



Solicitation Information
24 January 2012

Request for Proposals # 7449412

TITLE: Request for Proposals – EOHHS PMO and IV&V Services for MMIS System Transition and Health Information Exchange/Eligibility System Implementation

Submission Deadline: 20 February 2012 @ 11:00 AM (Eastern Time)

Questions concerning this solicitation must be received by the Division of Purchases at rfp.questions@purchasing.ri.gov no later than **3 February 2012**. Questions should be submitted in a *Microsoft Word attachment*. Please reference the RFP # on all correspondence. Questions received, if any, will be posted on the Internet as an addendum to this solicitation. It is the responsibility of all interested parties to download this information.

SURETY REQUIRED: No

BOND REQUIRED: Yes

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Vendors must register on-line at the State Purchasing Website at www.purchasing.ri.gov

Note to Vendors:

Offers received without the entire completed three-page Rhode Island Vendor Information Program (RIVIP) Generated Bidder Certification Form attached may result in disqualification.

THIS PAGE IS NOT A BIDDER CERTIFICATION FORM

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Section 1 – Introduction

The State of Rhode Island, Division of Purchases (“Division”), on behalf of the Executive Office of Health and Human Services (“EOHHS”) is requesting proposals in the form of a Request for Proposals (“RFP” or “Request”) from qualified firms to perform the following five major tasks for the State:

1. Establish a Project Management Office (“PMO”)
2. Provide Project Management Services via a PMO for transition services to a new Medicaid Fiscal Agent contract and for major enhancements to the Medicaid Management Information System (“MMIS”) and MMIS Project.
3. Provide Project Management Services via a PMO for development and implementation of EOHHS/Medicaid components of the new Health Insurance Exchange/Integrated Eligibility System (“HIX/IES”) technology program, which will be implemented and shared by three state agencies.

The “IES” portion of this new technology program will provide integrated eligibility system (“IES”) determinations for Medicaid, the Health Insurance Exchange, and eventually for other human service programs. The “HIX” portion of the project will support other business functions primarily for RI’s Health Insurance Exchange (“Exchange”). Although Medicaid already has some of these Exchange business functions within the MMIS, there will be components of the new non-eligibility technology system functions that must be built for the Exchange, which Medicaid may wish to leverage. This RFP is requesting project management services for the development and implementation of the Medicaid business components of this integrated technology program. The Medicaid business components of this integrated technology program will be referred to in this RFP as “Eligibility System Project”.

Project management services will also include a degree of technical assistance to help the State deal with the unexpected implementation complexities and federally induced changes expected through the life of the project. Examples of potential technical assistance tasks are specified in this RFP.

4. Provide Independent Verification and Validation (IV&V)¹ services for the MMIS Project
5. Optional Tasks

This procurement for Project Management Services and IV&V Services will be conducted in accordance with the State’s General Conditions of Purchase available at www.purchasing.ri.gov.

The State seeks vendors who will bid on both the PMO and IV&V sections of the RFP, as well as vendors who wish to bid separately on the PMO or IV&V sections of work delineated in this RFP.

This is an RFP; responses will be evaluated on the basis of the relative technical merits of the proposals received in addition to cost. There will be no public opening and reading of the

¹ Verification purpose: ensure the implementation produces a well-engineered system. Validation purpose: ensure the system meet user business needs

responses received by the Division pursuant to this RFP, other than to name those vendors who have submitted requests for proposals.

INSTRUCTIONS AND NOTIFICATIONS TO VENDORS:

1. Potential vendors are advised to review all sections of this Request carefully and to follow instructions completely, as failure to make a complete submission as described elsewhere herein may result in rejection of the proposal.
2. Alternative approaches and/or methodologies to accomplish the desired or intended results of this procurement are solicited. However, proposals which depart from or materially alter the terms, requirements, or scope of work defined by this Request will be rejected as being non-responsive.
3. All costs associated with developing or submitting a proposal in response to this Request, or to provide oral or written clarification of its content shall be borne by the vendor. The State assumes no responsibility for these costs.
4. Proposals are considered to be irrevocable for a period of not less than sixty (60) days following the opening date, and may not be withdrawn, except with the express written permission of the State Purchasing Agent.
5. All pricing submitted will be considered to be firm and fixed unless otherwise indicated herein.
6. Proposals misdirected to other state locations, or which are otherwise not present in the Division of Purchases at the time of opening for any cause will be determined to be late and will not be considered. For the purposes of this requirement, the official time and date shall be that of the time clock in the reception area of the Division of Purchases.
7. It is intended that an award pursuant to this Request will be made to a prime Vendor, who will assume responsibility for all aspects of work. Joint venture and cooperative proposals will not be considered. Subcontracts are permitted, provided that their use is clearly indicated in the vendor's proposal and the subcontractor(s) to be used is identified in the proposal.
8. All proposals should include the vendor's FEIN or Social Security number as evidenced by a W9, downloadable from the Division of Purchases website at www.purchasing.ri.gov
9. The purchase of services under an award made pursuant to this Request will be contingent on the availability of funds.
10. Vendors are advised that all materials submitted to the State for consideration in response to this Request will be considered to be Public Records as defined in Title 38 Chapter 2 of the Rhode Island General Laws, without exception, and will be released for inspection immediately upon request once an award has been made.
11. Interested parties are instructed to peruse the Division of Purchases website on a regular basis, as additional information relating to this solicitation may be released in the form of an addendum to this RFP.
12. Equal Employment Opportunity (RIGL 28-5.1) – 28-5.1-1 Declaration of policy – (a) Equal opportunity and affirmative action toward its achievement is the policy of all units of Rhode Island state government, including all public and quasi-public agencies, commissions, boards and authorities, and in the classified, unclassified, and non-classified services of state employment. This policy applies to all areas where State dollars are spent, in employment, public services, grants and financial assistance, and in

state licensing and regulation. For further information, contact the Rhode Island Equal Opportunity Office at (401) 222-3090 or Raymond.lambert@hr.ri.gov.

13. In accordance with Title 7, Chapter 1.1 of the General Laws of Rhode Island, no foreign corporation, a corporation without a Rhode Island business address, shall have the right to transact business in the State until it shall have procured a Certificate of Authority to do so from the Rhode Island Secretary of State (401-222-3040). *This is a requirement only of the successful Vendor.*
14. The vendor should be aware of the State's Minority Business Enterprise (MBE) requirements, which address the State's goal of ten percent (10%) participation by MBE's in all State procurements. For further information, contact the MBE Administrator at (401) 574-8253 or visit the website www.mbe.ri.gov or contact dorinda.keene@doa.ri.gov

Section 2 – Background

2.1 Medicaid Management Information Systems (“MMIS”)

The Rhode Island Medicaid Program operates within the Executive Office of Health and Human Services (“EOHHS”). Rhode Island Medicaid operates under a Section 1115 demonstration waiver, known as the Global Waiver. The Medicaid Program issued an RFP on November 22, 2011 to re-procure the contract with a Fiscal Agent to operate the Medicaid Management Information Systems (“MMIS”).

In considering the approach to the transition and enhancement of the MMIS, the State considered three potential approaches: 1) Transition and enhance the existing MMIS system, 2) Transfer another state’s MMIS to RI, and 3) Custom build of a new MMIS system. The State chose Option 1 because it was deemed equal to or superior in five of six respects: Supporting Business Functionality, Supporting Technical Strategy, Supports Time to Implement, Cost, and Risk. The Takeover option’s only disadvantage was a lower ability to more rapidly increase the CMS MITA maturity levels for Rhode Island.

The existing MMIS system, though not new, has been upgraded over the years and has the capacity to handle the needs of Medicaid for some years to come. The substantive enhancements described in the MMIS Fiscal Agent RFP are intended to significantly augment the capacity of the MMIS system and will require special PMO scrutiny.

The successful Fiscal Agent bidder will be required to take over, operate and maintain all current functions and operations of the Rhode Island MMIS. These responsibilities include processing of claims and other transactions for the following entities:

- EOHHS, including the:
 - Department of Human Services (DHS) including the DHS Division of Elderly Affairs (DEA);
 - Department of Health (DOH);
 - Department of Children, Youth and Families (DCYF);
 - Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH); and the
- Department of Corrections (DOC).

Claims and other transactions processed for these agencies include: claims and encounters processed for Medicaid eligibles and other populations covered by the 1115 Global Waiver; claims for clients who participate in the same programs but whose Medicaid eligibility varies; claims for clients who participate in programs covered under programs for Costs Not Otherwise Matchable (CNOMs) as approved under the Global Waiver; and other medical and social services claims for populations managed by the above departments and agencies.

The successful Fiscal Agent (“FA”) bidder will be required to transition, operate, and maintain other current functions. These other functions include, but are not limited to:

1. Operation of the Data Warehouse;
2. Operation of the provider Web portal, including provider enrollment, various provider call centers, pharmacy point-of-sale processing, encounter processing for multiple managed care programs, prior authorization of services, translation services, third-party liability identification, and estate and casualty recoveries; and
3. Premium payment generation and collection. The successful FA bidder is required to maintain current operations and implement enhancements to maintain the CMS certification of the MMIS system. The successful FA bidder will also attain CMS certifications on the MMIS system enhancements done during the transition. The core transition MMIS system will require CMS re-certification if a new vendor becomes the Fiscal Agent.

EOHHS has the following goals for the MMIS FA procurement:

- The resulting system will be the most cost effective and administratively efficient system available to Rhode Island Health and Human Services;
- The project will be on-time and within budget;
- The new Rhode Island MMIS transition will meet all certification requirements established by CMS within the minimum time period allowed by CMS; and
- The implementation of the enhancements will be completed without disruption of service to Medicaid recipients, providers of services, and other customers of the system.

More information on this project is contained in the “MMIS RFP: Request for Proposals for Transition, Enhancement, Operation, and Maintenance of the Medicaid Management Information System” document found in the Bidders Library for this RFP per Appendix A.

EOHHS has determined that strong and effective Project Management support is a necessary component in achieving these goals. The State has identified the need for PMO to support and ensure that the transition and enhancement of the MMIS is managed effectively and efficiently.

EOHHS realizes that system enhancements included in the MMIS procurement will bring additional functionality that may impact current business processes. Project management support is needed to maximize the positive impact of these new solutions, and minimize the impact on current operations.

Vendors should recognize the degree of difficulty in implementing a project like this, and should be prepared to provide technical assistance as described in this RFP. Significant substantial technical assistance items may conceivably be addressed through the Optional Tasks section.

EOHHS is also seeking IV&V services for the MMIS project. The IV&V work is described later in this RFP document.

2.2 The Health Insurance Exchange/Integrated Eligibility System (HIX/IES)

The RI Health Insurance Exchange (“Exchange”) is being developed and implemented under an Executive Order issued by Governor Chafee in September 2011 creating the Exchange as a program within the Executive Office. The Exchange will be implemented in compliance with federal requirements for certification of a Health Insurance Exchange. The Exchange will require technology system support for eligibility determination for Exchange subsidies, as well as to support other non-eligibility business functions, including an online insurance information portal; determination of qualified health plans/products for Exchange participation; enrollment into Exchange plans/products; billing, collection and payment; financial management; small business “SHOP” program; federal financial reporting; and program management reports.

Many Rhode Island programs rely on the same set of marketing, eligibility determination, enrollment and customer service processes, resulting in duplication of services across state programs. The advent of the Health Insurance Exchange and the resources offered by the Affordable Care Act to both the Exchange and Medicaid allow the state to consider a new, consolidated, integrated, end-to-end service delivery model for many programs. This model will enhance the customer experience as well as government efficiency and efficacy.

Through its technology planning efforts, EOHHS has concluded that it cannot rely on its current eligibility determination system, known as InRhodes, to create a ‘no wrong door’ approach (i.e., allowing individuals to access health coverage in a variety of ways, and through multiple entry points). InRhodes is an aging system based on outdated technology that is inflexible, costly to maintain, and difficult to modify. Faced with this challenge in combination with the requirement to implement an Exchange by January 2014, RI has decided to create a single coordinated set of rules to determine eligibility for all publicly-subsidized health coverage programs in a rules engine that will support Medicaid, CHIP, exchange based subsidy programs and other public programs in a phased approach.

Three Rhode Island state entities: EOHHS, the Exchange, and OHIC, (“Partner Agencies”) will partner to create a new technology program that can be used by several agencies and programs. This new technology program will provide a single, positive experience for Rhode Islanders and their families as well as Rhode Island businesses and their employees. This will be supported by integrated, end-to-end service architecture for health insurance and other human service programs.

