

3.4 PROJECT ADMINISTRATION AND PROJECT CONTROLS

Project administration activities include the set-up of all the internal management processes for the contractor and its subcontractors, as well as the implementation of all department and contractor management processes and reporting requirements. The objective of these controls is to ensure the smooth administration of the project. Bidders must propose an approach to project administration that includes and describes the following activities that shall be in effect throughout the life of the project:

- o formal status reporting procedures and schedules;
- o a proven system development methodology;
- o issue identification, tracking, reporting and resolution procedures, including an automated tracking and management system with the information captured and tracked to be subject to the state's approval;
- o change control procedures;
- o management of subcontractor relationships, to ensure high quality performance of all subcontractor functions; and
- o personnel management functions, including hiring and firing and employee relocation.

Where appropriate, the use of automation to facilitate these activities is encouraged.

The contractor must describe the project management approach for planning, organizing, and managing the staff and activities throughout the life of the project. The contractor's project management approach must facilitate open and timely communication with the OHCA and a strong working relationship to achieve the overall goal of satisfactory performance within budget.

3.5 DEVELOPMENT AND IMPLEMENTATION TASK REQUIREMENTS

The work to be performed by the contractor during the Development and Implementation Task will be organized under five (5) major subtasks: Design Subtask, Development/Testing Subtask, Conversion Subtask, Acceptance Testing Subtask, and Implementation Subtask.

The contractor shall set the schedule of key dates and dates for submittal of major deliverables for state review during the Development and Implementation task in the work plan. All milestone dates and key dates are contingent upon state approval. The primary considerations are that (1) the contractor must allow a minimum of twelve (12) weeks for user acceptance testing, including the operational readiness test, and (2) the start of operations must be on or before July 1, 2002.

Each subtask in the Development and Implementation Task is described in terms of:

- o requirements,
- o state responsibilities,
- o contractor responsibilities,
- o deliverables, and
- o milestones.

The material that will be presented in each of the five areas above, for all subtasks included in Development and Implementation, is described below.

Requirements

The requirements are mandatory activities for the given subtask. There are a number of activities that reoccur in every subtask. The standard contractor requirements and activities for every subtask within the Development and Implementation Task are:

- o prepare an outline and obtain approval from the state for the contents and format for each deliverable before beginning work on the deliverable;
- o obtain written approval from the state on the final deliverables for each subtask;
- o revise deliverables, if required, using state review findings to meet content and format requirements;
- o report progress against the work plan for each subtask by weekly written status reports and at weekly status meetings with the state's MMIS project manager and through a biweekly updated work plan/subtask schedule;
- o deliver written status reports and updated work plans/schedules one (1) business day, that is twenty-four (24) hours, before the status meeting; and
- o identify scope of work issues. Seek state approval before commencing work outside the scope of the ITB. See ITB Subsection "Terms and Conditions," 6.3.

State Responsibilities

The responsibilities of State personnel are stated for each of the five (5) subtasks. There are a number of activities that reoccur in every subtask. The standard state responsibilities for every subtask within the Development and Implementation Task are:

- o review and approve the proposed format and content of all subtask deliverables;

- o review contractor deliverables, determine the approval status of the deliverable, and provide written comments to the contractor within twelve (12) business days;
- o conduct weekly status meetings with the contractor to review progress against the work plan;
- o review weekly written status reports and biweekly work plan/subtask schedule updates;
- o monitor contractor progress to task milestones; and
- o analyze, authorize, and add to the contract, any changes to the Scope of Work as described in this ITB.

Contractor Responsibilities

The responsibilities of the contractor are identified for each of the five (5) subtasks. In addition, the contractor has overall responsibility for the timely and successful completion of each of the subtasks. The contractor is responsible for clearly specifying and requesting information/data from the state in such a manner as not to delay any part of the schedule.

The contractor's proposed approach to assuming this overall responsibility and the specific responsibilities of each of the subtasks will be considered by the state. The approach to coordinating the responsibilities of the state with those of the contractor to ensure overall project success must be addressed.

Deliverables

All deliverables for the Development and Implementation Task must meet state-approved format and content requirements.

Deliverables for the Development and Implementation Task are:

- o Detailed Work Plan,
- o Requirements Specification Document,
- o General System Design,
- o Detailed System Design,
- o System Test Plan,
- o System Test Results,
- o MMIS User Manuals,
- o MMIS Operating Procedures,
- o Provider Manuals,
- o Disaster Recovery Plan,
- o Revised Detailed System Design,
- o Conversion Plan,
- o Conversion Test Results,

- o Preliminary Converted Files,
- o Acceptance Test Resolutions Document,
- o Updated MMIS User Manuals,
- o Updated Provider Manuals,
- o MMIS Systems Documentation,
- o MMIS Implementation Plan,
- o State Training Plan,
- o Provider Training Plan, and
- o Results of Final File Conversion.

Each contractor deliverable must be delivered in fifteen (15) hardcopies and an electronic media and format compatible with state standards. Deliverables shall be reviewed by OHCA, and will require formal approval from the OHCA. The contractor must include at least twelve (12) business days, per deliverable, in the project work plan for state staff to complete a review of each deliverable and to document their findings. Based on the review findings, the OHCA may grant approval, reject portions of or the complete document, request contractor revisions be made, or may state the inability to respond to the deliverable until a future specified date. Additional five (5) business day periods shall be required by the state for subsequent reviews whenever revisions are requested or a deliverable is disapproved.

Milestones

Project milestones are listed for each task. Each milestone denotes a checkpoint toward the operations start date.

The dates for completion of the milestones must be identified in the bidder's proposal and reflect key dates specified by the bidder. At a minimum, key dates to be specified in the work plan are:

- o state approval of all Design Subtask milestones;
- o state approval of all Development Subtask milestones;
- o state approval of all Conversion Subtask milestones;
- o state approval of all Acceptance Test Subtask milestones;
- o state-approved contractor start of full MMIS operations, including all prerequisite training and reporting functions; and
- o receipt of written approval for federal certification of the Oklahoma MMIS.

Milestone and key dates will be included as part of the contract. The Detailed Work Plan, prepared as part of the Design Subtask, will be used for performance standards, payment incentives, and implementation checkpoints. Payment for major activities within the Development and Implementation Task shall be conditional upon successful achievement of milestones.

Because failure to meet any milestone completion date is a signal to OHCA that a key date has not or will not be met, OHCA will monitor each milestone completion date to ensure that the operations start date will be met.

3.5.1 DESIGN SUBTASK

The state anticipates that the proposed transfer MMIS will support the vast majority of the requirements stated in this ITB. In addition, the proposed transfer MMIS must be easily modified and enhanced to support all requirements in this ITB.

The objectives of the Design Subtask are to:

- o gain an understanding of the Oklahoma medical assistance program environment,
- o present the proposed system design documentation to orient Oklahoma Medical Assistance Program staff to the proposed system,
- o validate and refine the system requirements specified in this ITB through Joint Application Design (JAD) sessions and/or interviews,
- o refine and finalize the work plan required as part of the bidder's technical proposal, and
- o develop the general and detail designs of the Oklahoma MMIS.

This subtask will result in a Detailed Work Plan, reflecting the required Development and Implementation Task activities; a Requirements Specification Document (RSD); a General System Design (GSD); and a Detailed System Design (DSD) document.

3.5.1.1 Design Subtask Requirements

The contractor must establish work space within a fifteen (15) mile radius of the OHCA state office location to conduct Design Subtask activities. The state will not provide work space for this task.

3.5.1.2 State Responsibilities

State responsibilities for requirements definition activities are:

- o provide all available relevant documentation on current MMIS operations;
- o clarify, at the contractor's request, OHCA and Division policy, regulations, and procedures;
- o determine or develop policy, where necessary;
- o make staff available to participate in the definition of general and detailed system and operational requirements;
- o determine the frequency, intent, format, media, and numbers of copies for all reports; and
- o meet with contractor staff, as necessary, to finalize MMIS requirements.

State responsibilities for general design activities are:

- o review and approve (or request modification of) subsystem descriptions and flowcharts;
- o review and approve (or request modification of) identified inputs and outputs;
- o review and approve (or request modification of) preliminary screen and report layouts and descriptions; and
- o attend walk-throughs of the GSD to enhance understanding of the MMIS and to facilitate the approval process.

State responsibilities for detail design activities are:

- o review and approve (or request modification of) screens, reports, edit criteria, and record contents;
- o review policies and develop additional fee schedules and reimbursement or other criteria, as needed;
- o provide copies of all current files, as requested, to support conversion activities; and
- o attend walk-throughs of the DSD to enhance understanding of the MMIS and to facilitate the approval process.

3.5.1.3 Design Subtask Contractor Responsibilities

Contractor responsibilities for the Design Subtask include:

3.5.1.3.1

Prepare a Detailed Work Plan, defining each task, subtask, activity, and completion date for each, and incorporating all state subtasks and activities. Detailed Work Plan content requirements are specified in ITB Subsection 3.5.1.4.1.

3.5.1.3.2

Contractor responsibilities for requirements definition activities are as follows.

- o Become familiar with Oklahoma Medicaid and other medical program policies, services, and administration, as well as Oklahoma MMIS requirements, through interviews with state staff and reviews of documentation.
- o Validate the requirements in this ITB and the open Change Orders.
- o Conduct joint application design (JAD) sessions and follow-up interviews with state staff to finalize requirements and ensure that responses to all ITB requirements and open Change Orders are acceptable to the state. This may entail changes to window, screen, or report layouts or system functionality.
- o Define the MMIS by identifying functions within and across subsystems, subsystem integration, internal and external interfaces, system files, and processing architecture.
- o Prepare the Requirements Specification Document (RSD) deliverable meeting the requirements as defined in ITB subsection 3.5.1.4.2.

3.5.1.3.3

Contractor responsibilities for general design activities include the following.

- o Develop preliminary screen and report detail layouts, subsystem narratives, subsystem flowcharts, and identify all inputs and outputs to reflect Oklahoma requirements. In developing window, screen, report, or other layouts the contractor must perform prototyping to enable state staff to review and approve designs prior to their becoming final.
- o Prepare the General System Design (GSD) deliverable, meeting the requirements as defined in ITB Subsection 3.5.1.4.3; the state prefers and will accept "staggered" delivery of the GSD as long as the whole document is complete by the date identified in the approved work plan. The responsibility includes research of HCFA GSD and reporting requirements to advise the state on any format or content specifications defined by HCFA.

- o Conduct walk-throughs and demonstrations during development of the GSD to enhance state understanding and to facilitate the approval process. Ongoing presentation of window, screen, and report layouts and obtaining state approval during GSD development will facilitate overall state approval. Walk-throughs or demonstrations must not result in any additional cost to the state, including travel costs.

3.5.1.3.4

Contractor responsibilities for detail design activities include the following.

- o Develop and revise window, screen, and report detail layouts, edit criteria, and file and record contents to reflect Oklahoma requirements. In developing window, screen, record, or other layouts the contractor must perform prototyping to enable state staff to review and approve designs prior to their becoming final.
- o Prepare the Detailed System Design (DSD) deliverable, meeting the requirements as defined in ITB Subsection 3.5.1.4.4; the state prefers and will accept "staggered" delivery of the DSD as long as the whole document is complete by the date identified in the approved work plan.
- o Conduct walk-throughs and demonstrations during development of the DSD to enhance state understanding and to facilitate the approval process. Ongoing presentation of window, screen, and report layouts and obtaining state approval during DSD development will facilitate overall state approval. Walk-throughs or demonstrations must not result in any additional cost to the state, including travel costs.

3.5.1.3.5

General contractor responsibilities for this task are as follows.

- o Select and establish a site in the State of Oklahoma within a fifteen (15) mile radius of the OHCA state office location where Development and Implementation Task, Operations Task, and Maintenance and Modifications Task functions will be performed.
- o The contractor will be responsible for addressing all open Change Orders during the implementation task. The contractor shall determine the transferred system's capability to meet the required functionality of the open Change Orders. Any functionality that is not met by the transferred system shall be considered a requirement of the transferred system. These requirements must be implemented when the system becomes operational on July 1, 2002.

The projected open Change Orders are listed in Appendix D. Full descriptions are contained in the Procurement Library. All requirements (except for the hourly staffing requirements), as well as all state and contractor responsibilities and procedures that apply to the modification staff activities during the Modification Task will apply to these activities during the Operations Task. The costs to perform these activities shall be included in the firm fixed base price of the contract.

- o The contractor must address new requirements that become known between the release of this document and the July 1, 2002. The contractor must be prepared to supply additional staff during the implementation task in order to address these potential new requirements. These staff will be responsible for developing the functionality to meet these requirements in the transferred system when it is implemented on July 1, 2002. These staff will be paid separately by the state under the terms of an all-inclusive hourly rate. The price for these services is all inclusive/encompassing, and includes all facility, telephone, mailing, and computer costs, any other overhead costs, all profit and so on required to have a full time person or a full time equivalent working productively.

All requirements, as well as all state and contractor responsibilities and procedures that apply to the modification staff during the Modification Task will apply to these staff during the Operations Task. The all-inclusive rate for these staff shall be priced on the pricing sheet in Appendix F.

3.5.1.4 Deliverables

There are four (4) deliverables defined for the Design Subtask: Detailed Work Plan, Requirements Specification Document, General Systems Design, and Detailed System Design. Minimum requirements for each document are presented below.

3.5.1.4.1 Detailed Work Plan

A Detailed Work Plan is required early in the Design Subtask. The purpose of the work plan is to reaffirm contractor delivery dates presented in the contractor's proposal, to detail work activities, and to facilitate the state's monitoring of contractor progress based on milestones and key dates as specified in ITB Subsection 3.5. The work plan must be updated on a biweekly basis. At a minimum, the Detailed Work Plan must include:

- o key dates, and dates for submittal of deliverables;
- o structure, using a breakdown of activity, task, subtask, and sub-subtask work steps within each of the major Development and Implementation Task subtasks: Design, Development/Testing, Conversion, Acceptance Testing, and Implementation;

- o an organization chart;
- o description at the subtask level which includes:
 - . description of the subtask;
 - . proposed location for tasks to be performed;
 - . definition of a work product;
 - . personnel resources applied by name and level of effort, in hours;
 - . state resource requirements (staff and other);
 - . duration of task;
 - . dependencies;
 - . assumptions;
- o all required deliverables;
- o contingency and recovery procedures at the activity level;
- o Gantt chart;
- o PERT or dependency chart; and
- o resource (personnel and other) matrix by subtask, summarized by total hours by person, per month.

3.5.1.4.2 Requirements Specification Document

The RSD will take proposal requirements, validate them, and identify how and where the requirements are met in the MMIS design. At a minimum, the RSD must include:

- o a detailed description of the hardware and software configuration to be used for MMIS processing;
- o cross-walk or map of each functional requirement included in the MMIS Requirements Checklist shown in Appendix A of this ITB, any open Change Order, as well as any requirements subsequently identified in JAD sessions to a subsystem(s) and process(es);
- o an overview of the system architecture and how components are integrated to meet ITB requirements;

- o an identification of all internal and external interfaces; and
- o an identification of linkages across functions.

3.5.1.4.3 General System Design (GSD)

At a minimum, the GSD must be available in hardcopy and in an electronic media and format compatible with state standards, and must include:

- o a systems standards manual, listing all standards, practices and conventions, such as, language, special software, identification of all test and production libraries, and qualitative aspects of data modeling and design;
- o an identification of system files and processing architecture;
- o a general narrative of the entire system and the flow of data through the system;
- o a general narrative of each subsystem, describing functions, features, and processes;
- o a flow diagram of each subsystem, identifying all major inputs, processes, and outputs of the subsystem;
- o lists of all inputs and outputs, by subsystem;
- o a listing and brief description of each file;
- o preliminary screen and report layouts;
- o preliminary screen and report narrative descriptions;
- o a network configuration with a graphic layout of network lines showing alternative line configurations;
- o a preliminary training plan and description of training materials;
- o a preliminary layout for user manuals; and
- o a preliminary layout for the data element dictionary.

3.5.1.4.4 Detailed System Design (DSD)

At a minimum, the DSD must be available in hardcopy and in an electronic media and format compatible with state standards, and must include:

- o detailed subsystem narratives describing each function, process, and feature;
- o final network configuration with graphic layout of all network lines, switches, and so forth, and all hardware/software detail;
- o a high level data model and a detailed and physically specific data model;
- o entity relation diagrams;
- o hierarchy charts;
- o high and medium level batch flow charts to the job, procedure, and program level;
- o detailed program logic descriptions and edit logic, including, at a minimum, the sources of all input data, each process, all editing criteria, all decision points and associated criteria, interactions with other programs, and all outputs;
- o final layouts for all inputs to include, at a minimum, input names and numbers; data element names, numbers, and sources for each input field; and examples of each input;
- o final layouts for all outputs to include, at a minimum, output names and numbers; data element names, numbers, and sources for each output field; and examples of each output;
- o final layouts for all files to include, at a minimum, file names and numbers; data element names, numbers, number of occurrences, length and type; record names, numbers, and length; and file maintenance data such as number of records, file space, and so forth; and
- o a detailed comprehensive data element dictionary, including, at a minimum, data element names, numbers, and definitions; valid values with definitions; sources for all identified data elements; and lists from the data element dictionary (DED) in multiple sort formats.

