The SMA demonstrates adoption of governance process and structure to promote trusted data governance, data stewards, data owners, data policy, and controls redundancy within intrastate.	6/30/2018	XXXXX	Not Assessed	There are Data governance charter, Data management plan, Data management Strategy and ISIG(Information Services Influence Group) Project Charter by OTS. Too early to assess as the adoption of Design documentation according to the project agreed upon Design Expectation document is present for every XXXX IE
Governance	IA.DS.3	The SMA documents information exchanges in trading partner agreements as specified in 45 CFR 162.915.	6/30/2018	XXXXX	Met	Interface, but some interface is not

Outreach & Support	S&C.BRC.2	The SMA communicates effectively with providers, members, and the public.	6/30/2018	XXXXX	Met	Project updates and possible changes as a result of IE will be assimilated to all providers through OCM. Training will also
Outreach & Support	S&C.BRC.9	The system of interest utilizes web-based person-centric system for outreach where providers, applicants, and members provide feedback and assessment of accessibility, ease of use, and appropriateness of decisions.	6/30/2018	XXXXX	Met	The IE system will include a contact my worker section for questions about applications/cases, ability to opt in to text messaging communications, a notification center to display agency
Outreach & Support	S&C.RC.3	The SMA demonstrates it provides timely information transaction processing, and ensures high availability and quick response to customer requests.	6/30/2018	XXXXX	Not Assessed	Service levels will be part of M&O planning. XXXX is in very early stages of M&O planning
Outreach & Support	S&C.RC.4	The SMA provides system decision logic and coding used by eligibility to the public.	6/30/2018	XXXXX	Met	The IE SSP provides basic policy and eligibility requirements as well as what verifications are needed to process an
Outreach & Support	TA.FR.5	The system of interest provides online assistance to users to support effective use of data query, data analysis, and report formatting capabilities.	6/30/2018	XXXXX	Not Assessed	No evidence to assess yet.
Outreach & Support	TA.LG.3	The system of interest provides services that manage the delivery of event messages to several business services and people / roles / contexts interested in a condition and change of behavior of interest.	6/30/2018	XXXXX	Not Assessed	This may not apply although NAC interface may fall into the category as it provides messages or information back to NAC (for other states).
Process	S&C.RC.5	The SMA has a process for identifying errors and promptly correcting them. The SMA is capable of producing audit trails of decisions.	6/30/2018	XXXXX	Met	The IE system provides a QC Module which allows for QC Reviewers to conduct their case reviews. It also has a Case Review for Supervisors and Policy Consultants to review worker actions.
Process	TA.BPM.2	The SMA aligns business workflows for Medicaid and Exchange business operations and requirements using BPM standards (e.g. Business Process Execution Language (BPEL).	6/30/2018	XXXXX	Not Met	IE system design did not use BPM standards for managing for SNAP/FITAP/DSNAP/KCSP operations and requirements.
Process	TA.CM.1	The SMA implements software configuration management practices and identifies intrastate configuration items and baselines.	6/30/2018	XXXXX	Met	Configuration management plan work product which was produced as part of XXXX Enterprise Architecture provide details for establishing and performing
Process	TA.CM.3	The SMA uses build management, process management, and environment management through the SDLC.	6/30/2018	XXXXX	Met	Configuration management plan work product which was produced as part of XXXX Enterprise Architecture provide details for establishing and performing

Process	TA.DAM.6.1	The SMA performs data management storage optimization and consolidation techniques.	6/30/2018	XXXX	Not Assessed	No evidence to asses yet.
Process	TA.UT.1	The system of interest introduces versioning, mediation, and distributed systems.	6/30/2018	XXXX	Not Assessed	No evidence to asses yet.
Process	MES.PR.1	In preparation for a milestone review, SMA has provided all artifacts required for that review (see Required Artifact List in the MECT). If the names of the artifacts differ from what they are named in the Required Artifacts List, the SMA has provided a mapping between the Required Artifacts and what the state calls the artifacts.	6/30/2018	XXXX	Not Applicable	This Progress Report is not in preparation for a milestone review. This is therefore not applicable.
Reuse	S&C.LC.1	SMA participates in a multi-state effort and shares (or provides a method to share) it's reusable components, to promote sharing, leverage, and reuse of Medicaid technology and systems.	6/30/2018	XXXX	Met	The IE team meets with representatives of other states including an in-person trip to XXXX. IE management participates in a monthly call with states that have a similar system. XXX plans to provide other
Reuse	S&C.LC.5	SMA identifies and evaluates commercial or open-source solutions and plans for cloud computing.	6/30/2018	XXXX	Not Applicable	
Reuse	S&C.LC.8	SMA minimizes need for ground-up or customization solutions.	6/30/2018	XXXX	Met	NextGen is Deloitte's pre-packaged and production-proven Integrated Eligibility solution.
RFP/Contract/ Acquisition	IA.DS.4	As Per SMM Part 11: State documents and follows RFP development process, contract development process, and proposal evaluation plan.	6/30/2018	XXXX	Met	The XXX Integrated Eligibility System was developed as a sole source amendment to the original E&E Contract. The statement of work was developed and the
RFP/Contract/ Acquisition	S&C.BRC.1 2	The SMA has service level agreements (SLAs) in place and evaluates system and contractor performance against those SLAs. When SLAs are not met, the SMA creates and executes plans of action with	6/30/2018	XXXX	Not Assessed	Service levels will be part of M&O planning. XXX is in very early stages of

Security	TA.SP.64	The system of interest conducts user authentication using public key infrastructure in conformance with MITA Framework, industry standards, and other nationally recognized standards.	6/30/2018	XXXXX	Not Assessed	
Security	TA.SP.65	For the system of interest's use of Public Key Infrastructure (PKI), the solution follows standard practices such as the use of accepted certification authorities, documented Certificate Policy (CP), and Certification Practice Statement (CPS), which includes key escrow strategy. The System of Interest's PKI implementation uses foundational technical standards such as X.509 Certificate format and Public Key Cryptography Standard (PKCS).	6/30/2018	XXXXX	Not Assessed	No evidence to asses yet.
Security	TA.SP.75	The system of interest employs malicious code protection mechanisms at IT system information system entry and exit points and at workstations, servers, or mobile computing devices on the network to detect and eradicate malicious code. The system of interest utilizes network scanning tools, intrusion detection and prevention systems, and end-point protections such as firewalls and host-based intrusion detection systems to identify and prevent the use of prohibited functions, ports, protocols, and services.	6/30/2018	XXXXX	Not Assessed	No evidence to asses yet.
Security	TA.SP.78	The system allows only authorized staff members to do manual deletes and overrides of alerts/edits.	6/30/2018	XXXXX	Met	All edits/deletes/overrides are based on security level. Most of these functions are only available to supervisors are higher.

General Information

Instructions: CMS team member to provide CMS response for the state progress report submitted by the IV&V Contractor. In this section, select an appropriate choice from the drop-down menu for the reason for response, and enter the date of the response. For all dates, please use MM/DD/YYYY format.

Response to a quarterly progress report or to a milestone review?		Date	
---	--	------	--

Milestone Review Team

Instructions: Leave blank if this is not given in response to a milestone review. Use dropdown menu to select/update Milestone Review Team.

	Name	Organization		Name	Organization
Review Team Lead					
Overall RFP / Procurement / Funding					
Overall MITA					
Access / Security					

If "Other," please provide additional info.:

<Insert additional information here.>

CMS Comments

Instructions: This section can be used for both quarterly report responses and milestone review summaries. Provide executive summary or high level comments in the free form text below.

Executive Summary / General Comments

<Include executive summary / general comments here>

Instructions: The sections below are for milestone review responses regarding specific checklists. For each, **first select a header** for each YELLOW box from its drop down menu. These correspond to checklist names. Then, enter CMS comments for the checklist you selected.

Eligibility & Enrollment

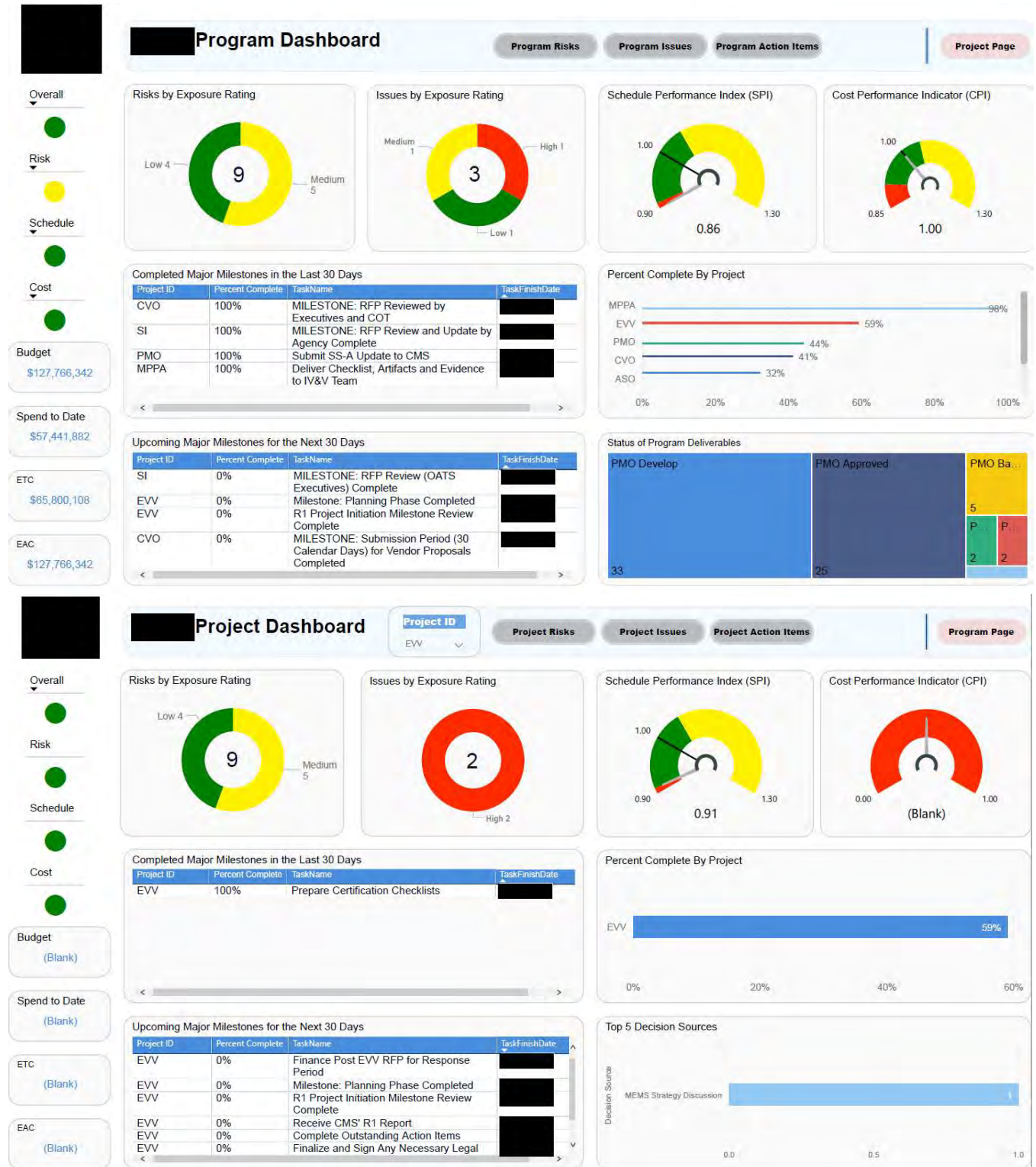
Observations	< Enter CMS comments here for the item selected above, in yellow>
Findings	< Enter CMS comments here for the item selected above, in yellow>
Corrective Actions	< Enter CMS comments here for the item selected above, in yellow>
Recommendations	< Enter CMS comments here for the item selected above, in yellow>

Provide two (2) sample IV&V assessment reports

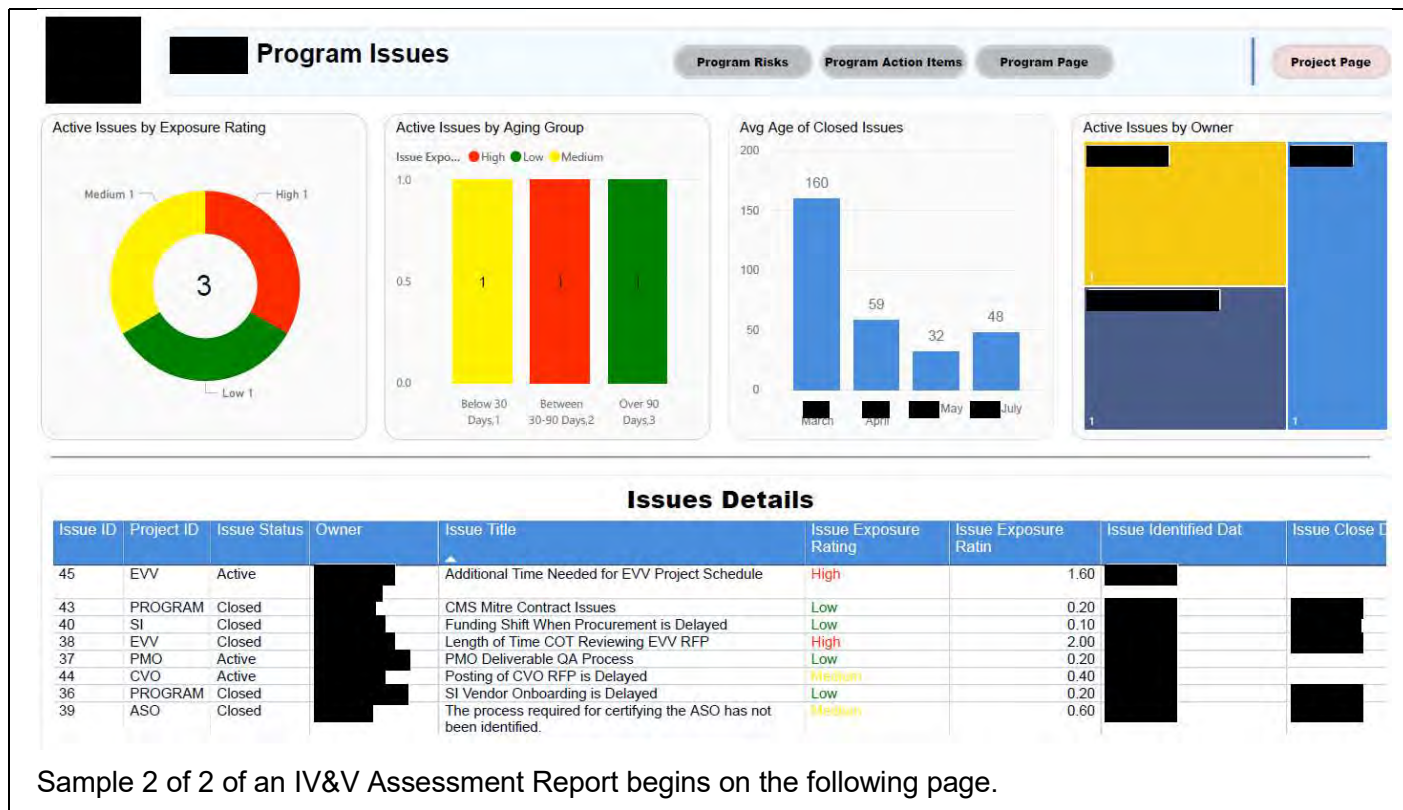
5

Our sample IV&V Assessment Reports contain similar reporting elements that will be required on the IEBM report. Our IV&V consultants will tailor our IV&V assessment reports per section 2.4.D. We will work to provide report customizations as needed.

Sample 1 of 2 of an IV&V Assessment Report begins below.



Risks Details								
Risk ID	Project ID	Status	Owner	Risk Title	Risk Exposure Rating	Risk Score	Risk Closure Date	Date Reported
58	ASO,CVO,EMM,EVV,SI	Active		DPGO Coordinator's Workload Could Cause Schedule Delay	Low	0.02		
60	ASO,CVO,EMM,EVV,SI	Active		New Template Language Changes Could Cause Schedule Delay	Medium	0.05		
59	ASO,CVO,EMM,EVV,SI	Active		Procurement Tasks/Process Change Could Impact Schedule	Low	0.03		
57	ASO,CVO,EMM,EVV,SI	Active		Tasks in Schedule Are Performed by Individuals Outside of Team	Medium	0.07		
64	PROGRAM	Active		MEMS Technical Roadmap Potentially Delayed	Low	0.03		
62	PROGRAM,ASO,EMM,EVV,MPPA	Active		Lack of SI Input may impact RFP Quality	Medium	0.06		
63	PROGRAM	Active		Lack of SI Oversight may result in Poor Module Quality	Medium	0.10		





[REDACTED]
[REDACTED]
Project

IV&V Bi-Weekly Status Report

Report Date: September 3, [REDACTED]

[REDACTED]
[REDACTED]

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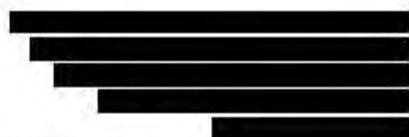


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[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Document Information		
Project Start Date: September [REDACTED]	Planned Go-Live Date: January [REDACTED]	Reporting Period: August 5, [REDACTED] - August 16, [REDACTED]

1. Executive Summary

This reporting period IV&V focused on establishing bi-weekly touchpoint meetings with [REDACTED] the PMO, and [REDACTED]. IV&V discussed the project schedule, potential delay impacts, reviews of meeting efficiency, and continuing development of metrics. [REDACTED] and the [REDACTED] reported that at present no additional schedule delay is anticipated as change orders are within scope and additional staff are available for construction if needed. The project is implementing daily stand-up meetings to review meeting efficiencies and identify any problems on a daily basis. PCG will be attending these meetings as well. PCG and PMO will be scheduling meetings in September to review and identify options for metrics for project reporting.

Table 1: Overall Project Health



PCG considers the project to be in an overall yellow status based upon the schedule delay and scope concerns regarding OCM and testing activities which are discussed further below.

Table 2: Triple Constraint Rating



Scope

[REDACTED] has onboarded staff to work on the RFP's for Testing and Organizational Change Management. The OCM RFP will be developed first. PCG will provide review and comment of the statements of work as they are prepared. However, the final scope for OCM and Testing has yet to be determined and therefore PCG considers scope to be yellow.

Schedule

No significant changes were noted regarding the project schedule this period. The project team will continue to look for opportunities to achieve the original go-live date. Based on the schedule slippage, PCG considers the schedule as yellow.



Budget

PCG will be meeting with the PMO this month to review metrics options for budget monitoring. Costs for Testing and OCM vendors have yet to be finalized and therefore budget is also considered yellow at this time.

1.1 Material Findings

The table below quantifies the status of currently open findings.

Table 3: OPEN Findings Matrix by Rank/Timeframe*

IV&V Dashboard Category	Preliminary Concerns	IV&V Identified Project Risks			Issues	Totals
		Low	Med	High		
< 90 Days			2	2		4
≥ 90 Days < 180 Days		1		2		3
≥ 180 Days < 360 Days						
≥ 360 Days						
Total Open IV&V Findings		1	2	4		7

* Please refer to Appendix D for a detailed description of all open IV&V Findings.

1.2 Project Health by Assessment Area

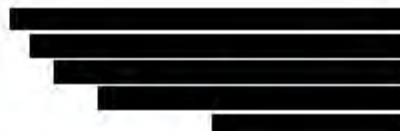
The following dashboard provides performance ratings for 13 of the 24 assessment areas that IV&V has monitored to date. Six assessment areas (Scope, Schedule, Quality Management, Performance Management, Organizational Change Management, Testing, and Implementation Planning) are assessed as yellow with mitigation plans in place. All other assessed areas are rated as green. Notwithstanding areas of caution with recommendations for improvement, IV&V rates overall project health as yellow.

Table 4: Assessment Area Dashboard

Assessment Areas		Previous Status	Current Status	Observations/Comments
Project Governance				Appropriate governance structures are in place with monthly executive steering committee and weekly status meetings in place. The project is largely following a waterfall SDLC but is implementing agile-type daily stand-up meetings to better track efficiencies and progress in design. The schedule is tracked in MS Project.
Project Management	Scope			See IV&V Findings – Open Risk: Procurement for OCM and Testing vendors is in progress and [REDACTED] has onboarded the



Assessment Areas		Previous Status	Current Status	Observations/Comments
				procurement lead. OCM will be developed first, followed by Testing. Recommendation: IV&V recommends that the full scope of the OCM, and Testing activities be added to the Integrated Master Schedule when finalized.
	Schedule			The schedule continues to show a delay of approximately 90 days.
	Risks & Issues			PCG observed two risk and issue meetings this month. Risks and issues were appropriately reviewed, closed or updated.
Staff Management				has onboarded a procurement lead. No other staff changes reported this period.
Requirements Management				IV&V reviewed the RTM last reporting period and viewed a demo of the system. The system tracks requirements from the RFP through design, development, testing, and deployment. IV&V has no additional comments at this time.
System Design				Design sessions are continuing with weekly updates provided via the burndown charts.
Quality Management				As previously reported, IV&V continues to work with the project to evaluate the health of the project through the key indicators of Cost Performance Index (CPI) and Schedule Performance Index (SPI). The project is tracking SPI's for each project track. IV&V is exploring methodologies to determine the best approach to estimating the CPI. reports an interim Quality Management staff person has been identified pending onboarding of the OCM vendor.
Performance Management				The DDI Vendor is in the process of identifying key performance indicators (KPIs) for fiscal agent services and solution. Overall the project lacks an approach and defined metrics to help assess project performance. Metrics for design are being provided. The schedule now shows a delay of approximately 90 days. However, there is not a comprehensive view of overall performance aligning scope, schedule and cost.