The system will have multiple functions to provide IT support across several Partner Agencies: Exchange, Medicaid, DHS, and OHIC. The system will be innovative, flexible, and interoperable solutions for design and development of the Health Insurance Exchange and Integrated Eligibility System. The system will be flexible to be adaptable to changing policies and business rules, interoperable with external systems, and will take advantage of new technologies and best practices.

Rhode Island’s goal in implementing this IT strategy is to support a first-class, 21st century customer and partner experience, as well as seamless coordination between Medicaid, CHIP, and the Exchange. Rhode Island’s IT vision is to implement a solution that is consumer-focused, cost-effective, and reusable. Based upon national standards, the new system will:

- Support real-time eligibility determination, routing and enrollment whenever feasible, and for all individuals, a timely and responsive resolution process;
- Create a knowledge-base that serves as a single “point of truth” for business rules and is complemented with a high level of integration to avoid duplication of costs, processes, data and effort on the part of the State and beneficiaries;
- Leverage IT components that will become available through Innovator State projects, such as the New England States Collaborative Insurance Exchange Systems (NESCIES) project;
- Leverage the federal approach to verification from federal agencies such as the Internal Revenue Service, Department of Health and Human Services, Social Security Administration, and Department of Homeland Security to eliminate the independent establishment of those interfaces and connections at the State level;
- Achieve the necessary degree of interoperability between technology components to provide health insurance coverage through the Exchange, Medicaid or CHIP programs;
- Build a solution that will meet the seven CMS conditions and standards that were developed to ensure that states are making efficient investments and improving the likelihood of successful implementation and operation;
- Support MITA initiatives that provide a common framework to focus on opportunities to build common services by decoupling legacy systems and processes, liberating data previously stored and contained in inaccessible silos, and increasing the State’s ability to keep up with the rate of change demanded by the changing business landscape of health care delivery and administration;
- Move the design and development of the State’s Medicaid systems away from siloed systems and move to a service oriented architecture (SOA) framework;
- Build a solution that provide the flexibility of open interfaces and exposed application program interfaces (APIs);
- Ensure alignment with, and incorporation of, industry standards: the Health Insurance Portability and Accountability Act of 1996 (HIPAA) security, privacy and transaction standards; accessibility standards established under section 508 of the Rehabilitation Act, or standards that provide greater accessibility for individuals with disabilities, and compliance with federal civil rights laws; standards adopted by the Secretary under section 1104 of the Affordable Care Act; and standards and protocols adopted by the Secretary under section 1561 of the Affordable Care Act;
- Reduce time to deliver and overall costs by separating the business rules from the rest of the application logic; and
- Be scalable to allow for the incorporation of shared eligibility determination rules to support the State’s phased approach, described below.

The Integrated Eligibility System (IES) component of the HIX/IES will support:

- Combined “MAGI” (Modified Adjusted Gross Income) eligibility for the Exchange and MAGI Medicaid by October 2013 Exchange Open Enrollment (aka as the finish of “Phase 1”).

- Exchange business functions by January 2014
- Eligibility for Medicaid disabled and long-term care populations (non-MAGI) by December 31, 2015 (aka as the finish of “Phase 2”).
- Eligibility for other Human Service programs, including SNAP, RI Works (TANF), General Public Assistance (GPA), Child Care, WIC, and LIHEAP after 2015. (Aka as Phase 3.)

The EOHHS/Exchange HIX/IES implementation will utilize the following three phases:

1. In Phase #1, the eligibility rules engine will offer the new Modified Adjusted Gross Income (MAGI) rules for determining an applicant’s eligibility for premium subsidies, Medicaid, CHIP and, potentially, a Basic Health Plan beginning October 1, 2013. During Phase 1, eligibility rules for the Medicaid eligibility based on characteristics other than income (non-MAGI) will remain in InRhodes.

For Phase 1, client incomes will need to be submitted to the IES system to determine MAGI income eligibility. The MAGI and non-MAGI client data collected by the HIX/IES system will be nightly batched over to the Medicaid legacy eligibility system InRhodes. The MAGI client data will be made to be read-only in InRhodes and non-MAGI client data will remain at read-write within InRhodes.

2. In Phase #2, the State will incorporate the eligibility determination rules for Medicaid eligibility based on characteristics other than income (non-MAGI) into the eligibility rules engine. This phase will be implemented by December 31, 2015. At the conclusion of Phase 2, all Medicaid eligibility rules will be migrated to the new HIX/IES system.
3. In Phase #3, Rhode Island will incorporate the eligibility determination rules for the other human service programs administered by DHS (e.g., Supplemental Nutrition and Assistance Program [SNAP]; General Public Assistance [GPA]; Temporary Assistance for Needy Families [TANF]; Child Care; Child Support; and potentially Women, Infants and Children’s Program [WIC] and the Low Income Home Energy Assistance Program [LIHEAP]) into the eligibility rules engine which over time will lead to the replacement of InRhodes.

The Partner Agencies are embarking on a joint procurement to begin to implement Phases 1 and 2 of this technical program through a series of projects. Joint procurement is defined in this context as a single RFP, with a single contract with a single primary vendor, to support this initial set of projects. At a future date, an RFP will be issued for the implementation of the HIX/IES. The eventual successful vendor for the HIX/IES project is referred to as the “Implementation Vendor” throughout this RFP.

CMS, which is providing the funding for the Integrated Technology Project through the Exchange Establishment II Cooperative Agreement, and a Medicaid IAPD, has directed Rhode Island to actively pursue opportunities to reuse technology components required under the ACA that have been developed by states with Innovator Grants.

EOHHS/Medicaid is seeking project management services to supports its efforts and contributions to this projects. EOHHS may decide to also seek IV&V services for the Medicaid/EOHHS portions of the HIX/IES project. This potential work is described under Task 5. Optional tasks.

Section 3 – Scope of Work

3.1 Procurement Objective

The objective of this RFP is to competitively procure a PMO and/or IV&V Services from a qualified vendor or vendors. The state is seeking an experienced PMO vendor to support the Medicaid program's oversight of both the MMIS Project and the EOHHS components of the HIX/IES technology program. This procurement also is seeking IV&V services for the MMIS Project and potentially, for the EOHHS components of the HIX/IES technology program. In addition, the State seeks limited business and technical assistance from the PMO vendor in the establishment of the HIX/IES.

The State seeks vendors who will bid on both the PMO and IV&V sections of the RFP, as well as vendors who wish to bid separately on the PMO or IV&V sections of work delineated in the RFP. Vendors who bid separately on the PMO and IV&V work must specify a strategy to coordinate their work with the PMO or IV&V vendor selected by the State. Vendors submitting a combined bid for both PMO and IV&V work must also specify their strategy to coordinate the PMO and IV&V work.

3.2 Statement of Need

A PMO vendor is necessary to establish the project management for the MMIS and EOHHS portions of the HIX/IES projects. The project management procured through this RFP will be independent of the Implementation Vendor's efforts. EOHHS will rely upon the PMO vendor for the following critical needs:

- The PMO vendor will assist EOHHS by providing support to the State in the oversight and management of the MMIS transition and enhancement project, with participation involving multiple vendors.
- The PMO vendor will assist EOHHS by providing support to the State in the oversight and management of the EOHHS/Medicaid components of the HIX/IES Project, with participation involving multiple vendors.
- The PMO vendor will align all project management processes, system products, and professional services work plans for the Medicaid and EOHHS components of the above two projects.
- The PMO vendor will perform project management-related consulting services in support of the overall project efforts.

An IV&V vendor is required to perform the following essential functions:

- Through its independent reporting structure, the IV&V vendor will ensure the implementation produces a well-engineered system.
- The IV&V vendor will ensure the system meets user business needs

3.3 Project Tasks

The following tasks will provide the basis for the bidders' responses. Within each Task is a description of specific activities that should be included, at minimum, in the response for each task. Bidders should use their own expert knowledge of CMS requirements, technology requirements for human service eligibility systems and MMIS systems, and background knowledge of RI's current environment and recent development described in documents in the Bidder's Library to propose a workplan, timeline and resources for the state's consideration that will ensure successful and timely accomplishment of the objective of this contract.

The vendor shall provide technical expertise for the following activities at a minimum, and may propose other activities in this area to successfully accomplish the objectives of the contract. All activities conducted under all Tasks must be coordinated with EOHHS, the Exchange Project Management Team, and the PMO vendor.

The five Project Tasks are:

Task 1: Establish a Project Management Office (PMO vendors)

Task 2: Provide PMO Services for the Medicaid MMIS project (PMO vendors)

Task 3: Provide PMO Services for EOHHS/Medicaid Portions of HIX/IES Project (PMO vendors)

Task 4: Provide IV&V Services for Medicaid MMIS project (IV&V vendors)

Task 5: Optional tasks (potentially for PMO and IV&V vendors)

3.3.1 Task 1: Establish a Project Management Office.

Activity 3.3.1.1 PMO Office

The Project Management contractor will be required to establish a Project Management Office. Project Management is the application of knowledge, skills, tools, and techniques to project activities to meet project requirements. The responsibility of the PMO will be to provide project management support to EOHHS.

The vendor will be responsible for creating and maintaining a Project Management Plan based on the Project Management Institute's Body of Knowledge (PMBOK). EOHHS expects the contractor to provide an initial detailed work breakdown structure and schedule in Microsoft Project format and use this to track activities, tasks, milestones, deliverables, and resources.

Activity 3.3.1.2 PMO Staffing

Because of the complexity of these projects, combined with the aggressive time constraint of ACA deadlines and CMS time constraints of funding, it is critical that the project management activities provided by the primary vendor and any subcontractors be supported by strong, dedicated, on-site project management capacity, who are available upon signing a contract with the state. The vendor's Project Management capacity is expected to ensure a close, on-site working partnership with the state, coordinating, organizing and tracking the work of the Tasks

in this RFP at an individual project level. The vendor is required to provide effective communication with state and other contracted individuals as appropriate.

The state anticipates that a minimum of one on-site project manager will be required to accomplish these tasks, and requests that bidders propose a project management plan (names of proposed individuals, skill sets, and proposed role/responsibilities) sufficient to the scope of work and skill sets required to complete it. The bidder's proposed key staff must be available and located with the RI project staff during the project on a full-time basis.

EOHHS will provide space for one project manager and one technical staff to be co-located with state and other contractor staff. The PMO office space will be equipped with cubicles, chairs, desks, telephones, power and Internet. However, the bidder is required to supply all other materials to be used by their staff, including but not limited to:

- Computer hardware, software, and other such technology required to complete the work of the contract
- Licensed software including test tools, VPN, and software maintenance;
- Legal copies of anti-virus and anti-spyware software on all computers;
- Long distance telephone service;
- Office equipment not supplied by EOHHS, e.g., fax machine, additional printers, etc.;
- Offices and ancillary supplies;
- Physical storage facilities;
- Transportation to project-related meetings in Rhode Island; and
- Shredding of confidential documents.

For off-site PMO activities approved by EOHHS, the bidder must provide toll-free communications with EOHHS staff to conduct business operations.

Activity 3.3.1.3 PMO Status Reports and Other Deliverables

The PMO bidder will provide EOHHS with a monthly status report, detailing significant activities of the previous month with a description of problems and estimated completion times, a summary of risks to not completing the tasks on time, and proposed solutions to mitigate risk to project quality and timeline. Please see Appendix D for PMO activities and deliverables.

The PMO vendor shall be responsible for materials preparation and keeping detailed meeting notes for periodic planning meetings. The vendor is expected to continuously evaluate/prioritize those project activities that most impact the project's desired outcomes and make recommendations to effect positive change.

All deliverables will be submitted to EOHHS electronically with an original non-PDF file(s) using the Microsoft Office 2003 suite of tools (Word, Excel, PowerPoint, etc. and Microsoft Project 2003 for project planning.) Deliverables and correspondence produced in the execution of this RFP must be clearly labeled with the project name, deliverable title, deliverable tracking

or reference number, version number and date. EOHHS must approve all deliverables for each activity, before the activity in question will be considered complete.

Deliverables are to be developed and maintained by the bidder in a web-accessible location provided by the vendor, in a form ready to be provided to EOHHS in the event of project or vendor termination. Deliverables will be prepared according to established project documentation standards.

Activity 3.3.1.4 PMO Task Duration

The PMO Office is required for the entire duration of the contract for Tasks 2 and 3 when applicable. The PMO office staffing and resources are expected to differ in accordance with the timeline and end date for each of these tasks.

