



ORIGINAL

Technical Response to RFP 5252 Z1

State of Nebraska Administrative
Services on behalf of the Department
of Health and Human Services

Independent Verification and Validation (IV&V) Services



Proposal Submitted by:

Timothy F. Masse, MBA, Principal
BerryDunn
100 Middle Street
Portland, ME 04104
Phone: (207) 541-2200
tmasse@berrydunn.com

Proposal Submitted on:

May 18, 2016



May 18, 2016

Ms. Jennifer Crouse & Mr. Robert Thompson
State Purchasing Bureau
1526 K Street, Suite 130
Lincoln, NE 68508

Dear Ms. Crouse and Mr. Thompson:

Berry Dunn McNeil & Parker, LLC (BerryDunn) is pleased to submit this proposal to provide Independent Verification and Validation (IV&V) services for the Nebraska Department of Health and Human Services (DHHS), Division of Medicaid & Long Term Care (MLTC).

We appreciate the innovative approach Nebraska is taking to achieve its Medicaid Enterprise Systems objectives. We understand that each project is unique and our clients appreciate the proven, collaborative approach BerryDunn takes to providing IV&V and our ability to tailor our approach to meet their unique project needs. In developing this proposal, we have put significant thought into forming a team and developing an IV&V approach that will meet your objectives for the Eligibility and Enrollment Solution (EES) and Data Management and Analytics (DMA) projects and fit within the culture of DHHS.

Our proposal is submitted in response to Request for Proposal (RFP) 5252 Z1. We have read the RFP and amendments, we understand them, and we agree to the terms and conditions stated therein. Our proposal is a firm and irrevocable offer that is valid for the period of time commencing with the proposal submission deadline of May 18, 2016, until an award is made or the RFP is cancelled.

As the Principal and leader of our Government Consulting Group, I am authorized to bind BerryDunn to the commitments made herein, and I will serve as BerryDunn's representative for all matters related to this RFP. Should you have any questions regarding our proposal, my contact information is as follows:

Timothy F. Masse, Principal
BerryDunn
100 Middle Street
Portland, ME 04101
Phone: (207) 541-2200 | Email: tmasse@berrydunn.com

We would enjoy the opportunity and consider it a privilege to work with the State of Nebraska on the EES and DMA projects and would be pleased to present our proposal, team, and corporate qualifications in person and answer any questions the Evaluation Team may have.

Sincerely,

A handwritten signature in blue ink that reads 'Timothy F. Masse'.

Timothy F. Masse, MBA
Principal

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1.0 Request for Proposal Form

On the following pages, we have provided the following signed documentation:

1. Signed Bidder Contact Sheet (Form A)
2. Signed RFP Form
3. Acknowledged Terms & Conditions.

**Form A
Bidder Contact Sheet
Request for Proposal Number 5252 Z1**

Form A should be completed and submitted with each response to this Request for Proposal. This is intended to provide the State with information on the bidder's name and address, and the specific person(s) who are responsible for preparation of the bidder's response.

Preparation of Response Contact Information	
Bidder Name:	Berry Dunn McNeil & Parker, LLC
Bidder Address:	100 Middle Street, Portland ME 04101
Contact Person & Title:	Timothy F. Masse, Principal
E-mail Address:	tmasse@berrydunn.com
Telephone Number (Office):	(207)541-2323
Telephone Number (Cellular):	(207)541-2323
Fax Number:	(207)774-2375

Each bidder shall also designate a specific contact person who will be responsible for responding to the State if any clarifications of the bidder's response should become necessary. This will also be the person who the State contacts to set up a presentation/demonstration, if required.

Communication with the State Contact Information	
Bidder Name:	Berry Dunn McNeil & Parker, LLC
Bidder Address:	100 Middle Street, Portland ME 04101
Contact Person & Title:	Bill Richardson
E-mail Address:	Senior Manager
Telephone Number (Office):	(207)842-8023
Telephone Number (Cellular):	(414)899-6555
Fax Number:	(207)774-2375

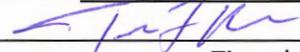
BIDDER MUST COMPLETE THE FOLLOWING

By signing this Request for Proposal for Contractual Services form, the bidder guarantees compliance with the provisions stated in this Request for Proposal, agrees to the terms and conditions unless otherwise agreed to (see Section III) and certifies that bidder maintains a drug free work place environment.