3.5.1.5 Milestones

Milestones for the Design subtask are:

- o state approval of the Detailed Work Plan,
- o state approval of the RSD,

- o state approval of the GSD, and
- o state approval of the DSD.

All of the above subtask requirements, where appropriate, must be completed for the DSS/DW function if that option is exercised by the State.

3.5.2 DEVELOPMENT/TESTING SUBTASK

The objectives of the Development/Testing subtask are to:

- o install/modify/develop a certifiable MMIS on the contractor's hardware;
- o perform unit, subsystem, system integration, and parallel testing to ensure the MMIS will appropriately process and pay all medical claim records, make all types of updates, and produce required reports and other outputs;
- o demonstrate, through integrated testing, that the contractor is ready to perform all required functions for the MMIS; and
- o assure that the state can successfully participate in the Acceptance Testing Subtask.

3.5.2.1 Development/Testing Subtask Requirements

The contractor must:

- o establish permanent facilities within fifteen (15) miles of the OHCA state office location,
- o establish all necessary telecommunications links with all specified state offices, and
- o establish the electronic data processing environment necessary to operate the MMIS.

3.5.2.2 State Responsibilities

State responsibilities are to:

- o coordinate communications links with state and the contractor;
- o coordinate communications and act as liaison between the new contractor and the incumbent, if necessary;
- o advise the new contractor of any changes being made to the current Oklahoma MMIS between the contract start date and the first day of the Operations Task;

- o review and approve on-line systems capabilities;
- o attend deliverable walk-throughs to enhance understanding and facilitate the approval process; and
- o provide input on state policies and so forth for provider manuals.

3.5.2.3 Development/Testing Subtask Contractor Responsibilities

Contractor responsibilities are to:

3.5.2.3.1

Install, develop, modify, enhance, and test the MMIS software.

3.5.2.3.2

Maintain a change control process to document discrepancies and their resolution and to manage changes to programs and libraries.

3.5.2.3.3

Coordinate with the incumbent on questions and problems relating to implementation and testing of the MMIS.

3.5.2.3.4

Prepare a System Test Plan, as described in ITB Subsection 3.5.2.4.1, and secure state approval prior to beginning the integrated systems test.

3.5.2.3.5

Perform unit, subsystem, integrated, and parallel system tests to ensure that software programs function correctly on contractor hardware and conduct a capacity analysis of the traffic the system can handle and still meet performance requirements.

3.5.2.3.6

Prepare the System Test Results deliverable, as described in ITB Subsection 3.5.2.4.2, and provide a walk-through of the subsystem, integrated, and parallel system test results for state staff.

3.5.2.3.7

Develop operating procedures, as defined in ITB Subsection 3.5.2.4.4, and provide a walk-through for state staff.

3.5.2.3.8

Prepare user manuals for all subsystems, as defined in ITB Subsection 3.5.2.4.3, and provide a walk-through for state staff.

3.5.2.3.9

Prepare provider manual, as described in ITB Subsection 3.5.2.4.5, for all provider types and deliver to the state for approval.

3.5.2.3.10

Provide procedures for timely updates to the user manuals and distribution of manual amendments to all manual holders.

3.5.2.3.11

Prepare provider bulletins for state approval announcing upcoming changes in the MMIS.

3.5.2.3.12

Provide orientation for state personnel on contractor organization, contractor functional responsibilities, and MMIS operations.

3.5.2.3.13

Develop a Disaster Recovery Plan, as prescribed in ITB Subsection 3.5.2.4.6, and provide a walk-through for state staff.

3.5.2.4 Deliverables

There are seven (7) deliverables defined for the Development/Testing Subtask: System Test Plan, System Test Results, MMIS User Manuals, MMIS Operating Procedures, Disaster Recovery Plan, and Revised Detailed System Design. Minimum requirements for each document are presented in the next section.

3.5.2.4.1 System Test Plan

Minimum requirements are:

- o a test plan and schedule for each system module and subsystem, as well as for the integrated system and automated parallel testing; integrated system

testing must include testing all MMIS features including those which involve more than one (1) subsystem, such as updates to recipient or provider records based on paid claim records, interfaces between TPL records and claim records payments, processing of claim records from input through reporting, and so forth; automated parallel testing must be conducted to show the same processing through the existing MMIS and the newly developed MMIS;

- o a description of test situations and expected test results;
- o an organization plan showing contractor personnel responsible for testing;
- o a discussion of management of the testing effort, including strategies for dealing with delays in the testing effort, back-up plan, back-up personnel, and so forth;
- o procedures for tracking and correcting deficiencies discovered during testing;
- o a plan for updating documentation based on test results;
- o procedures for notifying the state of problems discovered in testing, testing progress, adherence to the test schedule, and so forth; and
- o a plan for organizing test results for state review.

3.5.2.4.2 System Test Results

Minimum requirements include:

- o all test results, including screen prints, test reports, and test inputs, cross-referenced to the expected test results in the System Test plan;
- o corrective actions taken and retest documentation for all problems identified in the initial tests and all retests;
- o system performance benchmarks resultant from the capacity analysis;
- o integrated system test results which show that the system can perform all integrated functions and can process all claim types from input through reporting; specific claim records must be tracked by control number through the system;
- o automated parallel system test results which show the results of the same processing run through the existing MMIS and the newly developed MMIS, including an explanation for any discrepancies in the results;
- o a summary of the status of testing, including numbers of problems identified by type of problem, numbers of problems corrected, any significant

outstanding issues, the effect of any findings on the implementation schedule, and so forth.

3.5.2.4.3 MMIS User Manuals

The contractor must prepare user manuals for each subsystem. User manuals will be prepared during the Development/Testing Subtask and updated during the Acceptance Testing Subtask. During the Operations Task, updates to user manuals must be prepared in final form on all changes, corrections, or enhancements to the system prior to state sign off of the system change. The contractor will be responsible for the production and distribution of all user manual updates in a timely manner. The following are minimum requirements for MMIS user manuals.

- o The manuals must be available on-line via the MMIS and must facilitate updating, also the state requires twelve (12) paper copies using 8-1/2" x 11" pages in three-ring (3) binder form, pages numbered within each section, and a revision date on each page. Revisions must be clearly identified in bold print.
- o User manuals must be created and maintained in Word 97 or higher (consistent with the state) and must be provided on request to the state on diskette or CD.
- o User manuals must be written and organized so that users not trained in data processing can learn from reading the documentation how to access the on-line screens, read subsystem reports, and perform all other user functions.
- o User manuals must be written in a procedural, step-by-step format.
- o Instructions for sequential functions must follow the flow of actual activity (that is, balancing instructions and inter-relationship of reports).
- o User manuals must contain a table of contents and an index.
- o Descriptions of error messages for all fields incurring edits must be presented and the necessary steps to correct such errors must be provided.
- o Definitions of codes used in various sections of a user manual must be consistent.
- o Mnemonics used in user instructions must be identified and must be consistent with windows, screens, reports, and the data element dictionary.
- o Abbreviations must be consistent throughout the documentation.
- o Field names for the same fields on different records must be consistent throughout the documentation.

- o Each user manual must contain "tables" of all valid values for all data fields (for example, provider types, claim types), including codes and an English description, presented on windows, screens, and reports.
- o Each user manual will contain illustrations of windows and screens used in that subsystem, with all data elements on the screens identified by number.
- o Each user manual will contain a section describing all reports generated within the subsystem, which includes the following:
 - . a narrative description of each report;
 - . the purpose of the report;
 - . definition of all fields in reports, including detailed explanations of calculations used to create all data and explanations of all subtotals and totals;
 - . definition of all user-defined, report-specific code descriptions; and
 - . a copy of representative pages of each report.
- o Instructions for requesting reports or other outputs must be presented with examples of input documents and/or screens.
- o All functions and supporting material for file maintenance (for example, coding values for fields) must be presented together and the files presented as independent sections of the manual.
- o Instructions for file maintenance must include both descriptions of code values and data element numbers for reference to the data element dictionary.
- o Instructions for making on-line updates will clearly depict which data and files are being changed.
- o User manuals will be used as the basis for user training, unless otherwise specified by the state.

All of the above requirements must be completed for the DSS/DW function if that option is exercised by the State.

3.5.2.4.4 MMIS Operating Procedures

MMIS Operating Procedures define the relationships and responsibilities of contractor and state personnel for MMIS operations. Minimum requirements are:

- o must be written in a procedural, step-by-step format;

- o operating procedures must be created and maintained in Word 97 or higher (consistent with the state) and must be provided on request to the state on diskette or CD;
- o instructions for sequential functions must follow the flow of actual activity;
- o operating procedures must contain a table of contents and be indexed;
- o include all procedures for MMIS operations including mailroom, cycle balancing, production control, file updates, and so forth;
- o descriptions of error messages for all fields incurring edits must be presented;
- o definitions of codes used in various sections of a manual must be consistent;
- o mnemonics used in operating procedures must be identified and must be consistent with windows, screens, reports, and the data element dictionary;
- o abbreviations must be consistent throughout the documentation;
- o instructions for making on-line updates will clearly depict which data and files are being changed; and
- o operating procedures must contain any internal reports used for balancing, and so forth, which are not MMIS outputs. All fields in reports must be defined, including detailed explanations of calculations used to create all data.

All of the above requirements must be completed for the DSS/DW function if that option is exercised by the State.

3.5.2.4.5 Provider Manuals

Provider manuals are used to enable the provider community to submit claim records in the proper format for adjudication. Each manual must be specific to individual provider type(s) or groups of related provider types. The minimum requirements are to:

- o contain an introduction, policy section developed by the state, billing instructions, billing examples, and rate methodologies;
- o must be created and maintained in Word 97 or higher (consistent with the state) and must be provided on request to the state on diskette or CD;
- o provide general program information and highlight differences in programs and in processes among programs;
- o contain a table of contents and be indexed;

- o describe provider enrollment and recertification procedures, general participation requirements, and termination procedures;
- o describe general medical record content and record retention procedures and audit procedures and responsibilities;
- o identify third party resource identification and recovery procedures;
- o identify methods of verifying recipient eligibility, describe identification cards, describe all relevant recipient information supplied to the provider, describe each eligibility verification access method available and how to utilize it, and describe why this information is relevant to providing services;
- o identify covered services and service limitations;
- o identify reimbursement procedures, including co-payment requirements and managed care procedures;
- o identify any special forms needed and describe how to complete them and submit them (for example, PA, sterilization consent);
- o provide detailed billing instructions and filing requirements, including ECM;
- o describe the process to do adjustments and make refunds;
- o describe utilization review and control procedures; and
- o describe how to do provider inquiries.

3.5.2.4.6 Disaster Recovery Plan

The system must be protected against hardware, software, and human error. The system must include appropriate checkpoint/restart capabilities, file backup and storage capabilities, hardware and software backup, telecommunications reliability, and disaster recovery. The Disaster Recovery Plan shall be available for review by state or federal officials on request. The contractor must prepare a Disaster Recovery Plan that addresses:

- o checkpoint/restart capabilities;
- o retention and storage of back-up files and software;
- o hardware backup for the main processor;
- o hardware backup for data entry equipment;
- o network backup for telecommunications;
- o the continued processing of Oklahoma transactions (claim records, eligibility verification, provider file, updates to the MMIS, and so forth), assuming the loss of the contractor's primary processing site; this will include interim access support for the state on-line component of the MMIS;
- o back-up procedures and support to accommodate the loss of on-line communication between the contractor's processing site and state facility(s) in Oklahoma; these procedures will not only provide for the batch entry of data and provide the contractor with access to information necessary to adjudicate claim records, but will also provide the state with access to the information and processing capabilities necessary to perform its functions;
- o a detailed file back-up plan and procedures, including the off-site storage of crucial transaction and master files; the plan and procedures will include a detailed schedule for backing up critical files and their rotation to an off-site storage facility; the off-site storage facility will also provide for comparable security of the data stored there, including fire, sabotage, and environmental considerations; and
- o the maintenance of current system documentation and source program libraries at an off-site location.

Each aspect of the Disaster Recovery plan must be detailed as to both contractor and state responsibilities and must satisfy all requirements for federal certification. The plan shall be maintained by the contractor in current form throughout the term of the contract.

All of the above requirements must be completed for the DSS/DW function if that option is exercised by the State.

3.5.2.4.7 Revised Detailed System Design

The contractor must revise the DSD, described in ITB Subsection 3.5.1.4.4, to reflect changes identified during the testing process. It must provide updated pages to the state for review and approval.

All of the above requirements must be completed for the DSS/DW function if that option is exercised by the State.

3.5.2.5 Milestones

Milestones for the Development/Testing Subtask are:

- o state approval of System Test Plan,
- o state approval of System Test Results,
- o state approval of MMIS user manuals,
- o state approval of MMIS operating procedures,
- o state approval of provider manuals,
- o state approval of Disaster Recovery Plan, and
- o state approval of Revised Detailed System Design.

All of the above subtask requirements, where appropriate, must be completed for the DSS/DW function if that option is exercised by the State.

3.5.3 CONVERSION SUBTASK

The Conversion Subtask will consist of the planning, development, testing, and coordination of all data and file conversions required to support the operation of the new MMIS. The Conversion Subtask will include the identification of all data elements required to support MMIS processes and those which need to be converted. It will also include the identification of the source of the data (manual file, automated file, and/or primary data collection, how to secure the data, and the development of data conversion requirements. The data conversion requirements shall include changes to current provider types, categories of service, diagnosis codes, procedure codes, and so forth. The Conversion Subtask will also include development of conversion software and/or manual procedures, testing of conversion programs and procedures, and preliminary conversion of all files. The Conversion Subtask will demonstrate, through comprehensive testing of conversion processes, that all data required to support MMIS processing will be available and accurate. The Conversion Subtask will be performed concurrently with the Development/Testing Subtask.

This task will result in a Conversion Plan, Conversion Test Results, and preliminary converted files.

3.5.3.1 Conversion Subtask Requirements

There are no subtask-specific requirements identified.

3.5.3.2 State Responsibilities

State responsibilities are to:

- o assist in identifying other sources of data;
- o clarify, at the contractor's request, data element definitions, record layouts, and file descriptions; and
- o provide staff time for walk-throughs of deliverables.

3.5.3.3 Conversion Subtask Contractor Responsibilities

Contractor responsibilities are to:

- o identify data requirements and source(s) of data for all MMIS files necessary to meet all functional specifications in this ITB;
- o receive files from the state;
- o obtain data from other sources when approved by the state;
- o prepare a Conversion Plan, and provide a walk-through for state staff;
- o test conversion programs and procedures, and provide a walk-through of Conversion Test Results for state staff; and
- o perform preliminary file conversions.

3.5.3.4 Deliverables

The deliverables for the Conversion Subtask are the Conversion Plan, Conversion Test Results, and Preliminary Converted Files.

3.5.3.4.1 Conversion Plan

The minimum requirements are:

- o a detailed plan for conversion of all files, user validation of converted data, and final conversion of files; the plan should include a detailed conversion schedule and the personnel assigned to the conversion of each file;

- o a description of all files to be converted and whether it will be a manual or an automated conversion, or a combination of both;
- o data element mappings, including values, of the old system data elements to the new system data elements, and new data elements to old data elements to ensure all data elements are addressed;
- o a discussion of the management of the conversion effort, including strategies for dealing with delays, back-up plan, back-up personnel, and so forth;
- o procedures for tracking and correcting conversion problems when encountered;
- o procedures for notifying the state of conversion problems encountered; and
- o identification of default values, where necessary.

3.5.3.4.2 Conversion Subtask Conversion Test Results

The minimum requirements are:

- o interim reporting on each file conversion within twenty-four (24) hours of each scheduled file conversion; this interim report will include the following for each file conversion:
 - . all test results;
 - . any problems encountered and the impact on the rest of the conversion schedule; and
 - . before and after versions of each converted file, including default values, formatted for review by non-technical personnel (in certain cases, the state may require only a portion of the file to be formatted for review);
- o a summary of the status of the conversion, including numbers of problems identified by type of problem, numbers of problems corrected, any significant outstanding issues, the effect of any findings on the implementation schedule, and so forth; and
- o copies of all conversion programs and program listings used during the test.

3.5.3.4.3 Preliminary Converted Files

Minimum requirements are:

- o interim reporting on each file conversion within twenty-four (24) hours of each scheduled conversion, to include:

- . any problems encountered and the impact on the rest of the conversion schedule; and
- . before and after versions of each converted file, including default values, formatted for review by non-technical personnel (in certain cases, the state may require only a portion of the file be formatted for review); and
- o versions of manually and automated converted files available for review online, where appropriate.

3.5.3.5 Milestones

Milestones for the Conversion Subtasks are:

- o state approval of Conversion Plan,
- o state approval of Conversion Test Results, and
- o state approval of all preliminary converted files.

All of the above subtask requirements, where appropriate, must be completed for the DSS/DW function if that option is exercised by the State.

3.5.4 ACCEPTANCE TESTING SUBTASK

The Acceptance Testing Subtask is designed to demonstrate that the Oklahoma MMIS, as installed by the contractor, meets Oklahoma specifications and performs all processes correctly. All MMIS subsystems and modules will be tested. Components of the test will require that the contractor demonstrate readiness to perform all contractor MMIS functions and contractual requirements, including manual processes. The state will identify the schedule for test cycles and delivery of output.