3.3.2 Task 2: PMO Services for the MMIS Project

Activity 3.3.2.1 MMIS Project Management

The following provides a sense of the overall specific work scope for Task 2, Project Management of the MMIS Project. The State of Rhode Island has issued an RFP to: 1) procure a Fiscal Agent (FA) Contractor to take over the current Medicaid Management Information System (MMIS) and related systems; 2) operate and maintain all current functionality; 3) implement enhancements to current functionality; 4) modify the MMIS and related systems as requested by the State; and 5) at the end of the contract, turn the systems over to the State or its designated contractor. The MMIS is critical to the State's ongoing operations. The State is seeking a Contractor that will be able to transfer the operation and maintenance of MMIS without degrading the system's current level of performance and quality.

The State seeks a PMO vendor to assist EOHHS in its oversight of the above activities, up to and including the completion of the required enhancements and any necessary CMS certifications. The PMO vendor will be expected to support EOHHS in the following ways:

- The PMO function will provide necessary independent oversight of the MMIS transition project. Please see the “MMIS RFP: Request for Proposals for Transition, Enhancement, Operation, and Maintenance of the Medicaid Management Information System” document found in the Bidders Library.
- The PMO vendor will assist to assure compliance of current and future business and technological needs, with the RI Medicaid services moving to higher CMS MITA maturity model standards as expressed in Rhode Island's 2011 State Self-Assessment.
- The PMO vendor will ensure effective operation and performance through a transition of the existing MMIS operation.
- The PMO vendor will ensure effective operation and performance for the enhancements to be made to the existing MMIS system.

The bidder will perform all PMO responsibilities defined in this RFP throughout the term of the contract. The bidder is expected to actively participate in meetings and to contribute PMO expertise to all phases of the MMIS project. The PMO vendor will be responsible for

maintaining a consolidated Project Management plan and schedule for the MMIS transition project. The PMO will be responsible for maintaining a consolidated Project Management plan and schedule.

The PMO services will follow industry standard methodologies and approaches, and, at a minimum, will consist of the services described below. All bidders are urged to demonstrate added value in their proposals by recommending PMO services not addressed below.

Activity 3.3.2.2 PMO Services

The successful bidder will be responsible for providing requirements-based independent integration testing services covering all application systems under test including interfaces to other RI systems. These services will be derived from industry best practices and established project management principles, and will include the following:

- The PMO vendor shall use the RFP and contract as its guide in providing project management and technical control for the project.
- The PMO vendor shall provide a Project Manager and other key personnel as may be required by the PMO vendor to ensure an on time, on budget successful implementation of the transition and enhancement of the MMIS
- The PMO vendor must have the ability to prioritize the various PMO activities and provide extra focus on those activities leading to a successful project.
- The PMO vendor shall provide oversight of the Fiscal Agent's project plan and task assignments for the MMIS implementation.
- The PMO vendor shall provide project management support to the State in project administration, scope change control, issue management, and performance metrics for the deliverables identified in Appendix D.
- The PMO vendor shall provide system and business assessment/oversight.
- The PMO vendor shall participate in project strategy and direction as requested.
- Project Life Cycle. The PMO vendor shall provide and maintain the complete Project Life Cycle Methodology for the project.
- The PMO vendor shall establish and implement project management and technical processes, methodologies, and tools to minimize risk and contain costs for the MMIS transition, enhancement, and certification project.

Activity 3.3.2.3: MMIS PMO Schedule and Scope

The PMO vendor shall, within 60 days from the start date of the PMO contract, create a Roadmap for moving forward with a phased implementation of the MMIS project. The Roadmap will identify all project phases, as well as major deliverables within each phase, necessary to implement business requirements in the most efficient (time and schedule) manner, with no interruptions to current business services and minimal rework. The Roadmap will identify risks associated with the phased approach and contain risk mitigation strategies for each identified risk. The Roadmap will establish metrics to allow the State to measure progress throughout the

life of the project.

The Vendor's Specific Deliverables related to this task will include:

- The PMO vendor shall prepare a final work plan for the project. The PMO vendor shall support the State and the State's Fiscal Agent in meeting the deliverables established in the final PMO work plan.
- The PMO vendor shall be responsible for creating and maintaining detailed project plans and schedules that support project scope, costs, milestones, and deliverables.
- The PMO vendor shall track project progress against the plan, do bi-weekly status reports, and perform project evaluations. The PMO vendor shall be responsible for materials preparation and keeping detailed meeting notes for periodic planning meetings.
- The PMO vendor shall provide assistance to the State in the form of independent oversight, monitoring, and reporting on activities and metrics critical for on-time delivery of quality technology services to meet needs of the State.
- The PMO vendor shall be responsible for performing schedule, scope and technical control tasks over all aspects of the project.
- The PMO vendor shall perform technical assessments to identify vendor solutions to hardware and software system problems.
- The PMO vendor shall review all MMIS Transition & Enhancement RFP business requirements to validate that the requirements conform to all needed standards and meet the business needs of Medicaid.
- The PMO vendor shall provide Technical Assistance to state staff to transition to the project oversight and maintenance role at the completion of Task 2.

Specific PMO activities and deliverables are provided in Appendix D of this RFP

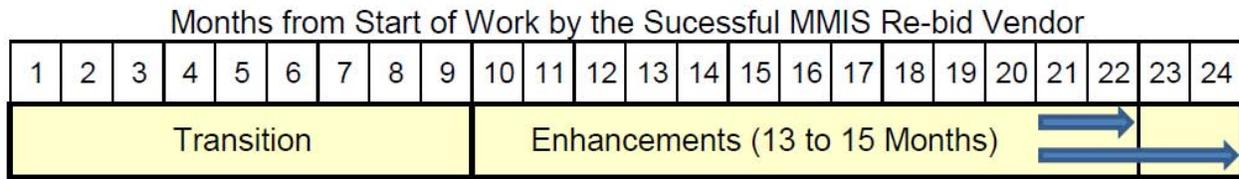
Activity 3.3.2.4: PMO Services for MMIS Project – Duration

Services shall commence upon completion of the award, contract, and the issuance of a state Purchase Order. Activities in Task 2 could take a minimum of 15 months to a maximum of 24 months, depending on the successful bidder and their transition plan. The minimum would occur if the incumbent FA were to win and take 15 months to do the enhancements. The maximum of 24 months would occur under two conditions:

1. A new FA vendor wins and takes 9 months to do the transition and 15 months to do the enhancements = 24 months.
2. The present FA vendor wins and uses the 9 month transition to relocate the Data Center, then takes 15 months to do the enhancements = 24 months.

Please see the below exhibit for a visual representation of the two separate potential timelines. Regardless of the successful bidder, any MMIS Re-bid vendor, including the incumbent, has the option of moving the MMIS hosting location to another Data Center. Data Center relocation would require some degree of transition time. Vendors should submit a cost proposal reflecting a 15 month time horizon and a 24 month horizon as reflected in Cost Proposal Attachment C.

Exhibit 1. MMIS Re-Bid Workplan



Note: the above timeline also applies to the IV&V vendor

The State anticipates CMS will need to certify the enhancements to the MMIS. For more information on the enhancements, please see the MMIS RFP referenced in the Bidders Library listed in Appendix A.

Certification of the core MMIS will depend on whether or not the incumbent is the successful bidder. The State anticipates the certification will occur as close as possible to the production go-live deployment time, but PMO work after the go-live production date may be necessary.

3.3.3 Task 3: Provide PMO Services for EOHHS/Medicaid Portions of HIX/IES Project

The HIX/IES technology program will be shared by three state entities. The “IES” portion of this new technology program will conduct Medicaid and other program eligibility determinations for Medicaid, the Health Insurance Exchange, and eventually for other human service programs. The “HIX” portion of the technology program will support other business functions primarily for RI’s Health Insurance Exchange. This RFP is requesting project management services to support EOHHS in its oversight of the development and implementation of the Medicaid business components of this integrated technology program.

The PMO will not be responsible for the project management of the combined EOHHS and Exchange/OHIC project, but will be responsible for supporting EOHHS in its role. The PMO vendor will be expected to collaborate with the Exchange team, for activities where EOHHS has the primary responsibility and those activities where EOHHS has the secondary responsibility. Thus the EOHHS PMO will work collaboratively with other vendors participating in the HIX/IES technology project.

Activity 3.3.3.1 PMO functions for EOHHS components of the HIX/IES

The bidder will perform all PMO responsibilities defined in this RFP throughout the term of the contract. The bidder is expected to actively participate in meetings and to contribute PMO expertise to all phases of the eligibility systems project. The PMO vendor will be responsible for maintaining a consolidated Project Management plan and schedule for the EOHHS components of the HIX/IES project. The PMO will also be responsible for maintaining a consolidated EOHHS Project Management plan and schedule that incorporates, the tasks and activities of: the PMO contractor, the Implementation Vendor, the incorporation of Innovator state reusable

components if applicable (depending on the state's decision), IV&V activities for this Task, and EOHHS/Medicaid staff functions. Once the project is underway, all planning organizations/personnel will meet to settle on the optimum ways to coordinate project plans across the complex implementation project.

At the beginning of the contract, the EOHHS Project Management Plan will be aligned by EOHHS with the Project Management Plan for the Exchange staff, and the Exchange vendors. EOHHS will depend on its PMO vendor to provide assistance to align the overall Project Management Plan.

Activity 3.3.3.2 Coordination with Implementation Vendor on detailed Medicaid business functions for the HIX/IES Project

Joint Projects that are primarily focused on EOHHS-specific functionality will be assigned to EOHHS as the primary lead agency, and will be managed by the EOHHS and with assistance from the PMO vendor selected under this RFP. For these projects, the Exchange will be the secondary agency. The Implementation Vendor selected will be responsible for working in close partnership with EOHHS staff and vendors; Exchange staff and vendors.

This intent to leverage interagency strengths and capacities is referenced throughout this RFP. It is critical to the success of this Task that the Project Managers and the PMO vendors will work together across Departments in a collaborative and mutually supportive manner. Demonstration of this commitment to partnership will be a key factor in review of responses to this bid.

In accordance with federal law and the ACA, there are four primary deadlines:

- October, 2012: Federal law requires states to “prove exchange readiness” by January, 2013, and recent guidance encourages states to prove readiness by October, 2012. Because Rhode Island has decided that the Exchange and Medicaid MAGI eligibility will have one single eligibility system, this will include a readiness review of this combined eligibility system as well as other Exchange-specific business functions.
- October 1, 2013: Rhode Island must have an operational exchange in place, ready to accept enrollees. Rhode Island's single MAGI eligibility system must be functioning by this date for exchange and Medicaid Magi-eligible groups. The date marks the end of Phase 1.
- December 31, 2014: Exchange establishment funds must be spent by December, 2014, after which the Exchange must be completely self-sustaining. Any configurations to the system for Exchange-specific functionality must be completed by this date.
- December 31, 2015: Medicaid CMS funding for eligibility system infrastructure development supported by the 90-10 federal match must be spent by December, 2015. Any configurations to the system for Medicaid-specific functionality, including non-MAGI eligibility, must be completed by this date. The date marks the end of Phase 2.

By the beginning of the contract resulting from this RFP, the state expects to have a document delineating the Projects within the HIX/IES designated as Joint Projects vs. Separate projects, and primary and secondary agency designation for each Joint Project. However, so bidders can estimate resource requirements, an early list of Joint vs. Secondary Projects is provided in

Appendix G, along with the current draft assignments of primary and secondary responsibility for each joint project. There may be changes to this list as the agencies continue to work to finalize the decisions.

Activity 3.3.3.3 Refine strategy for leveraging components from Early Innovator States

CMS is providing the funding for the HIX/IES Project through the Exchange Establishment II Cooperative Agreement, and a Medicaid IAPD. CMS has directed Rhode Island to actively pursue opportunities to reuse technology components required under the ACA that have been developed by states with Innovator Grants. The PMO vendor under contract as a result of this RFP will be expected to assist in the evaluation of such opportunities, and advise the state, in collaboration with the Exchange PMO vendor and the Implementation Vendor.

Rhode Island is committed to leveraging as much as technically and practically possible from Innovator grant projects, such as the New England (NESCIES) collaboration, of which RI is a member. To do so, Rhode Island may request the vendor to represent Medicaid/EOHHS by participating in a collaborative detailed design process with NESCIES to ensure common components will work for Rhode Island. The vendor will be responsible for communicating Medicaid's design needs to inform the NESCIES collaboration or other innovator states, identify options as well as risks and benefits of key components that Medicaid can potentially leverage or reuse, and define the plan by which these components could functionally and technically be integrated into the HIX/IES.