Per Nebraska's Transparency in Government Procurement Act, Neb. Rev Stat § 73-603 DAS is required to collect statistical information regarding the number of contracts awarded to Nebraska Contractors. This information is for statistical purposes only and will not be considered for contract award purposes.

NEBRASKA CONTRACTOR AFFIDAVIT: Bidder hereby attests that bidder is a Nebraska Contractor. "Nebraska Contractor" shall mean any bidder who has maintained a bona fide place of business and at least one employee within this state for at least the six (6) months immediately preceding the posting date of this RFP.

I hereby certify that I am a **Resident disabled veteran or business located in a designated enterprise zone** in accordance with Neb. Rev. Stat. § 73-107 and wish to have preference, if applicable, considered in the award of this contract.

FIRM: Berry Dunn McNeil & Parker, LLC
COMPLETE ADDRESS: 100 Middle Street, Portland ME 04101
TELEPHONE NUMBER: (207)775-2387 FAX NUMBER: (207)774-2375
SIGNATURE:  DATE: May 18, 2016
TYPED NAME & TITLE OF SIGNER: Timothy F. Masse, Principal

III. TERMS AND CONDITIONS

By signing the "Request for Proposal for Contractual Services" form, the bidder guarantees compliance with the provisions stated in this Request for Proposal, agrees to the Terms and Conditions unless otherwise agreed to, and certifies bidder maintains a drug free work place environment.

Bidders are expected to closely read the Terms and Conditions and provide a binding signature of intent to comply with the Terms and Conditions; provided, however, a bidder may indicate any exceptions to the Terms and Conditions by (1) clearly identifying the term or condition by subsection, and (2) including an explanation for the bidder's inability to comply with such term or condition which includes a statement recommending terms and conditions the bidder would find acceptable. Rejection in whole or in part of the Terms and Conditions may be cause for rejection of a bidder's proposal. **Bidders must include completed Section III with their proposal response.**

The State of Nebraska is soliciting bids in response to the RFP. The State of Nebraska will not consider proposals that propose the substitution of the bidder's contract, agreements, or terms for those of the State of Nebraska's. Any License, Service Agreement, Customer Agreement, User Agreement, Bidder Terms and Conditions, Document, or Clause purported or offered to be included as a part of this RFP must be submitted as individual clauses, as either a counter-offer or additional language, and each clause must be acknowledged and accepted in writing by the State. If the Bidder's clause is later found to be in conflict with the RFP or resulting contract the Bidder's clause shall be subordinate to the RFP or resulting contract.

A. GENERAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The contract resulting from this Request for Proposal shall incorporate the following documents:

1. Amendment to Contract Award with the most recent dated amendment having the highest priority;
2. Contract Award and any attached Addenda;
3. The Request for Proposal form and the Contractor's Proposal, signed in ink
4. Amendments to RFP and any Questions and Answers; and
5. The original RFP document and any Addenda.

These documents constitute the entirety of the contract.

Unless otherwise specifically stated in a contract amendment, in case of any conflict between the incorporated documents, the documents shall govern in the following order of preference with number one (1) receiving preference over all other documents and with each lower numbered document having preference over any higher numbered document: 1) Amendment to Contract Award with the most recent dated amendment having the highest priority, 2) Contract Award and any attached Addenda, 3) the signed Request for Proposal form and the Contractor's Proposal, 4) Amendments to RFP and any Questions and Answers, 5) the original RFP document and any Addenda.

Any ambiguity in any provision of this contract which shall be discovered after its execution shall be resolved in accordance with the rules of contract interpretation as established in the State of Nebraska.