Acceptance testing will be conducted in a controlled and stable environment. No modifications to the software or files in the acceptance test library will be made without written prior approval from the state.

The state will utilize two (2) types of acceptance testing:

- o structured data test, and
- o operational readiness test.

The structured data test is designed to test the existence and proper functioning of edits and audits, the accuracy of claim records payment and file maintenance, and the format and content of all system outputs, including outputs from reporting functions such as MARS, utilization management, and EPSDT. These tests may utilize all of, or select parts of, the preliminary converted files.

The operational readiness test is designed to ensure that the contractor is ready to process all inputs, price claim records correctly, meet all reporting requirements, utilize a properly functioning data communications network, and have a demonstrated back-up capacity. Operational readiness testing will include a volume test of several days of production capacity claim records volumes to demonstrate the MMIS and the contractor's staff are prepared for full production. Operational readiness testing may include a pilot test of actual claims processing in a full operational environment through the check request process.

An additional component of the operational readiness test is the demonstration and verification of physical plant security, data security, and fire/disaster prevention and recovery procedures.

3.5.4.1 Requirements

The contractor must:

- o provide a thoroughly tested version of the operational system that meets all Oklahoma requirements and is separate and distinct from its own development and test system;
- o make the acceptance test system available from 7:00 a.m. to 6:00 p.m., Central Time, during the test period; and
- o provide training to the acceptance testing team, including preparation of input data, using MMIS screens, understanding MMIS processes, and reviewing MMIS outputs.

3.5.4.2 State Responsibilities

State responsibilities are to:

- o approve the Acceptance Test Plan,
- o approve the acceptance test criteria and procedures,
- o assist the contractor in preparing acceptance test data,
- o approve the acceptance test schedule,
- o monitor contractor support for acceptance testing,
- o monitor contractor compliance with the test schedule,
- o validate results,
- o inform the contractor of any problems and or discrepancies,
- o use the contractor's change control process to document discrepancies or problems,
- o monitor contractor response and resolution of discrepancies or problems,
- o direct retest after correction of any problems,
- o document results, and
- o approve contractor's operational readiness report.

3.5.4.3 Contractor Responsibilities

Contractor responsibilities are to:

3.5.4.3.1

Ensure that all modifications to the MMIS software or files are thoroughly unit and system tested prior to implementation of the acceptance test.

3.5.4.3.2

Prepare an Acceptance Test Plan.

3.5.4.3.3

Design Acceptance Test criteria and procedures.

3.5.4.3.4

Develop an Acceptance Test Schedule.

3.5.4.3.5

Execute acceptance test cycles according to the schedule provided by the state.

3.5.4.3.6

Perform acceptance test activities as defined for regular Operations Task processing.

3.5.4.3.7

Assist the state in implementation of the acceptance test with respect to generation of test transactions, data, and files, as well as analysis of reasons for unanticipated processing results.

3.5.4.3.8

Provide data entry staff and other data processing staff, other than technical or supervisory-level staff, necessary to perform acceptance test activities.

3.5.4.3.9

Provide senior systems analysts and other technical staff necessary to coordinate acceptance test activities and assist the state in the analysis of test results.

3.5.4.3.10

Provide timely responses to discrepancy notices.

3.5.4.3.11

Maintain the acceptance test software and files as directed and approved by the state.

3.5.4.3.12

Correct, at no cost to the state, any problems resulting from incorrect computer program code, incorrect file conversion, incorrect or inadequate documentation, or from any other failure to meet specifications or performance standards.

3.5.4.3.13

Process, from receipt to final disposition through the check request process, in a fully operational environment, a representative sample of actual or test claim records, as designated by the state, as an operational readiness test; the sample will not exceed a week's volume.

3.5.4.3.14

Prepare the acceptance test resolutions document, including a description of all problems identified and the corrective steps taken.

3.5.4.3.15

Prepare and deliver the updated version of all MMIS user manuals.

3.5.4.3.16

Prepare and deliver the updated version of all MMIS provider manuals.

3.5.4.4 Deliverables

There are five (5) deliverables required for the Acceptance Testing subtask: Acceptance Test Plan, Acceptance Test Resolutions Document, updated MMIS User Manuals, updated MMIS Provider Manuals, and an Operational Readiness Report.

3.5.4.4.1 Acceptance Test Plan

Minimum requirements are:

- o define the approach to acceptance testing;
- o define the resources, both state and contractor;
- o outline the scope of the acceptance testing process;
- o describe the development of the test scenarios to ensure that all subsystems and functions of the MMIS are evaluated and acceptable;
- o define the schedule of the acceptance testing effort; and
- o describe how the acceptance testing process is tracked and monitored to ensure that all testing and re-testing have been satisfactorily completed.

3.5.4.4.2 Acceptance Test Resolutions Document

Minimum requirements are:

- o a summary of the testing process, including number of problems identified and corrected, by type;
- o description of problems identified and corrective steps taken; and
- o description of problems outstanding at the end of acceptance testing, the plan for resolution, and the impact on operations.

3.5.4.4.3 Updated MMIS User Manuals

The contractor must update the user manuals, as described in ITB Subsection 3.5.2.4.3, to reflect changes identified during the acceptance test process. The contractor must provide updated pages to the state for review and approval.

3.5.4.4.4 Updated MMIS Provider Manuals

The contractor must update the provider billing manuals, as described in ITB Subsection 3.5.2.4.5, to reflect changes identified during the acceptance test process. The contractor must provide updated pages to the state for review and approval.

3.5.4.4.5 Operational Readiness Report

The contractor will submit a report that certifies that the MMIS, its subsystems, functions, processes, operational procedures, staffing, telecommunications, and all other associated support is in place and ready for operation.

3.5.4.5 Milestones

Milestones for the Acceptance Testing Subtask are:

- o state approval of the Acceptance Test Plan,
- o state approval of the Acceptance Test Resolutions document,
- o state approval of the updated MMIS user manuals,
- o state approval of the updated MMIS provider manuals, and
- o state approval of contractor's operational readiness report.

All of the above subtask requirements, where appropriate, must be completed for the DSS/DW function if that option is exercised by the State.

3.5.5 IMPLEMENTATION SUBTASK

During the Implementation Subtask, the contractor shall convert existing data and implement the MMIS. Processing of all claim types must be implemented simultaneously. Date of receipt shall determine whether claim records are processed by the new contractor or the previous contractor.

The incumbent is responsible for all claim records processed through the last payment cycle in June 2002. The new contractor will be responsible for all claim records not adjudicated by that date.

3.5.5.1 Implementation Subtask Requirements

There are no subtask-specific requirements identified.

3.5.5.2 State Responsibilities

State responsibilities are to:

- o coordinate and monitor final conversion activities;
- o arrange for transfer of all required files to the contractor;
- o arrange for transfer of archive files and records;
- o review and approve the contractor's notification process and content to inform providers of the new MMIS contract, new billing procedures, and the date from which all claim records are to be submitted to the new contractor;

- o direct the MMIS certification process and act as the contact with HCFA during the certification process;
- o prepare the MMIS certification letters to HCFA;
- o approve contractor produced MMIS certification documentation;
- o approve final file conversion;
- o validate the contents of all edit/audit criteria files and edit disposition files;
- o provide staff time for initial training of the state management, technical, administrative, and clerical personnel;
- o provide policy specialists for contractor provider training sessions to address policy-related questions; and
- o provide staff time for documentation walk-throughs.

3.5.5.3 Implementation Subtask Contractor Responsibilities

Contractor responsibilities are to:

3.5.5.3.1

Accept all current files from the state and the incumbent. Files may be magnetic tape, disk, diskette, or paper.

3.5.5.3.2

Accept all claim-related receipts and pended claim records on hand from the incumbent contractor for MMIS for completion of processing.

3.5.5.3.3

Accept and arrange for storage and backup of archive files transferred on computer-readable media. The storage of archive files shall be maintained in an off-site vault that is water- and fire-resistant, as specified in the contractor's proposal. The files shall be maintained using archival-quality media that are retrievable by the contractor.

3.5.5.3.4

Conduct final MMIS file conversion.

3.5.5.3.5

Balance files to the state's and incumbent's control totals.

3.5.5.3.6

Correct any problems identified during final file conversion.

3.5.5.3.7

Plan and conduct initial training to state management, administrative, technical, and clerical personnel. MMIS training must enable state users to prepare inputs, use on-line windows, interpret reports, and fully understand all MMIS processes.

3.5.5.3.8

Plan and conduct contractor provider training sessions on new billing procedures, policies, and MMIS processing with assistance from the state policy specialists.

3.5.5.3.9

Print and distribute all Oklahoma-unique claim forms.

3.5.5.3.10

Conduct provider re-enrollment or certification, as directed by the state.

3.5.5.3.11

Accept claim records for processing by providers and the state.

3.5.5.3.12

Begin processing all claim types.

3.5.5.3.13

Prepare MMIS Systems Documentation.

3.5.5.3.14

Prepare an Implementation Plan, and provide a walk-through for state staff.

3.5.5.3.15

After state approval, prepare and issue a notice to providers of the new MMIS contract in which transition activities are identified. This shall include, new billing procedures, the date from which all claim records are to be submitted to the new contractor, and all other relevant information required by the provider community to successfully submit claim records.

3.5.5.3.16

Provide MMIS certification support to include:

- o prepare all reports and data necessary for the preliminary letter submission to HCFA as outlined in the State Medicaid Manual, Part 11241
- o prepare certification folders that include all State Medicaid Manual, Parts 11242 and 11243, required documentation, reports, and crosswalks;
- o provide personnel to brief appropriate state staff on certification procedures, system operations, and other information necessary for state staff to make appropriate presentations at the time of certification;
- o provide a walk-through of the Oklahoma facility and operations, if required by the HCFA certification team; and
- o provide MMIS expertise to answer questions or provide insight during the certification process.

3.5.5.4 Deliverables

There are five (5) deliverables for the Implementation Subtask: MMIS Systems Documentation, MMIS Implementation Plan, State Training Plan, Provider Training Plan, and Results of Final File Conversion.

3.5.5.4.1 MMIS System Documentation

The contractor is responsible for providing to the state complete, accurate, and timely documentation of the MMIS. The MMIS Systems Documentation must be provided within thirty (30) days following state acceptance of the MMIS.

Following the Implementation Subtask, the contractor must prepare updates to the MMIS Systems Documentation to incorporate all changes, corrections, or enhancements to the MMIS. Updates to the MMIS Systems Documentation must be delivered to the state prior to state sign off of the change, unless otherwise agreed to by the state.

Four (4) copies of the final version of the MMIS Systems Documentation must be provided to the state. The contractor will be responsible for supplying any copies of the MMIS Systems Documentation required by HCFA.

The MMIS Systems Documentation must:

- o be available and updated on electronic media (diskette, tape, cartridge) and must be maintainable after turnover;
- o have all narrative created and maintained in Word 97 or higher (compatible with state version) and be provided to the state on request on diskette;
- o be organized in a format which facilitates updating and revisions must be clearly identified;

- o include system and subsystem narratives which are understandable by non-technical personnel;
- o contain an overview of the system, including:
 - . a narrative of the entire system;
 - . a description and flow charts showing the flow of major processes in the system;
 - . multiple sets of hierarchic, multi-level charts, that give a high, medium, and detail view of the system, for both on-line and batch processes;
 - . a description of the operating environment; and
 - . the nomenclature used in the overview should correspond to nomenclature used in subsystem documentation (all subsystems must be referenced, and documentation must be consistent from the overview to the specific subsystems and between subsystems);
- o contain the following documentation for each subsystem:
 - . subsystem name and numeric identification;
 - . subsystem narrative, including each function and feature of the subsystem;
 - . subsystem flow charts, identifying each program, input, output, and file;
 - . job streams within subsystems identifying programs, input and output, controls, job stream flow, Job Control Language (JCL), operating procedures, and error and recovery procedures;
 - . on-line teleprocessing tables and entries;
 - . identification and listing of all contractor internal control reports;
 - . for all forms, screens, tapes, and other inputs: input definitions, including names, descriptions, sources, examples, and content definition;
 - . for all screens, reports, tapes, and other outputs: output definitions, including names, numbers, sources, destinations, examples, and content definition; tape/cartridge specifications, file descriptions, and record layouts must be included for all data stored on tape or cartridge;
 - . listings of edits and audits applied to each input item, including detailed edit logic, claim and provider types affected, edit disposition, suspense and override data, and corresponding error messages;

- . program documentation to include, at a minimum:
 - program narratives, including process specifications for each, the purpose of each, and the relationships between the programs and modules;
 - a list of input and output files and reports, including retention;
 - file layouts;
 - file names and dispositions;
 - specifics of all updates and manipulations;
 - program source listing;
 - comments in the internal identification division of the listing, identifying changes to the program by date, author, and reason; and
 - comments in the internal procedure division of the listing, identifying each subroutine and each major entrance, exit, and function of the subroutine;
- . detailed program logic descriptions and edit logic (or decision tables), including, at a minimum, the sources of all input data, each process, all editing criteria, all decision points and associated criteria, interactions and destination links with other programs, and all outputs;
- . detailed pricing logic for all claim records processed by the system;
- . physical file definitions;
- . for all files, including intermediate and work files: file descriptions and record layouts, with reference to file names and numbers; data element names, numbers, number of occurrences, length, and type; record names, numbers, and lengths; and file maintenance data, such as number of records, file space, and so forth;
- . lists, by identifying name, of all files, inputs, and outputs with cross-references to the programs in which they are used;
- o contain a data element dictionary which will include, for each data element:
 - . a unique data element number;
 - . a standard data element name;
 - . a narrative description of the data element;

- . a list of data names used to describe the data element;
- . a table of values for each data element;
- . the source of each data element;
- . a cross-reference to the corresponding Part 11 of the State Medicaid Manual;
- . a list of programs using the data element, describing the use of input, internal, or output; and
- . a list of files containing the data element;
- o contain operations run documentation with schedules and dependencies; and
- o support state and federal monitoring activities.

3.5.5.4.2 MMIS Implementation Plan

The MMIS Implementation Plan identifies all the activities which must be accomplished for a successful implementation, including dates. Minimum requirements are:

- o identify plans and schedules for designing, ordering, and distributing all required MMIS forms;
- o identify cutover procedures and dates for submittal of claim records on EMC and hard copy;
- o document resolution of inventory issues (for example, suspense, claim records on hand, provider enrollments) and associated dates;
- o document plans for installation of lines and workstations at the state;
- o specify methodology for handling adjustments to incumbent-processed claim records;
- o identify procedures and dates for provider enrollment and/or re-certification; and
- o identify the process to accommodate provider updates, recipient data changes, reference changes, and medical authorizations, after final conversion but before implementation.

3.5.5.4.3 State Training Plan

The State Training Plan identifies all the activities leading up to, and including, the training of state user staff, at all levels, in the proper use of the MMIS. Minimum requirements are:

- o description of training materials;
- o description of training facilities (for example, use of screens);
- o training schedule;
- o plans for remedial training; and
- o methodology to ensure continued training during the Operations Task for new staff or staff changing positions (for example, use of videotapes).

3.5.5.4.4 Provider Training Plan

The Provider Training plan identifies all the activities leading up to, and including, the training of all provider types in proper billing procedures, understanding of RAs, and so forth. Minimum requirements are:

- o description of training materials,
- o training schedule for all provider types across the state and selected out-of-state providers,
- o providing experienced training staff throughout the contract period,
- o locations for training, and
- o plans for remedial and ongoing training during operations.

3.5.5.4.5 Results of Final File Conversion

The minimum requirements are:

- o interim reporting on each file conversion within twenty-four (24) hours of each scheduled conversion to include:
 - . any problems encountered and the impact on the remaining conversion schedule;
 - . before-and-after versions of each converted file formatted for review by non-technical personnel, including default values (in certain cases, the state may require only a portion of the file be formatted for review); and
- o versions of manually and automated converted files available for review online, where appropriate.

3.5.5.5 Milestones

Milestones for the Implementation Subtask are:

- o state approval of final file conversions,
- o state approval of MMIS Systems Documentation,
- o state approval of the Implementation Plan,

- o state approval of the contractor's notice that the MMIS is fully operational for all claim types; and
- o MMIS certification approval from HCFA.

All of the above subtask requirements, where appropriate, must be completed for the DSS/DW function if that option is exercised by the State.

3.6 OPERATIONS TASK

The contractor's Scope of Work includes performance of thirty-two (32) operational subtasks. These subtasks correspond to the functional requirements addressed in ITB Subsection 3.3. Each is presented in terms of:

- o state responsibilities,
- o contractor responsibilities, and
- o performance expectations.

In addition to the performance expectations included in this subsection, specific performance standards are also defined in ITB Section 6.

The responsibilities identified for this task include manual, as well as automated, functions. The contractor must perform all functions necessary to operate a successful, complete, and certifiable Oklahoma MMIS.

The responsibilities in this subsection are presented by function.