Assessment Areas		Previous Status	Current Status	Observations/Comments
Organizational Change Management				See IV&V Findings - Open Risk #19: The project team will be meeting in September to identify OCM activities that can be initiated pending selection of a vendor. A procurement lead has been hired and OCM will be the first assignment.
Testing				See IV&V Open Risk #21 Procurement staff have been onboarded by [REDACTED]. The testing RFP will be developed after the OCM RFP. Recommendation: IV&V plans to review the statement of work for testing and meet with [REDACTED] to better understand the roles and responsibilities of the state [REDACTED] and testing vendor.
Transition / Implementation	Transition Plan			See IV&V Open Risk #16. IV&V discussed this finding with [REDACTED] and [REDACTED] this reporting period. [REDACTED] and [REDACTED] agree that there is confusion as to whether transition refers to transition from the legacy system to the [REDACTED] system or from [REDACTED] to some subsequent vendor. The issue is not currently a priority and there is no immediate impact.
	Implementation Plan			See IV&V Findings – Open Risk #17: A September 2021 date is set for DDI's delivery of a draft implementation plan, which is just four months prior to scheduled go-live. Recommendation: Implementation Plan: PCG discussed this with [REDACTED] and [REDACTED]. The project plan will be clarified as to whether the four months is for a final plan or a draft plan.
Operations and Maintenance				See IV&V Findings – Risk #18. IV&V reviewed this risk with [REDACTED]. The risk has been escalated to the Executive Steering Committee and will go to the legislature next session for resolution.
Certification				No Concerns Noted; [REDACTED] plans to submit checklists to PCG in October.
Security				IV&V plans to review the system security plan submitted to CMS when finalized. IV&V has reviewed the design document and comments have been addressed.



2. Key Updates and Accomplishments

The following tables reflect the key accomplishments for this reporting period.

2.1 IV&V Deliverable Submissions

Table 5: IV&V Deliverables

Deliverable	Submission Date(s)	Status
D08.1 - Bi-Weekly Status Report	08/15/2019	Closed – final submission
D03 – IV&V Work Plan and Updates	08/15/2019	Ongoing - Perform integrated schedule quality checks and perform weekly schedule progression.

2.2 Vendor Deliverables, Project Artifacts, and Documentation Reviews

The table below reflects the completion of ten IV&V Vendor Deliverable Reviews (VDRs). IV&V reviews vendor deliverables and project artifacts through the lens of contract compliance and applicable industry standards, as required by CMS MECT MECL. Where material deficiencies exist, IV&V provides remediation recommendations.

Table 6: Vendor Deliverables

Vendor	Deliverable Name	Review Date	Findings/Status
██████████	CRM DSD	In progress	Due 09/25/2019
██████████	AVR DSD	In progress	Due 09/11/2019

2.3 Project Artifacts/Document

Table 7: Project Artifacts/Document

Assessment Category ¹	Document/Artifact	Review Date(s)	Status/Comments
Project Management	Project Schedule	08/21/2019, 08/28/2019	Provided weekly comments to schedulers, solved some SPI issues, and discussed server outage events causing data loss.
Project Management	██████████ Schedule Remediation Plan / CO Burndown charts	08/23/2019, 08/30/2019	Reviewed and provided comments in schedule remediation meeting as needed.
Project Management	Weekly Status Reports	08/22/2019, 08/29/2019	Reviewed in meeting.

¹ Category as established by MECT MECL Appendix B, Required Artifacts to group document/artifacts.



2.4 [REDACTED] Meeting Attendance

Table 8: Project Meetings

Meeting Title	Date(s)
Weekly Status Meeting	08/22/[REDACTED], 08/29/[REDACTED]
[REDACTED] Mapping Demo	08/22/[REDACTED]
Weekly Scheduler Meeting	08/21/[REDACTED], 08/28/[REDACTED]
Testing Meeting - Discuss Delivery Plan	08/28/[REDACTED]
PCG [REDACTED] TouchPoint	08/28/[REDACTED]
PCG PMO Touchpoint	08/28/[REDACTED]
PCG [REDACTED] Touchpoint	08/27/[REDACTED]
Monthly Risk and Issue Review	08/29/[REDACTED]
Monthly Action Item Review	08/29/[REDACTED]

Table 9: Gap/Design Sessions

Session Title	Date(s)
Claims/BPAR Pharmacy Design Session	08/27/[REDACTED]
[REDACTED] TPL Design Sessions	08/21/[REDACTED], 08/28/[REDACTED]
Provider Bi-Weekly Design	08/19/[REDACTED]
[REDACTED] Action: Review four MAR Change Orders	08/20/[REDACTED]
Member Design	08/22/[REDACTED]
MAR Category of Service	08/26/[REDACTED]
Cost Settlement Scope Discussion	08/26/[REDACTED]
Claims/BPAR Clinics Design	08/27/[REDACTED]
Claims/BPAR Common Validity Edits Session	08/28/[REDACTED]
Claims/BPAR MH Audits and Diagnosis/ Surgical Procedure Edits Design Session	08/29/[REDACTED]
ICD Diagnosis and ICD Procedure edit mapping review session	08/29/[REDACTED]

Table 10: Stakeholder Engagement

Stakeholder Business Unit	Date	Assessment Area/MECT Category	Functional Role/Responsibilities
Stakeholder Engagement Sessions not performed in this reporting period.			



[Redacted]

3. Key Staffing Changes

Table 11: Key Staffing Changes

Date	Organization	Role	Activity
No Key Staffing Changes noted in this reporting period.			

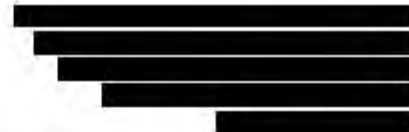


[Redacted]

4. IV&V New Findings

Table 12: Findings Summary

ID	Title	Finding Type	Risk Rating / Exposure (P * I)
22	Project Schedule Indicates Delayed Go-live Date	Risk	5



5. Planned Activity for the Next Reporting Period

PCG will continue to provide IV&V services for CMS and [REDACTED] in support of the Medicaid Enterprise Certification Life Cycle (MECL) through guidance found in the Medicaid Enterprise Certification Toolkit (MECT).

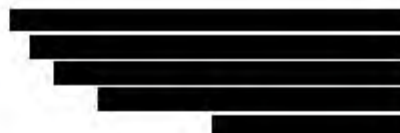
IV&V staff observes project meetings and activities to understand the processes, procedures, and tools used in the MMIS program and MES/MRP project environments. IV&V will review and analyze all applicable and available documentation for adherence to industry standards. IV&V staff will review the project and MMIS system processes and progress in areas including, but not limited to Project Management and Modular Development.

Table 13: Planned Focus Areas

IV&V Deliverables	Project Meetings	Artifact, Document & Deliverable Review	Stakeholder Engagement/Assessment Areas
D03 - Work Plan / Schedule Update	Weekly Project Status	[REDACTED] Project Meeting Minutes	None planned for next reporting period.
D04 – Scheduled Assessment Activity	Schedule Management	Schedule / Milestones and Burndown Charts	
D06 – Rewrite and resubmission of IV&V Semi-Annual Assessment Report	[REDACTED] Bi-Weekly Testing	Requirement Specification Documents (RSD)	
D08.1 - Bi-Weekly Status Report	[REDACTED] Status	Design Specification Documents (DSD)	
D08.2 – Monthly Status Report	CMS/IV&V Monthly Meeting	[REDACTED] Vendor Deliverables	
D11 Project Briefing		Appendix B Artifacts, as available.	

Public Consulting Group (PCG) will continue to provide IV&V services for Centers for Medicare and Medicaid Services (CMS) and [REDACTED] in support of the Medicaid Enterprise Certification Life Cycle (MECL) through guidance found in the Medicaid Enterprise Certification Toolkit (MECT).

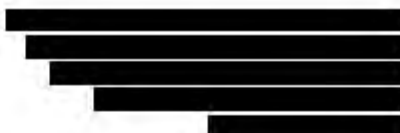
IV&V staff observes project meetings and activities to understand the processes, procedures, and tools used in the MMIS program and [REDACTED] project environments. IV&V will review and analyze all applicable and available documentation for adherence to industry standards. IV&V staff will review the project and MMIS system processes and progress in areas including, but not limited to Project Management and Modular Development.



Appendix A: Legend of Project Health and Assessment Area Color Codes

Table 14: Abbreviated Project Health Color Coding Legend

Green	Yellow	Red	Undetermined
Assessment area is on track without material risk, issue, or concern.	Assessment area faces one or more challenges that, if left unmanaged, may have a material adverse impact on project quality or outcome in terms of schedule, cost, or quality.	Assessment area faces one or more challenges posing a significant risk to project quality or outcome in terms of schedule, cost, or quality. The project team should take immediate corrective action.	Not Evaluated in the reporting period.

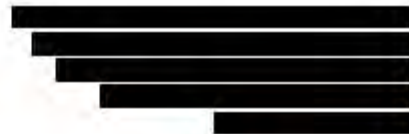


Appendix B: Assessment Areas and Context

In accordance with [REDACTED] IV&V provides independent and unbiased assessments of project status, performance trends, compliance with applicable standards, policies, project expectations and requirements in each of the following areas:

Table 15: IV&V Assessment Areas

Project Management	System/Modular Development	IV&V Add-On Areas
Project Governance	Requirements Management	Infrastructure Management
Project Management (Scope, Schedule, Budget)	System Design	Release Management
Staff Management	System Development	IT Standards and Conditions (Security, Privacy, HIPAA)
Organizational Change	Configuration Management	Operating Environment



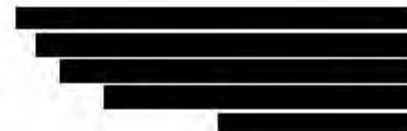
Assessment Area	Examples of Assessment Artifacts
	<ul style="list-style-type: none"> Cost MECT MECL Appendix B Required Artifact – Project Management Plan DDI and PMO Vendor PMPs Project Management Status Reports including Project Management Metrics Procurement
Staff Management	<ul style="list-style-type: none"> Staff Management Plan Resource Management Performance Reports and Metrics
Requirements Management	<ul style="list-style-type: none"> Requirements Management Plan Requirements Change Requests Requirements Requirements Management Status Reports and Metrics Technical/SDLC Change Management Plan Backlog of User Stories or Use Cases for functional and non-functional requirements (See MECL Appendix B, page 7)
System Design	<ul style="list-style-type: none"> System Design Approach Architecture Documents Design Documents and Diagrams Design Status Reports and Metrics HIPAA Statement Data Security Plans Disaster Recovery Plans Business Continuity Plan System Design Document (Re: MECL Appendix B, Required Artifacts, page 7)
System Development	<ul style="list-style-type: none"> System Development Approach Architecture Plans and Diagrams Solution Components System Development Status Reports and Metrics
Configuration Management	<ul style="list-style-type: none"> Configuration Management Plan Configuration Management Tools Configuration Item Records Configuration Management Status Reports and Metrics
Development Environment	<ul style="list-style-type: none"> Architecture Plans and Diagrams Environment Management Plans Environments Configuration Records Development Environment Status Reports and Metrics



Assessment Area	Examples of Assessment Artifacts
Software Development	<ul style="list-style-type: none"> • Software Development Approach • Code • Code Management Tools • Software Development Status Reports and Metrics
Quality Management	<ul style="list-style-type: none"> • Quality Management Plan • Operational Metrics Plans • Quality Review Procedures • Quality Status and Metrics
Performance Monitoring	<ul style="list-style-type: none"> • Performance metrics
Operations Oversight	<ul style="list-style-type: none"> • Operations Management Plan • Operations Oversight Status Reports and Metrics
Organizational Change Management	<ul style="list-style-type: none"> • Organizational Change Management Plan • Organization Change Management Status Reports and Metrics
Data Management	<ul style="list-style-type: none"> • Database Design – A record layout of each data store with data element definitions • Samples of the logical data model, corresponding physical model data structures with data dictionary excerpts for each structure • Data Architecture • Data Management Plan • Data Conversion Plan – Elaboration of material in the MITA Data Management Strategy • Interface Design Document • Partner Memoranda of Understanding • Data Management Status and Metrics • Data Security Plans
Testing	<ul style="list-style-type: none"> • Test Management Plans (Master and child) • Test Scripts • Test Results • Testing Status Reports and Metrics • Bi-Directional Traceability to Requirements and Design • Automated Testing and self- documenting • Test Reports/Validated Product Reports – Acceptance testing report for each user story/use case
Knowledge Transfer	<ul style="list-style-type: none"> • Knowledge Transfer Approach • Training Plans • Knowledge Transfer Status Reports and Metrics • Product Documentation
Transition / Implementation	<ul style="list-style-type: none"> • Transition/Implementation Approach



Assessment Area	Examples of Assessment Artifacts
	<ul style="list-style-type: none"> • Transition/implementation Plans (Master and child) • Operational Readiness Testing Plan • Operational Readiness Checklists • Transition/Implementation Status Reports and Metrics
Operations and Maintenance	<ul style="list-style-type: none"> • Operations and Maintenance Management Plans Operations Management (Service Management) Processes • Business Continuity and Disaster Recovery (BCDR) Plans • Service Level Agreement(s) • Operations and Maintenance Status Reports and Metrics
Stabilization	<ul style="list-style-type: none"> • Stabilization Status Reports and Metrics
Certification	<ul style="list-style-type: none"> • Certification Compliance Approach • Certification Checklists • Certification Status Reports and Metrics



Appendix C: Findings Defined

PCG uses its proprietary Eclipse IV&V® methodology to define types of Findings used in our IV&V practice:

- **Positive:** Typically raised to acknowledge adherence to standards and project guidelines.
- **Preliminary Concern:** Often based on observations where IV&V may have “limited visibility” of the subject area. More analysis and a better understanding of the concern is necessary before classifying the item as a risk or issue and assessing the potential impact. This finding may serve as notice of a concern IV&V is researching.
- **Risk:** “an uncertain event or condition that, if it occurs, has a positive or negative effect on one or more project objectives such as scope, schedule, cost, or quality”³.
- **Issue:** an event or condition that has already happened and has impacted, or is currently impacting, the project objectives. There is no uncertainty or probability aspect associated with an issue. Issue rating is determined by its impact on the Project.

The IV&V Findings Log captures all identified findings and serves as a register.

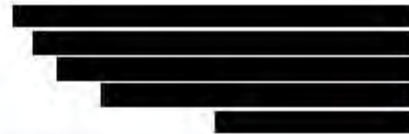


Table 17: IV&V Findings Log: Data Elements Defined

Finding Field	Definition
IV&V ID # (number)	A unique numerical identifier assigned to an IV&V project finding
Title	A brief descriptive title of the finding
Create Date	Discovery date of the finding
Creator	IV&V Analyst who observed/discovered the finding
Owner	Primary resource assigned to manage the risk
Finding Type	Positive, Preliminary Concern, Risk, or Issue
Category	Project Specific Assessment Area / Domain
Severity/Rating	The rating for the finding. See Table 18: Risk / Issue Rating Matrix for details
Risk Statement	Describes the condition, consequence, and likelihood
Supporting Analysis	Describe in detail the Criteria, Condition, Cause, and Effect
Recommendation	Actionable recommendations to reduce or alleviate the effect of an adverse finding
Status	Progress in addressing finding
Probability	A numeric value assigned to weight the probability of occurrence
Impact	A numeric value assigned to weight the impact
Risk Rating/Exposure (Probability x Impact)	High, Medium, or Low
Project Risk/Issue # (number)	If/when the risk transfers to and the project accepts the risk, this field populates with the MS MES project identification number for risk traceability



Appendix D: IV&V Findings Summary

The following table presents the IV&V Open Findings for this reporting period.

Table 18: IV&V Open Findings

ID	Dashboard Category	Title/Description	Finding Type	Risk Rating
17	Transition & Implementation	A September 2021 date is set for DDI's delivery of a draft implementation plan, which is just four months prior to scheduled go-live.	Risk	Low
19	Organizational Change Management	Absence of Applied Best Practices for Organizational Change Management (OCM)	Risk	High
20	Project Management - Scope	Project Scope - Missing Key Activities - Without including the OCM, Certification, and Transition/Implementation Plans, and SOW for the Testing Management vendor duration, level of effort, and expected start and end dates the impact to the project schedule is unknown as these key program activities have not been fully developed or planned at this time.	Risk	Medium
21	Testing	Lack of a test management vendor	Risk	High
22	Schedule	Project Schedule Indicates Delayed Go-live Date	Risk	High



Appendix E: IV&V Risks and Issue Rating Matrix

The table below displays the priorities of each risk based upon an assessment of the probability of occurrence and magnitude of impact.

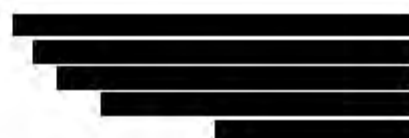
Table 19: Risk / Issue Rating Matrix

Probability of Occurrence		Magnitude of Impact							
		Negligible 1	Minor 2	Moderate 3	Significant 4	Critical 5			
Probable (80-90%)	5	Low	Medium	High					
Likely (60-79%)	4								
Possible (40-59%)	3								
Unlikely (20-39%)	2								
Improbable (1-19%)	1		Low						

The following table defines the rating PCG uses when identifying risks and issues. IV&V calculates the risk score based on the probability and impact ratings.

Table 20: Risk / Issue Rating Definitions

Rating	Definition
High	The possibility of substantial impact to product quality manageability cost or schedule. Major disruption is likely and the consequences would be unacceptable. A different approach is required. Mitigation strategies should be evaluated and acted upon immediately.
Medium	The possibility of moderate impact to product quality manageability cost or schedule. Some disruption is likely and a different approach may be required. Mitigation strategies should be evaluated and implemented as soon as feasible.
Low	The possibility of a slight impact to product quality manageability cost or schedule. Minimal disruption is likely and some oversight is needed to ensure that it remains low. Mitigation strategies should be evaluated and considered for implementation when possible.



Appendix F: Acronyms Defined

The following table provides a listing of acronyms used in this document and their associated definitions.

Table 21: Acronyms

Acronym	Definition
AC	Actual Costs
AVRS	Advanced Voice Recognition System
BAC	Budget at Completion
BCDR	Business Continuity and Disaster Recovery
BPA	Business Process Administration
CMMI	Capability Maturity Model Integration
CMS	Centers for Medicare & Medicaid Services
CPI	Cost Performance Indicator
CRMS	Customer Relationship Management System
DDI	Design, Development, and Implementation (vendor)
DED	Deliverable Expectation Document
DRP	Disaster Recovery Plan
DSD	Design Specification Document
DSS	Decision Support System
EDI	Electronic Data Interchange
EDMS	Electronic Data Management System
EV	Earned Value
EVM	Earned Value Management
EVV	Electronic Visit Verification
FFS	Fee for Service
FTE	Full-Time Equivalent
HIPAA	Health Insurance Portability and Accountability Act
IAPD	Implementation Advanced Planning Document
ID #	Identification Number
IEEE	Institute of Electrical and Electronics Engineers
ISO	International Organization for Standardization
IMS	Integrated Master Schedule

Provide one (1) sample report of Risk Report and Issue Log. (Sec 2.4.G and H)

5

PCG's risk report and issue log is embedded into a monthly status report. Our sample report contains similar reporting elements that will be required on the IEBM report. Our IV&V consultants will tailor the IV&V Risk Report and IV&V Issues Log to the requirements listed in section 2.4.G and H.



██████ Eligibility and
Enrollment (E&E) Modernization
IV&V Project

IV&V Monthly Status Report (Final)

Reporting Period: July ██████

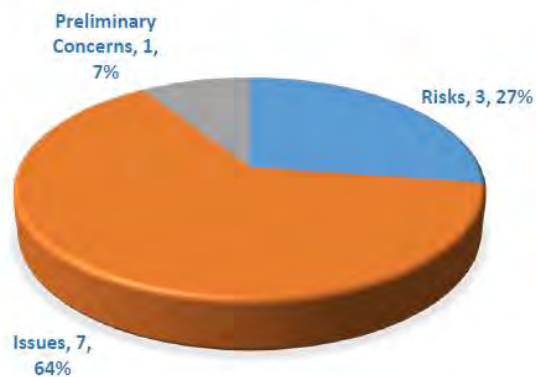
Report Date: August 28, ██████

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Executive Summary and Metrics

The overall project health remains at a criticality rating of Medium. In this reporting period, one (1) new finding was opened and five (5) were closed. IV&V conducted a detailed review of five (5) findings in a Watch status during the month of July and determined four (4) could be retired and one (1) needed further review. CMS is still awaiting the State's second draft of the Project Partnership Understanding (PPU) as part of MEELC. There are currently eleven (11) open findings: seven (7) issues, three (3) risks and one (1) preliminary concern which are depicted in the charts below.