Once proposals are opened they become the property of the State of Nebraska and will not be returned.

B. AWARD

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

All purchases, leases, or contracts which are based on competitive proposals will be awarded according to the provisions in the Request for Proposal. The State reserves the right to reject any or all proposals, in whole or in part, or to award to multiple bidders in whole or in part, and at its discretion, may withdraw or amend the Request for Proposal at any time. The State reserves the right to waive any deviations or errors that are not material, do not invalidate the legitimacy of the proposal, and do not improve the bidder's competitive position. All awards will be made in a manner deemed in the best interest of the State. The Request for Proposal does not commit the State to award a contract. If, in the opinion of the State, revisions or amendments will require substantive changes in proposals, the due date may be extended.

By submitting a proposal in response to this Request for Proposal, the bidder grants to the State the right to contact or arrange a visit in person with any or all of the bidder's clients.

Once intent to award decision has been determined, it will be posted to the Internet at:
<http://das.nebraska.gov/materiel/purchasing.html>

Grievance and protest procedure is available on the Internet at:
http://das.nebraska.gov/materiel/purchase_bureau/docs/vendors/protest/ProtestGrievanceProcedureForVendors.pdf

Any protests must be filed by a vendor within ten (10) business days after the intent to award decision is posted to the Internet.

C. COMPLIANCE WITH CIVIL RIGHTS LAWS AND EQUAL OPPORTUNITY EMPLOYMENT / NONDISCRIMINATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AK</i>			

The Contractor shall comply with all applicable local, state, and federal statutes and regulations regarding civil rights laws and equal opportunity employment. The Nebraska Fair Employment Practice Act prohibits Contractors of the State of Nebraska, and their Subcontractors, from discriminating against any employee or applicant for employment, with respect to hire, tenure, terms, conditions, compensation, or privileges of employment because of race, color, religion, sex, disability, marital status, or national origin (Neb. Rev. Stat. §§ 48-1101 to 48-1125). The Contractor guarantees compliance with the Nebraska Fair Employment Practice Act, and breach of this provision shall be regarded as a material breach of contract. The Contractor shall insert a similar provision in all Subcontracts for services to be covered by any contract resulting from this Request for Proposal.

D. PERMITS, REGULATIONS, LAWS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The Contractor shall procure and pay for all permits, licenses, and approvals necessary for the execution of the contract. The Contractor shall comply with all applicable local, state, and federal laws, ordinances, rules, orders, and regulations.

E. OWNERSHIP OF INFORMATION AND DATA

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The State of Nebraska shall have the unlimited right to publish, duplicate, use, and disclose all information and data developed or derived by the Contractor pursuant to this contract.

The Contractor must guarantee that it has the full legal right to the materials, supplies, equipment, and other rights or titles (e.g. rights to licenses transfer or assign deliverables) necessary to execute this contract. The contract price shall, without exception, include compensation for all royalties and costs arising from patents, trademarks, and copyrights that are in any way involved in the contract. It shall be the responsibility of the Contractor to pay for all royalties and costs, and the State must be held harmless from any such claims.

F. INSURANCE REQUIREMENTS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The Contractor shall not commence work under this contract until all the insurance required hereunder has been obtained and such insurance has been approved by the State. The Contractor shall maintain all required insurance for the life of this contract and shall ensure that the State Purchasing Bureau has the most current certificate of insurance throughout the life of this contract. If Contractor will be utilizing any Subcontractors, the Contractor is responsible for obtaining the certificate(s) of insurance required herein under from any and all Subcontractor(s). The Contractor is also responsible for ensuring Subcontractor(s) maintain the insurance required until completion of the contract requirements. The Contractor shall not allow any Subcontractor to commence work on any Subcontract until all similar insurance required of the Subcontractor has been obtained and approved by the Contractor. Approval of the insurance by the State shall not limit, relieve, or decrease the liability of the Contractor hereunder.

If by the terms of any insurance a mandatory deductible is required, or if the Contractor elects to increase the mandatory deductible amount, the Contractor shall be responsible for payment of the amount of the deductible in the event of a paid claim.