- o Recipient Data Maintenance;
- o Recipient Identification Card;
- o Eligibility Verification and Provider Inquiry System;
- o Provider Data Maintenance;
- o Reference Data Maintenance
- o Electronic Data Interchange(EDI) and Claim Capture;
- o Edit/Audit Processing;
- o Claims Pricing;
- o Enhanced Claims Editing
- o Adjustment Processing;
- o Financial Processing;
- o Quality Control/Assurance;
- o Claims Adjudication;
- o Claims Resolution;
- o Medical Authorization Processing;
- o Long Term Care Processing;
- o Pre-Admission Screening and Annual Resident Review (PASRR) and Medical Eligibility Determination and Tracking System (MEDATS)- (PASMED);
- o Managed Care;
- o Early and Periodic Screening, Diagnosis, and Treatment (EPSDT);

- o Third Party Liability Processing (TPL);
- o Case Management;
- o Financial Accounting and Reporting;
- o Retrospective Drug Utilization Review (DUR)
- o Prospective Drug Utilization Review (PRO-DUR)/Electronic Claims Management (ECM);
- o Drug Rebate Processing;
- o Security Management;
- o Customer Service;
- o Quality Assurance;
- o Internet;
- o Management Administrative Reporting (MAR);
- o Decision Support System/Data Warehouse (DSS/DW);
- o Surveillance and Utilization Review (SUR)/Fraud and Abuse;
- o SUR Case Tracking; and
- o Staff Performance Tracking.

3.6.1 RECIPIENT DATA MAINTENANCE

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.1.1 Recipient Data Maintenance State Responsibilities

State responsibilities are to:

- o determine which individuals are eligible to receive medical assistance benefits;
- o determine benefit limitations and applicable timeframes;
- o maintain recipient eligibility information on the PS/2;
- o perform all Buy-In activities;
- o update changes to TPL, patient liability, and medical coverage groups and provide it to the MMIS contractor in an agreed upon format and media, on an agreed upon periodic basis;
- o define the desired content, format, frequency, and media for reports;
- o approve on-line windows; and
- o assist in the correction of errors and discrepancies resulting from the recipient update process if the contractor is unable to correct them.

3.6.1.2 Recipient Data Maintenance Contractor Responsibilities

Contractor responsibilities are to:

- o access PS/2 for on-line receipt of recipient eligibility data;
- o maintain the MMIS recipient data set(s);
- o generate a file of financial transactions for Buy-In and provide it to the state in an agreed upon format and media, on an agreed upon periodic basis;
- o ensure that all existing and new requirements of the State Medicaid Manual, and state and federal policy are met by the Recipient Data Access function;
- o generate and distribute all Medicaid identification cards, including replacements;
- o allow on-line updates for recipient data changes;
- o provide current recipient eligibility, TPL, and other required information to the ELIGIBILITY VERIFICATION AND PROVIDER INQUIRY SYSTEM and/or claims processing;
- o perform reconciliation of the MMIS recipient file to the PS/2 eligibility file;
- o research and resolve recipient file discrepancies, seeking state assistance when necessary;
- o provide on-line inquiry access windows for all recipient data;
- o maintain appropriate controls and audit trails to ensure that the recipient eligibility data inquired for and received is used for eligibility verification and each claims processing cycle;
- o provide all recipient reports according to state specification; and
- o support all Recipient Data Access functions, files, and data elements necessary to meet the requirements of this ITB.

3.6.1.3 Recipient Data Maintenance Performance Expectations

Performance expectations are that the recipient data must be received from the PS/2 in real-time update mode and be available following a daily batch update in the claims processing and/or eligibility verification system for the next working day processing.

3.6.2 RECIPIENT IDENTIFICATION CARD

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.2.1 Recipient Identification Card State Responsibilities

State responsibilities are to:

- o determine categories of recipients who are to receive the identification cards;
- o determine format and content of identification cards; and
- o determine procedures regarding issuance and replacement.

3.6.2.2 Recipient Identification Card Contractor Responsibilities

Contractor responsibilities are to:

- o maintain recipient eligibility data necessary to produce the identification cards;
- o process requests for new and replacement identification cards;
- o produce and distribute identification cards;
- o track the distribution of identification cards.

3.6.2.3 Recipient Identification Cards Performance Expectations

The performance expectations are:

- o produce and distribute replacement identification cards within twenty-four (24) hours of request; and
- o produce report on card distribution on a daily basis

3.6.3 ELIGIBILITY VERIFICATION AND PROVIDER INQUIRY SYSTEM

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.3.1 Eligibility Verification and Provider Inquiry System State Responsibilities

State responsibilities are to:

- o review and approve all Eligibility Verification and Provider Inquiry System-related documentation furnished to providers; and
- o review reports and monitor Eligibility Verification and Provider Inquiry System activities to ensure compliance with ITB provisions.

3.6.3.2 Eligibility Verification and Provider Inquiry System Contractor Responsibilities

Contractor responsibilities are to:

- o maintain an Eligibility Verification and Provider Inquiry System for Oklahoma medical assistance providers to verify recipient eligibility and

other pertinent data such as TPL resources, last medical and dental screening, transaction reference number of inquiry, Managed Care Program, recipient spend down data, lock-in, medical authorization, remittance advices, claims history, and so forth;

- o identify compatible personal computer and mainframe computer/mini-computer configurations, and, if appropriate, point of sale devices for use with the Eligibility Verification and Provider Inquiry System;
- o use current (same day) data and provide it as a response to electronic verification inquirers;
- o provide appropriate staff levels to support this function;
- o provide access to the Eligibility Verification and Provider Inquiry System in a variety of methods, including direct and dial-up lines from switch vendors, personal computer, the Internet, telephone, and so forth;
- o supply, install, and operate the necessary software and communication lines required for providers to access the Eligibility Verification and Provider Inquiry System utilizing their own equipment such as personal computers, telephones and telephone lines;
- o provide the necessary training to providers and state personnel, as needed, in how to use the Eligibility Verification and Provider inquiry System;
- o develop, produce, and distribute Eligibility Verification and Provider Inquiry System provider and user manual sections and other documentation to providers and state staff;
- o produce all Eligibility Verification and Provider Inquiry System-related reports according to state specifications;
- o provide a contingency resource, including use of contractor staff, for situations when the Eligibility Verification and Provider Inquiry System is down;
- o provide for logging all inquiries from providers; and
- o make recommendations on any area in which the contractor thinks improvements can be made.

3.6.3.3 Eligibility Verification and Provider Inquiry System Performance Expectations

Contractor performance expectations are as follows.

- o provide sufficient access lines so that Oklahoma medical assistance providers do not encounter busy conditions at least ninety-nine percent (99 percent) of the time;
- o provide a back-up system to assure that Eligibility Verification and Provider Inquiry System and the associated network downtime is limited to a maximum of thirty (30) continuous minutes; and
- o provide eligibility verification availability 24 hours per day, 7 days a week, except for agreed upon downtime for updates and preventative maintenance.

3.6.4 PROVIDER DATA MAINTENANCE

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.4.1 Provider Data Maintenance State Responsibilities

State responsibilities are to:

- o develop policy governing provider participation in the Oklahoma Health Care Authority Program;
- o develop format and contents of state provider agreements;
- o sign-off on complete enrollment approval packages forwarded by the contractor;
- o perform all provider relations activities;
- o develop quarterly provider newsletters;
- o provide the contractor with criteria for deactivating/purging providers' records;
- o provide the contractor in writing, performing on-line updates, any changes to provider file data which come to the attention of the state;
- o approve all provider-specific payment rate updates, including mass or paper updates;
- o approve the contractor's training plan and training materials;
- o define the desired content, format, frequency, and media for reports;

- o approve or modify all provider issuances, including manuals, handbooks, bulletins, and notices developed by the contractor;
- o develop and distribute provider training packets that includes program descriptions, billing instructions, and a description of appropriate medical services;
- o approve contractor-developed EMC billing software and instructions;
- o determine and provide the contractor in writing, any service restrictions to be placed on individual providers and to be updated to the provider data on-line;
- o notify the contractor of the number, sequence and sort selection of mailing labels to be produced;
- o perform provider file updates to specific fields finalized during the Design Subtask; and
- o sign off on enrollment and certification updates for all providers.

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3.6.4.2 Provider Data Maintenance Contractor Responsibilities

Contractor responsibilities are to:

- o operate and maintain the Provider Data Maintenance function, including the maintenance of a provider master data set or master file;
- o update the provider master file on an immediate on-line basis to reflect changes brought to the attention of the contractor by the state, providers, or from within;
- o enter state approved, provider specific payment rate updates, including mass or paper updates, into the MMIS on-line;
- o establish methods to edit and verify accuracy of provider file data;
- o maintain a physical file on all approved and denied providers. The file for approved providers must contain applications, provider agreements, copy of the provider license, and all correspondence relating to certification, enrollment or resulting in provider file updates. Files for denied providers will include applications and/or profile information and documentation regarding the reason for the denial;
- o develop and produce a state approved informational booklet for prospective providers;
- o develop and print, subject to state approval, the provider application form(s);
- o receive requests for enrollment and mail all enrollment packets to providers;
- o facilitate provider enrollment process by distributing enrollment materials, receiving and screening provider enrollment forms, including reviewing returned packets for completeness and obtaining missing information, forwarding complete forms to the state for eligibility approval, and entering approved data into the provider file. Enroll providers eligible to provide medical assistance services;
- o print the state developed provider agreement;
- o notify providers of acceptance/rejection as a Oklahoma Medicaid provider and send accepted providers a start-up packet containing all the information for participation in and for billing the state for Medicaid services, to eligible recipients;
- o perform provider re-enrollment resulting from HIPAA regulations;
- o make available to the state on-line inquiry capability for prompt access to the provider files;

- o verify required licenses and certifications;
- o maintain regular communication with the applicable state agencies to perform certification and licensure verification. Verify certification in neighboring states for certifying out-of-state providers and handle all out-of-state provider activities;
- o distribute, receive, and process provider contracts;
- o track the provider application process through final disposition of the application;
- o provide ongoing training to providers on a group or individual basis about the Oklahoma medical assistance program, the claims processing system, and proper billing and Medical Authorization procedures through workshops, training sessions, presentations at professional association meetings, individual training, as needed, and the production and distribution of provider manuals and bulletins;
- o target for special training those providers who have been identified as having an abnormal number of claims denied or suspended, as defined by OHCA;
- o print at no charge, all claim forms (except UB-92, and HCFA-1500) unique to the Oklahoma Health Care Authority Program, including Medical Authorization forms;
- o distribute all claim forms unique to the Oklahoma Health Care Authority Program, all consent forms, and maintain inventory control over all forms;
- o supply all providers with the most current provider manual materials through continual updates and semi-annual reprinting of manuals to fold in updates so that new and replacement manuals being distributed are all inclusive, as well as replacement manuals when necessary;
- o provide copies (in electronic and paper format) of provider manuals to OHCA and other departments as specified by the state, the number of copies to be determined by the state;
- o inform providers about electronic billing, automated remittance, and EFT options, and work with providers to finalize appropriate formats for the data transfer including testing of interface;
- o develop, and make available free of charge, software, including updates, for providers to submit EMC via personal computer;
- o develop and submit to the state for approval a provider training and recruitment plan annually at the beginning of the contract year and update the plan as necessary;

- o conduct provider training, including, when necessary, personnel from OHCA and other departments;
- o develop, distribute, and evaluate provider training questionnaires from all training sessions, and provide the state with a summary of the provider responses;
- o maintain and submit to the state records of all providers (by provider type) who participate in training sessions;
- o provide training in the use of the Provider system to state personnel initially and on an ongoing basis;
- o conduct provider site visits on an as needed basis;
- o submit all provider reports to the state on a timely basis;
- o make recommendations on any area in which the contractor thinks improvements can be made;
- o conduct mass updates of the provider file when directed to do so by the state;
- o receive and appropriately process returned provider mail; and
- o write, with state approval, and distribute, provider satisfaction questionnaires to all providers on a yearly basis.

3.6.4.3 Provider Data Maintenance Performance Expectations

Contractor performance expectations are to:

- o mail provider enrollment packets within two (2) days of request;
- o process complete provider applications within five (5) days of receipt;
- o have trained provider representatives visit a new provider, (first time enrollee) within ten (10) days of application approval;
- o test and report results of electronic billing, automated remittance, and electronic fund transfer options within ten (10) business days of a provider's written notice that he is ready to test;
- o produce and mail 1099s no later than January 31 of each year for the previous year; and
- o mail claim forms and other billing documents to providers within five (5) days of request for the forms.

3.6.5 REFERENCE DATA MAINTENANCE

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.5.1 Reference State Responsibilities

State responsibilities are to:

- o establish specific pricing criteria for all Procedure, Pricing, and Drug files;
- o identify all service codes (HCPCS, NDC) which are not covered under the Oklahoma medical assistance program;
- o provide all unique Oklahoma service codes to the contractor;
- o specify the benefit limitation and service conflict criteria to be applied through the use of the Edit/Audit Criteria file;
- o identify the procedures, drugs, and diagnoses which require Medical Authorization.
- o initiate updates, by giving the contractor a request in writing, or making on-line updates to the reference files (excluding drug file);
- o approve all updates on an ongoing basis (excluding drug file);
- o provide the operational and policy parameters used by the contractor to design or modify edits and audits;
- o define alternate pricing methodologies to be implemented in the future;
- o define the desired content format, frequency, and media for reports; and
- o respond to all inquiries from the contractor regarding discrepancies in Reference file information.

3.6.5.2 Reference Contractor Responsibilities

Contractor responsibilities are to:

- o operate the Reference Data Maintenance function of the MMIS;
- o maintain all Reference files and ensure that only the most current information is used in claims processing;
- o provide the state with on-line inquiry and update capabilities to all Reference files;
- o provide training to the state in the use of the Reference functions initially and on an ongoing basis;

- o contract with a drug updating service to update drug prices at least weekly, and provide the state with two (2) sets of complete drug catalogs three (3) times per year, and with periodic catalog updates as they are issued by the update service;
- o perform on-line and mass updates to the Reference files as specified by the state;
- o provide the required reports, on-line listings, and/or microform of the Reference files to the state;
- o support all Reference Data Maintenance functions, files, and data elements necessary to meet the requirements in this ITB;
- o identify and advise the state of changes to edits and audits to enhance processing and efficiency; and
- o make recommendations on any area in which the contractor thinks improvements can be made.

3.6.5.3 Reference Performance Expectations

Contractor performance expectations are to:

- o correctly apply updates to the Reference files within two (2) working days of the update processing, and
- o provide listings of the Reference files to the state within one (1) week of receipt of the request.

3.6.6 ELECTRONIC DATA INTERCHANGE (EDI) AND CLAIM CAPTURE

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.6.1 Electronic Data Interchange (EDI) and Claim Capture State Responsibilities

State responsibilities are to:

- o determine policies and procedures for EDI;
- o authorize claim forms (state specific) to be used for each service; and
- o determine the requirements for claims attachments.

3.6.6.2 Electronic Data Interchange (EDI) and Claim Capture State Responsibilities

Contractor responsibilities are to:

- o accept state approved claim forms in EDI format;
- o accept paper or hard copy claims;
- o monitor and track claims;
- o conform to all HIPAA required EDI formats;
- o resolve data entry errors;
- o maintain batch controls and audit trails; and
- o maintain extract files which contain key elements of support files to verify the validity of claim information and keying accuracy.

3.6.6.3 Electronic Data Interchange (EDI) and Claim Capture State Responsibilities

Performance expectations are to:

- o assign a unique control number to every claim, attachment, and adjustment within twenty-four (24) hours of receipt at the contractor's site;
- o enter hard-copy claims within two (2) days of receipt;
- o maintain data entry error rates below established standards;
- o load electronically submitted claims within twenty-four (24) hours of receipt by the contractor;
- o perform daily presence, format, and validity editing on entered claims;
- o return hard-copy claims missing required data within twenty-four (24) hours of receipt;
- o microform every claim and attachment within twenty-four (24) hours of receipt at the contractor's site;
- o retain hard-copy documents and claim records until the batch is fully adjudicated; and
- o retrieve hard-copy claim documentation from microform within twenty-four (24) hours of the request.

3.6.7 EDIT/AUDIT PROCESSING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.7.1 Edit/Audit Processing State Responsibilities

State responsibilities are to:

- o approve edit and audit criteria;

- o approve duplicate or suspect-duplicate audit criteria;
- o approve criteria and procedures for adjudication of "special" claim (that is, bypass edit/audit conditions);
- o determine prepayment and medical review criteria;
- o determine the disposition of edits and audits (suspend, claim correction form, deny, report, message only);
- o provide, on an ongoing basis, written approval of all accepted adjudication processes;
- o resolve suspended claims that require special handling, such as out-of-state claim records or medical expertise as defined by a decision tree approved by the state;
- o perform on-line inquiry into edit/audit criteria and disposition files; and
- o perform on-line updates to the edit/audit criteria and disposition files.

3.6.7.2 Edit/Audit Processing Contractor Responsibilities

Contractor responsibilities are to:

- o propose edit and audit criteria;
- o propose duplicate or suspect-duplicate audit criteria;
- o propose criteria and procedures for adjudication of "special" claims (that is, bypass edit/audit conditions);
- o verify that services performed are consistent with services previously rendered to the recipient and that they comply with state policy and medical criteria;
- o manually and systematically review and resolve any claims that suspend for any of the edits and/or audits, determined by the state;
- o adjudicate suspended claim records after review by the contractor or state staff;
- o process "special" claims, including late billing, recipient retro-eligibility, out-of-state emergency, payment under court order, result of an appeal/fair hearing, class action suit, and any other state-defined situation, in accordance with state instructions;

- o maintain the edit/audit disposition indicator on an error disposition file in the Reference Data Maintenance function. This file shall also indicate whether a particular edit can be forced or overridden;
- o make recommendations on any area in which the contractor thinks improvements can be made; and
- o support all Edit/Audit Processing functions, files, and data elements necessary to meet the requirements of this ITB.