OPEN FINDINGS



PROCESS AREAS



IV&V Findings and Recommendations

The following pages provide additional details on the current open findings in the below Process Areas:

- Planning Oversight
- Project Management
- Quality Management
- Training
- Requirements Management
- Operating Environment
- Development Environment
- Software Development (includes Security)
- System and Acceptance Testing
- Data Management
- Operations Oversight

IV&V Findings and Recommendations

Project Management

ID 1 – RETIRED Issue - <u>Need to update key project management documentation, specifically Scope Management</u>		Critical Rating
Issue: As a result of incomplete, undefined, or out-of-date project management documentation, specifically related to project scope, the project may experience poorly defined and/or understood requirements, as well as insufficiently implemented scope management processes. July: As [REDACTED] made a change requiring a Scope Statement for all projects, the process have been followed consistently for the past 90 days, and [REDACTED] is continuously training Project Managers to understand required Project artifacts; IV&V has retired this finding.		
Action Item(s) to Resolve Finding		Owner(s)
Completed: IV&V will follow up in July to either retire this finding or provide further details for action.		IV&V
Recommendation(s)		
Client Comments		
4/3/[REDACTED]: On smaller projects in the past only a Charter or a Scope document was required since scope is really determined in detail with the WBS. We have changed our policy and documentation to require both templates completed for all projects. Supervisors and PMT's will be looking for these documents at the appropriate gate reviews. Supervisors have also developed a checklist that PMs use to help ensure they are following the correct procedures and PM supervisors use it to help guide their project reviews.		
Best Practices Referenced		
Project Management Institute (PMI) Project Management Book of Knowledge (PMBOK®) standard Institute of Electrical and Electronics Engineers (IEEE) State [REDACTED] Project Management Methodology		


IV&V Findings and Recommendations

Project Management

ID 3 – Preliminary Concern - Lack of Capability Maturity Model Integration (CMMI) Maturity Level Assessment	Critical Rating
Due to the lack of periodic project CMMI assessments, the project may not be able to meet its contractual requirement of achieving and maintaining CMMI Level 2 (IV&V Oversight Task QA#8). July: [REDACTED] talking with [REDACTED] [REDACTED] about the approach to see if the State can bring in someone to assist with completion.	N/A
Action Item(s) to Resolve Finding	Owner(s)
In Process: [REDACTED] is talking with [REDACTED] about the approach to see if the State can bring in someone to assist with completion	[REDACTED]
In Process: Looking internally and reevaluating strategic PMO documents (missions, goals, steps, activities) to further [REDACTED]'s CMMI model.	[REDACTED]
In Process: Learn the CMMI model and map to the maturity PMO model to inform the model.	[REDACTED]
Not Started: The PMO will meet with IV&V for input once the 2, In Process Action Items are completed.	[REDACTED]
Recommendation(s)	
IV&V recommends keeping this finding open in a "watch" status, as it will be reevaluated throughout PCG's initial project assessment activities (including artifact review).	
Client Comments	
7/26/[REDACTED]: [REDACTED] – there are 24 process areas and [REDACTED] needs to understand and identify policies that indicate they have a process, plan, and resources to perform these processes. [REDACTED] is talking with [REDACTED] about the approach to see if the State can bring in someone to assist with completion.	
Best Practices Referenced	
PMI PMBOK® standard; IEEE, State [REDACTED] Project Management Methodology	

IV&V Findings and Recommendations

Project Management

ID 8 – Issue - Many [REDACTED] Modernization projects lack Risk Management registers and sufficient detail	Critical Rating
<p>The PMO hasn't implemented the ePMO Risk Management Process and Plan within their SDLC process. Many [REDACTED] Modernization projects lack Risk Management registers and sufficient detail. Also, [REDACTED] currently does not have a Risk Management Plan; therefore there is not enough detail. July: [REDACTED] walked IV&V through the updated Risk Management policy and process, as well as projects within Sciforma and how they are documenting due to the policy implemented in March [REDACTED].</p>	
Action Item(s) to Resolve Finding	Owner(s)
<p>Completed: IV&V will follow up in July to either retire this finding or provide further details for action. In Process: Determine how many E&E projects have gone through the Planning Gate Review since April [REDACTED]</p>	<p>IV&V [REDACTED]</p>
Recommendation(s)	
<p>7/31/[REDACTED]: IV&V recommends the State determine how many E&E projects have gone through the newly implemented Planning Gate Review since implemented in April, [REDACTED], and review these projects to determine if projects are following the Risk Management policy, as well as determine quality and execution of any corrective action plans for those that did not pass review. IV&V additionally recommends IV&V review all E&E projects' risk management following an additional 90 days (Nov, [REDACTED]).</p>	
Client Comments	
<p>4/23/[REDACTED]: [REDACTED] assist IV&V with where to find the Risk Management Plans. 4/5/[REDACTED] In the month of March, [REDACTED] is transitioning from a spreadsheet to [REDACTED] (fields not necessary to do a risk plan). [REDACTED] updated [REDACTED] to include analysis, probability and severity as well as the mitigation plan for Risks. [REDACTED] is asking PMs to record risks in [REDACTED] as some older projects have not done so, yet. The [REDACTED] Commissioner has requested all updates completed by mid-March all requires all projects have Risk Plans. If projects have a Risk Plan, it is to be uploaded to [REDACTED]; if a Project does not have a Risk Plan, a plan needs to be completed and uploaded into [REDACTED]. Next steps through May, [REDACTED], is to ensure the Risk Plans are useable. [REDACTED] will start by changing [REDACTED] so information makes sense with the processes.</p>	
Best Practices Referenced	
<p>PMI PMBOK® standard; IEEE, State [REDACTED] Project Management Methodology</p>	


IV&V Findings and Recommendations

Project Management

ID 10 – RETIRED Issue – <u>Insufficient Project Resources</u>	Critical Rating
Insufficient Project Resources - Based upon IV&V meeting attendance, interviews, documentation, meeting minutes review, and discussion with the State, it is apparent there are insufficient resources assigned to projects; as well as over allocated resources. 7/26/███: Slide deck completed and awaiting CBTO's decision on how to engage. █████ still discussing the common understanding of Sponsor expectations and whether this deck addresses all sponsors or just █████ sponsors.	
Action Item(s) to Resolve Finding	Owner(s)
Completed: IV&V will follow up in July to either retire this finding or provide further details for action.	IV&V
Recommendation(s)	
IV&V strongly recommended █████ Project Management Leadership (PMO, PMT, and NextGen) evaluate the number of projects in flight (which IV&V understands is around 150 APD and non-APD), LOE per project per role, and the assignments of each PM to determine if sufficient PM resources are on staff. A similar exercise should be completed specific for QA resources. If projects are not staffed sufficiently, the likelihood for delivering a quality project, on time, within scope, and on budget diminishes.	
Client Comments	
4/3/███: IV&V response appears to address another issue. For insufficient resources, this varies by function and SDLC. Currently the PMO is meeting the demand for PMs. Because of staff turnover and reductions there were occasions where coverage was necessary until we could move another staff member into place. We would need to know what other functions are included in the finding in order to appropriately evaluate. PMT is the governance that deals with escalated staffing issues and conflicts.	
Best Practices Referenced	
PMI PMBOK® standard; IEEE, State █████ Project Management Methodology	

IV&V Findings and Recommendations

Change Management

ID 11 – Issue - <u>Scope and Change Management Process</u>	Critical Rating
<p>IV&V observed during the January [REDACTED] PAR instances where changes to project scope and requirements did not follow the defined change management process. July: Slide deck completed and awaiting CBTO's decision on how to engage. [REDACTED] still discussing the common understanding of Sponsor expectations and whether this deck addresses all sponsors or just [REDACTED] sponsors.</p>	
Action Item(s) to Resolve Finding	Owner(s)
<p>Complete: BSO follow up with PMO to include [REDACTED] Sponsor as a role in the Sponsor presentation. In Process: Train sponsors.</p>	<p>BSO [REDACTED]</p>
Recommendation(s)	
<p>IV&V recommends all changes should be subject to the defined change management process, unless considered to be a "standard" change (i.e., changing out a computer monitor, keyboard, etc.). IV&V also recommends the PMTs and project teams review the change management process reiterating the need for following the process. Additionally, as part of Finding #1, ensure Scope Statements are well defined and detailed.</p>	
Client Comments	
<p>7/26/[REDACTED]: Slide deck completed 7/25 and have been provided to the CBTO. Meeting scheduled with management 8/5 and then will await CBTO's decision on how to engage. 7/15/[REDACTED]: [REDACTED] still discussing the common understanding of Sponsor expectations and whether this deck addresses all sponsors or just [REDACTED] sponsors.</p>	
Best Practices Referenced	
<p>PMI PMBOK® standard; IEEE, State [REDACTED] Project Management Methodology</p>	






IV&V Findings and Recommendations

Project Management

ID 12 – RETIRED Issue - <u>Project governance processes not always followed</u>	Critical Rating
<p>Project governance processes not always followed. There is insufficient compliance to formal project governance and communications processes, as it has been identified that IBM developers circumvent the Communication Plan and processes by communicating directly to the DHS sponsor. Due to non compliance, the project could experience degradation of technical collaboration and communication between DHS and [REDACTED] project staff and IBM developers. The lack of consistent adherence to governance and communication processes could create confusion, distrust and frustration between the parties involved. As an example, IV&V was informed that on occasion the IBM team will work directly with DHS sponsors to get project changes approved without following formal project processes, and without informing the project manager ahead of time. July: IV&V retired this finding, as [REDACTED] noted they have spoken with IBM Leadership and do not believe there is a problem. Additionally, IV&V could not identify specific examples of the Communications Plan being circumvented. IBM insists that they do not directly communicate with the business project sponsors with the exception of when they are doing a soup-to-nuts effort which requires them to directly work with the sponsors. Without the specific examples, [REDACTED] cannot formulate a mitigation plan for this issue. IV&V will continue to monitor for compliance to the Communications Plan to ensure formal project processes are being adhered to.</p>	
Action Item(s) to Resolve Finding	Owner(s)
<p>Completed: IV&V will follow up in July to either retire this finding or provide further details for action.</p>	IV&V
Recommendation(s)	
<p>IV&V recommends [REDACTED] execute the following steps: 1) Modify behavior to follow documented and agreed upon project governance and communications processes; 2) Follow RACI model which identifies roles and functions performed by groups involved in governance and communications processes. RACI is an industry standard tool useful in clarifying and communicating roles and responsibilities in cross-functional and inter-departmental projects and processes; 3) Add to all new PMT sessions an agenda to provide another overview of the governance and communication processes; 4) Add to all Project Meetings an agenda item to provide another overview of the governance and communication processes; and 5) Conduct periodic evaluations to ensure project team members following governance and communication processes.</p>	
Client Comments	
<p>4/16 [REDACTED] has noted they have spoken with IBM and do not believe there is a problem.</p>	
Best Practices Referenced	
<p>PMI PMBOK® standard; IEEE, State [REDACTED] Project Management Methodology</p>	

IV&V Findings and Recommendations

Change Management

ID 13 – Issue - Release Planning	Critical Rating
<p>Release Planning - Due to release planning taking a reactive (adaptive and corrective maintenance) approach versus a proactive (perfective and preventative maintenance) approach, projects must overcome multiple release complications including compressed testing times, inaccuracies within releases, and a growing backlog of changes. July: Release Management has started creating weekly Release Health Report that contains information about status of the current release. Information in this document includes QA and Project Manager statuses as well as a summary of issues used to determine the Release Health. Details are captured in separate pdf attachments. That is a positive step for RM and makes sure all stakeholders know the status of current release.</p>	
Action Item(s) to Resolve Finding	Owner(s)
In Process: Determine a process moving forward	
Recommendation(s)	
<p>1. Plan projects based on relative size indicated by the Rough Order of Magnitude (ROM) or other general estimating method as well as: a. relative size drives planning for the project, for example, scheduling requirements and design to occur in Release 1 and development and testing in Release; 2. Improve ROM estimating methods by: a. Involve SMEs in developing LOE estimations, for example, the Testing Manager should provide ROM for testing activity, b. Estimate ROM in ranges of time and cost to arrive at relative size categories such as Small, Medium, Large, Jumbo, for example, bucket of hours for a Large project may be 480 080 hours; c. Incorporate use of analogous estimation techniques when possible to provide slightly more accurate ROM estimates; Enhance the estimation tool to provide complete traceability from the change request to the required vendor and role; 3. Plan for all but small projects to occur over multiple release periods so that requirements, design, estimates and schedule occur in one release period; development, testing and deployment occur in subsequent release periods; 4. Plan for major enhancements outside of release cycle. Manage major enhancements outside schedule; 5. Dedicate project management, development and testing efforts to enhancement projects; and 6. Add additional level of configuration management to assure code changes from regular releases are merged into the development code.</p>	
Client Comments	
<p>7/22,  continues to move forward helping PMT on the understanding of roles and approach with Releases and are following these as part of the 2020 Roadmap and release planning. As we continue to document our process, we are implementing sub-processes to support the overall process. Here a few examples of that. 1) Release Mgmt. holding a twice per week meeting,  "In Flight Release Fitness". In the meeting, we review testing progress, defects, deployment plans, and any other issues that may impede the release. 2) There is a schedule for each release, example, Release Scope Finalization Schedule for 20.1, that steps the teams through a process in order to be included in the upcoming release.</p>	
Best Practices Referenced	
PMI PMBOK® standard; IEEE, State  Project Management Methodology	


IV&V Findings and Recommendations

Project Management


ID 14 – Issue - <u>Inconsistent estimation processes are in place across the enterprise</u>	Critical Rating
Inconsistent estimation processes are in place across the enterprise - As a result of inconsistent estimation processes in place across the enterprise, projects do not properly estimate the time, cost and resource allocation needed for requested changes. July: BSO noted there was a delay in progress. The final list will be provided.	M
Action Item(s) to Resolve Finding	Owner(s)
In Process: Review all current estimating tools and processes.	M
Recommendation(s)	
<p>1. Perform consistent retrospectives; 2. Institute formal metric reporting by project, and by release; 3. Performance metrics such as adherence to project scope and schedule, and accuracy of estimates; 4. Create advisory metrics and reports such as: a. Average duration (elapsed time) and level of effort (hours consumed) for requirements definition and approval, b. Programs/modules with the highest number of modifications, c. Total Releases in the Pipeline, d. Total Releases Implemented, e. Number of Failed Releases, f. Number of Releases Rescheduled, g. Number of Releases During Business Hours, h. Number of Releases Outside of Business Hours, i. Average Process Time Per Release, j. Number of Releases Resulting in Incidents Release Management Process Maturity, k. Others where process efficiencies and improvements need to be made or where changes to the release schedule may be needed; 5. Improve LOE estimating methods by: a. Involve SMEs in developing LOE estimations, for example, the Testing Manager should provide the ROM for the testing activity, b. Estimate ROM in ranges of time and cost to arrive at relative size categories such as Small, Medium, Large, Jumbo, for example, the bucket of hours for a Large project may be 480 – 2080 hours, c. Incorporate the use of analogous estimation techniques when possible to provide slightly more accurate ROM estimates, and d. Enhance the estimation tool to provide complete traceability from the change request to the required vendor and role.</p>	
Client Comments	
7/26/19: [redacted] not in attendance, however, [redacted] noted there was a delay in progress. The final list will be provided to [redacted] and IV&V.	
Best Practices Referenced	
PMI PMBOK® standard; IEEE, State of [redacted] Project Management Methodology	

IV&V Findings and Recommendations

Operations Oversight

ID 15 – Risk - <u>PMT governance does not currently address Organizational Change Management (OCM)</u>	Critical Rating
<p>PMT governance does not currently address Organizational Change Management (OCM) - IV&V has observed that no formalized Organizational Change Management (OCM) framework and plan is currently in place. Without a documented OCM framework and plan, the following risks exist: 1. Stakeholders, especially those impacted by change, do not know their roles and responsibilities within the change process and do not follow governance processes. 2. Metrics related to success of the change effort are less likely to be measured and tracked. 3. It is unlikely that [REDACTED] will successfully operationalize OCM and operational readiness, and create a sustainable and repeatable process. 6/14 [REDACTED] see if there should be a different “owner”. July: DHS meeting to discuss recommendations. IV&V reviewed and determined criticality rating should remain at Medium until the State makes a determination on action, if any.</p>	
Action Item(s) to Resolve Finding	Owner(s)
In Process: Determine recommendations.	DHS
Recommendation(s)	
<p>IV&V recommends MNIT establish an OCM framework and formalize the current informal Operational Transition form into an OCM plan. Dedicated resources from within the organization should be committed to developing and implementing the PMO OCM and Operational Readiness Plan(s). This will help develop, communicate and provide long term support to OCM and operational readiness initiatives and potentially identify opportunities for OCM to reduce the number of workarounds and other improvements. Consider creating and implementing a full OCM methodology to define a systematic, repeatable process for supporting change.</p>	
Client Comments	
<p>7/26, [REDACTED] The BSO management team met and will work with Sarah Small's group to start discussing recommendations for how the agency can address this in a more meaningful way. 7/15, [REDACTED] : [REDACTED] talked with [REDACTED] and notes that [REDACTED] is a coordinator specific to the modernization strategic roadmap and plan for the state. [REDACTED] will update the state's response to this finding in SharePoint. [REDACTED] will message [REDACTED] as they believe ownership belongs in the BSO. [REDACTED] agrees, and will meet with [REDACTED] to get a better handle on OCM plans, if any.</p>	
Best Practices Referenced	
PMI PMBOK® standard; IEEE	

IV&V Findings and Recommendations Systems & Acceptance Testing




ID 16 – Risk - <u>Developers and QA teams potentially utilize different documents as the source</u>	Critical Rating
<p>Developers are using the Functional Specification Document (FSD) and the Quality Assurance team is using the Requirements Traceability Matrix (RTM) to test application components, which puts the project at risk for inconsistencies in test results due to variations within the two documents. If the FSD and RTM do not match and tests are run against these two different documents, all requirements, tests, and associated results within the FSD may not be tracked or traced within the RTM, which may ultimately cause delays in integrated testing and cost overruns due to retesting and discovery of unknown defects. July: IV&V would like one more interview cycle (September [REDACTED]) to ensure the appropriate process is being followed.</p>	
Action Item(s) to Resolve Finding	Owner(s)
Recommendation(s)	
<p>IV&V recommends the following: 1) Ensure the test plan complies with IEEE standards on testing and requirements traceability; 2) Include which requirements documents are permissible to test against in the test plan and enforce through the process, oversight, and track requirements; 3) PM, QA Lead, and BA Lead should review the FSD and RTM to understand the variations, and ensure all of the approved requirements are captured in one location (RTM or requirements management tool); 4) Ensure test results are traced back to these requirements within the RTM or requirements management tool. In addition, IEEE recommends "bi-directional traceability as a technique that can be used to: improve the integrity and accuracy of all requirements, from the system level all the way down to the lowest level system element, allow tracking of the requirements development and allocation with related measures such as requirements coverage, compliance, and complexity, provide a means of documenting and reviewing the relationships between layers of requirements that capture certain aspects of the design, and support easier maintenance and change implementation of the system in the future."</p>	
Client Comments	
<p>6/14 [REDACTED] spoke with peers to add representatives from QA & BA; as well as [REDACTED] in this Bi-Weekly meeting. 6/10 [REDACTED] The QA Test Methodology v2 formally requires the creation of and link to the Functional Specification Document (FSD) and the Business Requirements Document (BRD) as part of the entrance criteria before a project is accepted into any QA Environment.</p>	
Best Practice(s) Referenced	
<p>IEEE, State [REDACTED] Quality Assurance Testing Methodology</p>	




IV&V Activities Initiated During the Reporting Period

IV&V Activities Initiated During the Reporting Period			
Deliverable	Activity	Scheduled Start Date	Status
IM-8	IV&V Internal QA Status Report 13/June	7/1/████	G
IM-8	Initial Submission of Status Report 13/June	7/3/████	G
IM-8	MN Review & Approval Status Report 13/June	7/9/████	G
IM-8	Final Submission of Status Report 13/June	7/10/████	G
IM-8	MN Review and Approve Status Report 13/June	7/11/████	G
IM-8	Develop Status Report 14/July	7/28/████	G
IM-7	Prepare Monthly Invoice 12	7/2/████	G
IM-7	Submit Monthly Invoice 12	7/5/████	G
IM-4	Quarter 4 IV&V Review Planning (Interviews, Documentation, Meetings)	7/4/████	G
IM-4.1	Quarter 4 Progress Report preparations	7/10/████	G
IM-4.1	Submit Quarter 4 Progress Report Draft	07/17/████	G
IM-4.1	Submit Quarter 4 Progress Report Final	7/31/████	G

Appendix A – Findings and Recommendations Log

- See attached Findings and Recommendations Log
- Criticality Risk Ratings and Project Status are provided below:

Criticality Rating	Definition (not applicable for preliminary concerns; only risks)
	A high rating is assigned if there is a possibility of substantial impact to product quality, scope, cost, or schedule. A major disruption is likely and the consequences would be unacceptable. A different approach is required. Mitigation strategies should be evaluated and acted upon immediately.
	A medium rating is assigned if there is a possibility of moderate impact to product quality, scope, cost, or schedule. Some disruption is likely and a different approach may be required. Mitigation strategies should be evaluated and implemented as soon as feasible.
	A low rating is assigned if there is a possibility of slight impact to product quality, scope, cost, or schedule. Minimal disruption is likely and some oversight is most likely needed to ensure that the risk remains low. Mitigation strategies should be considered for implementation when possible.