With the assistance of the PMO vendor, EOHHS will need to develop and refine cost estimates for leveraging Medicaid/EOHHS-related innovator components and quantify the difference in cost for development and operations of this collaboration as compared to Rhode Island developing and implementing an independent solution to the particular component. The PMO vendor will assist in the presentation of risks, benefits, cost differences, and time estimates for potentially reusable components. With the Implementation Vendor, the PMO vendor will assist in the integration of the state's decision on reuse of Medicaid-related components into the Project design.

Activity 3.3.3.4 Change Management

The vendor is expected to work in partnership with EOHHS and Exchange staff and contractors, to develop a coordinated process to help transition existing EOHHS functions that will be supported by the new HIX/IES infrastructure from current practices to new procedures and practices needed to make appropriate use of the HIX/IES in conducting Medicaid business functions. This may include changes to state functions including Medicaid staff and consultant functions, and DHS field staff functions. Such systems and processes are expected to have the greatest impact on client and field staff systems and procedures for application, eligibility determination, verification, and notices.

Participation in the Department of Human Services' Ford Foundation Grant effort will also be required under this task.

Activity 3.3.3.5 Define Reporting Requirements

The PMO vendor will assist the State in the development of reporting requirements to comply with federal and state requirements as well as ongoing program management needs for the Medicaid components of HIX/IES. The PMO vendor will conduct an environmental scan of current needs and requirements in areas where the new system will replace or enhance existing Medicaid-related functions (e.g. reports on applications, use of electronic verifications, eligibility decisions, PERM reports if needed, fraud and abuse monitoring, RIte Share reports, Premium billing requirements, interagency agreement requirements, state legislative reports, federal reports, etc.) Additional reports will provide information to monitor the impact of changes in applications and eligibility on Medicaid costs. The PMO vendor will develop a plan and procedure (including specific report structures, formats, and templates; routine data extract needs; and frequency) for reporting requirements for the Implementation Vendor to perform, and will incorporate such into the HIX/IES business design document. The PMO vendor will also provide a template for a frequent, high-level internal “dashboard” report to include all Medicaid/EOHHS areas of the HIX/IES, for internal Medicaid program management purposes. The vendor will provide technical assistance as needed to the Implementation Vendor in the definition and creation of reports.

Activity 3.3.3.6 HIX/IES Financial Sustainability Analysis and Plan

The Exchange and OHIC team have the primary responsibility to develop a plan for financial sustainability of the HIX/IES. The PMO vendor will provide analytical assistance for the Medicaid portion of a plan for financial sustainability, including assistance with ongoing cost projections and appropriate assignment of financial responsibility for ongoing funding by the various interagency funding sources. The PMO vendor will assist in the formulation of reports to determine and monitor program-specific use of the HIX/IES system that will inform and provide documentation for cost allocation for the HIX/IES. The PMO vendor will work with state staff to translate these models into Medicaid/EOHHS budget projections on the impact of the associated Medicaid expansion and enrollment on Medicaid costs.

Activity 3.3.3.7 PMO Deadlines

Implementation of Phase 1 of the Exchange/Medicaid eligibility system functionality must be complete by October 1, 2013. Implementation of other Exchange functionality must be complete between Oct 1, 2013 and January 1, 2014. Additional Exchange-specific business needs configurations must be completed by December 31, 2014. Any configurations to the HIX/IES system for Medicaid-specific functionality, including MAGI and non-MAGI eligibility must be completed by December 31, 2015, and it is expected that project management for this Task will be completed by this date.

Activity 3.3.3.8 Technical Assistance

The project management services will include technical assistance to help the State deal with unexpected implementation complexities and federally induced changes expected through the life of the project. Examples of potential work include the following. The State may request the vendor to provide business analysis services in line with the intent of this RFP, The State may request the vendor to research federal regulations that have bearing on the intent of this RFP. The State may request the vendor to compare Rhode Island’s project approaches with those of other states, in line with the intent of this RFP.

3.3.4 Task 4: IV&V Services for MMIS and HIX/IES Project

The state is seeking an IV&V (Independent Verification and Validation) vendor to oversee Medicaid fiscal agent implementation work to be awarded to a vendor through the state's RFP process. IV&V is critical to ensuring successful transition and enhancement of the MMIS.

Validation is concerned with checking to ensure the software meets the user's business needs, and Verification is concerned with checking to ensure the system is well engineered. The word "Independent" indicates the IV&V vendor is not under the control of the Implementation Vendor. Thus the IV&V services must be provided, managed and financed by a vendor organization that is technically, managerially and financially independent of the Implementation Vendor(s). Furthermore, the IV&V team must have totally separate personnel from the teams under this contract doing work under Tasks 1, 2 and 3:

- The IV&V effort must be vested in an organization separate from the implementation system development vendors.
- The IV&V team cannot use personnel who are involved in the Program Management/development effort described in Tasks 1, 2, and 3.
- The IV&V must be able to submit to State and Federal management, the IV&V results and findings without any restrictions (e.g. without any prior review or approval from the Implementation Vendor or Project Management/development team under this contract).
- The IV&V budget must be controlled by the IV&V team, separate from the PMO team.

IV&V services will provide an early warning of technical risks and deviations from requirements, which will allow the project team to take the necessary corrective actions. IV&V services will also provide management with continuous, comprehensive visibility into the quality and progress of the development, and provides decision criteria for whether or not to proceed to the next development phase.

Please see Appendices E for Verification and Appendix F for Validation for additional information on the IV&V activities and deliverables.

The purpose of IV&V services includes the following but is not limited to:

- Assure compliance of current and future business and technological needs, with the RI Medicaid services moving to higher CMS MITA maturity model standards as expressed in Rhode Island's 2011 State Self-Assessment cited in the Appendix A Bidders Library,
- Ensure effective operation and performance through a transition of the existing MMIS operation
- Ensure effective operation and performance for enhancements to be made to the existing MMIS system. The IV&V Contractor will be tasked with tracking the Fiscal Agent's adherence to the Seven Conditions and Standards contained in CMS Medicaid IT Supplement (MITS-11-01-v1.0) released in April 2011 as it completes the Enhancement activities.

In general, these validation services will include:

- Review of the current business environment, policies, processes and procedures, including workflow and forms;
- Development of a User Acceptance Test (UAT) validation strategy to define and support the validation efforts;
- Directing the development and execution of UAT test artifacts by business personnel;
- Support for the development and implementation of training in the use of the new system, as well as attendant policies, processes and procedures;
- Support the continued CMS certification for the systems by ensuring that critical pieces of information and documentation are gathered and consolidated for CMS Certification; and
- Administrative activities and tasks in support of the validation effort.

IV&V services will include the HIX/IES project for the EOHHS components of the HIX/IES development and implementation. These services will include:

- Assure compliance of current and future business and technological needs, with the HIX/IES joint components being able to accommodate both EOHHS and Exchange functionality, and the IES components be able to accommodate future eligibility determination for non-Medicaid human service programs (please see Phase 3 described in the Background section of this RFP, and Appendix G for HIX/IES EOHHS responsibilities, and relevant documents in the Bidders Library.)
- Assure that recommendations, decision, and implementation of any Innovator-state eligibility-related component to the HIX/IES have the flexibility to be able to be configured to accommodate future eligibility determination for non-MAGI Medicaid and non-Medicaid human service programs

EOHHS will provide space for one IV&V project manager to be co-located with state and other contractor staff. The IV&V office space will be equipped with cubicles, chairs, desks, telephones, power and Internet. However, the bidder is required to supply all other materials to be used by their staff, including but not limited to:

- Computer hardware, software, and other such technology required to complete the work of the contract
- Licensed software including test tools, VPN, and software maintenance;
- Legal copies of anti-virus and anti-spyware software on all computers;
- Long distance telephone service;
- Office equipment not supplied by EOHHS, e.g., fax machine, additional printers, etc.;
- Offices and ancillary supplies;
- Physical storage facilities;

- Transportation to project-related meetings in Rhode Island; and
- Shredding of confidential documents.

For off-site IV&V activities approved by EOHHS, the bidder must provide toll-free communications with EOHHS staff to conduct business operations.

If the EOHHS IV&V Bidder and PMO contractor are from different organizations, the EOHHS IV&V Bidder must fully cooperate with the EOHHS PMO vendor throughout the life of the project and will participate as required in reviews resulting from the work of the IV&V vendor. .

Activity 3.3.4.1 – Quality Assurance/Oversight and Monitoring of IT Infrastructure development and implementation

The vendor shall provide quality assurance monitoring and contractor oversight for the systems build and implementation,.

3.3.6 Task 5: Optional Tasks

Task 5 requires the vendor to provide the State with additional services, as needed. Optional Tasks are an option and may or may not be exercised, depending on currently undefined HIX/IES needs that may arise during Phases 1 and 2. The total dollar amount of optional tasks will not exceed 10% of the total contract costs for the PMO section of this RFP. Additional work will utilize the hourly rate(s) specified in the Cost Proposal.

Additional services may include the following elements of work:

1. Additional Project Management/Technical Assistance Services

In the future, the State may need project management services that the State is not able to currently define but is related to the scope of work defined in this RFP. It is critical that the state has the flexibility to bring on additional assistance and expertise in a timely manner to respond to changing federal and state requirements and needs for related activities. These activities may include for example, the need for project management assistance in the planning, development, and implementation of components to the HIX/IES to support additional EOHHS programs, initiatives, business methods, and analyses in response to changes in federal law and regulation, state legislation, and best practice advances in human service technology systems.

Other examples of anticipated work include researching the impact of federal CMS regulations and policies as they pertain to the HIX/IES project or Medicaid; researching and reporting techniques utilized by other states to accomplish objectives related to changes in MMIS or eligibility systems; analyzing HIX/IES legal or contract documents to determine the best text composition approach to meet EOHHS business needs.

The examples cited are not meant to be an exhaustive list, but to give a vendor an idea of additional related work that may be contemplated. In addition to the activities described above, the State reserves the option to direct the vendor to conduct additional but similar task(s) to support EOHHS. The Vendor must be able to demonstrate the capacity, capability, flexibility and responsiveness in response to the State’s need for technical assistance resources to perform

additional tasks. It is the State's intent to utilize these additional resources/enhanced activities as needed in response to the State's changing needs and requirements and as funding allows.

The decision to utilize contract services under Task 5 will be at the State's sole option through a request for specific enhancement activities, not already included under Tasks 1-4, to be defined and agreed to in writing, by both EOHHS and the vendor, before the enhancement work begins. There is no commitment on the part of the State to specifically utilize any or all of the optional tasks/enhancement activities

This task will be bid and paid on a fully loaded time and materials basis, using the rates supplied beforehand by the vendors in their response to this RFP.

2. Additional IV&V Services

With the workscope of the HIX/IES expected to be dynamic, there may arise a need for additional unforeseen IV&V work to be undertaken during the project to address new federal requirements and additional components to the HIX/IES that satisfy the State's needs for phase 2 and/or Phase 3. The total dollar amount of optional tasks will not exceed 10% of the total contract costs for the IV&V Services section of this RFP. Additional work will utilize the hourly rate(s) specified in the Cost Proposal.

Section 4 –Contractor Requirements

4.1 PMO and IV&V Contractor Qualifications

The Vendor selected as a result of this RFP will be required to have the following minimum credentials, as applicable:

- Successful track record at managing complex multi-process projects with eight years of PMO and/or IV&V experience.
- Significant knowledge of and experience with the health information technology components required to support state human service program eligibility systems and Medicaid management information systems.
- Understanding of federal requirements for business, systems, and federal funding for Medicaid MMIS/MITA, Medicaid MAGI eligibility changes under the ACA, and Medicaid eligibility across all Medicaid populations.
- General knowledge of federal requirements for business, systems, and federal funding for state health insurance exchanges.
- Successful experience in publicly funded health insurance program coordination and integration among state agencies.

The selected Vendor will demonstrate sufficient experience and capacity necessary to successfully complete all tasks.

4.2 PMO Staffing Requirements

Bidders must provide staffing levels sufficient to ensure effective quality assurance processes and monitoring activities. The proposed individuals should possess the requisite skills and certifications for the roles they are filling. At a minimum, all individuals proposed must:

- Be knowledgeable in system requirements definition and analysis, system design, project management, and performance measurement; and
- Provide staffing resources with experience in large-scale government system implementation.

The team should be comprised of individuals with the following skill sets:

- PMO Services
- Extensive experience in procurement, installation, evaluation, operations and maintenance of Medicaid systems, human service eligibility systems, or similar large health care claims processing system;
- Broad experience with technical writing;
- Specific experience in healthcare related concepts, configuration and management; and
- Experience with the CMS certification process.