3.6.7.3 Edit/Audit Processing Performance Expectations

Contractor performance expectations are to:

- o perform at least one (1) edit processing run per week,
- o perform at least one (1) audit processing runs per week, and
- o adjudicate claim records in accordance with the requirements detailed in the State Medicaid Manual, Part 11, Section 11325.

3.6.8 CLAIMS PRICING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.8.1 Claims Pricing State Responsibilities

State responsibilities are to:

- o provide, on an ongoing basis, written approval of all accepted pricing methodologies; and
- o perform on-line entry of manual pricing of certain claim records.

3.6.8.2 Claims Pricing Contractor Responsibilities

Contractor responsibilities are to:

- o price all claim records in accordance with Oklahoma medical program policy, benefits, and limitations as defined by the state;
- o maintain sufficient staff to manually price claims according to state-specified criteria;
- o process Medicare coinsurance and deductible charges from providers on hard-copy and electronic media;
- o maintain a method to process for payment any specific claim(s), as directed by the state, on an exception basis and maintain an audit trail; and
- o make recommendations on any area in which the contractor thinks improvements can be made.

3.6.8.3 Claims Pricing Performance Expectations

Contractor performance responsibilities are to:

- o perform at least one (1) pricing cycle per week; and
- o manually price claims within fourteen (14) working days.

3.6.9 ENHANCED CLAIMS EDITING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.9.1 Enhanced Claims Editing State Responsibilities

State responsibilities are to:

- o approve the edit and audit criteria utilized by the Enhanced Claims Editing process and ensure that the criteria is consistent with OHCA Medicaid policy,
- o determine the content of non-payment notification letters, remittance advices, and EOBs; and

- o establish policies and procedures for expanded Medical Review and perform the required reviews.

3.6.9.2 Enhanced Claims Editing Contractor Responsibilities

Contractor responsibilities are to:

- o operate and maintain the Enhanced Claims Editing function according to the policies prescribed by the state;
- o apply updates to the edit and audit criteria, and disposition requirements as instructed by the state;
- o maintain a record of potential cost savings realized by expanded edits and audits; and
- o produce and deliver reports on Enhanced Claims Editing operations and activity as required by the state.

3.6.9.3 Enhanced Claims Editing Performance Expectations

Performance expectations are to:

- o implement updates to the edit and audit criteria on an agreed upon time frame, and
- o produce and deliver reports on Enhanced Claims Editing operations on-line and in other media specified by the state on an agreed upon schedule.

3.6.10 ADJUSTMENT PROCESSING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.10.1 Adjustment Processing State Responsibilities

State responsibilities are to:

- o determine adjustment parameters based on policy changes and edit/audit criteria;
- o determine format and content of letters to providers regarding accounts receivable;
- o perform the individual and mass adjustments; and
- o recover payments for claims denied by Peer Review Organizations;

3.6.10.2 Adjustment Processing Contractor Responsibilities

Contractor responsibilities are to:

- o maintain audit trails of all adjustments;
- o update provider, recipient and claims history files;
- o maintain an on-line adjustment selection screen;
- o generate letters to providers regarding accounts receivable;
- o track collected dollars; and
- o produce and deliver reports on adjustment activities including recoveries, recoupments, and refunds.

3.6.10.3 Adjustment Processing Performance Expectations

Performance expectations are to:

- o process the adjustment offset in the same claims payment cycle when required; and
- o produce the required reports on a schedule specified by the state.

3.6.11 CLAIMS ADJUDICATION

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.11.1 Claims Adjudication State Responsibilities

State responsibilities are to:

- o define the desired content, format, frequency, and media for reports;
- o review and follow-up on reported questionable claim records from returned EOBs and RAs; and
- o review all inventory management and other operational claim records reports.

3.6.11.2 Claims Adjudication Contractor Responsibilities

Contractor responsibilities are to:

- o produce and distribute recipient EOBs;
- o produce and distribute provider RAs;
- o screen returned EOBs for discrepancies and produce monthly reports which identify the percentage of claims questioned, the number of claim records questioned, and the dollar amount of the claims questioned;
- o provide on-line inquiry access to active and permanent claims history files and the status of suspended claims;

- o maintain a claim control and inventory system approved by the state;
- o provide the state with micromedia or hard-copy original claims, adjustments, attachments, non-claim transaction documents, and all EMC billings for all transactions processed, as requested by the state;
- o provide training to state staff in the use of the claims processing system, initially and on an ongoing basis;
- o produce all required claims adjudication and operations reports and deliver to the state;
- o provide claims payment data to the state;
- o make recommendations on any area in which the contractor thinks improvements can be made; and
- o support all the Claims Adjudication functions, files, and data elements necessary to meet the requirements of this ITB.

3.6.11.3 Claims Adjudication Performance Expectations

Contractor performance expectations are to:

- o enter within one (1) day of receipt, state and district office requests for recipient and provider history printouts;
- o generate EOBs no less frequently than every forty-five (45) days and within two (2) business days after the most current payment processing cycle;
- o generate remittance advices with the payment cycle; and
- o produce claims inventory reports after each processing cycle.

3.6.12 CLAIMS RESOLUTION

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.12.1 Claims Resolution State Responsibilities

State responsibilities are to:

- o specify error override and force policy and procedures ;
- o resolve manually and systematically suspended claim from edit and audit processing;
- o accept electronic claim resolution forms from providers;
- o monitor the use of override codes during the claims resolution process to identify potential abuse, based on state-defined guidelines;
- o identify individuals who are authorized to perform a force or override on an error code based on individual operator identification or authorization level;
- o identify those individuals who performed a force or override on an error code;
- o identify claims which suspend for medical review, and refer those claims to the state medical consultants, as needed;
- o override claim edits and audits in accordance with guidelines; and
- o make on-line resolutions to claim records referred by the contractor, based on the decision logic identified by the state.

3.6.12.2 Claims Resolution Contractor Responsibilities

Contractor responsibilities are to:

- o operate and maintain an on-line claims resolution function in the MMIS, including resolution of all data entry errors;
- o refer claims to the state for resolution according to policy and procedures;
- o maintain claim resolution screens that display all claim records data entered and corrected; and
- o make recommendations on any area in which the contractor thinks improvements can be made.

3.6.12.3 Claims Resolution Performance Expectations

Contractor performance expectations are to transmit claims that suspend to the state staff for resolution within one (1) working day.

3.6.13 MEDICAL AUTHORIZATION PROCESSING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.13.1 Medical Authorization Processing State Responsibilities

State responsibilities are to:

- o receive and determine approval/denial of Medical Authorization requests for all Oklahoma medical assistance services that require Medical Authorization;
- o enter PA requests, approvals, and the like onto the MMIS Medical Authorization system, on-line;
- o review and approve of all Medical Authorization error messages and notification letter content;
- o approve the format of all Medical Authorization request forms and related material;
- o specify Medical Authorization record purge criteria;
- o define the desired content, format, frequency, and media for reports;
- o resolve Medical Authorization disputes at fair hearings; and
- o determine which services will require Medical Authorization.

3.6.13.2 Medical Authorization Processing Contractor Responsibilities

Contractor responsibilities are to:

- o operate the Medical Authorization function of the Oklahoma MMIS;
- o at the state's direction, enter data to the Medical Authorization function through batch entry or on-line;
- o purge old Medical Authorization records according to state-specified criteria;
- o provide on-line inquiry and access to the Medical Authorization data set;
- o produce and mail provider Medical Authorization notices of approved, denied, or suspended Medical Authorization requests;
- o produce and mail bilingual recipient Medical Authorization denial notices;
- o access the Medical Authorization function during claims processing;

- o access LTC facility Medical Authorization data to produce nursing facility TADs used for billing;
- o produce all Medical Authorization reports according to state specifications;
- o provide training to state staff in the use of the Medical Authorization screens, windows, and reports;
- o support all Medical Authorization functions, features, and data elements necessary to meet the requirements of this ITB; and
- o make recommendations on any area in which the contractor thinks improvements can be made.

3.6.13.3 Medical Authorization Processing Performance Expectations

Contractor performance expectations are to generate and distribute Medical Authorization approval, denial, and suspense notices to providers and bilingual Medical Authorization denials to recipients within twenty-four (24) hours of input or processing.

3.6.14 LONG-TERM CARE (LTC) PROCESSING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.14.1 LTC Processing State Responsibilities

State responsibilities are to:

- o maintain recipient-specific data on PS/2;
- o define the desired content, format, frequency, and media for reports;
- o provide LTC facility rates to the MMIS contractor; and
- o maintain facility certification and review information.

3.6.14.2 LTC Processing Contractor Responsibilities

Contractor responsibilities are to:

- o generate monthly TADs to LTC providers,
- o enter changes to the TAD as input to the claims processing system,
- o produce all LTC reports according to state-specified criteria,
- o identify providers due for recertification or review sixty (60) days prior to the due date, and

- o make recommendations on any area in which the contractor thinks improvements can be made.

3.6.14.3 LTC Processing Performance Expectations

The performance expectation is to generate and mail out TADs to providers no later than ten (10) days prior to the end of each month.

3.6.15 PRE-ADMISSION SCREENING AND ANNUAL RESIDENT REVIEW (PASRR) AND MEDICAL ELIGIBILITY DETERMINATION AND TRACKING SYSTEM (MEDATS) – (PASMED)

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.15.1 PASRR and MEDATS State Responsibilities

State responsibilities are to:

- o determine criteria for level of care for institutional settings;
- o provide format and content for referrals and letters;
- o conduct all medical surveys and reviews;
- o accept referrals from recipients' nursing facilities, hospitals, nurses, and so forth; and
- o enter and update data into PASRR and MEDATS.

3.6.15.2 PASRR and MEDATS Contractor Responsibilities

Contractor responsibilities are to:

- o maintain the PASRR and MEDATS systems;
- o provide required reports;
- o identify cases due for review; and
- o provide claim histories.

3.6.15.3 PASRR and MEDATS Performance Expectations

The performance expectations are to:

- o identify cases due for review sixty (60) days prior to review month;
- o provide claim histories within forty-eight (48) hours of request; and
- o provide reports within state approved time frames.

3.6.16 MANAGED CARE

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.16.1 Managed Care State Responsibilities

State responsibilities are to:

- o analyze and define policies and procedures to guide the development and operation of capitated payment programs in Oklahoma;
- o enter into agreements with HMOs, and other prepaid health plans to serve as providers;
- o negotiate with HCFA concerning the terms and structure of the program, and amend the State Plan as needed; and
- o perform other program development activities as required.

3.6.16.2 Managed Care Contractor Responsibilities

Contractor responsibilities are to:

- o implement all identified functional requirements needed to support capitated payment managed care programs;
- o implement the ability to timely enroll/disenroll eligibles into managed care entities;
- o provide data requested by the state to facilitate the program development and implementation effort;
- o accept and process encounter claim data from managed care plans; and
- o make recommendations for improvements when possible.

3.6.16.3 Managed Care Performance Expectations

The performance expectation is to complete all updates to provider, reference, recipient data, and adjudication processes within the timeframes specified in Part 11 of the State Medicaid Manual.

3.6.16 EARLY AND PERIODIC SCREENING DIAGNOSIS AND TREATMENT (EPSDT) PROCESSING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.17.1 EPSDT Processing State Responsibilities

State responsibilities are to:

- o assure that eligible recipients are periodically informed of the availability of EPSDT services and benefits, according to 42 CFR, Part 441;
- o determine and interpret all policy and administrative decisions regarding EPSDT;
- o through the Oklahoma OHCA district offices, offer support services as necessary to eligible EPSDT recipients and arrange for those services when requested, and to aid in administering case management activities;
- o generate and distribute periodic follow-up or reminder correspondence to recipients about upcoming or overdue appointments, initial and follow-up letters about EPSDT benefits, schedules for well-child exams and immunizations, and other EPSDT related information and events;
- o assure tracking of the provision of support services for EPSDT eligibles who request them;
- o assure the follow up of recipients who have requested services but for whom there is no indication of service provided;
- o assure the current periodicity schedule;
- o define the desired content, format, frequency, and media for reports; and
- o monitor program effectiveness using reports produced by the contractor.

3.6.17.2 EPSDT Processing Contractor Responsibilities

Contractor responsibilities are to:

- o operate the EPSDT function of the MMIS, including the creation of an EPSDT tracking file which includes screening, referral, diagnosis, and treatment data for all EPSDT-eligibles;
- o make available to the state on-line inquiry capability for access to the EPSDT files;
- o document services provided, referrals made, and treatment received to meet federal and state EPSDT reporting requirements and provide the information needed for EPSDT policy decisions;
- o identify and report abnormalities found during screenings and referred for treatment, from data submitted on claim forms or managed care data;
- o identify and report (from paid claim records and managed care data) clients receiving treatment under the EPSDT program;

- o produce the HCFA-416 and program management reports and containing recipient-level and summary data relating to EPSDT services, referrals, and follow-up treatment using both fee-for-service and encounter claim records data;
- o provide training in the use of the EPSDT Subsystem to OHCA state personnel, initially and on an ongoing basis;
- o provide the state an extract of paid EPSDT claim records;
- o provide information on completing claim forms for EPSDT services in provider manuals;
- o make recommendations on any area in which the contractor thinks improvements can be made; and
- o support all EPSDT Subsystem functions, files, and data elements necessary to meet the requirements in this ITB.

3.6.17.3 EPSDT Processing Performance Expectations

Performance expectations are to:

- o apply managed care and claim records data (for example, screenings, follow-up treatments) to the EPSDT tracking file in the same cycle as the screening and treatment claim records are adjudicated to a final status; and
- o generate reports according to federal requirements and agreed upon schedule.

3.6.18 THIRD PARTY LIABILITY (TPL) PROCESSING

The state is requesting that the contractor perform certain TPL activities. The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.18.1 TPL Processing State Responsibilities

State responsibilities are to:

- o determine and direct implementation of Oklahoma medical assistance TPL policies;
- o identify the appropriate thresholds and claim records or services requiring pay and chase activities;
- o collect TPL information during the initial recipient enrollment process;

- o collect and maintain initial and ongoing third party resource information from other available sources for all recipients;
- o identify data matches and exchanges to be performed by the contractor;
- o provide TPL information as part of the eligibility response to MMIS requests for recipient-related data and provide retroactive TPL changes to the MMIS for recipients whose TPL information has changed;
- o collect coverage information from recipients and health plans and maintain it in matrix form, by plan and service, for use by the contractor in cost avoiding claim records;
- o collect information on health plans and coverages offered by employers and provide for on-line or batch entry to the MMIS TPL employer file;
- o perform follow up and verification of changes to recipient TPL status identified during claims processing;
- o specify, with HCFA approval, which coverage types are to be cost avoided and which are to be paid and recovered, and revise this specification when appropriate;
- o define the desired content, format, frequency, and media for TPL reports;
- o establish coverage type, dollar volumes, and time parameters applicable to thresholds at which accumulated claim records are to be recovered or declared unrecoverable;
- o adjust thresholds and time parameters based on the size of claim inventory and the availability of state staff;
- o identify cases where insurance premiums or managed care coverage payments are to be made;
- o verify TPL suspect information and follow up on discrepancies;
- o perform all manual operational processes for pay and chase activities including, but not limited to, Estate Recoveries and Accident Case Recoveries, including identifying cases for recoveries, initiating recoveries, and following-up to closure;
- o request claim facsimiles, copies of microform claim records, and/or third party billing forms as needed; and
- o identify state users who are authorized to have access to TPL data for inquiry and/or update purposes.

3.6.18.2 TPL Processing Contractor Responsibilities

Contractor responsibilities are to:

- o operate the TPL processing function of the Oklahoma MMIS;
- o provide state staff with on-line update and inquiry access to TPL carrier information, employer health plan information, TPL case tracking information, and TPL accounts receivable;
- o provide state staff on-line inquiry access to recipient resource information;
- o provide ongoing training to state personnel in the use of the TPL system;
- o maintain the TPL system documentation;
- o deliver all reports created by the TPL function according to state specifications;
- o generate and mail out TPL verification letters;
- o generate and mail TPL retroactive bills including on-line and paper claim facsimiles, microform claim copies, and/or billing forms to invoice third parties for claim records requiring post payment recovery, and mail them out with an appropriate cover letter;
- o generate and mail TPL pay and chase bills;
- o implement a data exchange system with insurance carriers and governmental agencies, and perform the data exchange process;
- o identify recipients who should be subject to the provisions of the HIPP program, using data match and cost-effectiveness criteria defined by the state;
- o collect and provide to the state initial and ongoing third party resource information from other available sources for all recipients;
- o provide periodic full files of carrier and employer data to the state;
- o provide copies of microform claim records to the state to assist in TPL investigations;
- o provide a consolidated accounts receivable system that maintains all required TPL financial data;
- o make recommendations for improvements to TPL processing; and

- o support all TPL functions, files, and data elements necessary to meet the requirements of this ITB, HCFA certification standards, and the State Medicaid Manual.