Project Status	Definition
	Task is Late - Task may cause delay to the finish of the project based on the task's start date, as well as on the late start and late finish dates of predecessor and successor tasks, and other constraints.
	At Risk - Task is slipping and the finish date is past the baseline finish date.
	On Schedule - Task to complete on finish date.

Appendix B: Inputs

Meetings Attended During the Reporting Period		
No.	Date	Input
1-8	7/9/ 7/11/ 7/16/ 7/18/ 7/20/ 7/23/ 7/25/ 7/30/	Healthcare PMT
9-10	7/14/ 7/26/	IV&V Bi-Weekly Status Meeting
11-15	7/3/ 7/10/ 7/17/ 7/24/ 7/31/	I-ESC
16	7/2/	Interface Status Meeting
17-19	7/11/ 7/18/ 7/27/	AEM Weekly Team Meeting
20-22	7/3/ 7/17/ 7/24/	People PMT

Appendix B: Inputs (cont.)

Artifacts Reviewed During the Reporting Period	
No.	Input
1	AEM_Business_Requirements_Document_E Forms (2)
2	Unique Person ID - Project Management Plan
3	Unique Person ID - B3c SMI Exact Match - RTM
4	██████████ 2.0 Status of WBS
5	weekly status report ██████████ -07-21
6	weekly status report ██████████ -07-25
7	Final Lessons Learned
8	ProcessforReportingDefects-██████████ransition
9	██████████ 0725-IRTrack2TeamMeeting
10	██████████ 0723-Track3-4-Workgroup
11	██████████ 718-IRTrack2TeamMeeting
12	██████████ 0716-Track3-4-Workgroup
13	██████████ 0711-IRTrack2TeamMeeting
14	██████████ 0709-Track3-4-Workgroup
15	██████████ 0702-Track3-4-Workgroup

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Describe your company's overall approach to meeting the project requirements described in the Scope of Work for this RFP (Sec. 2.4.A-Q)

5

PCG's high-level IV&V services approach is based on our mature proprietary Eclipse IV&V® Methodology developed over the last 22 years. We are happy to share the details of our Methodology in a private discussion on request.

Develop an Initial IV&V Project Plan

The development of the IV&V project plan maps out the overall approach we will use to achieve the deliverables defined in the RFP.

Following initial meetings with the State and other stakeholders, personnel will be assigned to review all the project information. We will create a draft project plan and consult with DHS to agree on the outline. The team will then build a project plan and will review the final draft with DHS which will be delivered within 30 calendar days. In accordance with 45 CFR § (b) and (c), the plan will be provided to the state and to CMS at the same time.

The following sample outline depicts the typical contents of our Medicaid IV&V project plans. We have found this structure to be very effective in planning and performing IV&V services. This structure is standard in our Eclipse IV&V® Methodology and complies with CMS, IEEE, and PCG-derived best practices. The structure and content of the plan will be reviewed with you to make sure the plan reflect the needs, priorities, functions, and resources of the IEBM solution.



State of Arkansas

Department of Human Services

Division of County Operations

Integrated Eligibility and Benefit Management Solution (I|EBM) IV&V

Verification and Validation Plan (VVP)

v1.0

January 30, 2020



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AR Department of Human Services
Division of County Operations
Integrated Eligibility and Benefit Management Solution
Verification and Validation Plan

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DHS Function Requirements Knowledge

PCG looks forward to presenting our understanding of Arkansas' Medicaid program, policies, and statistics during the formal presentation phase of the proposal process. Additionally, we are eager to have the opportunity to share our experience of working with CMS as well as how our approach to delivering IV&V engagements that best recognize and ensure that all the applicable requirements and standards are observed and respected.

Upon being awarded this engagement opportunity, the our IV&V team will immediately request access to

DHS' program policies, procedures and manuals that are relevant to IEBM; and, then, begin engaging and developing relationships with all of the key stakeholders. PCG has successfully administered IV&V engagements that fully recognized HIPAA, which is the Act that protects the privacy of individual identifiable health information and set national standards for the security of electronic protected health information. The Act is supported by additional rules (e.g., HITECH Act and Omnibus Rule) that provide additional guidance.

The State of Arkansas has an estimated population of 3 million people. The State began offering managed care in 1994 with the launch of ConnectCare, which was a Primary Care Case Management program. Recently, the State expanded its program to low-income individuals and, as of June 2019, has enrolled 841,102 individuals in Medicaid and CHIP. That signifies a 50% increase over the past 5 years translating to almost one-third (28%) of the State's residents are receiving benefits. The DHS Division of Medical Services (DMS) is responsible for administering the Medicaid program in Arkansas. DMS relies upon the State's 50 acute care hospitals, 29 critical access hospitals and affiliated practices, rural health clinics, and federally qualified health clinics to deliver care. Additionally, Arkansas contracts with primary care providers (PCP) as well as six transportation brokers (according to geographic region) that provide non-emergency transportation services. Also, Arkansas contracts with Medicaid Managed Care Services (MMCS), which is a division of the Arkansas Foundation for Medical Care, to administer its ConnectCare program and perform monitoring and reporting functions. The Managed Care Programs that the State delivers are Non-Emergency Transportation, Arkansas Safety Benefit Program, Program for the All-Inclusive Care for the Elderly (PACE), and Primary Care Case Management.

PCG's IV&V team is looking forward to gaining further insights into the DHS and DCO agencies and will create a draft presentation on our approach and experience with initial insights. Then, within 45 calendar days of the contract's actual start date, our team will deliver an additional final submission.

Arkansas IEBM Knowledge

PCG has a proven commitment to successfully providing services nationally to state Human Services agencies. We have analyzed Arkansas' progress in deploying an integrated eligibility and benefit management solution. The members of our proposed team have reviewed project documentation to enhance their knowledge of the Arkansas IEBM in terms of their experience and knowledge in eligibility, enrollment, benefit management, Deloitte's NextGen Solutions, IBM Cúram, all phases of system integration, CMS certification, IT architectures, information security, and organizational analysis.

Our IV&V team will perform a formal presentation summarizing our understanding within 60 calendar days. We will prepare for the presentation by analyzing the project documentation, conducting structured interviews with key stakeholders, and creating a slide deck including the topics requested in the RFP:

- The Medicaid system as implemented in Arkansas
- The intent and scope of work for Arkansas' IEBM System Integrator RFP # SP-17-0012
- The current IEBM system including its architecture and sub-systems
- Internal and external data interfaces with IEBM
- The IEBM reporting requirements
- DHS' current strategy for replacing legacy modules with IEBM
- Key stakeholder groups within the current DHS organizational structure

Each key member of our IV&V team will create their assigned content of the presentation slides. A draft outline of the presentation will be delivered to you for review at least three weeks prior for approval. The final slide deck and presentation of the material will then be delivered.

Monthly IV&V Assessments

PCG's IV&V team will provide a monthly report on all DDI work provided by the IEBM system integrator. Known as a lead IV&V service provider since 1996, PCG possesses technical, functional and soft skills wrapped together in our pragmatic approach. Just as important, we also possess highly developed communications skills that allow us to effectively communicate the results of our analysis to key project stakeholders and executive management to promote project success. PCG's IV&V teams have been

successful in applying these skills and methodologies in Georgia, Hawaii, Kentucky, Louisiana, and Mississippi and feel confident that the IEBM project will benefit from its use.

- Our IV&V team will submit the required reports to the CMS, the United States Department of Agriculture Food and Nutrition Service (FNS) and DHS simultaneously no later than 5:00 p.m. Central Time (CT) on the Friday of the first full week of the month following the reporting period.
- Our IV&V team will develop the report to follow the CMS template and guidance and will seek approval of format by DHS. PCG has a history of working with CMS and is familiar with the required formatting of reports.
- Our IV&V team will format the report in such a way that it supports all MEELC reviews and the MEELC Quarterly Report. Information needed to support the MEELC Quarterly Report will be available for extraction from the monthly IV&V assessment report.
- Our IV&V team members will attend meetings regularly, conduct interviews with DHS and Deloitte staff, conduct interviews with other stakeholders, assess artifacts, assess project processes, and compare the observations made to our IV&V checklists that incorporate industry standards and CMS guidelines regarding the SDLC to provide an independent assessment of the IEBM system integrator contractor's performance applying best practices in project management, in SDLC processes, and in work products.

Each report will include:

- Overall Project Health Assessment
- Project Management Assessment
- Schedule Assessment
- Modular Development Assessment
- Artifact Assessments
- Security Assessment
- Risks Assessment
- Issues Assessment

Overall Project Health Assessment

PCG's IV&V team will provide an overall assessment of the IEBM project using the combined analysis of the project management, schedule, modular development, artifact, security, risks and issues assessments. Our IV&V team will derive an overall rating using color coded project status indicators GREEN, YELLOW, and RED as an easy indicator of project status. Each indicator color will have corresponding criteria that will determine its application. Our IV&V team will collaborate with your staff to agree on the criteria used to determine the application of each project status indicator. For example:

Project Management Assessment – Our IV&V team will focus on the IEBM system integrator's use of and adherence to project management processes, tools, and techniques compared to the Project Management Body of Knowledge (PMBOK®) and or the standards set by DHS on the IEBM project. Our team will identify any gaps observed and provide recommendations on how project management gaps can be closed.

Schedule Assessment – Our IV&V team will detail the effectiveness of the schedule, performance against the schedule, and evaluate if changes to the baseline schedule are being managed. Our team will identify any gaps or issues observed and provide recommendations on how they could be mitigated.

Modular Development Assessment – Our IV&V team will monitor the modular development as the IEBM solution is being developed and implemented. Our team will monitor and report any changes or concerns regarding the modular development of the IEBM. The ongoing modular development assessment will detail the status of modular development in areas to include:

- Our IV&V system architects and technical subject matter experts will assess the completeness and reasonability of IEBM concept of operations, architecture, and designs by reviewing the design documents and any other applicable project artifacts.

- Our IV&V team will assess the accuracy of capture of interfaces and data sharing requirements with systems external to the IEBM by assessing project interface control documents (ICD).
- Our IV&V team will assess the viability and completeness of the data transition plan by reviewing and using our PCG IV&V checklists to ensure all areas applicable are covered by the submitted data transition plan.
- Our IV&V team will assess the traceability of requirements through design, development, and testing by ensuring the project has controls in place to provide traceability. IV&V will look to the Requirements Management Plan for plan adherence and the Requirements Traceability Matrix (RTM) for its regular upkeep. These two documents will be the key source for project traceability.
- Our IV&V security subject matter expert (SME) will assess the adequacy of system security and privacy policies, plans, technical designs, and implementations through the thorough review of all applicable project artifacts including and the System Security Plan.
- Our IV&V team will assess the coverage and integrity of all system testing, including stress testing and testing of interfaces between modules and with external partner systems using one of our testing SMEs. The testing SME will review the test plan and any other applicable artifacts to provide an assessment and recommendations when appropriate.
- Our IV&V team will assess capacity management, including consideration of future vendors' support and release plans for underlying databases, software, and hardware. We will review design documentation to provide the capacity management assessment.
- Our IV&V team will review and assess the adequacy of disaster recovery planning. Our IV&V team will access the project disaster recovery plan for adequacy.
- Our IV&V testing SME will verify that adequate regression testing has been performed to confirm that replaced or enhanced modules do not adversely impact the current functionality and operation of the state's Medicaid Enterprise. Our IV&V team will review the project's test plan for the assessment.

Artifact Assessments – Our IV&V team will detail the quality of artifacts reviewed by IV&V during the reporting month. Our team assess artifacts for adherence to industry standards such as PMBOK, ITIL, IEEE, NIST, and Arkansas and federal guidelines when applicable. IV&V will assess whether quality and acceptance criteria are well defined. Our IV&V team will assess defect criteria and reporting processes.

Security Assessment – Our IV&V security SME will assess the adequacy of system security and privacy policies, plans, technical designs, and implementations through the thorough review of all applicable project artifacts including the System Security Plan. (NIST, IEEE, ITIL).

Risks Assessment – Our IV&V team will detail new and escalated project risks. Risks will be self-reported and observed by reviewing the risks log, participation in project meetings, and artifact reviews. The risks will be assessed for their probability of occurrence, level of impact, and whether the risks have been mitigated to minimize probability of occurrence and level of impact. Our team will assess whether the project is adhering to the risk management plan and report any deviations observed.

Issues Assessment – Our IV&V team will assess issues for the level of impact and issues have been mitigated to minimize the level of impact. Issues will be self-reported and observed through review of the issues log, participation of project meetings, and artifact reviews. Our team will assess whether the project is adhering to the issue management plan.

IT Governance Committee (ITGC) Reports

Our IV&V team are well versed in providing executive summaries of large and dynamic projects monthly to our clients. The executive summary is meant to bring out the important and actionable details from the monthly IV&V report. Our teams understand why you need an executive level summary information from dynamic projects with multiple streams of ongoing activity. We're geared to provide executive updates to any of your stakeholders. PCG understands that executive committees such as the ITGC needs clear and actionable issues brought forth to remove roadblocks and barriers for the project team. We know you need to quickly receive and act on the information provided by your IV&V vendor. We've done this for our clients on similar projects in Delaware, Georgia, Hawaii, Michigan, and Louisiana and we look forward to providing

the same level of service to Arkansas as well.

Our IV&V team will work with DHS to review existing formats being used and agree on any revisions of a monthly IV&V report that will be submitted to the ITGC and will be submitted no later than 5 p.m. CT on the Friday of the second full week of the month following the reporting period.

- Our IV&V team will condense the monthly IV&V assessment into an executive summary that provides the ITGC with information needed to keep abreast of project status.
- Our IV&V team will review and extract items that have significant impacts on project budget, schedule, or quality of product.
- Our IV&V team will review the items within the monthly ITGC report with DHS prior to its submission.

Document Transparency

As a leader in IV&V services, one of PCG's core tenets is to provide transparency in all that we do. We hold our IV&V consultants to the expectation of transparency while performing IV&V services. Our obligation and commitment to our clients results in providing services and observations that are beyond reproach. Our IV&V consultants are trained to do just that by taking a 'no surprises' approach with how we provide our services to our client, including our work products. Our proposed IV&V team will make sure that our procedures are documented in a clear and concise manner allowing for any future contractors to re-create the same reports if needed. Each IV&V document will include the following document controls:

- **Revision History** – Identifies the draft version, the date the draft was submitted, deliverable point of contact/person making change, and a description of changes made.
- **Table of Contents** – A summary list of the major headings within the document and their page references.
- **List of Figures** – A list of all figures and their page references.
- **List of Tables** – A list of all tables and their page references.
- **Referenced Documents** – A list of other relevant documents, including the document name, and identifying numbers or codes, any web or SharePoint link, and issuance date
- **Decision Log** – Provides a summary of decision point and owners.
- **Assumptions, Constraints & Risks** – Describes any assumptions, constraints, and risks regarding the project that impact deliverables.
- **Acronyms** – A list of all acronyms identified in the deliverable, their literal translations, and source.

IV&V Risk Report

PCG brings a robust and proven risk and issue management method imbedded in our Eclipse IV&V® Methodology. Our IV&V team will work with Arkansas to adapt our methods to your management ecology to provide details, summaries, dashboards, etc. We can post our risks and issues directly to state-controlled JIRA or maintain our own separate source data. We adapt to our client's needs.

Our proposed IV&V team will:

- Analyze posted documentation including contracts, SOWs, plans, etc.
- Participate in meetings, walkthroughs, presentations, training sessions, etc.
- Plan, conduct, and document stakeholder interviews
- Conduct risk solicitation meetings to identify risks by organization, skill, and taxonomy
- Document risks
- Report on risk using a comprehensive report in a format approved in advance by DHS
- Report on risk summaries using the CMS cadenced reports
- Identify trends, metrics and hotspots of risks

The timing of risk reporting will comply with the standard set in the RFP including:

- The cumulative Risk Report is updated at least monthly and included in the monthly IV&V

Assessments

- The report is updated and re-submitted within two business days when high impact risks are detected

Risk tracking and reporting will comply with Arkansas and CMS standards and include at least:

- Sources of overall project risk
- Assessed severity and impact
- Analysis of which sources are the most important drivers of overall project risk
- Plans for risk mitigation
- The individual responsible for monitoring each risk
- Summary information including the number of risks open and closed, the number of risks distributed across categories, risk trends over time, and any risks that have progressed to issues within the month.

PCG developed risk management methods using requirements and guidance from the following:

- PMBOK
- MITA 3.0
- CMS Expedited Life Cycle (XLC)
- ITIL V3
- IEEE Standard for Software Life Cycle Processes - Risk Management

Our risk management method incorporates the six PMBOK key processes:

- Risk Management Planning
- Risk Identification
- Qualitative Risk Analysis
- Quantitative Risk Analysis
- Risk Response Planning
- Risk Monitoring and Control

PCG's Eclipse IV&V® Framework contains a well-structured method for identifying and classifying risks, which all PCG IV&V staff are trained to understand and apply. Our proposed IV&V Lead will track and manage risks during the project. However, all project stakeholders may identify risks and support their management and resolution. The risk assessment will also review the project's risk management planning documents—the approach, procedures, and tools used to manage risk and issues associated with a project.

Our risk assessment methodology focuses on the three types described below.

- **Preliminary Concern** – An item we believe may pose a risk to the project, but more analysis and a better understanding of the subject area is necessary before classifying the item as a formal risk or issue. Preliminary concerns are documented in statements which articulate the concern and indicate further analysis and/or understanding of the matter is required.
- **Risk** – “An uncertain event or condition that, if it occurs, has a positive or negative effect on a project's objectives.” We identify risks with negative effects and expand the definition to include both conditions which may occur and those which may not occur (e.g., lack of a well-defined requirements traceability process could lead to delivery of an incomplete system, requiring costly and time-consuming rework).
- **Issue** – An event, often previously identified as a risk, which has occurred and caused a negative impact on the project. Issues are documented in issue statements which identify the event, its impact on the project, and status towards resolution.

Once identified, individual risks and issues are rated based upon qualitative and quantitative measures defined in the VVP. Our analysis examines project conditions to determine the probability of the risk being realized and the impact on the project if the risk is realized. Overall risk exposure is determined by finding

the intersection of the probability rating and the impact rating. The results of the risk assessments are reported to the state and vendor teams and maintained in a risk log. Project leadership will be briefed on risk management activities through the Weekly and Monthly Status Reports.

Ratings for individual risks and issues are rolled up to project categories such as project management, training, and testing for reporting and providing a dashboard of project health for projecting leadership. Category ratings distill the status of key project areas into a simple rating, with specific and prioritized recommendations for improvement. Each category will be rated based upon the overall category's risk to project success: low, medium, and high, as shown in Table 5 below. In addition to the category rating, comments relative to progress addressing risks in each category will be provided.

Table 5: Risk Exposure Rating

	MAGNITUDE OF IMPACT				
Probability of Occurrence	1 Negligible	2 Minor	3 Moderate	4 Significant	5 Critical
5 Probable (80%-99%)					
4 Likely (60%-79%)				HIGH	
3 Possible (40%-59%)		MEDIUM			
2 Unlikely (20%-39%)	LOW				
1 Improbable (1%-19%)					

Figure 3: provides the Eclipse IV&V® priority definitions.

Figure 3: Priority Definitions

PRIORITY	DEFINITION
HIGH	Possibility of substantial impact to product quality, manageability, cost, or schedule. A major disruption is likely and the consequences would be unacceptable. A different approach is required. Mitigation strategies should be evaluated and acted upon immediately.
MEDIUM	Possibility of moderate impact to product quality, manageability, cost, or schedule. Some disruption is likely and a different approach may be required. Mitigation strategies should be implemented as soon as feasible.
LOW	Possibility of slight impact to product quality, manageability, cost, or schedule. Minimal disruption is likely and some oversight is needed to ensure that the risk remains low. Mitigation strategies should be considered for implementation when possible.

Magnitude of Impact Definitions

- **Negligible** – Risk will have an impact so small that it can be ignored when studying the larger effect
- **Minor** – Risk will have a small impact to the project that should not be ignored when studying the larger effect
- **Moderate** – Risk will have a noticeable impact on the project

- **Significant** – Risk will have a large impact on the project
- **Critical** – Risk will have a large impact and may jeopardize the success of the project

IV&V Issues Log

Coupled with our risk reports is our robust and proven issue management process that will be adapted to the Arkansas ecology to populate and manage the IEBM IV&V Issues log. As we mentioned in the above IV&V Risk Report section, we adapt to our client's need regarding where we maintain issues. The timing of issue reporting will comply with the standard set in the RFP including:

- The cumulative Issues Report will be updated at least monthly and included in the monthly IV&V Assessments
- When high or moderate impact issues are detected the report will be updated and re-submitted within two business days

Issue tracking and reporting will comply with Arkansas and CMS standards and include at least:

- Issue type
- Who identified the issue and when
- Whether the Issue was previously anticipated in any Risk Report
- Description
- Impact and Priority
- Person assigned to lead resolution of the issue
- Target resolution date
- Status
- Final resolution

The Issue Management Process is used to ensure that every issue identified is formally:

- Identified
- Validated and Prioritized
- Analyzed
- Tracked and Reported
- Escalation
- Resolution

The Issue Management involves the implementation of five key processes:

- Identifying and assessing of project/program issues
- Clarifying issue and documenting the project/program issues
- Determination and performance of issue resolution actions
- Continuous monitoring and control of assigned issue until resolution
- Confirmation and closure of project issues

PCG's IV&V team will develop and maintain a log of all IEBM project issues that are identified by our team. The Issue log will be included in the monthly IV&V Assessments.