Insurance coverages shall function independent of all other clauses in the contract, and in no instance shall the limits of recovery from the insurance be reduced below the limits required by this section.

1. WORKERS' COMPENSATION INSURANCE

The Contractor shall take out and maintain during the life of this contract the statutory Workers' Compensation and Employer's Liability Insurance for all of the contactors' employees to be engaged in

work on the project under this contract and, in case any such work is sublet, the Contractor shall require the Subcontractor similarly to provide Worker's Compensation and Employer's Liability Insurance for all of the Subcontractor's employees to be engaged in such work. This policy shall be written to meet the statutory requirements for the state in which the work is to be performed, including Occupational Disease. This policy shall include a waiver of subrogation in favor of the State. The amounts of such insurance shall not be less than the limits stated hereinafter.

2. COMMERCIAL GENERAL LIABILITY INSURANCE AND COMMERCIAL AUTOMOBILE LIABILITY INSURANCE

The Contractor shall take out and maintain during the life of this contract such Commercial General Liability Insurance and Commercial Automobile Liability Insurance as shall protect Contractor and any Subcontractor performing work covered by this contract from claims for damages for bodily injury, including death, as well as from claims for property damage, which may arise from operations under this contract, whether such operation be by the Contractor or by any Subcontractor or by anyone directly or indirectly employed by either of them, and the amounts of such insurance shall not be less than limits stated hereinafter.

The Commercial General Liability Insurance shall be written on an occurrence basis, and provide Premises/Operations, Products/Completed Operations, Independent Contractors, Personal Injury, and Contractual Liability coverage. The policy shall include the State, and others as required by the contract documents, as Additional Insured(s). This policy shall be primary, and any insurance or self-insurance carried by the State shall be considered excess and non-contributory. The Commercial Automobile Liability Insurance shall be written to cover all Owned, Non-owned, and Hired vehicles.

3. INSURANCE COVERAGE AMOUNTS REQUIRED

COMMERCIAL GENERAL LIABILITY	
General Aggregate	\$2,000,000
Products/Completed Operations Aggregate	\$2,000,000
Personal/Advertising Injury	\$1,000,000 per occurrence
Bodily Injury/Property Damage	\$1,000,000 per occurrence
Fire Damage	\$50,000 any one fire
Medical Payments	\$10,000 any one person
Damage to Rented Premises	\$300,000 each occurrence
Contractual	Included
XCU Liability (Explosion, Collapse, and Underground Damage)	Included
Independent Contractors	Included
Abuse & Molestation	Included
WORKER'S COMPENSATION	
Employers Liability Limits	\$500K/\$500K/\$500K
Statutory Limits- All States	Statutory - State of Nebraska
USL&H Endorsement	Statutory
Voluntary Compensation	Statutory
COMMERCIAL AUTOMOBILE LIABILITY	
Bodily Injury/Property Damage	\$1,000,000 combined single limit
Include All Owned, Hired & Non-Owned Automobile liability	Included
Motor Carrier Act Endorsement	Where Applicable
UMBRELLA/EXCESS LIABILITY	
Over Primary Insurance	\$5,000,000
SUBROGATION WAIVER	
"Workers' Compensation policy shall include a waiver of subrogation in favor of the State of Nebraska."	
LIABILITY WAIVER	
"Commercial General Liability & Commercial Automobile Liability policies shall be primary and any insurance or self-insurance carried by the State shall be considered excess and non-contributory."	

4. EVIDENCE OF COVERAGE

The Contractor should furnish the State, with their proposal response, a certificate of insurance coverage complying with the above requirements to the attention of the Buyer at 402-471-2089 (fax)

Administrative Services
 State Purchasing Bureau
 1526 K Street, Suite 130
 Lincoln, NE 68508

These certificates or the cover sheet shall reference the RFP number, and the certificates shall include the name of the company, policy numbers, effective dates, dates of expiration, and amounts and types of coverage afforded. If the State is damaged by the failure of the Contractor to maintain such insurance, then the Contractor shall be responsible for all reasonable costs properly attributable thereto.