3.6.18.3 TPL Processing Performance Expectations

Performance expectations are to:

- o report new and changed TPL information to the TPL Unit within fifteen (15) days of discovery;
- o mail TPL retroactive bills on a weekly basis;
- o generate and mail out monthly TPL pay and chase bills;
- o generate and mail second and third requests no later than sixty (60) and ninety (90) days after first request if no response is received and notify state if no response is received after 90 days;
- o maintain and update the accounts receivable system on a daily basis;
- o submit returned denial notices to the state each week;;
- o provide copies of microform claim records to the state within one (1) business day of request,
- o provide agreed upon, periodic updates to the state of TPL carrier and employer information,
- o update the TPL files with claim information in the same cycle as the payment cycle, and
- o generate letters, claim facsimiles, and/or third party invoices within one (1) week of request.

3.3.19 CASE MANAGEMENT

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.19.1 Case Management State Responsibilities

State responsibilities are to:

- o determine the criteria for claims requiring medical review;
- o accept the referrals for medical reviews;
- o conduct the medical reviews;

- o determine content and format for notices of medical decisions and related documents; and
- o enter notes regarding medical reviews.

3.6.19.2 Case Management Contractor Responsibilities

Contractor responsibilities are to:

- o maintain automated medical review criteria;
- o provide automated “to do” listing of referrals to state;
- o assign claim status of “suspended for medical review;” and maintain claims on suspense file;
- o provide access to recipient claims history relative to medical review;
- o maintain notes function; and
- o provide the ability to flag recipients who should be receiving restrictive services.

3.6.19.3 Case Management Performance Expectations

The performance expectations are:

- o to provide referrals (to do list) to state on agreed upon basis;
- o to provide appropriate claims histories within forty-eight (48) hours of request; and
- o notify the state within twenty-four (24) hours of identifying recipients who should be receiving restrictive services.

3.6.20 FINANCIAL ACCOUNTING AND REPORTING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.20.1 Financial Accounting and Reporting State Responsibilities

State responsibilities are to:

- o establish financial processing and reporting policies, procedures, and posting instructions,
- o enter miscellaneous non-claim-specific financial transactions into the MMIS,

- o define expenditure summarization categories for interface with the statewide accounting system,
- o review provider 1099/W 2's earnings reports and notify contractor of any discrepancies, and
- o review all other financial reports from contractor.

3.6.20.2 Financial Accounting and Reporting Contractor Responsibilities

Contractor responsibilities are to:

- o send check register and file of checks to OHCA at the end of each claims and capitation payment cycle;
- o process transactions received from the Great Plains system;
- o process alerts regarding receivable information to appropriate unit for posting detail;
- o produce provider 1099/W 2's earnings reports annually;
- o balance details posted to each receivable transaction;
- o generate transaction to Great Plains regarding gross dollar amounts of receivables and write offs;
- o process EFT provider information;
- o perform adjustments to original and adjusted claim records and maintain records of the previous processing;
- o update claim history and on-line financial files with the check number, date of payment, and amount paid after the claims payment cycle;
- o issue check issuance requests to STO for providers, at any time during the weekly payment cycle, when requested and authorized by the state to do so;
- o produce all required federal and state financial reports;
- o report the status of each account receivable and report monthly to the state in aggregate and/or individual accounts, both on paper and on-line;
- o provide on-line access to financial information according to state specifications;
- o make recommendations on any area in which the contractor thinks improvements can be made; and

- o support all Financial Processing functions, files, and data elements necessary to meet the requirements of this ITB.

3.6.20.3 Financial Accounting and Reporting Performance Expectations

Contractor responsibilities are to:

- o perform weekly payment processing,
- o review and adjudicate 90 percent of provider-initiated requests for adjustment within ten (10) days of receipt and the remainder within thirty (30) days,
- o produce financial reports within state specified time frames, and
- o produce and mail out 1099/W 2's earnings reports no later than January 31 each year and report to IRS.

3.6.21 RETROSPECTIVE DRUG UTILIZATION REVIEW (DUR)

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.21.1 DUR State Responsibilities

State responsibilities are to:

- o determine composition of, establish, and arrange for appointments to the DUR Board;
- o review and approve or modify review standards and criteria for disease categories and therapeutic classes which will flag individual recipients and providers for exceptional drug utilization patterns;
- o monitor the retrospective components of the Drug Utilization Review function; and
- o follow up with recipients and providers who have been found by the outside contractor to exhibit verified drug use or prescribing aberrance's.

3.6.21.2 DUR Contractor Responsibilities

Contractor responsibilities are to:

- o use recipient and provider data and drug claim records for all state programs for retrospective DUR;
- o provide a pharmacy consultant to manage and direct the retrospective DUR for the state and act as a OHCA representative to the DUR board;

- o provide a retrospective DUR system to identify and monitor drug usage for fee-for-service claim records;
- o generate retrospective data for DUR with monthly updates and summaries;
- o produce letters for focused educational interventions based on retrospective DUR to both providers and recipients; and
- o produce reports on the functional processes of the retrospective DUR activities.

3.6.21.3 DUR Performance Expectations

Performance expectations are to:

- o deliver all Retro DUR reports within the time frame specified by the state, and
- o review literature and findings on Retro DUR and report to the DUR Board and the state on a regular basis.

3.6.22 PROSPECTIVE DRUG UTILIZATION REVIEW (PRO-DUR)/ ELECTRONIC CLAIMS MANAGEMENT (ECM)

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.22.1 PRO-DUR State Responsibilities

State responsibilities are to:

- o determine composition of, establish, and arrange for appointments to the DUR Board; and
- o review and approve or modify contractor developed review standards and criteria for disease categories and therapeutic classes which will flag individual recipients and providers for exceptional drug utilization patterns.

3.6.22.2 PRO-DUR/ECM Contractor Responsibilities

Contractor responsibilities are to:

- o operate prospective components of the Drug Utilization Review function of the MMIS;
- o interface with POS equipment or software currently in use in pharmacies;

- o provide on-line MMIS claim records data to pharmacies to support prospective DUR;
- o provide on-line claim adjudication;
- o provide on-line alerts and the ability to override the alert or reverse the claim;
- o restrict access to confidential recipient information;
- o allow for on-line pharmacy claim reversal for one month plus days supply from date of adjudication;
- o develop draft review standards and criteria which can be used to flag individual recipients and providers for exceptional drug utilization patterns;
- o present draft standards and criteria to the DUR Board for review and make any modifications requested by the Board;
- o use the approved standards to identify exceptional drug utilization patterns;
- o provide training to state, contractor staff, or providers on application of PRO-DUR methodologies;
- o provide the state with all required reports from the PRO-DUR/ECM system;
- o provide support for drug medical authorization process;
- o provide all other required PRO-DUR/ECM outputs; and
- o make recommendations on any area in which the contractor thinks improvements can be made.

3.6.22.3 PRO-DUR/ECM Performance Expectations

Performance expectations are to:

- o deliver all PRO-DUR/ECM reports within the time frame specified by the state,
- o provide a back-up system to assure that PRO-DUR/ECM System and the associated network downtime is limited to a maximum of thirty (30) continuous minutes; and
- o review literature and findings on PRO-DUR and report to the DUR Board and the state on a regular basis.

3.6.23 DRUG REBATE PROCESSING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.23.1 Drug Rebate Processing State Responsibilities

State responsibilities are to:

- o interface with HCFA on policy and procedural issues related to drug rebate processing;
- o implement and staff a positive control for rebate receivables;
- o provide drug rebate information for state funded programs identifying manufacturers for whom agreements exist and status in the state funded program; receive and process rebate payments from manufacturers;
- o maintain and post drug rebate receipts to the consolidated accounts receivable system;
- o review all drug rebate reports from the contractor; and
- o monitor, audit, and support the rebate collection and dispute resolution processes as needed.

3.6.23.2 Drug Rebate Processing Contractor Responsibilities

Contractor responsibilities are to:

- o update manufacturer information;
- o create on-line and hard copy quarterly drug rebate invoices, cover letters, rebate reports, mailing labels, and accounts receivable statements;
- o mail invoices (and cover letters) quarterly to manufacturers, for rebates and rebate adjustments;
- o mail rebate reports, collection letters, and accounts receivable statements;
- o generate follow-up letters to manufacturers who have not responded to the invoice;
- o maintain a tickler file to track:
 - . non-responding manufacturers and generate follow-up letters as appropriate; and
 - . each manufacturer's and generate follow-up letters as appropriate.

- o provide drug product utilization reports to assist in resolution of disputed rebate invoicing;
- o produce quarterly HCFA tapes;
- o request the OHCA to issue refunds to manufacturers as the result of overpayments; and
- o implement and staff a state approved dispute resolution process.

3.6.23.3 Drug Rebate Processing Performance Expectations

Performance expectations are to:

- o comply with federal timeliness requirements in all phases of processing;
- o mail quarterly correspondence (invoices and other correspondence) within thirty (30) calendar days; and
- o provide the state with weekly and on-request reports related to the status of rebate accounts receivable.

3.6.24 SECURITY MANAGEMENT

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.24.1 Security Management State Responsibilities

State responsibilities are to:

- o determine the security level for staff; and
- o assign passwords and logon identifications.

3.6.24.2 Security Management Contractor Responsibilities

Contractor responsibilities are to:

- o maintain security software;
- o provide for unique logon for each user;
- o ensure that passwords expire on a staggered schedule;
- o provide audit trails of update transactions by user logons, time entered, and source of entry;
- o maintain a list of users and their security profiles;
- o provide on-line screens for security maintenance; and
- o control system access based on logon ID.

3.6.24.3 Security Management Performance Expectations

The performance expectation is provide security management reports on a frequency determined by the state.

3.6.25 CUSTOMER SERVICE

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.25.1 Customer Service State Responsibilities

State responsibilities are to:

- o staff the customer service function;
- o answer customer inquiries; and
- o enter inquiry information into the automated call tracking system.

3.6.25.2 Customer Service Contractor Responsibilities

Contractor responsibilities are to:

- o maintain the automated call tracking system;
- o provide automated call attendant;
- o provide the capability to refer calls to other OHCA unit for resolution;
- o provide on-line updateable letters to recipients or providers regarding call resolutions;
- o provide the ability to FAX requested information to callers; and
- o generate reports on customer service activities.

3.6.25.3 Customer Service Performance Expectations

The performance expectations are:

- o to be functional 99% of the time during normal OHCA business hours, and
- o provide reports on a frequency determined by the state.

3.6.26 QUALITY ASSURANCE

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.26.1 Quality /Assurance State Responsibilities

The state responsibilities are to:

- o determine quality assurance parameters to be used;
- o utilize quality assurance findings to enhance OHCA programs and services.

3.6.26.2 Quality Control/Assurance Contractor Responsibilities

Contractor responsibilities are to:

- o provide the capability to operate under the quality improvement system for managed care;
- o generate HEDIS measures for fee-for-service;
- o generate and administrative data set for fee-for-service claims and claims requiring medical authorization;
- o provide for physician profiling and practice patterns; and
- o provide the ability to import various data sets for analysis to compare with Oklahoma data.

3.6.26.3 Quality Assurance Performance Expectations

Performance expectations are to provide data for analysis within forty-eight (48) hours from the request.

3.6.27 INTERNET

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.27.1 Internet State Responsibilities

State responsibilities are to:

- o determine state regulations regarding the use of the Internet for transacting OHCA business; and
- o determine the MMIS functions to be available via the Internet.

3.6.27.2 Internet Contractor Responsibilities

Contractor responsibilities are to:

- o provide a secure Internet site;
- o conform to all HIPAA security and privacy requirements;
- o provide links to other state and federal websites; and
- o maintain MMIS web enabled Internet functions.

3.6.27.3 Internet Performance Expectations

Contractor performance expectation are to:

- o maintain the web site on a schedule defined by the state; and
- o update the website with new or revised information on a schedule defined by the state.

3.6.28 MANAGEMENT AND ADMINISTRATIVE REPORTING SYSTEM (MARS)

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.28.1 MARS State Responsibilities

State responsibilities are to:

- o define required MARS reports, including the content, format, frequency, and media for the reports;
- o initiate and/or approve in writing, all report changes, additions, or deletions, to the Management Reporting function;
- o define state and federal programs, categories of service, eligibility categories, provider type and specialty codes, geographic codes, funding source codes, and other codes necessary for producing the reports;
- o monitor production of all reports and review reports produced to assure compliance with ITB and contract requirements;
- o review balancing reports to ensure internal and external report integrity;
- o respond to all requests from outside sources for data on the medical assistance programs that require the use of MARS reports; and
- o provide the contractor with any data required for complete financial reporting which is not generated or maintained by the systems operated by the contractor.

3.6.28.2 MARS Contractor Responsibilities

Contractor responsibilities are to:

- o operate and maintain the Management and Administrative Reporting function of the MMIS according to current and future federal MMIS certification requirements, Part 11 of the State Medicaid Manual, and all state requirements;
- o maintain six (6) years of payment data, claims history, and supporting reference data for use by the MARS reporting function;

- o produce all MARS reports and other outputs within the time frames and according to the format, input parameters, content, frequency, media, and number of copies specified by the state;
- o generate state specified reports to be sent to HCFA in the federally required format;
- o generate reports to include the results of all state initiated financial transactions by state-specified categories, whether claim or non-claim specific;
- o generate reports to identify the various types of recoupments and collections, for example TPL collections or fraud and abuse recoupments;
- o deliver reports on a variety of media, including on-line, hard copy, microform, tape, or diskette as specified by the state;
- o modify the reports to meet the changing information needs of the Oklahoma Health Care Authority Program and ensure compliance with changes in federal, state, or OHCA regulation, procedures, or policies;
- o meet all reporting requirements of MEDATS and produce all MEDATS reports;
- o ensure changes made to programs, category of service, and so forth carry through to MARS reports;
- o maintain complete up-to-date documentation for MARS;
- o disseminate updated MARS documentation to the designated state users and/or locations;
- o balance MARS report data to comparable data from other MARS reports to ensure internal validity, and to non-MARS reports to ensure external validity, and provide an audit trail; deliver the balancing report to the state with each MARS production run;
- o respond to state requests for information concerning the reports;
- o provide to state personnel initial and ongoing training in the use of the MARS function, at times and intervals specified by the state;
- o provide technical assistance as needed to assist users in researching problems, reviewing production outputs, and understanding report formats;
- o ensure the accuracy of all reports before delivery to the state;

- o provide uniform cut-off points for every report to ensure the consistency of all reports;
- o make recommendations on any area in which the contractor thinks improvements can be made;
- o support all reporting functions, files, and data elements necessary to meet the requirements in this ITB;
- o all MARS data must be made available through the ad hoc/DSS reporting functions;
- o provide to the state on a specified schedule, the contractor's administrative cost information necessary to accurately complete the administrative portion of the HCFA-64;
- o generate a HCFA-2082 type report; and
- o deliver to the state a hard copy and diskette copy of the Medicaid Statistical Information System (MSIS) report; produce, submit, and correct, if necessary, data according to HCFA media requirements and timeframes.

3.6.28.3 MARS Performance Expectations

Performance expectations are to:

- o deliver reports to the designated user(s) within one (1) business day of the production date specified by the state and agreed upon during the design task;
- o respond to state requests for general information about the reports within three (3) business days of the request; and
- o when report deficiencies are identified and substantiated, correct the problem and rerun the report within five (5) business days of the state's request.

3.6.29 DECISION SUPPORT SYSTEM/DATA WAREHOUSE (DSS/DW)

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.29.1 Decision Support System/Data Warehouse State Responsibilities

State responsibilities are to:

- o determine data to reside in the DSS/DW function;
- o determine frequency of refreshing the data;

- o approve the design of the database and the decision support software selected or developed by the contractor;
- o monitor the contractor performance and compliance in the operation of the DSS/DW function;
- o approve initial and updated user and system documentation;
- o approve the DSS/DW function “batch window” schedule;
- o provide the contractor with all non-MMIS data,
- o designate state staff who will work with the contractor in the development of the DSS/DW function;
- o provide space for contractor user support staff who are on site at OHCA;
- o approve the tools to be used; and
- o identify the users.

3.6.29.2 Decision Support System/Data Warehouse Contractor Responsibilities

Upon completion of the design and implementation of the DSS/DW function, the Contractor will assume operational responsibilities. Contractor responsibilities are to:

- o maintain and keep current, all system and user documentation throughout the term of the contract,
- o maintain DSS/DW function connectivity with the State LAN throughout the term of the contract,
- o once operations begin, update the documentation within thirty (30) calendar days of a change to the system, including the database,
- o routinely perform weekly updates to the DSS/DW database on a schedule that does not impact the MMIS negatively,
- o provide and schedule a “batch window” in evenings or on weekends where users can execute long running queries without fear of the system being brought down for maintenance. (Note: This batch schedule must be included in the Contractor Status Report and approved by the State Project Manager each month for the upcoming month.)
- o be available to assist users with all aspects of system use.
- o provide initial and ongoing training to system users and adapt future training to levels of proficiency.