Meeting and Interviews

PCG recognizes the importance meetings and the impact meetings have if not managed properly. PCG is prepared to conduct or support successful meetings in our role as your IV&V. Our IV&V team will continuously participate in meetings and walkthroughs and will conduct stakeholder interviews. A list of meetings and interviews, as well as other significant activities will be included in the monthly report.

In conducting meetings and interviews, PCG will work with Arkansas to adapt our meeting protocol to the

state's. The following describes our standard process.

Managing Project Meetings

PCG has extensive experience in executing IV&V processes and applying best practices for Medicaid agencies. That experience assures the IEBM solution that our IV&V team will reliably manage IV&V meetings throughout the project lifecycle. Regardless of the meeting type and subject, standardized meeting guidelines will include:

- **Meeting Invitations & Agendas** – Invitations and agendas will be distributed at least three business days in advance of the meeting. The Agenda should identify the presenter for each topic along with a time limit for that topic. The first item on the agenda should be a review of action items from the previous meeting.
- **Preparation** – PCG comes to meetings and interviews prepared. We will identify the reason (and need) for a meeting. If the results can be achieved by more efficient means (telephone, email, questionnaire, announcement, etc.) we use them. Regardless of the channel, we will have done our diligence, assembled the research, and come to the meeting with the background, materials, and questions to achieve the results.
- **Meeting Minutes** – Minutes and notes will be distributed within 48 hours following the meeting. Meeting minutes/notes will include the status of all items from the agenda along with new Action Items and the Parking Lot list. Our powerful approach to minutes works by desktop sharing the meeting minutes as they are recorded. This allows participants to visually confirm whether the information is being recorded properly. Attendees can immediately suggest changes, and the information is recorded as perceived by everyone in the meeting. Prior to the conclusion of the meeting, we will ask for reconfirmation of the information recorded and displayed on the screen. If attendees do not agree to an item recorded, the information can be corrected immediately. Once the meeting adjourns, the meeting minutes can be sent out.
- **Project Repository** – Agendas, minutes, and other meeting materials will not only be distributed to meeting invitees but also stored in a project repository.

Meeting Cadence

One of the lessons we have learned over time is that a cadence for operation of the project should be established at the outset of the project. This meeting cadence is the heartbeat of the project, and all the project partners need to fall into the rhythm of regular reporting by which they are held accountable to their contractual obligations. Regular reporting lays the foundation for effective collaboration. The essential step to encouraging collaboration is for the project to establish and constantly evaluate and adjust the consolidated meeting calendar. We recognize that Arkansas has an established meeting cadence that we will adopt.

As an example, PCG recommends the cadenced meetings listed in Table 6 as essential to establishing and maintaining the project management processes to drive the overall IEBM program. With a cadence established, the system integrator, IV&V, all vendors, and the PMO fall into a synchrony of producing status reports, managing assigned risks and issues, reporting on schedule and deliverables progress, and assessing the need for project changes. These very actions have their own value but also serve to promote collaboration. The following example table includes meetings that Arkansas included in the RFP and typical meetings from other projects.

Table 6: Recommended Meetings

MEETING NAME	PARTICIPANTS	PURPOSE
IEBM Leadership Meeting	PMO, IEBM vendors, and AR Leadership	Report on progress of project, discuss issues and risks, activities for coming week.
RAID	PMO leads or designees from AR and IEBM Vendors. Others as needed	Identify risks and issues, mitigation strategies, trigger dates; action items; decisions.

Change Management	PMO leads or designees from AR and IEBM vendors. Others as needed.	Review and prioritize change orders, impact analyses, track the status of approved changes. Determine which change orders are ready for committee review.
IEBM Project Status Meeting	IEBM project managers. PMO leads or designees from AR, IEBM, and PMO. DCO Leadership and others as needed.	Review IEBM Weekly Status Report on all components of the project. Focus on system interdependencies and interfaces.
DHS and IV&V	DHS IEBM leaders and IV&V	Review IV&V tasks, meetings, observations, and recommendations.
Executive Steering Committee	Committee, IEBM leaders, PMO, IV&V, and vendors	Review progress and plans, escalated issues, legislative and governance impacts, and major changes.
Schedule Management	Schedule managers or designees from AR, PMO, and IEBM Vendors. Others as needed.	Review status of the master program schedule. Tasks late or trending late. Proposed schedule updates and impacts.
PMO and IV&V Monthly	Key PMO and IV&V	Review accomplishments, plans, RAID, observations, and concerns.
Technology Work Group	TWG, IV&V, and others as called	Review technology plans, progress, observations, and concerns.
CMS Monthly Meeting	CMS, IV&V, IEBM leadership	Review project plans, progress, observations, and concerns. Receive CMS input, responses to questions, and plans.
Business Review Board	Committee, IEBM leaders, PMO, IV&V, and vendors	Review progress and plans, escalated issues, legislative and governance impacts, and major changes.
Requirements and Design	IEBM leaders, DCO SMEs, PMO, IV&V, and vendors	Identify and document system functional and nonfunctional requirement. Review, revise, and approve derived designs
Deliverables Tracking	PMO leads or designees from AR, PMO, and IEBM Vendors.	Confirm the status of production, review, and approval of deliverables

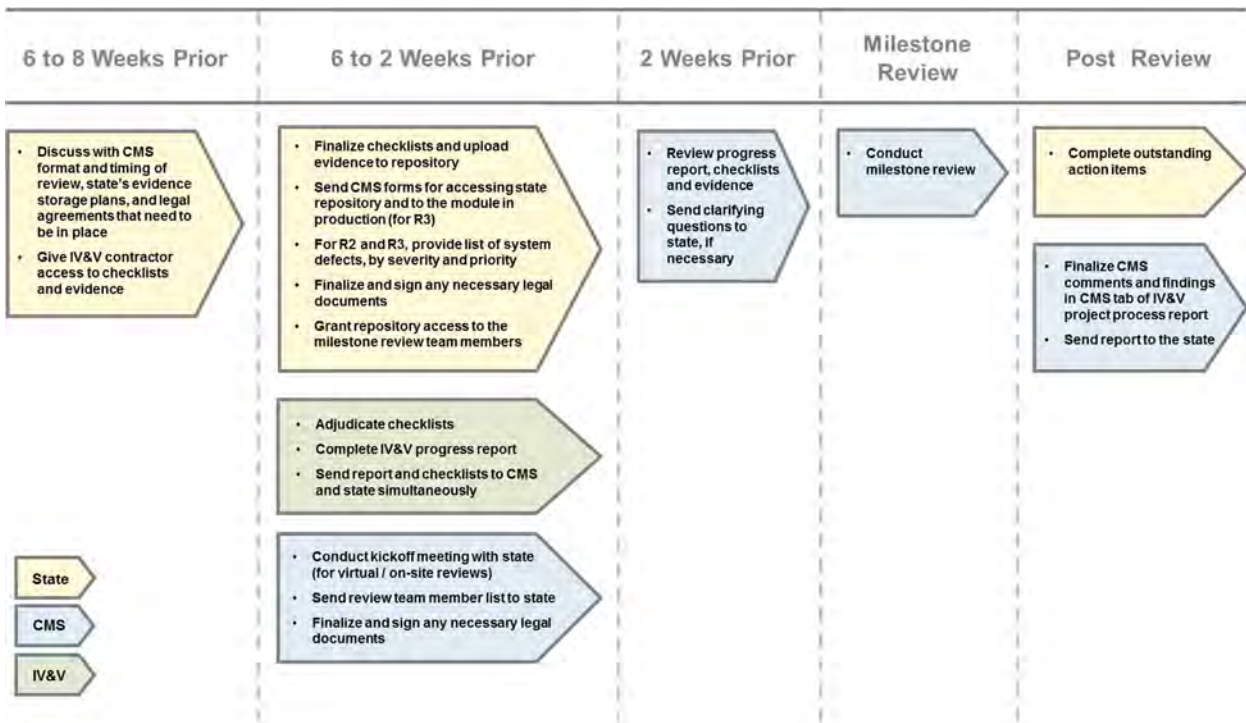
Systems Development and Lifecycle Gate Reviews

PCG brings extensive experience in planning, supporting, and successfully conducting internal and CMS gate reviews. Our Eclipse IV&V® methodology has been successfully used in all our IV&V projects and includes checklists, tools, examples, and best practices for gate reviews. Our IV&V team has conducted CMS gate reviews in their work managing system integrator projects, managing PMO's, and managing IV&V, nationwide.

Our IV&V support for the gate review will follow the CMS process shown Figure 4 below. In preparing for gate reviews, we will work with the state to ensure that all needed exhibits are being developed, tracked, and posted to the agreed CMS repository. Except during formal blackout periods, we will work collaboratively with the state, vendors, and stakeholders to prepare for the gate review.

Our IV&V team will include a list of completed gate reviews in the Monthly IV&V Assessments.

Figure 4: CMS Process



PCG will supply any IV&V services that CMS may require through:

- CMS correspondence requiring IV&V services
- Compliance with the most recent CMS Expedited Life Cycle (XLC)
- Compliance with the most recent State Medicaid Director letters
- Compliance with the MEET and MEECL

Project Management Support

PCG recognizes the critical function that requirements management and project management have to the success of major, mission-critical projects. Our Eclipse methodology brings a 'toolkit' of checklists, tools, examples, and best practices that assist team members in the evaluation and assessment of requirements and projects.

For requirements, our IV&V team will:

- Participate in requirements gathering via meetings and review meeting inputs and outputs.
- Assess that processes and responsibilities for identifying, managing and validating requirements are defined.
- Review the requirements to trace that they are prioritized, reviewed, approved, baselined, traced, validated, and reported.
- Monitor changes to baselined requirements are controlled, evaluated (for impact), and approved prior to implementation.
- Assess the quality of requirements as measured/monitored based on established criteria.
- Confirm that bi-directional traceability is maintained throughout the lifecycle.
- Track risks and issues related to requirements to evaluate if they are identified and managed.
- Review tools and other enablers to evaluate if they are leveraged to effectively manage requirements.
- Review whether KPI's related to requirements management are identified, monitored, and reported.
- Monitor if affected groups and individuals are informed of the status of requirements.

- Identify if stakeholders and appropriate staff are trained on the process and associated materials.
- Document the analysis results and summarize in the Monthly Assessments.

Recognizing that Arkansas has established project management methods, standards, and tools, PCG's IV&V team will adapt our project management tools, practices and standards to align with your methods. Our experience with other states and CMS allows us to effectively support MITA and E&E requirements.

The PCG IV&V Team will monitor and assess:

- Progress against budget and schedule by applying standard metrics of cost performance and schedule performance including, for example; Earned value analysis, variance analysis, trend analysis and reserve analysis that function to objectively measure and report on project financial and progress health.
- Risk management. Our IV&V team will elicit, analyze, and report on risks as described in section G by participating in meetings, reviewing documentation, applying checklists and taxonomic lists, and reporting risks in the Risk Report and Monthly Assessments.
- Inclusion of state goals/objectives and all federal eligibility and environment requirements in requests for proposal and contracts. Our IV&V team will review drafts of RFPs and contracts to compare them to the published state goals and objectives and the E&E requirements.
- Adherence to the state's SDLC. Our IV&V team will review documentation and compare plans and deliverables to Arkansas published SDLC.
- Incorporation of the standards and conditions for Medicaid IT into design and development. Our IV&V team will review the current SS-A and track any deviations in the design and development deliverables. Deviations will be included in the Monthly Assessment.
- Reasonability, thoroughness, and quality of MITA self-assessment, concept of operations, information architecture, and data architecture. Our IV&V team will analyze the SS-A, ConOps, information architecture and data architecture during our initial IEBM presentation preparation and reassess them when each is revised. The initial assessment will be presented in our initial "Knowledge of the Arkansas IEBM" presentation and revisions will be included in the Monthly Assessment as required.
- Reflection of the State's MITA goals and plans into the IEBM design and development. Our IV&V team will analyze your MITA goals and plans during our initial assessment and report on them "Knowledge of the Arkansas IEBM" presentation. As the design and development progress we will report on compliance and deviation in the Monthly Assessment.
- Configuration management that is robust and includes state or developer configuration audits against configuration baseline. Our IV&V team will analyze the CM plans, participate in CM meetings, monitor CM use, and report on CM in the Monthly Assessment.
- Change management. Our IV&V team will analyze the project change management plans and standards, attend change management meetings, evaluate the effectiveness of the process and report on change management in the Monthly Assessment.
- Adherence to service level agreements. Our IV&V team will analyze the service level agreements (SLAs) in contracts and RFPs, monitor the reporting and compliance of SLAs, and note deviations and trends in the Monthly Assessment.

Modular Development

Embodied in the CMS Seven Standards and Conditions, CMS has recognized the benefits of modern, modular development to enable faster value delivery, lowered risk, increased reuse, and lowered total cost of ownership. As your IV&V vendor, PCG will monitor and assess the modular development of the IEBM solution. PCG's IV&V team will monitor and assess the planning, partitioning, development, and integration of the IEBM solution modules. Modularity is an important attribute in modern system development that CMS promotes through the MITA Seven Standards and Conditions and through various MECL tools.

The our IV&V team will comply with the Arkansas requirements to monitor and assess modular development including without limitation:

- Completeness and reasonability of IEBM concept of operations, architecture, and designs
- Accuracy of capture of interfaces and data sharing requirements with systems external to the IEBM
- Viability and completeness of the data transition plan
- Traceability of requirements through design, development, and testing
- Adequacy of system security and privacy policies, plans, technical designs, and implementations
- Coverage and integrity of all system testing, including stress testing and testing of interfaces between modules and with external partner systems
- Capacity management, including consideration of future vendors' support and release plans for underlying databases, software, and hardware
- Adequacy of disaster recovery planning
- Verification that adequate regression testing has been performed to confirm that replaced or enhanced modules do not adversely impact the current functionality and operation of the state's Medicaid Enterprise

Module Reviews

In addition to the MEET checklist evidence and the required state documents or artifacts, PCG will review planned and working modules or code applicable to the review. Reviews of working modules or code will be conducted through multiple methods including reviews of application and database design and architecture, System Integration Test (SIT) and User Acceptance Test (UAT) results, live demonstrations, or evidence of actual system outputs. Assessments of working modules conducted via application and database design and architectural reviews increase the project's chance of success by identifying potential problems and risks early enough in the project life cycle to effectively resolve or mitigate the problem.

The CMS programmatic checklist contains critical success factor criteria by which the state's modular development are measured. The critical success factor criteria contained in the programmatic checklist are categorized as governance, outreach & support, process, reuse, RFP, contract & acquisition, and security. The Programmatic critical success factor criteria are derived from the S&C and MITA architectures.

PCG's review of the programmatic critical success factors is performed through a review of project and enterprise artifacts and interviews with project staff. Many of the Programmatic critical success factors and associated required documents (Appendix B of the CMS MECL process guide) are technical in nature, thus PCG's discovery and observations are applied against the principles and standards of sound enterprise architecture and governance, including those found in the MITA capability maturity matrices and The Open Group Architecture Forum (TOGAF) framework. Our review of the project's progress in meeting the Programmatic critical success factors results in an assessment of whether the critical success factor criteria is met, not met, not assessed, or not applicable; and includes any recommendations for improvement or risk mitigation.

Additionally, PCG steps for assessment of modules and modularity include:

- Review and evaluate planning and high-level design including ConOps and architectures
- Assess and test RTM depth, breadth, and flow
- Review and evaluate the configuration management plans and procedures associated with the development process
- Verify that all critical development documents, including but not limited to requirements, design, code and job control language are maintained under an appropriate level of control
- Verify that the processes and tools are in place to identify code versions and to rebuild system configurations from source code
- Verify that appropriate source and object libraries are maintained for training, test, and production and that formal sign-off procedures are in place for approving deliverables
- Verify that appropriate processes and tools are in place to manage system changes, including formal logging of change requests and the review, prioritization and timely scheduling of maintenance actions

- Verify that mechanisms are in place to prevent unauthorized changes being made to the system and to prevent authorized changes from being made to the wrong version
- Review the use of configuration management information such as the number and type of corrective maintenance actions over time in project management
- Assess security plans and procedures
- Monitor and assess third-party security functions including penetration testing
- Evaluate plans and tests of disaster recovery and business continuity

PCG will use the IV&V assessment methods and approach and will report on modular development in the reporting processes including the monthly IV&V Assessments.

IV&V Support for the CMS MEELC AND MEET

- PCG as an organization and our proposed IV&V team are intimately familiar with CMS MEELC and MEET.
- Our IV&V team will comply with the DHS requirements by:
- Following the current MEELC and completing the IV&V portions of the MEET
- Delivering all required IV&V input to DHS at least 14 days before the CMS scheduled review session
- Compile quarterly progress reports that objectively illustrate the project strengths and weaknesses and provide recommendations for the identified weaknesses
- The IV&V Progress Reports will be submitted to CMS and DHS (and any other state agency that Arkansas designates) simultaneously as required by 45 CFR §
- Our IV&V team will work with DHS to review evidence, annotate review findings, and annotate resolutions in the MEET checklists, except during CMS mandated blackout periods
- Our IV&V team will fill out the appropriate entries on the E&E checklists and append them to the E&E IV&V Progress Reports

Our extensive experience with MEELC and MEET will provide the best possible IV&V services for CMS and DHS.

Our methodology is further elaborated in practical terms in the subsections that follow.

Tactical Approach

Eclipse IV&V® enables a thorough understanding of the project status through multiple tactics including:

- Observation of and interviews with project management staff and subcontractors
- Observation and participation in project meetings and activities
- Review and analysis of all applicable and available documentation for adherence to accepted and contractually defined industry standards
- Review and assessment of the MEET checklist criteria evidence

These tactics, combined with the knowledge obtained through ongoing IV&V assessments, provide the understanding that forms the basis for our assessment of the five primary topics (described earlier) that comprise the CMS E&E IV&V progress report.

Progress Reports

PCG's IV&V Progress Reports (both draft and final versions), along with the programmatic checklist and the appended, completed MEET checklists, will be delivered concurrently to CMS, the State, the IV&V Contract Manager, and other appropriate stakeholders as prescribed by the State, according to the CMS approved E&E milestone review schedule. The draft progress report will be delivered requesting corrections of fact or comments to be returned to PCG no later than 20 days of receipt. The progress report will be updated with corrections of fact, and any comments received will be captured to provide a complete audit trail. The final progress report is delivered no later than 10 business days following the correction/comment period.

MEET Checklists

When our team prepares the IV&V Progress Report in conjunction with a milestone review, we evaluate the project's readiness for the CMS milestone review process. Using the CMS prescribed tools and templates, our IV&V team will assess project readiness through the MEET checklist evidence assessments and through reviews of the CMS-required documents for each milestone review point. PCG will complete the IV&V reviewer portion of the MEET checklists noting the results of the evidence assessments.

PCG will fairly and independently assess the MEET checklist evidence from three perspectives:

- Does the evidence stand on its own? The evidence must demonstrate that the system (inclusive of policies, procedures and processes, and technology) meets the certification criteria. It is insufficient to simply affirm that the system meets the criteria, or for IV&V to be aware that the system meets the criteria. The evidence must support this conclusion on its own.
- Will an individual who is not involved in the project understand the evidence? The evidence will ultimately be reviewed by CMS staff who have not participated in the E&E Modernization Project on a day-to-day basis and who will not know the project tools, lexicon, or history. The evidence must be clear to CMS, and PCG will review the evidence to assure that an "outsider" could understand it.
- Does the evidence match the criteria? The evidence must align with the criteria. This is not always easy to achieve, as MEET criteria must be interpreted in the context of its critical success factor and can be ambiguous or unclear at times. PCG assures that the evidence aligns with the intent of the MEET criteria.

Oversight: Programmatic Critical Success Factors Checklist

The programmatic checklist contains critical success factor criteria by which the state's performance in project management and modular development are measured. The critical success factor criteria contained in the programmatic checklist are categorized as governance, outreach & support, process, reuse, RFP, contract & acquisition, and security. The programmatic critical success factor criteria are derived from the S&C and MITA architectures.

PCG's review of the programmatic critical success factors is performed through a review of project and enterprise artifacts and interviews with project staff. Many of the programmatic critical success factors and associated required documents (Appendix B of the CMS MECL process guide) are technical in nature, thus PCG's discovery and observations are applied against the principles and standards of sound enterprise architecture and governance, including those found in the MITA capability maturity matrices and TOGAF framework. Our review of the project's progress in meeting the Programmatic critical success factors results in an assessment of whether the critical success factor criteria is met, not met, not assessed, or not applicable; and includes any recommendations for improvement or risk mitigation.