Notice of cancellation of any required insurance policy must be submitted to Administrative Services State Purchasing Bureau when issued and a new coverage binder shall be submitted immediately to ensure no break in coverage.

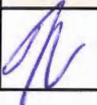
G. COOPERATION WITH OTHER CONTRACTORS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The State may already have in place or choose to award supplemental contracts for work related to this Request for Proposal, or any portion thereof.

1. The State reserves the right to award the contract jointly between two or more potential Contractors, if such an arrangement is in the best interest of the State.
2. The Contractor shall agree to cooperate with such other Contractors, and shall not commit or permit any act which may interfere with the performance of work by any other Contractor.

H. INDEPENDENT CONTRACTOR

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

It is agreed that nothing contained herein is intended or should be construed in any manner as creating or establishing the relationship of partners between the parties hereto. The Contractor represents that it has, or will secure at its own expense, all personnel required to perform the services under the contract. The Contractor's employees and other persons engaged in work or services required by the contractor under the contract shall have no contractual relationship with the State; they shall not be considered employees of the State.

All claims on behalf of any person arising out of employment or alleged employment (including without limit claims of discrimination against the Contractor, its officers, or its agents) shall in no way be the responsibility of the State. The Contractor will hold the State harmless from any and all such claims. Such personnel or other persons shall not require nor be entitled to any compensation, rights, or benefits from the State including without limit, tenure rights, medical and hospital care, sick and vacation leave, severance pay, or retirement benefits.

I. CONTRACTOR RESPONSIBILITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>PM</i>			

The Contractor is solely responsible for fulfilling the contract, with responsibility for all services offered and products to be delivered as stated in the Request for Proposal, the Contractor's proposal, and the resulting contract. The Contractor shall be the sole point of contact regarding all contractual matters.

If the Contractor intends to utilize any Subcontractor's services, the Subcontractor's level of effort, tasks, and time allocation must be clearly defined in the Contractor's proposal. The Contractor shall agree that it will not utilize any Subcontractors not specifically included in its proposal in the performance of the contract without the prior written authorization of the State. Following execution of the contract, the Contractor shall proceed diligently with all services and shall perform such services with qualified personnel in accordance with the contract.

J. CONTRACTOR PERSONNEL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The Contractor warrants that all persons assigned to the project shall be employees of the Contractor or specified Subcontractors, and shall be fully qualified to perform the work required herein. Personnel employed by the Contractor to fulfill the terms of the contract shall remain under the sole direction and control of the Contractor. The Contractor shall include a similar provision in any contract with any Subcontractor selected to perform work on the project.

Personnel commitments made in the Contractor's proposal shall not be changed without the prior written approval of the State. Replacement of key personnel, if approved by the State, shall be with personnel of equal or greater ability and qualifications.

The State reserves the right to require the Contractor to reassign or remove from the project any Contractor or Subcontractor employee.

In respect to its employees, the Contractor agrees to be responsible for the following:

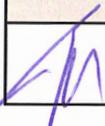
1. any and all employment taxes and/or other payroll withholding;
2. any and all vehicles used by the Contractor's employees, including all insurance required by state law;
3. damages incurred by Contractor's employees within the scope of their duties under the contract;
4. maintaining workers' compensation and health insurance and submitting any reports on such insurance to the extent required by governing State law; and
5. determining the hours to be worked and the duties to be performed by the Contractor's employees.

K. CONTRACT CONFLICTS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>PM</i>			

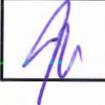
Contractor shall insure that contracts or agreements with sub-contractors and agents, and the performance of services in relation to this contract by sub-contractors and agents, does not conflict with this contract.

L. STATE OF NEBRASKA PERSONNEL RECRUITMENT PROHIBITION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The Contractor shall not, at any time, recruit or employ any State employee or agent who has worked on the Request for Proposal or project, or who had any influence on decisions affecting the Request for Proposal or project.