Vendors must identify the personnel who will be assigned to this project and state their duties

and responsibilities. Vendors must propose at a minimum the following personnel. A vendor may propose qualified personnel who have the capability to fill multiple roles. The vendor must provide logic to justify the proposed personnel usage.

- Project Director/Manager - the primary vendor contact for the State on this Contract. Requirements:
 - Must be employed by the respondent when the proposal is submitted, or committed to join the respondent's organization by the beginning of the contract start date. If the intended employee is not an employee, a letter of commitment to join the organization must be submitted with the respondent's proposal.
 - Must be on-site in the EOHHS facility in Cranston, Rhode Island for a preponderance of EOHHS business working days.
 - Must have documented experience in successfully managing MMIS and Human Service Eligibility System implementation projects (full project lifecycle) whose budget was greater than \$5,000,000 (excluding hardware/software costs) and whose timeline was greater than 2 years.
 - Must have a proven record of delivering projects on time and within budget.
 - Must have a minimum of 5 years' experience creating and executing MMIS and Human Service Eligibility System project implementation plans.
 - Must have a minimum 5 years recent experience managing MMIS and Human Service Eligibility System implementation projects in a government environment
 - Should have documented experience in client server and web application environments.
 - Must have a thorough understanding of systems development and technology working within UNIX and Windows operating systems, Oracle databases, and a wide range of web development technologies such as J2EE, Web Services, and XML.
 - Prefer experience in managing a project in a multi-vendor environment.
 - Must have a minimum 5 years' PMO-related experience creating and managing comprehensive project plans utilizing project management flows and tools.
 - Must have a minimum 5 years' experience performing scope management for projects including a disciplined change control process.
 - Must have excellent verbal and written communication skills.
 - Must be able to communicate effectively with clients and technical staff in English.
 - Must have at least a Bachelor's degree preferably in Information Technology, Engineering or a business or related field. Relevant MMIS and Human Service Eligibility System project management experience may be considered in lieu of degree.
 - Should possess Project Management Professional (PMP) or equivalent certification.
- Systems Analyst(s) – Requires a technologist familiar with hardware, network infrastructure, legacy systems, and software with a minimum of eight (8) years' experience in large-scale government system implementations and at least three (3) years' experience in another area specific to the contract tasks, such as QA/IV&V,

Project Management, MMIS, or Human Service Eligibility Systems, for a total of six (6) years' experience overall.

- Senior Business Analyst(s) – A minimum of three (3) years' experience in large-scale government system implementations and at least three (3) years' experience in another area specific to the contract tasks, such as QA/IV&V, Project Management, MMIS, or Human Service Eligibility Systems, for a total of six (6) years' experience overall. Experience in dealing with CMS CMCS and CCHIO is vital.
- Other Personnel Assignments - Vendors must disclose other projects to which the personnel are assigned and indicate the time allocated for each project. It is the State's intent that the named individuals be available for the duration of this project.

4.3 IV&V Staffing Requirements

Vendors must propose at a minimum the following personnel. A vendor may propose qualified personnel who have the capability to fill multiple roles. The vendor must provide logic to justify their proposed personnel usage.

- IV&V QA Project Manager
 - A minimum of five (5) years' experience in large-scale government system implementations and at least five (5) years' experience in QA/IV&V for a total of ten (10) years' experience overall.
 - Must be on-site in the EOHHS facility in Cranston, Rhode Island for a preponderance of EOHHS business working days.
 - Vendors must propose an IV&V QA Project Manager who will be available for the duration of the project. This individual will be the primary contact for the State for the IV&V Task.
 - Must have a minimum 5 years' experience creating Quality Assurance processes and plans directly related to MMIS and Human Service Eligibility System project implementation.
 - Must have a minimum 5 years' experience performing scope management for projects including a disciplined change control process.
 - Must have a minimum 5 years' experience creating Quality Assurance processes and plans directly related to MMIS and Human Service Eligibility System project implementation.
 - Must have excellent verbal and written communication skills.
 - Must be able to communicate effectively with clients and technical staff in English.
 - Must have a Bachelor's degree preferably in Information Technology, Engineering or a business or related field. Relevant MMIS and Human Service Eligibility System project management experience may be considered in lieu of degree.
 - Should possess Project Management Professional (PMP) or equivalent certification.

- **Senior Analyst(s)** – A minimum of three (3) years’ experience in large-scale government system implementations and at least three (3) years’ experience in QA/IV&V for a total of six (6) years’ experience overall.

The IV&V team should be comprised of individuals who have the following skill sets:

4.3.1 Verification Services

- Significant experience with industry-standard and best practices regarding quality, quality assurance and quality control principles and techniques;
- Expertise with automated test tools and their most effective use within large-scale development, package-acquisition, and integration projects;
- Appropriate experience with the specified relational database, mainframe, client/server, call center, data capture and web portal technologies in use on this project; and
- Experience in healthcare related concepts, configuration and management, with Medicaid experience a plus.

4.3.2 Validation Services

- Extensive experience in providing IV&V user services, preferably in the Medicaid or healthcare industry;
- Specific experience in supporting and directing User Acceptance Test (UAT) efforts;
- Proficiency in integrating Training activities within a broader view of the validation effort;
- Expertise in high volume health claims processing and related business functions;
- Extensive experience in procurement, installation, evaluation, operations and maintenance of Medicaid, similar large health care claims processing, or large-scale insurance-based systems;
- Broad experience with technical writing;
- Specific experience in healthcare related concepts, configuration and management; and
- Experience with the CMS certification process.

4.4 PMO & IV&V Vendor Responsibilities

4.4.1 Conditions Governing Subcontracting

If the Vendor intends to use any subcontractors, the Vendor must clearly identify the subcontractor in the response to the RFP and provide documentation of their skill sets and applicable experience. The Vendor retains responsibility for the completion and quality of any work assigned to subcontractors. The Vendor is expected to supervise the activities of subcontractors and employees in order to ensure quality.

4.4.2 Compliance with Statutory, Regulatory and Other Standards

The Vendor must comply with all applicable State and Federal regulations and statutes.

4.4.3 Confidentiality and Protection of Public Health Information and Related Data

Medicaid does not anticipate providing any protected health information to the successful vendor. However, in the event that protected health information or other confidential data must be shared by Medicaid or the Exchange with the vendor, the vendor shall be required to execute a Business Associate Agreement Data Use Agreement, among other requirements, shall require the successful vendor to comply with 45 C.F.R 164.502(e), 164.504(e), 164.410, governing Protected Health Information (“PHI”) and Business Associates under the Health Insurance Portability and Accountability Act of 1996 (P.L. 104-191), 42 U.S.C. Section 1320d, et seq., and regulations promulgated thereunder, and as amended from time to time, the Health Information Technology for Economic and Clinical Health Act (HITECH) and its implementing regulations, and regulations promulgated thereunder, and as amended from time to time, and the Rhode Island Confidentiality of Health Care Information Act, R.I. General Laws, Section 5-37.3 et seq. The successful Vendor shall be required to ensure, in writing, that any agent, including a subcontractor to whom it provides Protected Health Information received from or created or received by and/or through this contract, agrees to the same restrictions and conditions that apply through the above-described Agreements with respect to such information. Any information provided by Medicaid or EOHHS to the Vendor for the completion of the projects may not be sold, given or otherwise shared with outside parties.

4.4.4 Computers

Computer hardware, software, and other such technology required to complete the work of the contract are the sole responsibility of the Vendor.

4.4.5 Data and Reports

Data, information, and reports collected or prepared by the Vendor as well as equipment purchased by the Vendor in the course of performing its duties and obligations and paid by the State under this contract shall be deemed to be owned by the State of Rhode Island. This provision is made in consideration of the Vendor’s use of public funds in collecting and preparing such data, information, and reports, and in purchasing equipment.

4.4.6 Office Space and Equipment

Office space and equipment required to complete the work of the contract are the sole responsibility of the Vendor, with the exception of the proposed on-site staff discussed in Sections 4.2 and 4.3.

4.4.7 Travel

All travel costs for Vendor staff, including in-state and out-of-state travel necessary to carry out the tasks within the contract, shall be included in the fully loaded price point.

4.5 Contract

4.5.1 Single Award

One contract will be awarded for the work if the winning vendor covers both the PMO and IV&V. If separate vendors are selected for PMO and IV&V services, two contracts will be awarded by EOHHS.

4.5.2 Duration

Services under the contract are subject to approval of the State's Chief Purchasing Officer and his or her designee. Services shall commence upon completion of the award, contract, and the issuance of a state Purchase Order, and will run through December 31, 2015. The contract shall include the possibility of three one-year extensions, to be exercised at the option of the State.

4.5.3 Final Contract Terms

It is the intent of EOHHS to purchase all activities outlined in this RFP. Additional specific activities will be determined, based on the need and available funds, at the time of contract establishment.

4.5.4 Payment

The bidder will be paid through a payment schedule based on the nature of the work per the following two categories.

4.5.4.1 - One-Time deliverables

One-Time deliverables are those deliverables requiring little or no additional ongoing work for completion, other than routine maintenance to ensure conformance with the project's status and direction. Such "one-time" deliverables such as the Roadmap, the overall project plan, etc.

4.5.4.2 - Ongoing Deliverables

Ongoing Deliverables are those that will be developed throughout the project on an ongoing basis, such as status reports; issues, defects, etc. The vendor may bill for these deliverables according to the schedule for the delivery of such deliverables agreed upon between the vendor and EOHHS.

4.5.4.3 - Deliverables

The vendor will submit completed deliverables to the EOHHS Project Manager for review. In all cases, the EOHHS Project Manager will determine successful completion of a deliverable when the deliverables have been received, reviewed and approved by EOHHS. Should the deliverable not be accepted, the EOHHS Project Manager will return the deliverable to the vendor, along with a written notification of the issues pertaining to the deliverable. The vendor will then be required to address the issues to the satisfaction of the EOHHS Project Manager and re-submit the deliverable for review. Any such rework will not be billable to EOHHS.

The bidder shall propose a deliverable schedule and dollar amount in their response to the RFP. Due to the variability of the MMIS project duration ranging from 18 to 24 months (Task 2) and up to 3 years 9 months (Task 3), the final timing and organization of One-Time deliverables will be worked out with the successful bidder during contract negotiations. Subject to approval by the State, the vendor may propose bundling the individual One-Time deliverables into a fewer number of "milestone" deliverables. Ongoing activities will be paid after EOHHS' review and upon the submission of a monthly status report approved by EOHHS.

4.5.4.4 - Payments

The bidder must submit the final invoice for payment to EOHHS no more than 45 days after acceptance of the final deliverable by EOHHS. If the bidder fails to do so, all right to payment is

forfeited, and EOHHS will not honor any request submitted after aforesaid time period. Any payment due under the terms of the contract resulting from this RFP may be withheld until all applicable deliverables and invoices have been accepted and approved by EOHHS.

There will be no additional payments made to the bidder for incidental expenses such as software, office supplies, or travel expenses related to the completion of the deliverables of this contract.

Section 5 – Proposal Submission

5.1 The Required Proposal

The Division shall be the primary point of contact for all vendors from the date of release of the RFP until the contract is fully executed and signed. Any attempt by a vendor to contact any State employees regarding this procurement, other than those named above, may cause rejection of the proposal submitted by the vendor.

Questions concerning this Request for Proposals may be emailed to the Division of Purchases at rfp.questions@purchasing.ri.gov no later than the date and time specified on RFP page 1. Questions should be submitted in a Microsoft Word attachment. Please reference the RFP number on all correspondence. Questions received, if any, will be posted on the Division’s website as an addendum to this RFP. It is the responsibility of all interested parties to download this information. For computer technical assistance, call the Help Desk at (401) 574-8100.

Vendors should recognize that the only official answers to any questions are those made in writing and issued by the Division of Purchases to prospective vendors.

Interested vendors may submit proposals to provide the services covered by this Request on or before the date and time specified on RFP page 1. Proposals received after this time and date will not be considered.

Responses (one original plus 8 copies) and two electronic copies on CDs or flash drives should be mailed or hand-delivered in a sealed envelope marked **“RFP #7449412: “EOHHS PMO and IV&V Services for MMIS System Transition and Health Information Exchange/Eligibility System Implementation”** to:

Rhode Island Department of Administration
Division of Purchases, 2nd Floor
One Capitol Hill
Providence, RI 02908-5855

NOTE: Proposals received after the above-referenced due date and time will not be considered. Proposals misdirected to other State locations or which are otherwise not presented in the Division of Purchases by the scheduled due date and time will be determined to be late and will not be considered. Proposals faxed, or emailed to the Division of Purchases will not be considered. The official time clock is located in the reception area of the Division of Purchases.