Required Artifacts

PCG will also evaluate the required documents or artifacts for thoroughness, accuracy, and consistency in the context of the milestone review. The required documents for each milestone review are listed in Appendix B of the CMS MEELC process guide. Some of the artifacts (or their equivalents) required are:

- Arkansas' goals and objectives
- MITA 3.0 SS-A and MITA roadmap
- Concept of Operations (ConOps)
- Privacy Impact Analysis
- State security policies and security plan
- Project management plan artifacts (budget, schedule, risk register/exception plan)
- Product Documentation

Working Modules

In addition to the MEET checklist evidence and the required state documents or artifacts, PCG will review

any working modules or code applicable to the review. Reviews of working modules or code will be conducted through multiple methods including reviews of application and database design and architecture, System Integration Test (SIT) and User Acceptance Test (UAT) results, live demonstrations, or evidence of actual system outputs. Assessments of working modules conducted via application and database design and architectural reviews increase the project's chance of success by identifying potential problems and risks early enough in the project life cycle to effectively resolve or mitigate the problem.

Ongoing IV&V Activities

Our proposed IV&V team have clear expectations from DHS and from PCG. Our team will remain vigilant in performing these required activities throughout the duration of the contract. PCG assures DHS that our team of consultants will continuously monitor project processes, the completeness of testing and testing documentation, and that the quality of the work product is maintained at the level set by DHS. It's important that these activities are performed by professionals with the right skill sets to get the job done right. Our IV&V team will do just that! See listed below the activities that we will perform on an ongoing basis.

- The PCG IV&V team shall continuously provide and use a document repository for all our IV&V work products produced during this contract. All products will have reliable version control and provide efficient record retrieval to DHS staff. Our IV&V team will make sure that when DHS needs one of our work products items are located and retrieved with ease and efficiency.
- On a regular and ongoing basis our IV&V team will monitor and evaluate the system integrator's quality assurance processes. IV&V will communicate any concerns to the SI and DHS simultaneously.
- Our IV&V team will assess the IEBM change request process and suggest improvements where applicable. Our seasoned staff have observed these same processes on various other PCG contracts and will bring that insight into the IEBM project.
- Our IV&V team will verify and validate an approved representative sample of the unit test results for the program modules and processes before they are integrated, and system tested. We will also ensure the results are fully documented. Our IV&V team will post the assessment in the document repository.
- The PCG IV&V team will verify and validate that in depth, process-driven, and fully documented testing is being used to certify and demonstrate that the new IEBM system is ready for UAT prior to completion of the integration and system testing tasks. We understand that to make sure UAT progresses smoothly the testing needs to have been completed in Integration and system testing prior to UAT.
- Our IV&V team will verify and validate an approved, representative sample of UAT results for the program modules and processes before release for production. Our team will work with DHS staff to verify high priority improvements identified in UAT testing are integrated into the production version of our IV&V team will ensure those items identified remain visible to the project team and subsequently are integrated into the production version of the IEBM.
- Our IV&V team will conduct the initial assessments of data conversion plans, procedures, and software for each program that is migrating to IEBM.

We will deliver services mentioned above on an ongoing basis, with each instance being delivered early enough to meet the deadlines for their successor tasks. The PCG IV&V team will work with the project team to schedule the assessment of programs that syncs with the approved integrated master project schedule to ensure completion prior to successor tasks.

CMS Requested Testing

Our Eclipse IV&V® Methodology has been successfully used in all our IV&V projects and includes checklists, tools, examples, and best practices for assessing testing activities. As a Medicaid IV&V service provider, PCG is experienced in monitoring, managing, and conducting CMS required testing. Our IV&V team is well versed in the CMS process of reviewing and analyzing specifications, test scenarios, test data to successfully perform the CMS testing requested. Our IV&V team will comply with the DHS requirements to:

- Review the DDI contractor's use of the CMS scenarios

- Evaluate random samples from the daily test results
- Review the final testing report before it is sent to CMS
- Report any issues or concerns with the testing quality to both the DDI contractors and DHS within 48 hours of discovery

For Arkansas, the PCG IV&V team will perform the following:

- Review and evaluate the plans, requirements, environment, tools, staffing, and procedures used for testing system modules
- Evaluate the level of test automation, interactive testing and interactive debugging available in the test environment
- Verify that an appropriate level of test coverage is achieved by the test process, that test results are verified, that the correct code configuration has been tested, and that the tests are appropriately documented
- Verify that the DDI testing properly utilizes the scenarios provided by CMS
- Apply random sampling to daily test results and assess accuracy and completeness of test execution and reporting
- Verify that code is Tested by the development team, test results are consistent and correct, the correct code has been tested, and that adequate documentation exists for Testing
- Verify that the process for managing test scripts are included in the Configuration Management Plan and are managed in the configuration management tool
- Review final testing reports for accuracy, completeness, and conformance with expected results
- Report testing results, metrics, plans, recommendations, risks, issues, and concerns in cadenced IV&V reporting
- Complete IV&V input required by CMS no later than 21 calendar days before final results are to be delivered to CMS

Update the IV&V Project Plan

PCG understands the value of maintaining an up to date IV&V project plan. Outline how we intend to provide IV&V services in the IV&V Project Plan. The plan shows how PCG will execute deliverables and provide services on the IEBM project.

This IV&V Project Plan is a “living document” and will be updated as required to reflect the current state of deliverables from PCG and potential changes in our scope of work. Once again, the “no surprises” approach permeates in all that we do. Clients should know what and how we plan to do an activity before we perform the work. Our IV&V team operates with full transparency in what activities we perform and how we will perform them. Our team will extract the required deliverables and activities from the RFP and incorporate them into the IV&V Project Plan. We’ll cover the types of meetings to be attended, the artifact and document validation process, reporting, and the deliverable review and acceptance process. IV&V consultants will provide the details of how we intend on fulfilling the requirements in the plan. If there are changes encountered on the project that impact the IV&V Project Plan updates are made as they’re encountered. The plan shall be reviewed, updated, and submitted to DHS for approval by May 15th of each year.

United States Food and Drug Administration FNS Requirements

We understand the value and need to adhere to the FNS requirements for federal projects. We have a compliance group that is intimately familiar with the FNS requirements to ensure that PCG always adheres to the requirements. We will comply with the provisions set out in Appendix: A Food and Nutrition Service Required Federal Provisions including:

Executive Order 11246, entitled “Equal Employment Opportunity,” as amended by Executive Order 11375, and as supplemented by the Department of Labor Regulations (41 CFR Part 60)

- The Clean Air Act, Section 306

- The Clean Water Act
- The Anti-Lobbying Act
- Americans with Disabilities Act
- Drug Free Workplace Statement
- Debarment, suspension, and other responsibility matters
- The federal government reserves a royalty-free, non-exclusive, and irrevocable license to reproduce, publish, or otherwise use, and to authorize others to use, for federal government purposes, the copyright in any work developed under a grant, sub-grant, or contract under a grant or sub-grant or any rights of copyright to which a contractor purchases ownership.

Project Organization and Qualifications

**Maximum
Available
RAW Score**

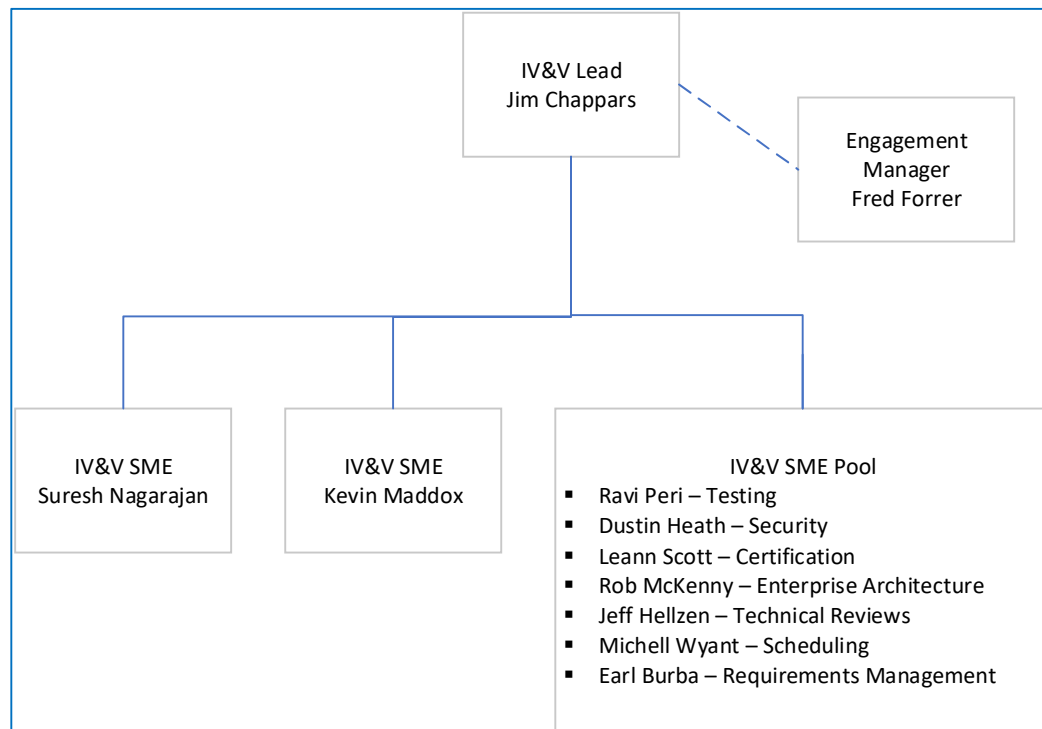
Describe the Key Personnel by position your company proposes to provide to staff this project. Vendor response must include key personnel's knowledge of the Deloitte NetGen Solution IEMB, all prior experience with Deloitte, and all prior IVV experience including IVV services provided for Medicaid and SNAP. (Sec 2.5)

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Our proposal includes a team size of four personnel, one Project Manager, two SME's, and one full time equivalent by leveraging the use of a pool of subject matter experts to perform required duties. All three key personnel are experienced with the Deloitte NextGen Solution IEMB, have prior Deloitte experience, with experience providing IV&V services for Medicaid and SNAP.

PCG proposes James (Jim) Chappars as our 100% dedicated IV&V Lead and Project Manager. Suresh Nagarajan and Kevin Maddox are our proposed full-time key IV&V SMEs supporting Jim and your project. Our pool of resources will support required efforts as needed.

The organizational chart below depicts our team structure consisting of three full-time resources and a pool of SME's representing a single full time equivalent. Additional information about the pool of resources can be found in our response to the requirement for Section 2.5,F pertaining to additional team members.



IV&V LEAD AND PROJECT MANAGER

Jim has over five years of experience working on IV&V projects for state agencies. Relevant project services include IV&V, project management, CMS certification, systems design and development, organizational change management, business analysis, project recovery, strategic planning, database analysis, test management, toolchain selection, requirements management, Capability Maturity Model Integration (CMMI™) advancement, software metrics, and risk management.

He is an experienced (over 20 years) project manager who has managed IV&V engagements, system integration projects, and developed PMOs. He is certified as a Project Management Professional (PMP®), an Eclipse IV&V® Professional, and in agile as a Scrum Master. Because of his breadth of experience, he approaches IV&V engagements in a collaborative spirit, keeping the success of the project as the primary goal.

Recent projects have included managing IV&V of the Louisiana Integrated Eligibility system where the state is implementing Deloitte's NextGen for Medicaid, Integrated Eligibility and Enrollment, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF), and Family Independence Temporary Assistance (FITAP) programs.

Prior to Louisiana, he was the IV&V Lead for the Georgia Integrated Eligibility System (IES). The IES project

successfully delivered the Gateway system which provides eligibility determinations, worker access and customer access for: Medicaid, FNS SNAP/Food Stamps, TANF, DECAL (Child Care and Early Learning) and WIC programs. Core IES is a Deloitte NextGen implementation.

In Nebraska, he managed the systems integration Medicaid Eligibility and Enrollment project in Cúram. Contributing to the breadth of his experience are IV&V for child welfare projects, business process engineering, new application development, strategic system planning, solutions and operations, hardware/software upgrades and transitions, and modernization/migration projects.

In addition to project management and IV&V skills, he is an experienced professional in CMS certification, business analysis, project recovery, strategic planning, database analysis, test management, toolchains, requirements management, Capability Maturity Model Integration (CMMI™) maturity advancement, software metrics, and risk management.

IV&V AND NEXTGEN SUBJECT MATTER EXPERTS

Kevin Maddox

Kevin has three years of experience working on IV&V projects for state agencies. Relevant project services include IV&V, project management, SDLC management, MEELC, MEET Checklist, eligibility and enrollment subject matter expert, risk and issue management, organizational change management, and client relationship management.

Kevin has over 14 years and three projects working with state human services programs. He has served as IV&V Lead, IV&V SME, Medicaid Member Services Director, Medicaid Managed Care Director, Medicaid Claims Supervisor, Medicaid Provider Services Supervisor, and Enrollment Broker Project Director.

Kevin has worked on three Medicaid projects that had multiple programs incorporated as Medicaid projects typically do. Programs worked with include Medicaid, TANF, DSNAP, Medicare, SSA, CHIP, Various Waiver programs, WIC, and Behavioral Health programs.

During the last three years, Kevin has worked with Deloitte on the Louisiana Medicaid Management Information System Modernization Project.

During the last 19 years Kevin has served as the Fiscal Agent, Medicaid Executive, Enrollment Broker, and Independent Verification and Validation consultant. He has been on multiple sides of health care technology and is poised to bring his knowledge and experience to your project.

Suresh Nagarajan

Suresh has over nine years of state and federal government experience in Integrated Eligibility and Medicaid Enterprise System management experience supporting large complex systems, implementation and replacement projects across multiple states. Suresh is a solutions architect with PCG and an Eclipse IV&V-certified professional, where for the past five years has provided IV&V services to large-scale, statewide eligibility determination system for programs, including Medicaid, CHIP, TANF, SNAP, WIC, CAPS, and LIHEAP (energy assistance).

Suresh specializes in IV&V of eligibility projects and specifically has done independent oversight of the successful implementation of Integrated eligibility solution for the State of Georgia and Louisiana. State of Louisiana's Department of Health & Department of Child and Family service's NextGen solution implementation covers benefits including Medicaid, CHIP, SNAP, DSNAP, and TANF. State of Georgia's Gateway system integrated Medicaid, CHIP, TANF, SNAP, CAPS, WIC, and LIHEAP. Suresh has five years of experience overseeing the implementation of Deloitte's NextGen solution, the solution used for the Georgia Gateway, Louisiana Medicaid & CHIP Enrollment & Eligibility solution and LA DCFS's LITE (Louisiana Integrated Technology for Eligibility).

His deep technical experience will allow him to work with Deloitte while his business and policy knowledge to work with DHS and his project management experience with the State PMO and QA vendor. Suresh has assisted both the states through the full CMS milestone review process as part of MEELC. He is specifically is skilled in areas of managing risk, driving quality across the implementation and project processes, and

delivering coordinated IV&V services to both client and Deloitte teams. Suresh's deep knowledge of the Deloitte NextGen solution allowed him to work closely with the State and Deloitte technical teams to minimize risk and successfully configure and customize the solution to both Georgia and Louisiana. Suresh gained an extensive knowledge of the database architecture and how it interacts with the SNAP/TANF application.

He has experience in evaluating all phases of testing including the validation of system integration testing, interface testing, pilot operations, user acceptance planning, and testing, and operations readiness. He also possesses outstanding interpersonal and tested negotiation skills to help build lasting and supportive client/associate/management relationships. Overall his experience spans across Project management, Large scale application development and implementation, IT operations management – business domain include Medicaid Management Information Systems (MMIS), Pharmacy Benefit Management (PBM), Pharmacy Claim Processing & Adjudication, Card Processing & Commercial payment solutions, Asset Servicing including Custody/Accounting & Benefit Disbursements.

ENGAGEMENT MANAGER

Fred Forrer

Fred has over 20 years of experience managing IV&V service teams and working with clients for state agencies focusing on IV&V and PMO services for Medicaid agencies throughout the Southeastern United States including Georgia, Alabama, Mississippi, Tennessee and Louisiana. His prior leadership roles include founder and Managing Principal of Public Momentum, LLC, Vice President over Cambria Solution's health practice, and leading Public Consulting Group's (PCG) Health Strategy and Finance Practice.

In these roles, Fred assisted more than 14 states plan for the development and implementation of their Health Insurance Exchanges. He also helped states plan and manage their Health Information Technology planning efforts, as well as planning and procuring technology and services for their Medicaid programs. Fred previously served as the President of Reassure Technologies, where he developed a system to automate medical claims auditing, and as President/CEO for MGT of America, Inc., a national research and management consulting firm dedicated to improving the efficiency and effectiveness of organizations serving the public. He served as the Special Assistant to the California State Auditor, managing numerous audits and investigations of state and local government entities. As Special Assistant State Auditor, Fred reported directly to the State Auditor with responsibilities including acting as legislative liaison with the Joint Legislative Audit Committee, managing all contracted audits and contracts for external consulting services, media liaison, and overseeing all major technology-related audits.

Staff Resumes

JAMES (JIM) CHAPPARS, SOLUTIONS ARCHITECT

PROJECT MANAGER & IV&V LEAD | 100% DEDICATED FTE

MINIMUM QUALIFICATIONS VERIFICATION	
YEARS OF EXPERIENCE WORKING WITH ELIGIBILITY SYSTEMS FOR STATE HUMAN SERVICES PROGRAMS:	5 years
YEARS OF EXPERIENCE PROVIDING IV&V:	5 years
YEARS OF EXPERIENCE WORKING WITH THE PRIMARY RESPONDENT TO THIS RFP:	3 years
YEARS OF EXPERIENCE WORKING WITH ANY SUBCONTRACTOR OF THE PRIMARY RESPONDENT TO THIS RFP:	N/A
FORMAL EDUCATION:	Bachelor of Arts in Computer Science
RELEVANT TECHNICAL CERTIFICATIONS:	<ul style="list-style-type: none"> Project Management Professional (PMP®) Project Management Institute Eclipse IV&V® Public Consulting Group, Inc. Professional SCRUM Master Scrum.org

RELEVANT PROJECT EXPERIENCE

Louisiana Department of Children and Family Services (DCFS)

Integrated Eligibility System (IES)

IV&V Lead, Deloitte NextGen SME | October 2017 – December 2018

PROJECT CLIENT REFERENCE

NAME:	Guy Sylvester	PROJECT ROLE:	DCFS Project Manager
PHONE:	(225) 342-9640		

The project is producing integrated eligibility for Louisiana's SNAP, Disaster Supplemental Nutrition Assistance Program (DSNAP), FITAP, and Kinship Care Subsidy Care (KCSP) programs. Deloitte is the prime system integrator, implementing their NextGen Solution.

Jim was the project manager for the IV&V services for of the IES project, validating compliance with the federal CMS and IEEE standards to ensure a solid foundation of requirements, design, development, and implementation for the project by reliably verifying plans, status reports, budgeting, technology, tools, work products, schedules, and deliverables. Responsibilities included:

- Provide pro-active identification of risks, issues, and recommendations
- Regularly brief state and federal oversight executives
- Evaluate compliance with the Seven Standards and Conditions, Medicaid Information Technology Architecture (MITA), and Medicaid Enterprise Certification Life Cycle (MECL)

Georgia Technology Authority (GTA)

Georgia Gateway Integrated Eligibility System (Georgia Gateway)

IV&V Lead, Deloitte NextGen SME | September 2016 – September 2017

PROJECT CLIENT REFERENCE

NAME:	John McCrary	PROJECT ROLE:	GTA Project Director
PHONE:	(770) 846-7682		

Jim was the project manager for the IV&V of the State's IES Project, providing compliance with federal CMS and IEEE standards to ensure a solid foundation of requirements, design, development, and implementation for the \$240 million project by reliably verifying plans, status reports, budgeting, technology, tools, work products, schedules, and deliverables. Provide pro-active identification of risks, issues, and recommendations. Regularly brief state and federal oversight executives. Evaluate compliance with the Seven Standards and Conditions, MITA, and MECL.

Jim performed business process re-engineering, trained 6,000 state users, established multiple technical environments, developed user and technical documentation, performed outreach to citizens who can directly access Georgia Gateway through a citizen portal, applied MITA, CMS, and Food and Nutrition Service (FNS) standards and directives, rigorously tested and confirmed all functionality, implemented more than 30 interfaces to other state and federal systems, and deployed the system across the state. Deloitte was the prime system integrator, implementing their NextGen solution.

Nebraska Department of Health and Human Services

Integrated Eligibility System

System Integrator Project Manager, IBM/Cúram SME | November 2014 – September 2016

PROJECT CLIENT REFERENCE

NAME:	Alan Ashurst	PROJECT ROLE:	IV&V Project Manager
PHONE:	(720) 220-8581		

The project consisted of a Business Process Reengineering (BPR), software design, development, and implementation; and hardware, software, and communications hosting. Support tools and methods included Business Process Model and Notation (BPMN) 2.0, Microsoft (MS) SharePoint, MS Project, Rational Team Concert, and IBM Cúram software.

Jim was engaged in the recovery of the \$80 million project charged with establishing a PMO, re-planned, re-staffed, and re-tooled. The project successfully passed federal progress (CMS AR/PBR) gate review. Following the successful gate review and audit, the Nebraska State IT Commission (NITC) rated the project

as yellow indicating additional management attention. Ultimately, NITC upgraded the project to green in all categories – Overall, Schedule, Budget, Scope, and Quality.