M. CONFLICT OF INTEREST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

By submitting a proposal, bidder certifies that there does not now exist any relationship between the bidder and any person or entity which is or gives the appearance of a conflict of interest related to this Request for Proposal or project.

The bidder certifies that it shall not take any action or acquire any interest, either directly or indirectly, which will conflict in any manner or degree with the performance of its services hereunder or which creates an actual or appearance of conflict of interest.

The bidder certifies that it will not employ any individual known by bidder to have a conflict of interest. Any contractor (and its subcontractors) serving in the role of independent validation and verification (IV&V) service contractor to the State is prohibited from soliciting, proposing, or being awarded any project management, quality assurance, software design, development, or other manner of planning, design, development, or implementation phase activity on the projects for which these IV&V services are being procured.

This exclusion likewise extends to any other project within the State that may interact with or otherwise provide services to the projects or to the State during the full term of this contract. This exclusion is executed in accordance with federal regulations at 45 CFR 95.626, which require that this IV&V effort, "... be conducted by an entity that is independent from the State".

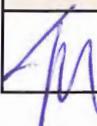
IV&V is the set of verification and validation activities performed by an agency not under the control of the organization developing the software. IV&V services must be provided and managed by an organization that is technically and managerially independent of the subject software development project. This independence takes two mandatory forms.

First, technical independence requires that the IV&V services provider organization, its personnel, and subcontractors are not and have not been involved in the software development or implementation effort or in the

project's initial planning and/or subsequent design. Technical independence helps ensure that IV&V review reports are free of personal or professional bias, posturing, or gold plating.

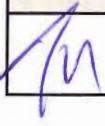
Second, managerial independence is required to make certain that the IV&V effort is provided by an organization that is departmentally and hierarchically separate from the software development and program management organizations. Managerial independence helps ensure that the IV&V service provider can deliver findings and recommendations to state and federal executive leadership and management without restriction, fear of retaliation, or coercion (e.g., reports being subject to prior review or approval from the development group before release to outside entities, such as the federal government).

N. PROPOSAL PREPARATION COSTS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The State shall not incur any liability for any costs incurred by bidders in replying to this Request for Proposal, in the demonstrations and/or oral presentations, or in any other activity related to bidding on this Request for Proposal.

O. ERRORS AND OMISSIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

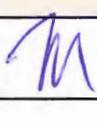
The bidder shall not take advantage of any errors and/or omissions in this Request for Proposal or resulting contract. The bidder must promptly notify the State of any errors and/or omissions that are discovered.

P. BEGINNING OF WORK

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The bidder shall not commence any billable work until a valid contract has been fully executed by the State and the successful Contractor. The Contractor will be notified in writing when work may begin.

Q. ASSIGNMENT BY THE STATE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The State shall have the right to assign or transfer the contract or any of its interests herein to any agency, board, commission, or political subdivision of the State of Nebraska. There shall be no charge to the State for any assignment hereunder.

R. ASSIGNMENT BY THE CONTRACTOR

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The Contractor may not assign, voluntarily or involuntarily, the contract or any of its rights or obligations hereunder (including without limitation rights and duties of performance) to any third party, without the prior written consent of the State, which will not be unreasonably withheld.

S. DEVIATIONS FROM THE REQUEST FOR PROPOSAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

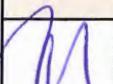
The requirements contained in the Request for Proposal become a part of the terms and conditions of the contract resulting from this Request for Proposal. Any deviations from the Request for Proposal must be clearly defined by the bidder in its proposal and, if accepted by the State, will become part of the contract. Any specifically defined deviations must not be in conflict with the basic nature of the Request for Proposal, mandatory requirements, or applicable state or federal laws or statutes. "Deviation", for the purposes of this RFP, means any proposed changes or alterations to either the contractual language or deliverables within the scope of this RFP. The State discourages deviations and reserves the right to reject proposed deviations.