Proposals should include the following:

- In the proposal, the bidder is expected to describe the actions necessary to produce the deliverables. In addition, the bidder should use examples to describe the format and content of the deliverables.
- EOHHS expects the Bidder to present a clear understanding of the methods and tools

used to ensure that its resources are managed to complete required tasks and deliverables. The Bidder's proposal must describe its Project Management process in sufficient detail to provide the EOHHS with an understanding of its approach.

- For Tasks 1 – 4 described in this RFP, bidders are asked to provide a proposed plan of specific PMO and IV&V activities, timeline, and resources to accomplish the proposed Tasks.
- The proposals should include an analysis of each of the four tasks, and for each, a specific proposed plan of work, milestones, and resources proposed.
 - The plan should consider the current status of RI's work to date (described in the links/documents included in the Bidders Library).
 - The plan should also consider, for each task, major changes in the state's business processes, staffing and contracts that will be necessary as a result of the design and implementation of the new technology projects.
 - The plan should identify a proposed schedule of key milestones and deliverables that the vendor will work with the state to develop and implement, as well as a proposed set of key project deliverables and timeline for such that the vendor will prepare and deliver to the state.

Proposals must include:

- A signed and completed three-page RIVIP Vendor Certification Form with a letter of transmittal signed by an owner, officer or authorized agent of the firm or organization, acknowledging and accepting the terms and conditions of this Request, and tendering an offer to the Executive Office of Health and Human Services. The signature of the official with legal authority to bind an organization into a contractual agreement should also be included. This form is downloadable at <http://www.purchasing.ri.gov>.
- A Technical Proposal describing the Vendor's relevant experience and expertise, subcontracts, and experience with similar programs, as well as the workplan or approach proposed, including completion of **Appendix B**. The technical proposal should include preliminary project timeline, including a description of the schedule, tasks, deliverables, and milestones of the work associated with this contract. The technical proposal shall be limited to 30 pages using a Times New Roman font not smaller than 12 point not including attachments. Please submit all paper copies of the technical proposal double-sided.
- A separate Cost Proposal reflecting the hourly rates and other fee structures proposed for this scope of services, including completion of **Appendix C**. The cost proposal shall be limited to 10 pages using a Times New Roman font not smaller than 12 point not including attachments. Please submit all paper copies of the cost proposal double-sided.
- The Technical Proposal and Cost Proposal shall be separately sealed and clearly marked. There shall be no reference to price(s) in the Technical Proposal
- In addition to the original and 8 hard copies of the proposals required, vendors are requested to provide their proposal in electronic format (CD ROM, Flash Drive). Microsoft Word, Excel, or PDF format is preferable. Two electronic copies are requested. The CDs or flash drives shall be included in the proposal marked "original"

and clearly labeled with vendor information.

5.2 Technical Proposal

The sum total of pages in the Technical Proposal shall not exceed 30 pages, with the exception of resumes and project plans. The technical proposal submission should contain the following sections below(5.2.1 thru 5.2.4) clearly delineated and labeled by section(i.e. 5.2.1 Executive Summary) in a 3 ring binder or similar bound document. Submissions not following this format may be excluded from evaluation. The Technical Proposal must contain the following sections:

5.2.1 Executive Summary

The Executive Summary is intended to highlight the contents of the Technical Proposal and to provide the State evaluators with a broad understanding of the vendor's technical approach and ability. The executive summary should include the following:

- A clear and concise summary of the vendor's understanding of the project and the State's needs.
- A clear and concise summary of the proposed approach.
- A brief summary of the vendor's experience and ability to perform this project.
- A general description of the capabilities and role of any subcontractors.

5.2.2 Relevant Experience and Expertise

This section shall include the following information:

- **Qualifications:** Provide a summary within the technical proposal. In an attachment to the technical proposal (not included in the 30 page limit), please include resume(s) for the vendor and any subcontractors.
- **Relevant experience:** Describe experience with prior or current projects related to the scope of work in this RFP.
- A brief description of the vendor's financial position and solvency
- The vendor's status as a Minority Business Enterprise (MBE) certified by the Rhode Island Department of Economic Development, and or a subcontracting plan which addresses the State's goal of ten percent participation by MBE's in all State procurements. Further questions may be directed to the State's MBE officer at (401) 574-8253 or <http://www.mbe.ri.gov>.
- The vendor shall provide at least three (3) references for projects that are of comparable size and complexity for which the vendor served as the prime QA contractor, preferably within the last five (5) years. These references may be contacted to verify vendor's ability to perform the contract. The State reserves the right to use any information or additional references deemed necessary to establish the ability of the vendor to perform the conditions of the contract. Negative references may be grounds for proposal disqualification.

- For each reference, the vendor shall provide (referencing the subsections in sequence):
 - The agency or company name of the reference;
 - The location where the services were provided (city, state);
 - Primary and secondary contact name, title, telephone number, and e-mail address of the client reference;
 - A complete description of the project;
 - Description of the vendor's role in the project;
 - Beginning and end dates of the project;
 - Maximum number of vendor staff assigned to project at one time;
- If the vendor chooses to utilize subcontractors, references must also be provided for each subcontractor.
- Resumes and references for all proposed full-time and key staff should also be included.

5.2.3 Organizational Approach and Understanding of Work

This section shall describe:

- The vendor's understanding of the State's requirements, including the result(s) intended and desired the approach and/or methodology to be employed within the scope of work, and
- A work plan to accomplish each task, and the results proposed. The work plan description shall include a list of activities and/or milestones that will be employed to successfully administer the project. Within the 30 page limit, the vendor should include a high-level timeline/workplan for achieving key milestones associated with this. A detailed timeline/workplan may be included as an attachment that will NOT be included in the 30-page overall limit for the technical proposal.
- Project Organization Chart
 - Vendors must provide a project organization chart showing all personnel by name and classification who will be assigned to this task and their related responsibilities. If part-time staff is proposed, this chart should also show their percentage of work availability to the contract effort and the timing for when the resource would begin and end work on the project. This requirement is discussed in greater detail in the following section.
- Vendors must describe the extent to which subcontractors will be used to comply with contract requirements. If subcontractors are to be used, please submit qualifications of personnel who will be directly involved with the implementation and on-going support of the Contract. Resumes are required for all subcontractor personnel. The Vendor retains responsibility for the completion and quality of any work assigned to subcontractors. The vendor is expected to supervise the activities of subcontractors and employees in order to ensure quality.

5.2.4 Capacity to Accomplish Tasks

This section should include:

- **Level of Effort.** This section will indicate the amount of time the vendor anticipates dedicating to each task. Please list staff and subcontractors, indicating level of effort as well as duties and responsibilities in relation to the scope of work. Attachment A should be completed in support of this section.
- **Organization.** This section should include a description of how vendor staff or subcontractors will be organized and supervised. Please include an organizational chart.

5.3 Cost Proposal

The Cost Proposal should include:

- A completed cost proposal for the proposed services is required and must be submitted separately from the bidder and proposed solution. The cost proposal shall include the appropriate tables from Attachment B delineating cost for each Task and year on which the bidder is submitting a bid. The Bidder shall further supply an hourly rate for consulting services as described in Task 5.
- The bidder's cost proposal should also provide a preliminary staff plan for this project, based on staff level and role. The bidder must also identify the staff who will be assigned for on-site work in Cranston, RI.
- The cost proposal must identify costs for each project deliverable and will be inclusive of any related expenses.
- Due to the potential variability of the project duration ranging from 13 to 24 months, the PMO bidders shall supply prices separately for Task one and two as follows:
 - Minimum MMIS project duration of 13 months with CMS certification of the transition enhancements.
 - Maximum MMIS project duration of 24 months with CMS certification of the core MMIS system and the transition enhancements.

Section 6 – Evaluation and Award

6.1 Review Team -

The State will commission a review team to evaluate and score all proposals that are complete and minimally responsive using the criteria described below. The evaluation of any item may incorporate input from sources other than the vendor's response and supplementary materials submitted by the vendor. Those other sources could include assessments made by evaluators based on findings recorded from reference checks (including but not limited to those supplied by the Vendor), prior experience with or knowledge of Vendor's work, responses to follow-up questions posed by the State and/or oral presentations by the vendors if requested by the state. The State may elect to use any or all of these evaluation tools.

6.2 Evaluation Criteria

6.2.1 Executive Summary

The executive summary should summarize and highlight the contents of the vendor's proposal. It should be oriented towards non-technical personnel and contain as little technical language as possible. In short, the executive summary should offer a clear-eyed, concise description of the positive assets the vendor can bring to bear on the project.

6.2.2 Relevant Experience and Expertise

25 Points

The Vendor must have at least eight years of PMO/IV&V experience, with preferably at least five of which are specific to Medicaid / MMIS projects or Medicaid/Human Service Eligibility Projects. Evaluators will consider prior experience and expertise in the tasks described and the extent to which the vendor meets the minimum criteria defined in the RFP.

6.2.3 Organizational Approach and Understanding of Work

25 Points

The State will evaluate the vendor's written proposal describing how it intends to organize and accomplish the tasks and activities in the Scope of Work. The description shall discuss and justify the proposed approach and the technical issues that will or may be confronted at each stage of the project. The proposed work plan shall describe the phases, tasks, milestones, dates, and deliverables for the project. The State will score vendors highly who demonstrate a clear, complete understanding of each task and activity and who present an effective work plan for accomplishing them. Vendors are encouraged to offer innovative and informative responses showing initiative above and beyond the requirements stated in this document.

6.2.4 Vendor Staffing and Level of Effort

20 Points

The vendor must detail the proposed staffing. The State will highly score vendors who present a plan for resources and level of effort that, in the State's best judgment, would accomplish the tasks effectively and efficiently resulting in an excellent quality outcome.

Level of expertise, experience and qualifications of proposed positions, proposed key staff, and proposed subcontractors will be considered significantly. Evaluators will strongly consider recommendations from other clients utilizing the vendor for similar work to be performed under the contract. Negative feedback from other clients will be cause for significant point deductions.

Vendor or subcontractor status as an MBE will also be considered.

6.2.5 Cost

30 Points

The lowest costing vendor will automatically receive 30 points, with every additional vendor receiving cost points on a proportional basis compared to the lowest cost. The cost score is calculated based on the following formula: $((\text{lowest cost}/[\text{proposed cost of other vendor}]) \times \text{cost points available})$.

6.3 Advancing to the Cost Evaluation Stage

As part of the Technical Review Committee's work on Items 6.2.1 to and including 6.2.4, the State may conduct written or oral discussions with vendors and may make onsite visits to the vendor's location. To advance to the Cost Evaluation phase, a proposal must receive a minimum of 52 (75%) out of a maximum of 70 technical points. Any technical proposals scoring less than 52 points will not have the cost component either opened or evaluated and the proposal will be dropped from further consideration.

6.4 Award

- The review team will present written findings, including the results of all evaluations, to the State Purchasing Agent or designee, who will make the final selection for this solicitation. When a final decision has been made, a notice will be posted on the Rhode Island Division of Purchases web site.
- In order for the Cost Proposal to be reviewed, all technical proposals must meet a minimum technical evaluation score of 52 total points. Any technical proposals scoring less than 52 points will not have the cost component either opened or evaluated and the proposal will be dropped from further consideration.
- Because the evaluation takes into consideration both the technical and cost components in a value based approach, the lowest costing vendor may not necessarily be awarded the contract.
- Notwithstanding anything above, the State, and its agents reserve the right to either accept or reject any, or all, bids, proposals, award on cost alone, cancel the solicitation and to waive any technicality in order to act in the best interest's of the State and to conduct additional negotiations as necessary.
- Proposals found to be technically or substantially non-responsive, at any point in the evaluation process, will be rejected and not considered further. The State, at its sole option, may elect to require presentation(s) by offerors in consideration for the award. An award will not be made to a contractor who is neither qualified nor equipped to undertake and complete required work within a specified time.

6.5 Federal and State Approvals

Final contract approval is contingent upon Federal and State approvals. Every effort will be made by the State to facilitate rapid approval upon award.

Section 7 – Governing Terms and Conditions

The State's General Conditions of Purchase contain the specific contract terms, stipulations and affirmations to be utilized for the contract awarded to the RFP. The State's General Conditions of Purchases/General Terms and Conditions can be found at the following URL:

<https://www.purchasing.ri.gov/RIVIP/publicdocuments/ATTA.pdf>

Additionally, all of the terms and conditions contained in the Rhode Island Vendor Information Program (RIVIP) Generated Bidder Certification Form are incorporated.