- o provide training of new DSS/DW users in basic system use throughout the term of the contract.
- o maintain the Decision Support System/Data Warehouse;
- o maintain the tools and data in the Decision Support System/Data Warehouse;
- o provide security for the Decision Support System/Data Warehouse;
- o refresh the Decision Support System/Data Warehouse;
- o provide user support; and
- o provide usage reports.

3.6.29.3 Decision Support System/Data Warehouse Performance Expectations

Contractor performance expectation are to:

- o maintain the DSS/DW on a scheduled defined by the state;
- o refresh the data on a weekly basis;
- o provide usage reports on a state approved schedule; and
- o provide user support in a timely manner as defined by the state.

3.6.29 SURVEILLANCE AND UTILIZATION REVIEW (SUR)/FRAUD AND ABUSE

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.30.1 SUR/Fraud and Abuse State Responsibilities

State responsibilities are to:

- o establish policy and make or delegate all administrative decisions concerning the operation of, and any changes to, the SUR reporting function or fraud detection;
- o approve or request modification of the contractor's SUR reporting system training activities;
- o approve or request modification of the SUR reporting User Manual;
- o update the SUR management control file and determine the parameters for SUR reports;
- o initiate and execute on-line changes to SUR control file and report parameters;

- o define criteria for extraction of claim data for utilization reports;
- o analyze all SUR reports and follow through with manual reviews and field audits, when necessary;
- o perform analysis of treatment patterns;
- o perform detailed analysis of recipient and provider profiles;
- o investigate fraud-related cases and propose corrective action;
- o identify recipients for lock-in;
- o identify providers to be placed on review;
- o monitor the contractor's operation of the SUR reporting system;
- o determine the appropriate action for questionable provider practices and recipient mis-utilization, and initiate an update to the provider and/or recipient data sets for those providers and recipients placed on lock-in, prepayment review, or other restrictions;
- o refer recipients to appropriate utilization programs for restriction and/or monitoring, within the constraints of current legislation;
- o monitor restricted recipients and providers, and determine when to remove restrictions;
- o monitor managed care recipients; and
- o submit claim detail requests and requests for provider and recipient profiles.

3.6.30.2 SUR/Fraud and Abuse Contractor Responsibilities

Contractor responsibilities are to:

- o maintain and operate a SUR system to meet the most recent federal requirements;
- o train state staff on the use of the SUR reporting system, initially and on an ongoing basis;
- o maintain up to date complete documentation for SUR;
- o provide technical assistance as needed to assist state users in researching problems, reviewing reports, establishing report parameters, and analyzing SUR data;

- o develop a weighting and ranking method, subject to OHCA approval, to set priorities for reviewing utilization review exceptions;
- o receive claim detail requests from the state;
- o produce claim detail reports, and provider and recipient profiles, in the timeframe, format, and media requested by the state;
- o furnish routine SUR management reports to the state on-line, in hard copy, microform, and/or other electronic media, as requested by the state;
- o implement SUR report parameter changes (control file) for upcoming reporting cycles, as initiated by the state;
- o review state requested SUR report parameter changes for feasibility, and report back to the state on any requests that are not feasible, prior to the cycle to which the change applies;
- o advise the state of any changes needed in the SUR function to correspond to changes made to other MMIS functions;
- o maintain a SURS case review tracking system;
- o produce priority rank suspect list;
- o identify cases with highest potential for fraud;
- o make recommendations on any area where the contractor thinks improvements can be made; and
- o support all SUR functions, files, and data elements necessary to meet the requirements in this ITB.

3.6.30.3 SUR Performance Expectations

Performance expectations are to:

- o apply all file updates emanating from SURS findings within the time constraints specified in Part 11 of the State Medicaid Manual;
- o deliver claim detail reports within five (5) business days of receipt of the request;
- o meet all federal review requirements for SUR;
- o deliver reports to the designated user(s) within one (1) business day of the production date specified by the state and agreed upon during the design task;

- o respond to state requests for general information about the reports within three (3) business days of the request; and
- o when reporting deficiencies are identified and substantiated, correct the problem and rerun the report within five (5) business days of the state's request.

3.6.30 SUR CASE TRACKING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.31.1 SUR Case Tracking State Responsibilities

State responsibilities are to:

- o approve the SUR case tracking system;
- o utilize the SUR case tracking system to monitor SUR activities.

3.6.31.2 SUR Case Tracking Contractor Responsibilities

Contractor responsibilities are to:

- o maintain the SUR case tracking system ;
- o accept information from the Medical Advisory Committee and OHCA legal division;
- o provide on-line access;
- o link with MMIS financial functions;
- o maintain claims history to support SUR review.

3.6.31.3 SUR Tracking Performance Expectations

Contractor performance expectation is to maintain the SUR case tracking system.

3.6.32 STAFF PERFORMANCE TRACKING

The following subsections describe state responsibilities, contractor responsibilities, and performance expectations for this function.

3.6.32.1 Staff Performance Tracking State Responsibilities

State responsibilities are to:

- o create performance measures by unit and business process;
- o create an employee calendar and schedule;
- o define criteria for assigning tasks;
- o record information into the performance tracking system; and
- o analyze information from the performance tracking system.

3.6.32.2 Staff Performance Tracking Contractor Responsibilities

Contractor responsibilities are to:

- o maintain and operate the performance tracking system; and
- o generate tracking system reports.

3.6.32.3 Staff Performance Tracking Performance Expectations

Performance expectations are to:

- o maintain access to the staff performance tracking system on a schedule defined by the state; and
- o generate reports on a schedule defined by the state.

3.7 MAINTENANCE TASK

The contractor shall be responsible for maintaining the Oklahoma MMIS throughout the term of the contract. This section of the Scope of Work describes how future changes to the system will be categorized, the minimum staffing requirements, the milestones which must be met within task activities, and how state and contractor responsibilities are split.

In addition, all MMIS functions must be updated and maintained by the contractor according to federal certification requirements; the HCFA State Medicaid Manual; all federal mandates; and all state requirements, statutes, and regulations.

3.7.1 OVERVIEW

The contractor shall perform software maintenance for the component parts of the MMIS after its implementation, as directed by the state. Some major program initiatives may require a prior-approved Advance Planning Document when additional resources are required.

The State of Oklahoma will be responsible for the production of all APDs. It is the state's expectation that **all** maintenance requirements shall be accomplished under the terms of the contracts firm fixed price for machine time, person time, and documentation support.

Ongoing changes, corrections, or enhancements to the system will be characterized as either maintenance-related or as a modification effort (see ITB Subsection 3.8). Maintenance will result from a determination by the state or by the contractor that a deficiency exists within the operational MMIS, including deficiencies found after implementation of modifications incorporated into the operational MMIS, that continued efficiency can be maintained or achieved through the proposed activity and other activities described below. The various types of maintenance support must include:

- o activities necessary to provide for continuous effective and efficient operation of the system to keep it ready and fit to perform at the standard and condition for which it was approved;
- o activities necessary to modify the system to meet the requirements detailed in this ITB;
- o activities necessary to ensure that all data, files, and programs are current and that errors are corrected;
- o activities necessary to meet HCFA certification requirements which exist at the time of contract award;
- o activities related to file growth and partitioning;
- o file maintenance activities for updates to all files;
- o scheduled ongoing tasks to ensure system tuning, performance, response time, data base stability, and processing;
- o changes to the JCL or system parameters concerning the frequency, number, and media of reports;
- o updates to software, operating systems or other system components requiring version updates, manufacturer 'patches' and so forth;
- o changes to edit disposition parameters for established edit or audit criteria; and
- o addition of new values and changes to existing system tables and conversion of prior records, as necessary.

3.7.2 SYSTEM MAINTENANCE TEAM STAFFING REQUIREMENTS

The contractor shall provide sufficient staff to perform all systems maintenance responsibilities. These individuals are separate and distinct from those defined in ITB Subsection 3.8 for modification support. They may be located at the contractor's Oklahoma City site or off-site at the contractor's discretion. OHCA requires weekly reports, meeting OHCA standards, to be submitted (sample reports available in the Procurement Library).

3.7.3 MAINTENANCE TASK ACTIVITIES AND MILESTONES

All system maintenance activities that address system deficiencies must be completed within the following time frames. Within two (2) working days of discovery or receipt of a deficiency notification, the maintenance staff shall submit a Corrective Action Plan (CAP) to the State for review indicating how the deficiency will be corrected. The correction will apply to both systemic and processing/operational issues.

The state staff will review and approve or return the CAP to the contractor for modification within 5 working days. The CAP will include information that will define any system and/or operational problem, the problem solution, and the level of effort required to code, test, implement, address operational issues and update documentation related to the deficiency. Once approved by the state, the contractor shall correct the deficiency within 10 business days unless the Project Administrator has granted an extension of the period of time necessary to cure the deficiency.

Weekly and monthly status meetings shall be held between the state and contractor-designated system maintenance staff at the state premises, unless the state elects to meet at the contractor's facility. The weekly meeting will allow the contractor to report progress against schedules and any necessary schedule revisions, and should allow for discussion of specific details where necessary. When appropriate, the deliverables presented during the week may be discussed. The monthly meetings shall be conducted so as to provide a synopsis of the highlights of the month's weekly meetings. The contractor shall document these weekly and monthly meetings, in writing.

In addition, the contractor will be required to maintain a summary log, updated weekly, of all work requests and will include all associated information. The contractor and state will design this report together. The report will be available on-line for access by both State and Contractor staff. The Contractor will maintain the report.

3.7.4 STATE RESPONSIBILITIES

Where maintenance activity has been determined:

- o participate in weekly and monthly status meetings with the contractor-designated system maintenance staff to monitor current operations and to monitor progress on maintenance activities.
- o prepare and submit to the contractor notices of system deficiency, as appropriate;
- o receive and review notices of maintenance support or proposed work requests from contractor;
- o review and approve Corrective Action Plans;
- o if necessary, determine priority for contractor completion of work requests and return approved requests with priority assigned;
- o assist the contractor in conducting a detailed requirements analysis on any major changes as required;
- o review and approve the Requirements Specifications Document;
- o review and approve the general design and the detailed design for changes, when required;

- o monitor contractor work request activities;
- o review and approve required test plans, including testing responsibilities;
- o assist in development of the test plan and in defining test conditions;
- o assist in performing user acceptance tests;
- o review and approve required test results;
- o review and approve updates to system documentation; and
- o review and approve updates to user and provider manuals and operations procedures (if required).

3.7.5 MAINTENANCE TASK CONTRACTOR RESPONSIBILITIES

The contractor responsibilities for maintenance activities are listed below:

- o provide a maintenance team for the State of Oklahoma to correct system problems, and to support the resolution of discrepancies. This shall include all maintenance activities necessary to ensure the continued efficiency of the Oklahoma MMIS;
- o submit an operational trouble report to the state when operational problems occur, describing the nature of the problem, the expected impact on ongoing functions, a Corrective Action Plan, and expected time of problem resolution;
- o submit Corrective Action Plans regarding all deficiencies;
- o perform all activities relative to the correction of deficiencies within the time-frames stated in ITB Subsection 3.7.3;
- o document weekly and monthly status meetings in writing, summarizing the key points covered, and provide a draft of the summary no later than 12:00 noon on the second work day after the meeting;
- o provide consultation to the state in the development of maintenance requests;
- o utilize and maintain the automated system described in section 3.4 of this ITB for tracking and reporting of maintenance projects, and provide regular reports to the state; and
- o perform work assignments according to priorities set by the state.

Where maintenance support is required:

- o participate in weekly and monthly status meetings with the appropriate state staff to monitor current operations and to monitor progress on maintenance activities.
- o correct all errors and discrepancies found in the operational system at no additional charge for computer resources needed to maintain or correct the system;
- o receive the notification of discrepancy on a work request from the state;
- o inform the state when a system deficiency is identified, within twenty-four (24) hours of discovery;
- o enter the work request identifying the maintenance support into an automated tracking system;
- o present the state with a Corrective Action Plan for approval within five (5) calendar days of discovery, unless otherwise specified by the state;
- o acknowledge an approved work request from the state;
- o initiate corrective action within twenty-four (24) hours of state approved work request and or Corrective Action Plan;
- o submit test plan, including testing responsibilities, when required by the state;
- o conduct systems test;
- o submit test results to the state;
- o prepare, submit, and distribute updates to Oklahoma MMIS system documentation, user and provider manuals, other user documentation, and any other necessary documentation within twenty (20) calendar days of the date the change goes into production, with the exception of report documentation. Documentation associated with report changes or newly created reports shall be received prior to the first production run of that report;
- o implement correction upon state approval;
- o verify the successful implementation of the correction, including monitoring accuracy of processing, and correction of any problems; and
- o prepare and distribute final form of manuals and system documentation within one week of technical sign off.

3.7.6 MILESTONES FOR THE MAINTENANCE TASK

The milestones for the maintenance task are:

- o submission of project requests;
- o submission of Corrective Action Plans;
- o state approval of Corrective Action Plans;
- o agreement upon estimated priority, staffing, and schedule for each request;
- o state approval of proposed requests;
- o state approval of requirements analysis document (major changes);
- o state approval of detailed system design documentation (major changes);
- o state approval of test plans and results; and
- o state approval of updates to system documentation, user manuals, operating procedures, and provider manuals (if required).

3.8 MODIFICATIONS TASK

The contractor shall be responsible for modifying the Oklahoma MMIS throughout the term of the contract. This section of the Scope of Work describes how future changes to the system will be categorized, the minimum staffing requirements, the milestones which must be met within task activities, and how state and contractor responsibilities are split. OHCA requires weekly reports, meeting OHCA standards, to be submitted (sample reports available in the Procurement Library).

In addition, all MMIS functions must be updated and maintained by the contractor according to federal certification requirements; the HCFA State Medicaid Manual; all federal mandates; and all state requirements, statutes, and regulations.

3.8.1 OVERVIEW

The contractor shall perform software modifications for the component parts of the MMIS after its implementation, as requested by the state. Some major program initiatives may require a prior-approved Advance Planning Document when additional resources are required. The State of Oklahoma will be responsible for the production of all APDs. It is the state's expectation that most modifications will be met under the terms of the contract's firm fixed price for machine time, person time, documentation support and all other costs associated with modification activities.

Ongoing changes, corrections, or enhancements to the system will be characterized as either maintenance-related (see ITB Subsection 3.7) or as a modification effort. Software modifications may result when the state or the contractor determines that an additional requirement needs to be met or that a modification to existing file structures or current processing is needed. Examples of modification tasks include:

- o implementation of capabilities not specified in this ITB or agreed to during design and development;

- o implementation of edits and audits not defined in the operational system accepted by the state;
- o activities necessary to meet new or revised HCFA requirements;
- o changes to established report, screen, or tape formats, such as sort sequence, new data elements, or report items; and
- o acceptance of a new input form.

System modification activities will be managed through a change request process.

3.8.2 SYSTEM MODIFICATION TEAM STAFFING REQUIREMENTS

At a minimum, full-time support for system modifications must be provided on-site in Oklahoma by:

- o a Modification Task Manager, and
- o eight (8) programmer/analysts.

The minimum qualifications for the Modification Task Manager and the systems analysts, are specified in ITB subsection 3.9.4. The Modification Task Manager shall serve as the primary liaison between the Modification Team resources and state staff for all system changes.

Additionally, the contractor shall also provide other full-time programmer/analysts on an ongoing basis for modification support. This support can be provided off-site. The state will have access to three thousand four hundred and fifty (3,450) hours of off-site support time available each contract month for a total, of both on-site (1,350) and off-site support, of four thousand eight hundred (4,800) available modification hours per contract month. The state determines when these modification hours are to be used and must approve all hours. See ITB Subsection 6.4.5 for additional requirements. Requests by the state for additional full-time on-site or off-site modification support beyond the monthly 4800 hours will be at the rates established through the all-inclusive hourly rates indicated in Appendix H.

3.8.3 MODIFICATIONS TASK ACTIVITIES AND MILESTONES

System modification activities will be required through a written change request completed by the state. The contractor must respond, in writing, to state-initiated change requests within ten (10) business days of receipt. The response shall consist of an acknowledgement of the request, its state assigned priority, and a preliminary assessment of the effort required to complete the change. Within fifteen (15) working days of receipt of a modification request, the modifications staff shall submit a Requirements Analysis and Specifications document. This document will identify problem definition, problem solution, and the level of effort required to code, test, implement, and update

documentation related to the requested change(s). The state will then approve or revise the request, assign a priority to it, and establish an expected completion date.

Weekly and monthly status meetings shall be held between the state and contractor-designated system modifications staff at the state premises, unless the state elects to meet at the contractor's facility. The weekly meeting will allow the contractor to report progress against schedules and any necessary schedule revisions, and should allow for discussion of specific details where necessary. When appropriate, the deliverables presented during the week may be discussed. The monthly meetings shall be conducted so as to provide a synopsis of the highlights of the month's weekly meetings. The contractor shall document these weekly and monthly meetings, in writing.

All completed work requests shall be retained for documentation and analytical purposes.

In addition, the contractor will be required to maintain a summary log, updated weekly, of all work requests and will include all associated information. The contractor and state will design this report together. The report will be available on-line for access by both State and Contractor staff. The Contractor will maintain the report.