T. GOVERNING LAW

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The contract shall be governed in all respects by the laws and statutes of the State of Nebraska. Any legal proceedings against the State of Nebraska regarding this Request for Proposal or any resultant contract shall be brought in the State of Nebraska administrative or judicial forums as defined by State law. The Contractor must be in compliance with all Nebraska statutory and regulatory law.

U. ATTORNEY'S FEES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

In the event of any litigation, appeal, or other legal action to enforce any provision of the contract, the Contractor agrees to pay all expenses of such action, as permitted by law, including attorney's fees and costs, if the State is the prevailing party.

V. ADVERTISING

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The Contractor agrees not to refer to the contract award in advertising in such a manner as to state or imply that the company or its services are endorsed or preferred by the State. News releases pertaining to the project shall not be issued without prior written approval from the State.

W. STATE PROPERTY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The Contractor shall be responsible for the proper care and custody of any State-owned property which is furnished for the Contractor's use during the performance of the contract. The Contractor shall reimburse the State for any loss or damage of such property; normal wear and tear is expected.

X. SITE RULES AND REGULATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The Contractor shall use its best efforts to ensure that its employees, agents, and Subcontractors comply with site rules and regulations while on State premises. If the Contractor must perform on-site work outside of the daily operational hours set forth by the State, it must make arrangements with the State to ensure access to the facility and the equipment has been arranged. No additional payment will be made by the State on the basis of lack of access, unless the State fails to provide access as agreed to between the State and the Contractor.

Y. NOTIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

During the bid process, all communication between the State and a bidder shall be between the bidder's representative clearly noted in its proposal and the buyer noted in Section II.A. Procuring Office and Contact Person, of this RFP. After the award of the contract, all notices under the contract shall be deemed duly given upon delivery to the staff designated as the point of contact for this Request for Proposal, in person, or upon delivery by

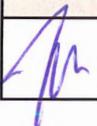
U.S. Mail, facsimile, or e-mail. Each bidder should provide in its proposal the name, title, and complete address of its designee to receive notices.

1. Except as otherwise expressly specified herein, all notices, requests, or other communications shall be in writing and shall be deemed to have been given if delivered personally or mailed, by U.S. Mail, postage prepaid, return receipt requested, to the parties at their respective addresses set forth above, or at such other addresses as may be specified in writing by either of the parties. All notices, requests, or communications shall be deemed effective upon personal delivery or three (3) calendar days following deposit in the mail.
2. Whenever the Contractor encounters any difficulty which is delaying or threatens to delay its timely performance under the contract, the Contractor shall immediately give notice thereof in writing to the State reciting all relevant information with respect thereto. Such notice shall not in any way constitute a basis for an extension of the delivery schedule or be construed as a waiver by the State of any of its rights or remedies to which it is entitled by law or equity or pursuant to the provisions of the contract. Failure to give such notice, however, may be grounds for denial of any request for an extension of the delivery schedule because of such delay.

Either party may change its address for notification purposes by giving notice of the change, and setting forth the new address and an effective date.

For the duration of the contract, all communication between Contractor and the State regarding the contract shall take place between the Contractor and individuals specified by the State in writing. Communication about the contract between Contractor and individuals not designated as points of contact by the State is strictly forbidden.