For this project, the following item(s) augment the State's General Terms and Conditions,.

31d. A Technology Errors and Omissions Policy or Professional Liability Policy in the amount of at least \$1,000,000 each occurrence and \$1,000,000 annual aggregate arising out of or resulting from the performance of Services under this Contract covering: Errors and Omissions, Product Failure, Security Failure, Professional Liability and Personal Injury. Insured will include any individual who is an agent or independent contractor while acting within the scope of his or her contract with the named insured under the Contract.

Section 8 – Appendices

Appendix A – Procurement Library

- MMIS RFP: Request for Proposals for Transition, Enhancement, Operation, and Maintenance of the Medicaid Management Information System
- Rhode Island MITA State Self-Assessment, June 16, 2011
- RI Exchange Establishment Documents:
 - Filename “D_RI_Level_Two_Abstract.pdf” - RI Exchange Establishment Abstract.
 - Filename “E_RI_Project_Narrative_Level_Two.pdf” – RI Exchange Establishment Project Narrative

Appendix B – Technical Proposal: Level of Effort

Please provide a staffing proposal for EACH YEAR OF THE CONTRACT (2012 – 2015) for each task.

YEAR _____

List Proposed Staff for Tasks 1-4

Please define # of hours for 1 Full-time Equivalent (FTE) _____

Task →	1	2	3	4	Total
Staff position titles (and names if applicable)					
Example Only John Doe, Data Analyst	20%	60%	0%	20%	100%
Total FTEs proposed					

List Proposed Subcontractors for Tasks 1-4

Estimated Level of Effort: # of Hours by Task

Task →	1	2	3	4	Total
Subcontractors (Type of business or name of business)					
Example Only Jane Doe, Policy Specialist	60 hours	0 hours	10 hours	20 hours	100 hours
Total Subcontractor level of effort proposed (hours)					

Appendix C – Cost Proposal

Please provide a cost proposal for EACH YEAR OF THE CONTRACT (2012 through 2015) for each task by the quarterly timeframe specified in left-hand column. Any work conducted during the three one-year option extensions shall be completed at the sole discretion of the State at the fully loaded hourly rates proposed below, with the total contract amount expended in any option year not exceeding the amount bid for 2015.

YEAR: _____

Tasks	Task 1	Task 2 (15 months)	Task 2 (24 Months)	Task 3	Task 4	TOTAL
January – March						
April – June						
July – September						
October – December						
Total						
Other Direct Costs						
January – March						
April – June						
July – September						
October – December						
Total						

Please provide a separate list of positions, fully loaded hourly rates and staff qualifications for positions (staff/contractors) that could be brought on for **Task 5** if requested by the State. The total dollar amount of optional tasks will not exceed 10% of the total contracted costs. Additionally, these rates will also be utilized in the option years, with the total contract amount expended in any individual option year not exceeding the amount bid for 2015.

Appendix D – PMO Activities

Legend: For the 1 / O column, 1 means one-time deliverables and O means ongoing deliverables.

Ref. #	PMO Activity	Detailed Description	Deliverable(s)	1 / O	Due Date Guidelines
1.	Roadmap	The Roadmap will identify all project phases, as well as major deliverables within each phase, necessary to implement business requirements in the most efficient (time and schedule) manner, with no interruptions to current business services and minimal rework. The Roadmap will identify risks associated with the phased approach and contain risk mitigation strategies for each identified risk. The Roadmap will establish metrics to allow the State to measure progress throughout the life of the project.	Roadmap	1	2 months after contract work start
2.	Schedule	The workplan will use a Work Breakdown Structure (WBS) to fully define the tasks including task precedents for the entire project. The vendor will collaborate with the FA to produce the Final Workplan, utilizing the FA's baseline project schedule and Deliverable Expectation Document for all required and proposed deliverables, both due 30 days from the FA's start on the project.	Final Workplan	1	2 months after contract work start
3.	Requirements Matrix Review	The PMO vendor shall review the IV&V vendor's business requirements matrix tracking activities to assure adherence to the requirements specified in the RFP.	Requirements Review	1	3 months after contract work start
4.	Schedule Tracking	The vendor shall track project progress against the plan.	Workplan Follow-up	O	Ongoing, beginning within 1 month of contract work start
5.	Independent Oversight of Project On-Time Delivery	The vendor shall provide independent oversight, monitoring, and reporting on activities and metrics critical for on-time delivery of quality technology services to meet needs of the State, including the review of the IV&V issues log.	Oversight Follow-ups	O	Ongoing, beginning within 1 month of contract work start
6.	Status Reports & Continuous Evaluation	The status reports shall be done on a bi-weekly basis, including an evaluation of project progress. The PMO vendor shall be responsible for materials preparation and keeping detailed meeting notes for periodic planning meetings. The vendor is expected to continuously evaluate/prioritize those project activities that most impact the project's desired outcomes and make recommendations to effect positive change.	Regular Reporting	O	Ongoing, beginning within 1 month of contract work start
7.	FA Artifact Review	Oversee, review, and collaborate on key FA project management documents in the following areas: Integration Management, Scope Management, Time Management, Cost Management, Quality Management, Human Resources Management, Communications Management, Risk Management, and Procurement Management.	Review Key FA Project Management Artifacts	O	Ongoing, beginning within 1 month of contract work start

Ref. #	PMO Activity	Detailed Description	Deliverable(s)	1 / O	Due Date Guidelines
8.	FA Deliverable Review	Oversee and review the FA deliverables found in the RFP found in the Bidder Library per Appendix A of this document. Please also see the FA Project Management Deliverables Section 5.2.2 of the MMIS RFP.	Review Key FA Project Management Deliverables	O	Ongoing, beginning within 1 month of contract work start
9.	PMO General Oversight	The vendor shall do continuous follow-up on the significant Roadmap project items, including DDI deliverable adherence, issues, scope status, technical assessments, and risk management.	Roadmap Follow-up	O	Ongoing, beginning within 1 month of contract work start
10.	Final Report	The vendor shall submit a final report to EOHHS summarizing its work activities over the life of the project, lessons learned, parting advice/recommendations, and additional relevant assessments.	Final Report	1	At conclusion of project.

Appendix E – Verification Activities to Ensure a Well-Engineered System

Legend: For the 1 / O column, 1 means one-time deliverables and O means ongoing deliverables.

Ref. #	Verification Activity	Detailed Description	Deliverable(s)	1 / O	Due Date Guidelines
1.	Project Workscope Definition	Create a Software Verification & Validation Plan based on IEEE 1012 and IEEE 1059 standards. Integrate all verification efforts including participation in the definition of the incremental approach for the application builds by the DDI contractor(s). The Workscope shall include an analysis of the requirements traceability matrix, a detailed analysis of the software design, the integration architecture, change control procedures, overall verification approach & strategy, verification standards & procedures, and other significant Fiscal Agent system development deliverables. The Traceability Matrix shall ensure specific business cases are matched to tests.	Verification & Validation Plan Finalized Requirements Traceability Matrix	1 1	2 months after work start on the IV&V contract
2.	Requirements Review & Prioritization	Review of requirements and formal identification of the testable requirements to be verified. The bidder will need to utilize the EOHHS Re-bid RFP, Implementation Advance Planning Document (IAPD) and any IAPD updates to gain an understanding of the needed requirements for the transition MMIS system plus the enhancements. The Workscope shall include a requirements criticality analysis, prioritized according to business functions and overall/specific risks.	Testable Requirements Requirements Criticality Analysis	1 1	2 months after work start on the IV&V contract
3.	MITA & the Seven Standards	Track the FA's adherence to the MITA 2.0 Framework, the RI MITA State Self-Assessment, and the Seven Conditions and Standards contained in CMS Medicaid IT Supplement (MITS-11-01-v1.0) released in April 2011.	Review of Relevant CMS Standards	O	Ongoing, beginning within 1 month of work start on the IV&V contract
4.	Identification of Issues	Document requirements-based and project-based issues using an agreed incident management procedure and tool, and track to resolution. The vendor shall maintain a project Issues log, to be constantly updated throughout the project. Investigate significant issues to determine root causes.	Issues Change Requests	O O	Ongoing, beginning within 1 month of work start on the IV&V contract
5.	Risk Identification	Communication of business risks to EOHHS and project contractors and working with all parties to ensure that these risks and issues have been reflected in the overall project schedule and priorities. Craft mitigation approaches to deal with business risks.	Documented risks and mitigation approaches	O	Ongoing, beginning within 1 month of work start on the IV&V contract
6.	Verification WBS and Schedule	Develop and maintain a work breakdown structure and schedule for all verification efforts. Define metrics to allow the State to evaluate progress throughout the project. Perform milestone reviews at the major milestone schedule junctures. Document and track changes, issues, defects and risks identified throughout the entire verification process.	WBS Schedule maintenance Milestone reviews	1 O O	Within 1 month after work start on the IV&V contract Ongoing Ongoing
7.	Define Test Criteria to Go-Live	Work with Medicaid to define the crucial production-ready test criteria to allow the application(s) to go from a testing development to "go-live" production	Production-Ready Testing Criteria Defined	1	Within 3 months after work start on the IV&V contract

Ref. #	Verification Activity	Detailed Description	Deliverable(s)	1 / O	Due Date Guidelines
		status.			
8.	Test Development and Execution	Review and provide feedback to the Fiscal Agent on the developed test plans and test cases. Witness significant tests. Develop and execute selected test runs, test cases, and automated test scripts. Ensure the test efforts and schedules are based on defined requirements priorities and project risks. Provide test plan reports to EOHHS.	Test Execution Defects Issues Artifacts results	O O O O	Ongoing beginning within 1 month of completion of the Requirements Prioritization and the Requirements Traceability Matrix
9.	Test Automation	Present applicable test execution automation scripts as deliverables and test data repository.	Automated test scripts Test data repository	O O	Ongoing, beginning within 3 months of the start of Test Scenario Development
10.	Status Reporting	Provide EOHHS project management with bi-weekly status reports clearly describing the state of the verification and validation efforts, and a monthly management report.	Bi-Weekly Status Reports Monthly Management Reports	O O	Ongoing Ongoing
11.	Deliverable Review	Provide all project deliverables to EOHHS project management for review; and schedule and participate in regular review meetings for the project and for all deliverables.	Review Comments	O	Ongoing
12.	Infrastructure & Operational Assessments	Evaluate operational recovery plans including backup, disaster recovery, and day-to-day operations to verify thoroughness of the plans and that processes are being followed. Review implementation and deployment plans and evaluate system implementation defect tracking process	Infrastructure & Operational Assessment Documentation.	O	Ongoing
13.	Code Evaluation	Assess the software code and architecture to ensure accordance with fundamental software design principles. Assure sufficient documentation exists to allow maintenance over the long-term	Code Evaluation Documentation	O	Ongoing
14.	Training Evaluation	Evaluate the Fiscal Agent's training plans to assure the required knowledge transfer occurs not only at Go-Live, but will be repeatable during the Operations and Maintenance phase.	Training Evaluation Documentation	O	Ongoing
15.	Other Services	Due to the nature of the verification services to be provided, other specific IV&V related responsibilities and attendant deliverables may be required within the scope of these services.	Various	O	Ongoing
16.	Final Report	The IV&V vendor shall submit a final report to EOHHS summarizing its work activities over the life of the project, lessons learned, parting advice/recommendations, and additional relevant assessments.	Final Report	1	At conclusion of project.

Appendix F – Validation Activities to Meet User Business Needs

Legend: For the 1 / O column, 1 means one-time deliverables and O means ongoing deliverables.