3.8.4 STATE RESPONSIBILITIES

Where a modification is required:

- o participate in weekly and monthly status meetings with the contractor-designated system modifications staff to monitor current operations and to monitor progress on maintenance and modification activities.
- o prepare and submit to the contractor a written change request when a modification is required;
- o receive and review notices of proposed work requests from contractor;
- o review and approve Corrective Action Plans for maintenance support;
- o determine priority for contractor completion of work requests and return approved requests with priority assigned;
- o assist the contractor in conducting a detailed requirements analysis on any major changes as required;
- o review and approve the Requirements Specifications Document;
- o review and approve the general design and the detailed design for changes, when required;
- o monitor contractor work request activities;

- o review and approve required test plans, including testing responsibilities;
- o assist in development of the test plan and in defining test conditions;
- o assist in performing user acceptance tests;
- o review and approve required test results;
- o review and approve updates to system documentation;
- o review and approve updates to user and provider manuals and operations procedures (if required);
- o approve implementation of modification; and
- o provide signoff that modification is approved.

3.8.5 MODIFICATIONS TASK CONTRACTOR RESPONSIBILITIES

The contractor responsibilities for modifications activities are listed below:

- o provide a modification team for the State of Oklahoma to modify the Oklahoma MMIS, and to support the resolution of discrepancies;
- o provide monthly modification staffing hours reports;
- o document weekly and monthly status meetings in writing, summarizing the key points covered, and provide a draft of the summary no later than 12:00 noon on the second work day after the meeting;
- o provide consultation to the state in the development of modification requests;
- o utilize and maintain the automated system described in section 3.4 of this ITB for tracking and reporting of modification projects, and provide regular reports to the state; and
- o perform work assignments according to priorities set by the state.

Where modification support is requested:

- o participate in weekly and monthly status meetings with the appropriate state staff to monitor current operations and to monitor progress on modification activities.
- o receive change orders from the state;
- o submit a work request for contractor-proposed changes;
- o conduct detailed requirements analysis for major changes;

- o submit requirements analysis and specifications to state for approval;
- o prepare an estimate of staff effort and schedule, including impact on other projects and priorities;
- o for minor changes, prepare a description of the required modifications;
- o for major changes, develop detailed design documentation, including inputs, outputs, flow charts, file/database changes, program narrative and logic, program flow charts, test plan, and user documentation, when required by OHCA;
- o prepare and submit a test plan for approval, when required by OHCA;
- o code programs/modifications;
- o perform systems test;
- o submit test results to state;
- o submit updates to systems documentation;
- o implement modifications upon state approval;
- o verify the successful implementation of the modification, including monitoring accuracy of processing, and correction of any problems; and
- o prepare, submit, and distribute updates to Oklahoma MMIS system documentation, user and provider manuals, other user documentation, and any other necessary documentation within twenty (20) calendar days of the date the change goes into production, with the exception of report documentation. Documentation associated with report changes or newly created reports shall be received prior to the first production run of that report.

If the contractor and the state agree that the change request cannot be accomplished with the available staff and hours (inclusive of the fifty-seven thousand six hundred (57,600) annual hours available for modification support), the contractor must respond with a detailed proposal, within fifteen (15) days, containing:

- o a statement of the scope of the change request in relation to subsystems, functions, features, and capabilities to be changed;
- o a breakdown of the work effort by milestone;
- o a breakdown of the work effort by hour within each job classification required;

- o a rate per hour for each job classification required with a total proposed amount;
- o an implementation schedule for the change request and, if appropriate, revised schedules for all other concurrently approved projects or change requests affected by the current change request; and
- o a justification for the additional staff, rates, and schedules.

The state must approve the proposal and, if approved, prepare a contract amendment, per ITB Subsection 6.1.4.

A change request is deemed successfully completed when:

- o it has been cancelled by the MMIS Project Manager in writing; or
- o the contractor has received a sign off initially signed by an authorized state representative(s) and co-signed by the MMIS Project Manager;
- o the modification has been successfully tested and approved by the MMIS Project Manager or has run successfully in production for thirty (30) calendar days or through a complete production cycle; and
- o all documentation has been drafted, approved by the state, and produced and distributed in final form.

3.8.6 MILESTONES FOR MODIFICATION TASK

The milestones for the modifications task are:

- o submission of project requests;
- o agreement upon estimated priority, staffing, and schedule for each request;
- o state approval of proposed requests;
- o state approval of requirements analysis document (major changes);
- o state approval of detailed system design documentation (major changes);
- o state approval of test plans and results; and
- o state approval of updates to system documentation, user manuals, operating procedures, and provider manuals (if required).

3.8.7 CHANGE ORDER TRACKING SYSTEM

In order to assist State staff in establishing reasonable completion dates and setting priorities for modifications, the Contractor shall maintain a project tracking and management system. This system will allow State and Contractor management staff to review current priorities and timeliness, change priorities by adding new tasks and target dates, and then immediately see the impact of these new priorities on pre-existing priorities and their target dates. This reporting will allow review of system

programmer/analyst slack time, status of phase completion, and rapid readjustment of target dates based on system staff being reassigned to new projects and priorities.

The objective of this system is to provide State management with a means of incorporating new projects into pre-existing priorities and target dates, to see the overall impact on ongoing projects and their dates, and to provide a practical method to rearrange priorities.

Information to be captured on the tracking system shall include, at a minimum, the following:

- o project number - a unique number assigned by the Contractor to each approved system change;
- o priority number - a ranking of the assigned priority of the project, as determined by the State. The system shall automatically reassign priority numbers when a project is inserted or deleted;
- o subsystem or Functional Area Indicator - the subsystem, system component or functional area most affected by the project;
- o subsystems affected indicator – a yes/no indicator for each subsystem and or system component or functional area affected by the project;
- o project description - a brief narrative description to help identify the project;
- o request date - the date of the initial written request;
- o requester - the name of the individual or unit initiating the change request;
- o project start date - the date that work began on the project;
- o assigned resource - the name of the primary resource person assigned to the project;
- o estimated completion date - the target or the required project implementation date;
- o estimated hours - the total hours estimated to complete the project;
- o hours worked to date - the total hours worked to date, by resource, by project;
- o estimated staff hours remaining;
- o Requirements Analysis and Design Document(s) submitted and approved dates;
- o system test results approved date;

- o user acceptance test completion date;
- o date documentation updates completed;
- o expected completion date;
- o project status - an indication of current project status, for example, on hold, delayed, in progress, in test, completed;
- o change in project scope/project requirements; and
- o project completion/implementation date - the date that the project requester or other delegated authority approves satisfactory completion of the project.

The automated system shall provide reports for tracking and management of Change Orders, including the flexibility to produce reports with varying content, format, sort, and selection criteria to meet both State and Contractor reporting needs, using all defined project information. All completed project requests will be maintained on the system file for analytical purposes throughout the life of the contract. The system and its data will be part of the system turned over to a subsequent contractor during the Turnover Task (see ITB Subsection 3.9).

3.9 TURNOVER TASK

Prior to the conclusion of the contract, the contractor shall provide, at no extra charge, assistance in turning over the enhanced MMIS to the state or its agent.

3.9.1 STATE RESPONSIBILITIES

State responsibilities are to:

- o review and approve a turnover plan to facilitate transfer of the Oklahoma MMIS to the state or its designated agent;
- o review and approve a statement of staffing and hardware resources which would be required to take over operation of the Oklahoma MMIS;
- o request turnover services be initiated by the contractor;
- o make state staff or designated state contracted staff available to be trained in the operation of the MMIS;
- o coordinate the transfer of MMIS software and files;
- o coordinate the termination or assumption of leases of MMIS hardware and software;

- o review and approve a Turnover Results Report that documents completion of each step of the Turnover Plan; and
- o obtain post-turnover support from the contractor at no extra charge for ninety (90) days following contract termination, if required.

3.9.2 TURNOVER TASK CONTRACTOR RESPONSIBILITIES

The contractor will be responsible for turnover activities described in the following subsections.

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3.9.2.1 Develop an MMIS Turnover Plan

Before the start of the last year of the base contract period, the contractor shall provide, at no additional cost, a Turnover Plan to the state. The plan shall include:

- o proposed approach to turnover,
- o tasks and subtasks for turnover,
- o schedule for turnover, and
- o production program and documentation update procedures during turnover.

3.9.2.2 Develop an MMIS Requirements Statement

Prior to the start of the last year of the base contract period, the contractor shall furnish to OHCA, at no extra charge, a statement of the resources which would be required by the state or another contractor to take over operation of the MMIS, containing the information listed below.

- o The statement must include an estimate of the number, type, and salary of personnel required to operate the equipment and perform the other functions of the Oklahoma MMIS. The statement shall be separated by type of activity of the personnel, including, but not limited to, the following categories:
 - . data processing staff;
 - . computer operators;
 - . systems analysts;
 - . systems programmers;
 - . programmer analysts;
 - . data entry operators;
 - . administrative staff;
 - . clerks;
 - . managers; and
 - . medical personnel (nurses, MDs, pharmacists, and so forth).
- o The statement shall include all facilities and any other resources required to operate the Oklahoma MMIS, including, but not limited to:
 - . data processing equipment,
 - . system and special software,
 - . other equipment,
 - . telecommunications networks,
 - . office space, and
 - . other resources.
- o The statement of resource requirements shall be based on the contractor's experience in the operation of the MMIS and shall include actual contractor resources devoted to the operation of the system.

3.9.2.3 Provide Turnover Service

As requested by the state, but approximately six (6) months prior to the end of the base contract period or any extension thereof, the contractor must transfer all source program code listings to the state.

As requested, but approximately six (6) months prior to the end of the base contract period or any extension thereof, the contractor must transfer to the state or its agent, as needed, a copy of the enhanced MMIS, including:

- o all necessary data and reference files on magnetic cartridge;
- o all production computer programs on magnetic cartridge;
- o JCL on magnetic cartridge;
- o data entry software;
- o all other documentation, including, but not limited to, user, provider, and operation manuals needed to operate and maintain the system on PC-compatible diskettes, using state-approved software;
- o procedures for updating computer programs, JCL, and other documentation;
- o all archived JCL sysout to include, at a minimum, job control statements executed, condition codes, system messages, start and stop dates and times, CPU time used, clock time used, and final file dispositions for each job step on magnetic cartridge, in a format specified by the state;
- o all operations logs, process summaries, and balancing documents completed during the contract, in a medium and format specified by the state at turnover;
- o all job scheduling software and reports used by operations;
- o hardware configuration diagram showing the relationship between all data processing and communication equipment necessary to operate the MMIS, including, but not limited to, local area networks, EMC support networks, control units, remote job entry devices, storage devices, printers, control units, and data entry devices; and
- o all system macros (such as panels, skeletal JCL, and CLISTs developed in TSO/ISPF) used for job scheduling, data entry, or system modification functions.

As requested, but approximately five (5) months prior to the end of the contract or any extension thereof, the contractor must begin training the staff of the state or its designated agent in the operation of the MMIS. Such training must be completed at least

two (2) months prior to the end of the contract or any extension thereof. Such training shall include:

- o claims processing data entry;
- o computer operations, including cycle monitoring procedures;
- o controls and balancing procedures;
- o exception claims processing; and
- o other manual procedures.

As requested, but approximately four (4) months prior to the end of the contract or any extension thereof, the contractor must provide updates to replacements for all data and reference files, computer programs, JCL, and all other documentation as will be required by the state or its agent to run acceptance tests.

At the option of the state, the contractor shall arrange for the removal of MMIS hardware and software or the transfer to the state of leases of equipment and software.

At a turnover date to be determined by OHCA, the contractor shall provide to the state or its agent all updated computer programs, data and reference files, JCL, and all other documentation and records as will be required by the state or its agent to operate the Oklahoma MMIS.

Following turnover of operations, the contractor must provide the state with a Turnover Results Report which will document completion and results of each step of the Turnover Plan.

3.9.2.4 Update MMIS Turnover Plan

At least six (6) months prior to the end of the base contract and at least six (6) months prior to the end of any contract extension, the contractor shall provide an updated MMIS Turnover Plan and MMIS Requirements Statement.

3.9.2.5 Provide Post-Turnover Services

In order to provide post-turnover support, the contractor shall provide, at no charge to the state, the services of an on-site systems analyst who has worked on the Oklahoma MMIS at least one (1) year. This individual shall be required to be on-site for the ninety (90) days following contract termination. The individual proposed by the contractor must be approved by the state. The state will provide working space and will assign work to be done on a full-time basis to support post-turnover activity.

The contractor shall also be responsible for, and must correct at no cost, any malfunctions which existed in the system prior to turnover or which were caused by lack of support at turnover, as may be determined by the state.

3.9.3 MILESTONES

The milestones for this task are:

- o state approval of Turnover Plan,
- o state approval of MMIS Requirements Statement,
- o state request for turnover services,
- o completion of turnover training, and
- o completion of turnover.

3.9.4 DELIVERABLES

The deliverables for this task are:

- o Turnover Plan,
- o MMIS Requirements Statement,
- o MMIS software, files, and operations documentation, and
- o Turnover Results Report.

3.10 ORGANIZATION AND STAFFING REQUIREMENTS

This subsection describes the contractor staffing requirements applicable to the Development and Implementation, and Operation and Modifications tasks. Bidders are expected to propose a supervisory and management structure which will accommodate the unique aspects of Oklahoma's Medicaid and state funded programs.

3.10.1 KEY PERSONNEL FOR IMPLEMENTATION

Key personnel required for the Development and Implementation Task are:

- o Project Manager/Account Manager,
- o Implementation Task Manager,
- o Conversion Task Manager, and
- o Implementation/Claims Processing Manager.

3.10.2 KEY PERSONNEL FOR OPERATIONS

Key personnel required for the Operations and Maintenance and Modifications Tasks are:

- o Project Manager/Account Manager;
- o Operations/Claims Processing Manager;
- o Modifications Task Manager;
- o Programmer/Analysts, eight (8); and
- o Provider Relations Manager.

3.10.3 GENERAL REQUIREMENTS FOR KEY PERSONNEL

General requirements for key personnel are as follows.

- o These key personnel and their immediate staff must be located in Oklahoma, with the reporting specialist located on-site at the department, to meet the requirements of and perform the functions specified in ITB Section 3.
- o The Project Manager/Account Manager must be employed by the bidder when the proposal is submitted.
- o All key personnel, besides the Project Manager, must be employed by or committed to join the bidder's organization by the beginning of the Development and Implementation Task.
 - . The state reserves the right to approve or disapprove all initial or replacement key personnel prior to their assignment to the MMIS project.
 - . The state shall have the right to require the contractor to remove any individual (whether or not key personnel) from assignment to this project, but only for cause and with reasonable notice.

3.10.4 MINIMUM QUALIFICATIONS FOR KEY PERSONNEL

Minimum qualifications for key personnel are as follows.

- o Project Manager/Account Manager:
 - . at least three (3) years as a Claims Processing System Manager for an MMIS or other large-scale medical claims processing system; and
 - . previous experience with an MMIS, or with major components of an operational MMIS.

Should the bidder propose separate individuals for DDI and operations, the proposed individual's qualifications must illustrate direct experience relating to that phase.

- o Implementation Task Manager:
 - . at least three (3) years of experience in managing an MMIS design, development, and implementation effort; and
 - . previous experience with the MMIS or components of the MMIS proposed by the bidder.
- o Conversion Task Manager:
 - . at least three (3) years of experience with the conversion effort on an MMIS or other large-scale system implementation project.

- o Implementation/Operations Claims Processing Manager:
 - . at least three (3) years of experience in managing the claims processing component of an MMIS; and
 - . previous experience with the MMIS or components of the MMIS proposed by the bidder.
- o Modifications Task Manager:
 - . at least three (3) years experience in MMIS development or ongoing maintenance and modification; and
 - . experience with implementing major modifications to the proposed transfer MMIS and at least one other large-scale claims processing system.
- o Programmer/Analysts:
 - . at least fourteen (14) programmer/analysts must each have a minimum of two (2) years of experience in MMIS development or ongoing maintenance and modification; and
 - . at least eight (8) of these fourteen (14) programmer/analysts should have direct experience in maintaining or modifying the proposed system.
- o Provider Relations Manager:
 - . at least three (3) years experience managing the provider relations function in Medicaid or other major public or private health care program.

Additional scored resume requirements for proposed managers include experience with:

- o Medicaid related programs, including managing government-funded Medicaid system transfer and/or development projects;
- o systems and/or facility turnover situations;
- o development of large system training plans;
- o training of users in large system implementations;
- o MMIS and/or other medical claims processing;
- o managing a large-scale system transfer and/or development staff;
- o managing a large-scale system operations and/or maintenance staff;

- o management of subcontractor arrangements;
- o similar system architecture and hardware;
- o systems and/or facility turnover situations;
- o training users of a large system;
- o developing training plans; and
- o Medicaid related programs, including how the knowledge was obtained and any projects to which it was applied.

3.10.5 STATE MMIS RE-PROCUREMENT MANAGER AND CONTRACT ADMINISTRATOR

The state will assign an MMIS Re-Procurement Manager to work directly with the contractor during the Development and Implementation Task. The state will assign an MMIS Contract Administrator to work directly with the contractor during the Operations, Maintenance, Modification and Turnover Tasks. The state will be assisted by a consultant contractor in providing deliverable review and development monitoring support.

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