Pennsylvania Department of Children, Youth, and Families

Statewide Automated Child Welfare Information System (SACWIS)

IV&V Lead, Deloitte System SME | April 2012 – September 2014

PROJECT CLIENT REFERENCE

NAME:	Tracey Currier	PROJECT ROLE:	Senior Analyst – CIO's Office
PHONE:	717-676-1039		

Pennsylvania's child welfare modernization project included as-is analysis, to-be alignment, system planning, requirements elicitation, BPR, UAT, documentation, and training. The system will federate county case management systems and leverage state enterprise solutions to automate and streamline data sharing, reporting, planning, and management. Phase 1 includes new business processes, organization, software, hardware, user support, continuity of operations, policy, procedures, and facilities for the state-wide hotline.

Jim was the project manager and subject matter expert in business process engineering and technology application. As a project manager, his responsibilities included managing the day-to-day activities of the IV&V team, directing integration of architecture, functional analysis, testing and strategic planning, and managing the IV&V of the design and development vendors.

Louisiana Department of Children and Families

OneDFCS Project

Project Manager, Deloitte System SME | March 2010 – July 2011

PROJECT CLIENT REFERENCE

NAME:	Guy Sylvester	PROJECT ROLE:	DCFS Project Manager
PHONE:	(225) 342-9640		

OneDCFS comprehensively re-engineered the processes, structure, methods, staffing, and computer systems of the department.

Jim provided BPR, strategic and tactical planning and management of information systems to help the department modernize, streamline, and consolidate operations. Provided IV&V of the design and development vendors. Responsibilities included:

- Requirements elicitation
- BPR
- Conceptual design of worker, citizen, provider portals, and master client index
- Strategic planning of systems roadmaps
- Development of federal Advance Planning Documents (APDs)
- Authoring Requests for Proposals (RFPs)
- Supporting state evaluations of proposals.

Received request from the state to provide specific support for the implementation of the statewide customer call center; managed the APD and RFP, provided evaluation tools for selecting the vendor, supported contract negotiations, and worked with the vendor and state management teams. After implementation, evaluated QA and Quality Assurance (QC) statistical reports, tested compliance with policy and procedures.

Mississippi Department of Human Services

Mississippi Automated Child Welfare System (MACWIS)

Project Manager, CIBER System SME | 1997 – 1999

PROJECT CLIENT REFERENCE

NAME:	Sue Perry	PROJECT ROLE:	Director
PHONE:	(601) 359-2210		

The project designed, developed, and implemented the MACWIS-compliant system that supports the work

of the state's child welfare workers, administrators, and managers.

Jim led the project from proposal preparation through implementation and turnover as project manager and later as project director. Managed custom development of a system with a team of over 30 professionals. Managed all aspects of planning, executing, staffing, and directing the project. Provided on-site, day-to-day leadership. Instructed staff on the application of the methodology. Worked with the IV&V vendor to ensure effective delivery. Maintained compliance with the PMBoK and IEEE standards. Oversaw the design and installation of the project infrastructure. Provided synchronization with the client, performed project risk analysis and mitigation, managed staff, and assigned roles. The project was delivered successfully – on time, within budget and with high client satisfaction.

Arkansas Department of Human Services

SACWIS

Project Manager, CIBER System SME | June 1996 – June 1997

PROJECT CLIENT REFERENCE

NAME:	Katherine Wilkerson	PROJECT ROLE:	Project Manager
PHONE:	(850) 219-1619		

The project transferred the child welfare system from Oklahoma, tailored the system to Arkansas requirements, and added functionality for adoptions and foster children.

Jim led the project from proposal through deployment and turnover to client as project manager and later as project director. Managed custom development of a system with a team of 30+ professionals. Managed the project, providing guidance on applying the corporate methodology, directing day-to-day activities, designing deliverables, ensuring compliance with the PMBOK, IEEE and quality procedures, managing risk, providing resources, monitoring progress, and interacting with client management. The project was delivered successfully – early, within budget and with high client satisfaction.

EDUCATION

- Bachelor of Arts, Computer Science | Hiram College – Hiram, OH

CERTIFICATIONS

- Project Management Professional (PMP®) | Project Management Institute
- Eclipse IV&V® | Public Consulting Group, Inc.
- Professional SCRUM Master | Scrum.org

KEVIN MADDOX, CONSULTANT

IV&V AND DELOITTE NEXTGEN SOLUTION SME

✓ MINIMUM QUALIFICATIONS VERIFICATION
YEARS OF EXPERIENCE WORKING WITH ELIGIBILITY SYSTEMS FOR STATE HUMAN SERVICES PROGRAMS: 14 years
YEARS OF EXPERIENCE PROVIDING IV&V: 3 years
YEARS OF EXPERIENCE WORKING WITH THE PRIMARY RESPONDENT TO THIS RFP: 3 years
YEARS OF EXPERIENCE WORKING WITH ANY SUBCONTRACTOR OF THE PRIMARY RESPONDENT TO THIS RFP: N/A
FORMAL EDUCATION: Bachelor of Science, MIS Florida State University – Tallahassee, FL
RELEVANT TECHNICAL CERTIFICATIONS:
<ul style="list-style-type: none"> • Certified Eclipse IV&V® Public Consulting Group, Inc. • Professional Scrum Master 1

RELEVANT PROJECT EXPERIENCE

Louisiana Department of Health

Louisiana Medicaid Management Information System Modernization Project

IV&V SME | November 2016 – Present

PROJECT CLIENT REFERENCE

NAME:	Natalie Newsom	PROJECT ROLE:	Project Director
PHONE:	(225) 925-6438		

Louisiana is working towards the modernization and modularization of Louisiana's Medicaid systems according to federal standards using the Centers for Medicare and Medicaid Services' seven conditions, including Medicaid Information Technology Architecture standards. The project is to provide IV&V services for the replacement of the legacy E&E and MMIS systems. Deloitte's NextGen Solution provides a Web-based Pre-Screening module as part of the Self-Service Portal where the general public, partners, providers, and workers can easily and quickly determine potential eligibility for Medicaid (MAGI and non-MAGI) and LaCHIP. IV&V services include review and assessment of each module's project progress using the CMS MEELC/MECL, CMS IV&V Progress Reports, and MEET/MECT checklists. The modules being developed include the enterprise architecture, enrollment and eligibility, and integrated eligibility. Kevin's responsibilities include:

- Evaluates project progress, resources, processes, budget, schedules, workflow, and the following plans: requirements management, quality assurance, test, communications, organizational change management, data conversion, and implementation/cutover
- Monitors project risks and issue management processes and provide feedback
- Assesses the communication process throughout the agency to ensure stakeholder and SME involvement
- Monitors project budget to ensure alignment with the project plan, scope, and organizational requirements
- Ensures project plan is being followed, evaluates the effectiveness of the plan to keep the project on schedule, and reviews the implementation vendor's associated reporting

Louisiana Department of Children and Family Services (DCFS)

Integrated Eligibility System (IES)

IV&V SME | November 2017 – November 2018

PROJECT CLIENT REFERENCE

NAME:	Guy Sylvester	PROJECT ROLE:	DCFS Project Manager
PHONE:	(225) 342-9640		

The project is producing integrated eligibility for Louisiana's SNAP, Disaster Supplemental Nutrition Assistance Program (DSNAP), FITAP, and Kinship Care Subsidy Care (KCSP) programs. Deloitte is the prime system integrator, implementing their NextGen Solution.

Kevin served as the IV&V services SME for the IES project working with the IV&V Lead, validating compliance with the federal CMS and IEEE standards to ensure a solid foundation of requirements, design, development, and implementation for the project by reliably verifying plans, status reports, budgeting, technology, tools, work products, schedules, and deliverables. Responsibilities included:

- Monitors project risks and issue management processes and provide feedback
- Assesses the communication process throughout the agency to ensure stakeholder and SME involvement
- Monitors project budget to ensure alignment with the project plan, scope, and organizational requirements
- Ensures project plan is being followed, evaluates the effectiveness of the plan to keep the project on

schedule, and reviews the implementation vendor's associated reporting

Louisiana Department of Health

Healthy Louisiana Enrollment Broker

Project Director | April 2012 – September 2016

PROJECT CLIENT REFERENCE

NAME:	Paula Jennings	PROJECT ROLE:	Project Lead
PHONE:	(225) 342-3929		

Kevin provided implementation direction for the enrollment broker systems and functions as the state initiated its first statewide managed care program. Kevin led teams to develop and maintain Enrollment and Eligibility algorithms that included Medicaid, TANF, SNAP, Waiver, WIC, and Behavioral Health eligibility files that were used in the enrollment process. Kevin set up and maintained multiple interfaces with six entities to provide member and provider data in support of the project. Kevin provided oversight of the business operations, which included a call center of over 100 staff to provide service to members. Kevin also:

- Provided oversight over all aspects of the Healthy Louisiana Enrollment Broker Project
- Ensured project compliance with all applicable corporate, contract, state, and federal requirements and regulations
- Provided executive management of the project's financial plan and forecast
- Participated in the development of proposals and pricing for amendments and new work
- Produced and monitored project reporting of startup and ongoing operations activities
- Tracked project risks and issues to resolution
- Facilitated process improvement activities
- Served as a liaison/analyst between the client and systems team capturing requirements on various client initiatives
- Provided direction of scope and priority of the systems development work in accordance with client needs
- Facilitated change control board meetings
- Developed and maintained a comprehensive knowledge of the Medicaid and Children's Health Insurance Programs, Enrollment Broker services, and project operations
- Established and maintained a productive relationship with client representatives to ensure the flow of information on a regular and ongoing basis
- Established and maintained relationships with representatives of client agencies, stakeholders, and community organizations to promote and develop Enrollment Broker services
- Represented the Enrollment Broker and the project in external meetings and forums
- Developed performance goals and objectives for direct reports and monitored the achievement of those goals

Georgia Department of Health

Georgia Families

Medicaid Member Services Director | August 2005 – April 2012

PROJECT CLIENT REFERENCE

NAME:	Tanya Chambers	PROJECT ROLE:	Medicaid Managed Care Director
PHONE:	(678) 222-8932		

Kevin provided the planning and management of member functions in Georgia's first statewide managed care program, Georgia Families. Kevin participated in planning and implementation activities to get the project ready for go-live and provided ongoing monitoring of the project member functions, including member interfaces to multiple partners. Kevin led teams to develop and maintain Enrollment and

Eligibility algorithms that included Medicaid, CHIP, SNAP, TANF, Waiver, WIC, and Behavioral Health eligibility files that were used in the enrollment process. Kevin also:

- Provided oversight to various vendors within managed care and fee for service Medicaid through direction information technology projects, policy, and contract management
- Ensured the care management organizations (CMOs) provide members with the contracted services and benefits that were right under the Medicaid Entitlement Act
- Interfaced with the various CMO's executive management and frontline managers on issues where DCH guidance was required
- Led the validation of the monthly membership roster and supporting reports that went to the CMO's identifying their monthly membership
- Participated in various process improvement workgroups with internal and external stakeholders where members/providers were being affected
- Served on the change control board steering committee where priority/approval was set on all DCH's system tickets waiting to be worked by the fiscal agent
- Reviewed reports submitted by the CMOs and partners for trends in CMO/member behavior
- Provided direct oversight to the managed care Enrollment Broker contract which includes compliance and performance
- Provided direct oversight to the Data Broker contract held by EDS
- Served as an SME on the EDS GAMMIS 2010 conversion project that included involvement during the entire system design life cycle
- Managed member services staff members within three functional member areas
- Facilitated staff scheduling, training, and coaching

EDUCATION

- Bachelor of Science, MIS | Florida State University – Tallahassee, FL

CERTIFICATIONS

- Certified Eclipse IV&V® | Public Consulting Group, Inc.
- Professional Scrum Master 1

SURESH NAGARAJAN, SOLUTIONS ARCHITECT

IV&V SUBJECT MATTER EXPERT (SME)

MINIMUM QUALIFICATIONS VERIFICATION	
YEARS OF EXPERIENCE WORKING WITH ELIGIBILITY SYSTEMS FOR STATE HUMAN SERVICES PROGRAMS:	5 years
YEARS OF EXPERIENCE PROVIDING IV&V:	5 years
YEARS OF EXPERIENCE WORKING WITH THE PRIMARY RESPONDENT TO THIS RFP:	5 years
YEARS OF EXPERIENCE WORKING WITH ANY SUBCONTRACTOR OF THE PRIMARY RESPONDENT TO THIS RFP:	N/A
FORMAL EDUCATION:	
<ul style="list-style-type: none"> • Bachelor of Electronics Engineering Bharathiar University - India 	
RELEVANT TECHNICAL CERTIFICATIONS:	
<ul style="list-style-type: none"> • Eclipse IV&V® Public Consulting Group, Inc. 	

RELEVANT PROJECT EXPERIENCE

Louisiana Department of Health (LDH)

Eligibility and Enrollment (E&E)

Project Manager, IV&V | October 2018 – Present

PROJECT CLIENT REFERENCE

NAME:	Natalie Newsom	PROJECT ROLE:	Project Director
PHONE:	(225) 925-6438		

The project is to provide IV&V services for the replacement of the legacy E&E and MMIS systems. Deloitte's NextGen Solution provides a Web-based Pre-Screening module as part of the Self-Service Portal where the general public, partners, providers, and workers can easily and quickly determine potential eligibility for Medicaid (MAGI and non-MAGI) and LaCHIP. IV&V services include review and assessment of each module's project progress using the CMS MEELC/MECL, CMS IV&V Progress Reports, and MEET/MECT checklists. This engagement involves working with multiple vendors and implementing a coordinated IV&V approach across multiple subprojects to manage risks and issues for both the individual subprojects and at a broader program level (i.e., risks and issues that affect the program enterprise). Suresh's responsibilities include:

- Oversee the work performed by IV&V and contracted resources for the MES program components such as E&E and EA. Within this engagement, he collaboratively works with the State leadership team including OTS's technical leadership, business stakeholders, project management office vendor, and the DDI vendor to review, evaluate and make recommendations to improve project outcome.
- Reviews operational data for post implementation E&E system
- Provides recommendations for data analytics and best practices for business and performance dashboards
- Conducts interviews with constituents to discuss observations, alert stakeholders of potential risks and/or issues, and effectively document concerns, risks, and/or issues
- Reviewed project and technical progress against the State's self-assessment based on MITA 3.0 and against defined requirements in the MEET/MECT
- IV&V oversight of the project work performed for the MES program components such as E&E & EA
- Conducted MITA 3.0 SS-A for LDH, including As-Is state, To-Be state, roadmap, and preliminary concept of operations
- Works with multiple vendors and implements a coordinated IV&V approach across multiple subprojects to manage risks and issues for both the individual subprojects and at a broader program level (i.e., risks and issues that affect the program enterprise)
- Identified high-level requirements that comply with MITA 3.0 and CMS Standards and Conditions
- Lead, manage, and perform reviews in conjunction with technology SMEs to make sure all IV&V technical assessments are completed promptly
- Oversee all aspects of the project to make sure client IT systems and services meet client requirements and standards, and are performing to defined design, cost, schedule and performance specifications and capabilities
- Reviews and assesses each module's project progress using MEELC/MECL, IV&V Progress Reports and MEET/MECT checklists
- Verify that project management of the Systems Development Life Cycle (SDLC) for the projects is conducted with industry best practices.
- Provide in-depth assessment and review of project and product risks and issues related to project scheduling methodologies and the agile SDLC
- Verify that the LDH program has plans, procedures, and software necessary for successful data mapping, conversion, and management

Louisiana Department of Children and Family Services (DCFS)

Integrated Eligibility System (IES)

Senior IV&V Analyst | October 2017 – October 2018

PROJECT CLIENT REFERENCE			
NAME:	Guy Sylvester	PROJECT ROLE:	DCFS Project Director
PHONE:	(225) 342-9640		
<p>Full-scale eligibility system upgrade and modularization for SNAP and TANF programs. Louisiana pursued this initiative utilizing Deloitte's NextGen solution satisfied the requirements of the ACA and the CMS Seven Standards and Conditions, including MITA. This is one component of a joint Medicaid/FNS eligibility system upgrade. The project also included disaster assistance (DSNAP) and other TANF related program eligibility functions. The modular system runs on a statewide platform, including universal client index, document management, reporting, database management, communication, and other services. The project life cycle combined waterfall deliverable milestones with agile sprint development cycles.</p> <p>Suresh was a trained and certified through Eclipse IV&V® to perform evaluations and assessments of each module and measure the project's progress based on established contractual agreements, requirements, and industry standards. Suresh performed the following duties/responsibilities/tasks in his role as an IV&V analyst-SME:</p> <ul style="list-style-type: none"> Analyzed enterprise IT system development and documents findings to determine appropriate mitigation strategies Conducted detailed evaluations of Data Conversion Plans, General System Designs, and System Test Plans Used a proprietary toolset to assess requirements and specific deliverables produced during DDI of the replacement Legacy TANF/SNAP eligibility system Conducting an ongoing analysis as the new LITE (Louisiana Integrated Technology for Eligibility) was designed, tested and moved into UAT Assessing the sufficiency and completeness of the data conversion, test planning, and UAT tasks conducted by vendor and verifying that DCFS requirements were traced through the test documentation Validating Functional and Unit test results, system test results, and the adequacy of UAT support Providing a comprehensive technical and management review of ongoing work with actionable recommendations for consideration in the continuous evaluation to assure project success Provided in-depth assessment and review of project and product risks and issues related to project scheduling methodologies and the agile SDLC Worked with the State agencies, project management office, vendors, FNS and CMS issuing the required IV&V periodic assessment reports Assessed and helped ensure the systems function as required to maximize and secure the enhanced federal funding <p>Georgia Technology Authority (GTA) Georgia Integrated Eligibility System (Gateway) Senior IV&V Analyst September 2014 – September 2017</p>			
NAME:	John McCrary	PROJECT ROLE:	Retired
PHONE:	(404) 550-3834		
<p>Georgia Gateway is an implementation of a Deloitte's NextGen solution that utilizes an efficient single point of entry that will allow seamless eligibility processing for Georgians requesting assistance. The system supports eligibility for Medicaid and PeachCare for Kids®, as well as several other state-administered assistance programs, including WIC, LIHEAP, CAPS (Childcare and Parent Services), SNAP and TANF. PCG's services focused on ensuring a solid foundation of requirements, followed by the effective and efficient design, development and implementation of the system.</p> <p>Suresh managed efforts to conduct IV&V services for the State. Suresh also served as the lead point of contact with state entity management and acted on all aspects of IV&V in completing all IV&V tasks and deliverables. Oversaw and assessed project plan and schedule, including critical path analysis, solution</p>			

architecture, requirements review and traceability, test planning and execution (including script reviews and testing validation), Hardware/software configurations, system security plan development, security risk analysis, System development life cycle process adherence and execution. Other responsibilities included:


- Involved in every aspect of planning, facilitation of interviews, data collection and analysis, validation for compliance to established standards, and executive-level out briefing.
- Each engagement consisted of the following activities:
- Provided IV&V oversight over benefit integrity and recovery claim processing for all human services, and Medical claim processing Interfaces implemented as part of the IE systems
- Developed IV&V monthly reports and critical panel reports which included various independent assessments, IV&V risks and issues, and deliverables that corresponded to the independent project oversight
- Developed the CMS milestone review progress report, including certification approach, methods to collect and assess information, status of corrective actions, progress in meetings MMIS CSFs, progress towards advancing MITA maturity, and IV&V recommendations
- Handled IV&V oversight throughout the various milestone review part of the MEECL certification and life cycle process for the IE system and the SME for the MECL and MEELC certification and life cycle processes
- Developed assessment checklists for all IES interfaces that integrated to Gateway through enterprise service bus
- Reviewed applicable standards such as the IEEE, PMBOK, TOGAF, and state policies in the formulation of criteria used to assess adherence to project management and system development life cycle input, processes, and output executed by the project team
- Identified non-conformity issues, identified technical improvements, and developed specifications to meet certification requirements
- Provided IV&V review and CMS attestations for system testing with the federal data services hub (FDSH) to use key verification services like social security composite and lawful presence, including account transfer testing, regression testing, and end-to-end testing
- Worked cooperatively and collaboratively with client and system integrator staff to understand constraints and provided recommendations when warranted
- Established an IV&V peer review framework and process to improve the quality of IV&V assessments and foster a spirit of collaboration among the consulting team, and ensure the applicable standards, such as IEEE, PMBOK, CMMI, ITIL, were used to evaluate system development activities
- Assisted the IV&V project manager in conducting executive and management briefings on a regular (weekly and monthly) basis to provide accurate, relevant, and timely feedback on IV&V observations and recommendations
- Provided periodic assessments that included independent review and analysis for the project with a focus on data conversion, interfaces, testing, configuration, system requirements and design, platform/software installation, reports, implementation and rollout, and maintenance and operations ensuring all project activities and vendor provided services conformed to standards, business, program and/or project objectives
- Prepared and delivered executive-level presentations based on objective, unbiased, and factually correct information, such as the 'true' status of the project

EDUCATION

- Bachelor of Electronics Engineering | Bharathiar University - India

CERTIFICATIONS

- Eclipse IV&V® | Public Consulting Group, Inc.