Ref. #	Validation Activity	Detailed Description	Deliverable(s)	1 / O	Due Date Guidelines
1.	Common IV&V Activities	Many Validation tasks are included within the preceding Verification section, so please see Appendix E.	See Appendix E	1 and O	See Appendix E.
2.	Current MMIS Review	Review the completed operations and systems functions of the Medicaid program to determine the current and future requirements. The bidder will review the systems documentation, user manuals, Medicaid handbooks and interview EOHHS staff to gain a thorough understanding of the current programs and processes.	Documented review notes	1	2 months after work start on the IV&V contract
3.	Validation Strategy	Development of a Validation Strategy as part of the Software Verification & Validation Plan. The templates provided in described in Appendix H will be used as a starting point for the Validation Strategy.	Approved Validation Strategy	1	2 months after work start on the IV&V contract
4.	Training Support	Necessary training support to EOHHS in preparation for the use and operation of the MMIS system and the enhancements.	Training Plan Training Materials	1 1	Timed appropriately in relation to the go-live time(s).
5.	Business Operations Review	Assistance to EOHHS in reviewing departmental policies, processes and procedures applicable to the use and operation of the MMIS system; and implementing any needed changes to these items.	Revised Medical Services Policies, processes and procedures	1	5 months after work start on the IV&V contract
6.	Certification Support	Assist in the definition, identification, collection and organization of all pertinent documentation for the CMS Certification processes. Coordinate EOHHS staff to meet specific CMS requirements. Provide assistance to the EOHHS team during the Certification visit to ensure that CMS needs are met.	Certification deliverables	1	Within 3 months of deployment. Note: the State prefers certification occur as close as possible to the production deployment time.
7.	Other Services	Due to the nature of the validation services to be provided, other specific IV&V responsibilities and attendant deliverables may be required within the scope of these services.	Various	O	Ongoing

Appendix G – EOHHS and Exchange HIX/IES Responsibilities

Legend: Single Project (SP) Phase 1: 10/1/2013 Deadline, Phase 2: 12/31/2015 Deadline

Functional Business Requirements

Requirement Group	Summary	Draft Governance		Phase	
		Prime	Second	1	2
General Information and Pre-screening	The system shall present information on Exchange features and coverage options to all users and will allow customers, caseworkers and Navigators to perform anonymous pre-screening of the customer's potential for eligibility into a state health and human services program (including Medicaid or subsidized plans through the Exchange).	HIX	EOHHS , DHS	X	X
Application, Registration, & Intake	The system shall allow customers (including authorized representatives acting on their behalf), Navigators, and caseworkers to submit a customer's application for health and human services programs. Customers will register for an account, validate their identity, and collect the information necessary to determine eligibility for these programs.	HIX	EOHHS TBD DHS	X	X
Eligibility Verification	The system shall be able to verify information needed to evaluate eligibility for Rhode Island health and human services programs, including Medicaid and subsidized commercial insurance offered through the Exchange.	EOHHS	HIX	X	X
MAGI Eligibility Determination	The system shall determine eligibility for Medicaid or subsidized coverage purchased through the Exchange based on modified adjusted gross income (MAGI). The system shall also determine eligibility for exemptions to the individual mandate, send notifications to the users, accept requests for appeal; and finalize the eligibility determination process. It also will have the capacity to evaluate eligibility for individual mandate exemptions and handle Rite Share.	EOHHS	HIX	X	X
Eligibility Verification and Determination for non-MAGI Medicaid	The Phase 2 detailed design, development, and implementation shall meet the Medicaid eligibility specified in detailed requirements.	EOHHS	TBD DHS		X
Medicaid Legacy Eligibility System Migration to New System	The Phases 1 and 2 detailed design, development, and implementation shall meet the migration requirements specified in detailed requirements.	EOHHS	TBD DHS	X	X
Rite Share		EOHHS	HIX	X	X
Calculation of Advance Premium Tax Credit, Subsidy Calculation, Medicaid Cost Sharing, Medicaid Premium Assistance	For consumers who are eligible to enroll in a commercial health insurance plan through the Exchange, the system shall calculate an estimated Advance Premium Tax Credit and the amount of any subsidy the customer may be eligible for. For consumers who are eligible to enroll in Medicaid, the system shall determine the required Medicaid managed care monthly premium payment or Rite Share premium assistance enrollment requirements	HIX	EOHHS	X	
Plan Presentment & Selection	The Exchange shall present information on available health plans for health and human services programs and allow plan selection.	HIX	EOHHS	X	
Plan Enrollment	The system will facilitate enrollment into QHPs and Medicaid managed care plans during initial, annual, and special enrollment periods. It will send enrollment information to QHPs, Medicaid	HIX	EOHHS	X	

Requirement Group	Summary	Draft Governance		Phase	
		Prime	Second	1	2
	managed care plans, and MMIS; secure acknowledgements of enrollment; send enrollment data to EOHHS; and maintain records of enrollment. On at least a monthly basis, the system will conduct a reconciliation of enrollment data with QHP issuers.				
Account & Case Management	The system will support individuals, caseworkers, and potentially others (e.g., Navigators, authorized representatives) in tracking and managing cases over time. Specifically, it will allow for the tracking and management of all user information from intake and enrollment through eligibility determination, redetermination, and disenrollment. It will allow users to update accounts to reflect a change in circumstances and initiate any action required as a result of the change.	EOHHS	HIX	X	X
Premium Payment & Tracking	The system will provide individuals with options for making and tracking premium payments to QHPs. It will determine premium payment amounts, allow people to view their premium obligations, and allow people to make premium payments in accordance with federal requirements and Exchange decisions.	HIX	EOHHS	X	X
Qualified Health Plan Certification & Management	The system shall allow for certification, recertification, and decertification of Qualified Health Plans (QHPs).	HIX	OHIC	X	X
SHOP Management	The system shall allow SHOP employers to facilitate enrollment of their employees into Qualified Health Plans.	HIX		X	X
Navigator Management	The system shall provide a way for Customers to have access to Navigators and shall provide Navigators access to the Exchange portal.	EOHHS	HIX	X	
Broker Management	The system shall provide a way for Customers to have access to Brokers and shall provide Brokers access to the Exchange portal.	HIX	EOHHS	X	
Reports	The system shall generate data and reports needed for relevant agencies and stakeholders	HIX	EOHHS	X	X
Outreach	The system shall support outreach initiatives	HIX	EOHHS	X	
Notifications	The system will send notifications to users of its findings and accept requests for appeal. The system will support communication with customers; insurance carriers; employers; other State agencies; case workers; and Navigators.	EOHHS TBD- DHS	HIX	X	X
Financial Management	The system shall process, track, and report Exchange financial transactions and notifications, including payments, collections, IRS and CMS notifications of enrollment and subsidy determinations and small business tax credits.	HIX		X	X

Non-Functional Business Requirements

Requirement Group	Draft Governance		Phase	
	Prime	Second	1	2
General Business Functions	Joint	Joint	X	X
System Adaptability & Configurability	Joint	Joint	X	X
Usability	Joint	Joint	X	X
Re-usability	Joint	Joint	X	X

Requirement Group	Summary	Draft Governance		Phase	
		Prime	Second	1	2
Accessibility		Joint	Joint	X	X
Security		Joint	Joint	X	X
Regulatory & Statutory Compliance		Joint	Joint	X	X

Appendix H – Validation and Testing Strategy Template

Introduction

The Introduction to the Strategy provides the reader with the objectives, scope and format of the Strategy document itself to improve the readers' comprehension of the Strategy.

Validation and Testing Strategy

The Validation and Testing Strategy section provides definition for a series of topics addressing high-level Strategy issues. All of the Strategy topics will be adapted to the specific project mission, structure, organization and processes to provide the most effective and integrated testing effort for the project.

Objectives and Benefits

This section documents the specific objective of the validation and testing effort, an objective such as “finding defects” as opposed to a simple “proof” of features or a demonstration of “correctness”. This section may also include a description of the expected benefits from using the specified testing approach.

The topic may appear unnecessary, but the presentation of this information to the entire project team ensures that all project participants understand and are working toward the same quality objectives. This in turn eliminates “surprises” to those responsible for implementation as the testing effort begins.

Roles and Responsibilities

This section describes, in clear and concise language, the definitions of the roles and responsibilities for validation and testing for each project participant.

This section defines the general role for each project participant in meeting the testing objectives; and the responsibilities that each participant has in achieving the success for the testing specifically and the project in general.

Incremental Implementation and Validation/Testing

This section documents the preliminary assessment of the high-level requirements, and their relative risk levels, priorities, and critical functions. This information in turn is used to establish the strategy for developing, validating and testing the project in small, easily managed increments based on some defined criteria, usually project or corporate risk factors.

This topic provides for the definition of design, development, validation and testing increments. This documented incremental approach provides for tight integration of all project efforts for maximum effectiveness and cooperation between and among the various implementation and validation/ testing efforts.

Coverage Strategy

Coverage is the relationship between objects produced during a project, and the efforts used to ensure that these objects are adequately and appropriately developed and validated. This section of the Strategy defines the coverage strategy through which all verifiable project objects are

validated, including a description of the process required to evaluate any deviations from that coverage strategy on an on-going basis.

Verifiable objects in a software project may include such diverse items as functional and usability requirements, use cases, business scenarios, the technical infrastructure, design specifications, software components, *et al.*

Quality Assurance

The role of any Quality Assurance (QA) effort is to ensure that the risks to any project have been identified and effectively addressed. The Strategy will address the role QA will play specifically within the validation and testing effort, including testing training, development of standards and procedures, reviews of test deliverables, and related QA issues.

Test Management

Every testing effort must be directed toward a specific objective, and managed through the course of testing to ensure achievement of that objective. This section therefore addresses the approach used to achieve the testing objectives, and the specific monitoring activities that will be included to ensure successful completion of the testing effort(s).

These monitoring efforts may include the development of and management to the validation and testing work plan; validation and testing deliverables; a metrics program to capture and report critical testing information; *etc.*

Quality Measurements and Metrics

Effective management and control of the testing effort requires the specification for well-defined measurements and metrics within the project.

For the validation and testing Strategy, this will include a definition of the critical metrics set required for the project, *i.e.*, the metrics required to ensure that the overall effort remains on track and in sync with the business needs.

This definition will also include

- The source of the measurement and metric information, *e.g.* testable requirements, defect repositories, and others;
- The distribution of the metrics as information to the appropriate levels of project management, *e.g.* defect levels, trends and distributions, results of corrective actions, and so on; and
- The frequency and manner in which the metrics will be distributed, *e.g.* reports, graphs, *etc.*, and weekly, semi-monthly, monthly, *etc.*

Quality Control Levels

Industry research has indicated that successful IT projects have significantly more quality control levels (often referred to as “test levels”) than do less successful projects. The Strategy will therefore address the quality control levels required and defined for a project.

Test Environments

Testing environment requirements need to be defined for each test level; that is, what facilities, network domains, hardware and software, test data sources, *etc.*, are required to support the testing for each test level.

The Strategy will also address the establishment of one test environment for each of the major defined test levels, and the support requirements for each environment. Note that for higher test levels, *e.g.*, system, user acceptance, *et al.* test levels, the environments must be configured as much like the planned production test environment as possible.

Standards and Procedures

This section provides for formalized definitions of the validation and testing-related standards and procedures.

Testing Staff Plan

This section addresses the requirement for specific types of testing staff resources, from Test Manager through testing technician, and related support staff, as required. The staff plan must take into account the dynamic nature of testing from the early stages of the project through rollout and transfer of testing to a maintenance, regression testing role.

Test Tools

This topic identifies and describes the tools required within a specific testing environment, *i.e.*, at each specified test level. The validation and testing tool kit can be broken down into the following categories.

Process Support Tools

The specific tools used to automate the various control processes, including Requirements Management, as well as the management of issues and defects; and the control of the versions and configurations of all project deliverables.

Requirements Management Tools

Tools for cataloging and managing the definition of the various functional needs for the system, *e.g.* requirements for business functions, usability, performance, security, operability, interconnectivity, and related subjects.

Testing Management and Execution Tools

Tools for identifying and controlling the scope of the testing effort, as well as for providing *ad hoc* and formal reporting of the status of any given test effort.

Disk Based Bidding Information

File Format

All disk based bid files are ZIP files that you can open using the **WinZip 8.1** software. The ZIP file will contain one or more files based on the type of Bid/RFP.

Downloading the Disk Based Bid

Bids that have a file for download are marked with a "D" in the Info field of the bid search results. The "D" will be an active link to the WinZip file until the bid reaches its opening date. Clicking on the active "D" link will allow you to open or save the ZIP file associated with the bid. Opening the WinZip file will download a copy to your computer's temporary directory.

Opening the Disk Based Bid

Once downloaded, you can open the ZIP file with Winzip and view the Microsoft Office files contained within the WinZip file. Immediately save (extract) the individual files to an appropriate directory on your computer, such as "Desktop" or "My Documents".

Completing the Disk Based Bid

Once the Microsoft Office files are properly saved, open the individual files and enter the required information in the appropriate fields. Save each file again to capture the new information you entered.

Submitting the Disk Based Bid

Save the completed files to a CD or diskette. Label the CD or diskette with the Bid/RFP number and bidder's name (company name, not contract name). Submit as instructed in the Bid or RFP solicitation document.