<p>Provide justification for any team members who will support this project from remote offices and explain what methods of communication, travel, and oversight will ensure the remote employee(s) perform their roles effectively. (Sec 2.5.D)</p>	<p>5</p>
<p>PCG recognizes that businesses of all sizes are continuing to embrace a remote workforce. In fact, Gallup's State of the American Workplace reveals that roughly 43 percent of companies allow some employees to work remotely. Even more interesting, however, is that the survey revealed remote workers tend to log more hours than their in-office counterparts and tend to be slightly more engaged.</p> <p>How can PCG ensure that the remote team is on task, staying productive, and collaborating appropriately whether on site or working from remote offices? PCG has organized and successfully implemented Technologies, Policies, Promoting Accountability and Follow Up to do so. Here are some details pertaining to tools and practices.</p> <ul style="list-style-type: none"> • Technology. PCG uses technologies such as Microsoft Teams and Productivity Monitors to monitor team availability and track activity. Managers can provide reports of employee's activities usages if the need arises. The reports can be customized by dates and individual employees. • Policy. PCG has remote work policy in place that defines what are appropriate measures for remote work and what is not. These policies are focused around empowering individuals to be more accountable, and that remote work is focused towards specific measurable and defined outcomes. • Promoting Accountability. PCG works to Create a culture of accountability (leading by example) such as by sharing time sheet and work activities with team members to socialize planned work and open accountability towards the achievement of those activities for the betterment of the team and project. This helps employees individually benchmark their performance, efficiency, and productivity as compared to the overall team. We are all accountable to each other as well as to our client. • Follow Up. PCG operates on a culture of trust, but verify, although all PCG team members are ethical professionals, all PCG administrators and Managers are assured to follow up on assignments and support accountability to deadlines. As such, not only are team members focused on work and accountability on site or off, but so are our Management team ensuring a complete oversight on work and accountability for our clients. <p>PCG recognizes that when implemented well, remote employee monitoring can have an incredibly positive impact on both expected work outcomes, but also on the confidence of achievable and expected outcomes while team members are working remotely.</p>	
<p>Describe how your company will support this project with additional IV&V team members as requested by DHS. (Sec 2.5,F)</p>	<p>5</p>
<p>PCG recognizes that often, scope or scale of a project may change, and as such, we must be agile enough to support increased resource needs of our client. PCG has an extensive team of staff available should any additional needs or expertise be identified and requested by DHS during this IV&V engagement, and we will be ready to provide additional IV&V resources at the request of DHS.</p> <p>As we anticipate that DHS's staffing needs may change, PCG recognizes that our approach to staffing throughout this engagement will be critical to project success. PCG carefully built our organizational chart around the responsibilities and deliverables for which the IV&V is accountable. PCG recognizes that DHS will benefit from a robust resource pool that will be at the ready to identify additional IV&V resources potentially needed based on categorical subject matter expertise. This means that while we have filled each of the key roles with our IV&V team and SME's identified by primary need, PCG will also arrive to the project with a broad inventory of skills that align with the stated expected responsibilities of DHS's IV&V Vendor.</p> <p>We have internally organized these skills into four resource pools:</p> <div data-bbox="162 1822 289 1936">  </div> <p>The SME Pool includes staff with various certifications including but not limited to ITIL v3 Foundation Certification and Certified Information Systems Security Professional (CISSP). These experts can be called upon for various needs including specialized deliverable and document review.</p>	



The IV&V Experts Pool primarily includes staff that have earned their Project Management Professional (PMP®) Certifications through PMI and are deeply knowledgeable of project management best practices in addition to all applicable IV&V oversight and monitoring practices. The individuals are at the ready – we can assign members of the IV&V Experts Pool to the engagement based on the needs that arise over the course of the project.



The Program Process Analysts Pool includes staff who regularly serve as PCG IV&V experts providing industry-leading advice to help ensure that Program and project resources are highly skilled, trained and aligned.



The Business Analysts Pool includes staff who are equipped and ready to assist Program and project teams with reporting and tracking, as well as system support and administration.

PCG is confident that our proposed roles and team structure will ensure contract success. We have dedicated staff to managing, overseeing and interfacing with all critical and distinct aspects of the engagement. Our ability to remain organized internally, while delegating resources effectively, will allow us to manage and coordinate all pertinent IV&V oversight and reporting activities in support of the IEBM effort.

Our IV&V Team SME Pool

With any major system modernization effort, there are a wide variety of technical, program, regulatory, or other aspects that require specialized knowledge and/or experience. Although PCG's proposed IV&V team brings extensive skills and experience with a high degree of professionalism, we plan for the instances where additional SMEs are required.

We have included in our proposal a pool of SMEs that can be called upon for a wide variety of issues that typically arise in an IV&V engagement. Beyond the SME's named in the proposal, PCG has a deep bench of Medicaid, MMIS, MITA, enterprise architecture, and CMS subject matter experts that can and will be called upon when and if needed.

The core team will be supported by a pool of SMEs that hold specialized technical and domain knowledge and skills that are not required in daily operation of IV&V services. We have utilized the pool structure on many IV&V projects to help reduce costs and improve productivity by engaging the right skill at the right time. We anticipate the need for these resources at the equivalent of one full-time person per month.

Ravi Kiran Peri, Testing

Ravi has over 15 years of experience in technology and Medicaid, specializing in quality assurance, risk management, user acceptance testing and implementing testing processes and methodologies. His experience includes all aspects of testing for enterprise architecture, eligibility and enrollment, integrated eligibility and MMIS projects for state programs.

Dustin Heath, Security

Dustin is our information security and disaster recovery specialist with over 25 years of technology experience including over 12 years working on state agency enterprise-wide projects. He is a Certified Information Systems Security Professional (CISSP) with multiple state health and human services eligibility determination and enrollment information system projects under his belt. Dustin reviews and recommends improvements to security artifacts for submission to the federal government through MARS-E 2.0, IRS 1075 and NIST 800-53r4, among other industry standards and compliance requirements.

LeAnne Scott, Certification

LeAnne has over 35 years of government experience in Medicaid and eligibility and enrollment and is our SME for the CMS Medicaid Eligibility and Enrollment/Medicaid Enterprise Certification Lifecycle (MECL) processes, milestone reviews, and the Medicaid Eligibility and Enrollment Toolkit/Medicaid Enterprise

Certification Toolkit checklists.

Robert (Rob) McKenney, Enterprise Architecture

Rob has over 16 years of experience in the design, development and implementation of advanced technologies and governance processes. He has over nine years of IV&V experience on multiple state Medicaid, eligibility and integrated eligibility projects. As a former Naval Nuclear Engineering Office, Rob applies his understanding of complex systems and interactions to large-scale technical architecture projects at public organizations, specializing in analyzing functional and informational overlap and integration of COTS, MOTS, and custom systems.

Jeff Hellzen, Technical Reviews

Jeff is our Chief Technologist with over 30 years of information technology experience, including over 16 years on state and federal government projects involving technical assessments and technical verification and validation of multi-year, multi-million-dollar development projects. He has provided technical IV&V on numerous eligibility systems and is familiar and current on Medicaid and CMS requirements.

Michell Wyant - Scheduling

Michelle has over 14 years of project management experience and is one of PCG's project scheduling experts. She brings PMP and PMP-ACP certifications with her hands-on practical experience to complex technology enterprise projects managing multiple project vendors and project management plans. She has a wealth of experience developing and maintaining integrated master schedules using enterprise-wide schedule management systems.

Earl Burba, Requirements Management

Earl has over 34 years of experience in technology specializing in systems design, requirements analysis and management, IV&V, and quality assurance of large, complex state programs. His extensive experience includes knowledge in all phases of project development life cycle, system architecture, design documents and testing. Earl has worked on numerous state projects implementing eligibility systems involving multiple human services programs, including working with CMS requirements.

Provide a detailed organizational profile for this project which shall include, at a minimum, the following: (Sec 2.6.B)

- **Company Name**
- **Name of Parent Company (if applicable)**
- **All Proposed Personnel by Job Title**
- **Lines of Supervision**
- **Number of Full Time Employees**
- **Number of Years in Business**
- **Number of Years Vendor (Prime) has been providing the type of services specified in the RFP**
- **Number of Employees providing the type of services specified in the RFP**
- **Headquarters in the USA**
- **Locations in the USA**
- **Office Servicing this account location**

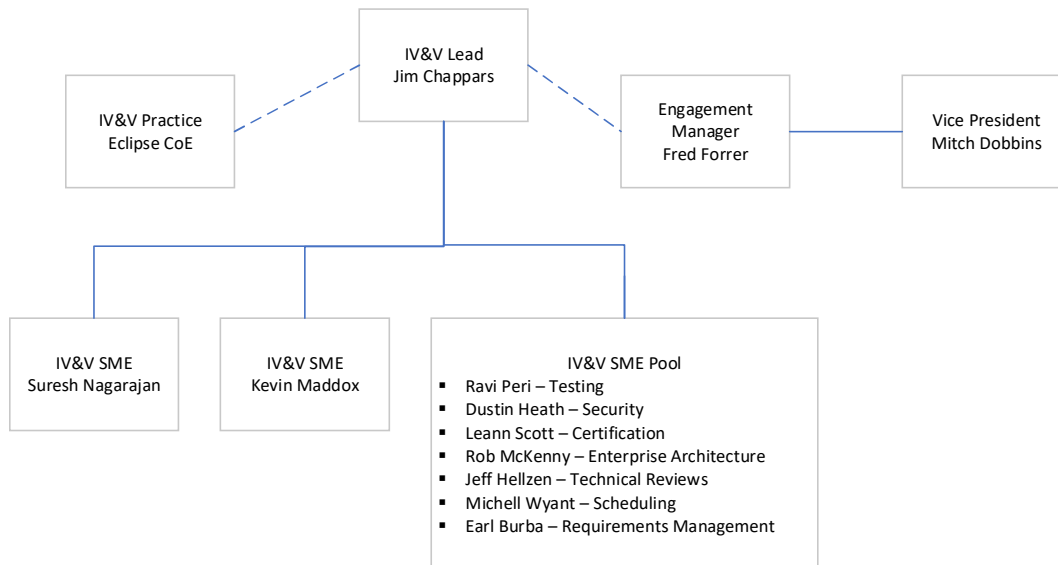
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COMPANY NAME:	Public Consulting Group, Inc.
PARENT COMPANY:	Not Applicable
PROPOSED KEY PERSONNEL BY JOB TITLE:	IV&V Lead & Project Manager – Jim Chappars
	IV&V SME – Kevin Maddox (Deloitte NextGen Solution IEBM)
	IV&V SME – Suresh Nagarajan (Deloitte NextGen Solution IEBM)

Lines of Supervision

Figure 5 on the next page illustrates our organizational chart depicting the lines of supervision for our proposed IV&V team.

Figure 5: Organizational Chart



# OF FULL TIME EMPLOYEES:	2,500
# OF YEARS PROVIDING IV&V SERVICES:	22 years
USA HEADQUARTERS:	Boston, MA
OFFICE SERVICING THIS ACCOUNT LOCATION:	2849 Paces Ferry Road, Suite 630 Atlanta, GA 30339
# OF YEARS IN BUSINESS:	32.5 years
# OF EMPLOYEES PROVIDING IV&V SERVICES:	100
LOCATIONS IN THE USA:	36 Offices Nationwide

Provide a staff continuity plan outlining the Vendor's approach to maintain the level of staffing proposed. The plan shall include at a minimum the following: (Sec 2.7-D)

5

- **Vendor's policies and plans for maintaining continuity of personnel assignments throughout the performance of any contract resulting from this RFP**
- **Vendor's contingency plans to avoid and minimize the impact of any unexpected personnel changes.**
- **Vendor's planned backup resources for key personnel**

Sustaining a team that possesses the required and necessary experience and qualifications throughout the duration of the contract will be vital to the success of the project. Contingency plans for staffing directly supports team sustainability, but in the case of resource and staffing management, PCG recognizes that happy and engaged workforce provides for such sustainability, and a proactive approach to staff management will yield greater outcomes than contingency planning alone. As such, PCG applies the following strategies to sustaining the team beginning with Retention and Development, and reserving Acquisition as the final step in contingency:

- **Retention** – the most practical and least disruptive strategy is to retain the staff already in place. These individuals will be the most experienced and knowledgeable.
- **Development** – an effective strategy to sustaining personnel experience and qualifications is to actively build and develop the team's up and coming junior talent. PCG staff development includes

tactics such as assignments designed to increase experience and knowledge, training, and mentoring.

- **Acquisition** – a targeted strategy to acquire staff experience and qualifications through direct hiring, teaming or partnering arrangements, and staff augmentation. Staff acquisition can also have a positive collateral impact to the Arkansas community by providing local jobs.

Staff Retention

Each one of the key personnel positions on our team is filled by a current employee of PCG Recognizing that the project timeline and/or individual employment situations can always change, PCG believes that employee retention is critical to the long-term health and success of our business, the IEBM project and providing outstanding service to our clients. To mitigate turnover risk for this project, we will focus on retaining our best employees to ensure DHS's satisfaction, effective succession planning, and deeply imbedded organizational knowledge and learning.

Our existing staff retention program focuses on several key elements including:

- Career development opportunities and a chance to grow in their chosen field
- Regular feedback on how both they and the company are doing
- Opportunities to contribute directly to the organization and be recognized for doing so
- Flexible work schedules that recognize their need for work/life balance
- Competitive compensation programs

Effective staff retention planning and execution starts from the time an employee is hired, not when the IEBM engagement starts or the staffing plans are approved. As such, PCG's employment practices are designed to have a positive impact on employee retention. Our key retention strategies include:

- **Recruitment and hiring** – We expend the time and effort on recruiting to ensure a good match between employees and our organization, resulting in greater staff retention.
- **Orientation and onboarding** – Treating employees right in the critical early stages of employment has been proven to enhance retention.
- **Training and development** – Training and development are key factors in helping our employees grow with PCG and stay marketable in their field.
- **Performance evaluation** – When employees know what they're doing well and where they need to improve, they, PCG, and our clients benefit.
- **Pay and benefits** – While today many employees tend to rate factors such as career development higher than pay, competitive compensation and benefits are critical.
- **Internal communication** – PCG feels strongly that effective communication helps to ensure that employees want to stay with the company. Employees need to know – and be reminded on a regular basis – how the organization is doing and what they can do to help.

At PCG, we believe that our employees are our most valuable resource. We are committed to making PCG a great place to work, while helping our employees to attain personal and professional growth. All our internal policies and procedures are documented in PCG's Staff Handbook, which covers general policies (e.g., non-discrimination and non-harassment, security and confidentiality, relocation assistance), employment (e.g., internal transfers, employee referral bonus program, resolving workplace issues), day-to-day operations. Other topics include benefits, performance management, and career development.

Retention Statistics

To date, PCG currently staffs over 2,500 employees which includes all consulting fields, information technology, and human resources departments. With these numbers, PCG has an average retention rate of 82% - 83%.

Staff Development

PCG values career development. We are committed to providing professional development opportunities

that are essential to the success and retention of PCG employees. We continuously evaluate and modify our offerings to ensure that all PCG's learning needs are being met.

PCG's Learning & Development (L&D) team supports the corporate mission by growing the capability of managers and employees to build a motivated, engaged and high-performing workforce. PCG L&D provides holistic learning and development opportunities and solutions at individual, team and organizational levels. Our learning solutions focus on developing and enhancing the competencies and behaviors needed by individuals and teams in order to provide our clients with the excellent customer service and creative solutions for which PCG is known. PCG L&D strives to influence and affect the quality and effectiveness of individuals and teams to accomplish meaningful goals and create a positive work climate that encourages and values clarity, collaboration, openness, diversity, community and results.

Our Learning Philosophy – To ensure that real learning takes place and endures, we emphasize and encourage a holistic approach by integrating both formal and informal elements. We believe that the most effective way to learn and develop a new skill or behavior is to apply and practice it in the classroom and more importantly, on the job. PCG L&D courses, programs and solutions are driven by the goals and needs of the people of PCG.

Our Learning Curriculum – PCG L&D offers formal learning solutions for managers and staff members through our in-person, skills-based training programs. We offer developmental courses on essential topics, including leadership development, risk mitigation, business process analysis and much more.

Some of our professional development opportunities include:

- **Professional Certifications** – PCG offers in-house training and/or financial support to promote ongoing professional staff development. Our current efforts include:
 - Hosting an in-house PMP training program taught by qualified staff members through which members of our team can become certified Project Management Professionals (PMPs) and covering annual PMI membership dues. As a member of PMI, staff gain access to knowledge and career advancing resources in the field of project management and beyond.
 - Offering Information Technology Infrastructure Library (ITIL) certification training to our professional staff. ITIL is a set of practices for IT service management that focuses on aligning IT services with the needs of business.
 - Promoting programs to allow interested staff members to become Certified Information Systems Security Professionals (CISSPs) and/or Professional Scrum Masters to advance their careers and offer these critical services to our clients.
- **IV&V Center of Excellence** – PCG's CoE for IV&V Services provides leadership, best practices, research support and training in the field of IV&V. In 2014, PCG created an IV&V training program through which staff can become certified Eclipse IV&V® practitioners in order to deliver high-quality IV&V services to our clients on a consistent basis.
- **Clark On-site MBA Program** – PCG launches a program every 2 – 3 years that allows staff to receive their MBA through Clark University at no cost to staff who are nominated to attend the program. In PCG TC alone, five of our professional staff have obtained their MBA through this program.

While formal training and certifications are indeed of value, a more personal means of staff development occurs through mentoring and coaching, and on-the-job experience. PCG is a matrixed organization – employees may report to one or more project managers while having a direct reporting relationship to another manager. Through this matrixed approach to service delivery and organizational reporting, staff receive immediate, timely and relevant feedback, and mentoring and coaching on their soft skills (communication, listening, interpersonal and relationship building, et al), and their job-related skills and knowledge.

It is through mentoring and coaching that PCG staff form a deep bond with their colleagues and clients, encouraging them to continue in their career and personal development.

Staff Acquisition

PCG has a deep bench of qualified consulting staff, from which we satisfy most of our contractual staffing obligations. For some engagements, PCG finds it advantageous or necessary to acquire new staff, or we can be requested to do so as we understand may be needed for DHS at some point. This can include engagements where high numbers of staff are needed for a limited period, highly specialized skills and knowledge are required, or the engagement location is remote or difficult to reach. Staff are acquired for an engagement through direct hiring, teaming or partnering, or staff augmentation services (including temporary or payroll staff).

At PCG, all open positions go through a Practice Area Director, Human Resources (HR) and Finance review and approval process, regardless of whether the request is for a new or replacement position. Once a request for personnel is approved, Human Resource staff post the position description on the 'Careers' page of the PCG website at www.pcgus.com.

PCG's Corporate HR office works with PCG hiring managers to develop recruitment strategies. HR coordinates all external advertising including those in local newspapers, professional journals, college job boards and online posting services. The HR office is also responsible for developing and managing all relationships and activities with external staffing resources such as temporary agencies, search firms, etc. PCG postings also automatically appear on several diversity job sites.

When practical and appropriate for the engagement, PCG seeks first to hire qualified, local candidates. To do so, PCG works with local colleges, trade schools, placement organizations, and social service agencies to support the placement of diverse candidates in internships, entry level, and regular positions.

Background Screening Procedure

Background checks are conducted on employees that work in certain practice areas and within specific projects. Background checks are also conducted on employees with fiscal or data responsibility (Corporate Finance, Accounting and IT). Our standard background check consists of SSN Validation, State & Federal Criminal Felony and Misdemeanor and Employee Credit. Some checks are more extensive depending on the project.

The Interview - PCG employees are expected to interview and select job candidates in accordance with PCG's Equal Employment Opportunity policy. All candidate interviews are scheduled through the Human Resource office and applicants are sent a PCG application in advance of their first appointment.

Completed applications become part of each applicant's file upon hire.

Reference Checks - Verbal references are obtained by the Recruiter on all final candidates, prior to a hiring decision. Reference information is retained by the Human Resource office.

Offers of Employment - The hiring manager and the Recruiter discuss all final candidate results and make a hiring decision. The Recruiter extends all verbal offers and works with the Human Resources Employment Assistant to process all offer letters and new hire packets in the standard PCG format. Salary negotiations and related discussions regarding final offer details occur solely between and Human Resources staff and the applicant in order to insure consistency of information.

Backup Resources for Key Personnel

To support the need for personnel consistency throughout the project lifecycle, the PCG IV&V team maintains a planned backup for Key Personnel assignments as shown in Table 7 below. Each resource is notified of his/her respective alternate assignment and participates in scheduled formal sessions to stay abreast of the tasks associated with each backup role. Where feasible, the respective roles are also involved in regular reporting and status sessions.

Table 7: Key Personnel Assignments

KEY ROLE	BACKUP ROLE
Engagement Manager	IV&V Lead
IV&V Lead	Engagement Manager
Full Time SME's	Engagement Manager or Part Time SME Designee
Part Time SME's	Full Time SME's or Part Time SME Designee

The table above confirms the IEBM IV&V Project team has designated staff that is trained and able to perform the functions of key positions when the primary staff member is absent on consecutive days of vacation or extended leave. The respective backup assignments are mapped based on similar or related levels, skillsets, and experience. The IV&V Lead will ensure adequate resource coverage for each team during holiday periods.