Z. EARLY TERMINATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The contract may be terminated as follows:

1. The State and the Contractor, by mutual written agreement, may terminate the contract at any time.
2. The State, in its sole discretion, may terminate the contract for any reason upon thirty (30) calendar day's written notice to the Contractor. Such termination shall not relieve the Contractor of warranty or other service obligations incurred under the terms of the contract. In the event of termination the Contractor shall be entitled to payment, determined on a pro rata basis, for products or services satisfactorily performed or provided.
3. The State may terminate the contract immediately for the following reasons:
 - a. if directed to do so by statute;
 - b. Contractor has made an assignment for the benefit of creditors, has admitted in writing its inability to pay debts as they mature, or has ceased operating in the normal course of business;
 - c. a trustee or receiver of the Contractor or of any substantial part of the Contractor's assets has been appointed by a court;
 - d. fraud, misappropriation, embezzlement, malfeasance, misfeasance, or illegal conduct pertaining to performance under the contract by its Contractor, its employees, officers, directors, or shareholders;
 - e. an involuntary proceeding has been commenced by any party against the Contractor under any one of the chapters of Title 11 of the United States Code and (i) the proceeding has been pending for at least sixty (60) calendar days; or (ii) the Contractor has consented, either expressly or by operation of law, to the entry of an order for relief; or (iii) the Contractor has been decreed or adjudged a debtor;
 - f. a voluntary petition has been filed by the Contractor under any of the chapters of Title 11 of the United States Code;
 - g. Contractor intentionally discloses confidential information;
 - h. Contractor has or announces it will discontinue support of the deliverable;

- i. second or subsequent documented "vendor performance report" form deemed acceptable by the State Purchasing Bureau; or
- j. Contractor engaged in collusion or actions which could have provided Contractor an unfair advantage in obtaining this contract.

AA. FUNDING OUT CLAUSE OR LOSS OF APPROPRIATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The State may terminate the contract, in whole or in part, in the event funding is no longer available. The State's obligation to pay amounts due for fiscal years following the current fiscal year is contingent upon legislative appropriation of funds for the contract. Should said funds not be appropriated, the State may terminate the contract with respect to those payments for the fiscal years for which such funds are not appropriated. The State will give the Contractor written notice thirty (30) calendar days prior to the effective date of any termination, and advise the Contractor of the location (address and room number) of any related equipment. All obligations of the State to make payments after the termination date will cease and all interest of the State in any related equipment will terminate. The Contractor shall be entitled to receive just and equitable compensation for any authorized work which has been satisfactorily completed as of the termination date. In no event shall the Contractor be paid for a loss of anticipated profit.

BB. BREACH BY CONTRACTOR

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The State may terminate the contract, in whole or in part, if the Contractor fails to perform its obligations under the contract in a timely and proper manner. The State may, by providing a written notice of default to the Contractor, allow the Contractor to cure a failure or breach of contract within a period of thirty (30) calendar days (or longer at State's discretion considering the gravity and nature of the default). Said notice shall be delivered by Certified Mail, Return Receipt Requested, or in person with proof of delivery. Allowing the Contractor time to cure a failure or breach of contract does not waive the State's right to immediately terminate the contract for the same or different contract breach which may occur at a different time. In case of default of the Contractor, the State may contract the service from other sources and hold the Contractor responsible for any excess cost occasioned thereby.

CC. ASSURANCES BEFORE BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

If any document or deliverable required pursuant to the contract does not fulfill the requirements of the Request for Proposal/resulting contract, upon written notice from the State, the Contractor shall deliver assurances in the form of additional Contractor resources at no additional cost to the project in order to complete the deliverable, and to ensure that other project schedules will not be adversely affected.

GG. PROHIBITION AGAINST ADVANCE PAYMENT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

Payments shall not be made until contractual deliverable(s) are received and accepted by the State.

HH. PAYMENT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

State will render payment to Contractor when the terms and conditions of the contract and specifications have been satisfactorily completed on the part of the Contractor as solely determined by the State. Payment will be made by the responsible agency in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §§ 81-2401 through 81-2408). The State may require the Contractor to accept payment by electronic means such as ACH deposit. In no event shall the State be responsible or liable to pay for any services provided by the Contractor prior to the Effective Date, and the Contractor hereby waives any claim or cause of action for any such services.

II. INVOICES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>X</i>		<i>AM</i>	<i>We would like to add that 1 1/2% interest be added to invoices 60 days past due</i>

Invoices for payments must be submitted by the Contractor to the agency requesting the services with sufficient detail to support payment. The terms and conditions included in the Contractor's invoice shall be deemed to be solely for the convenience of the parties. No terms or conditions of any such invoice shall be binding upon the State, and no action by the State, including without limitation the payment of any such invoice in whole or in part, shall be construed as binding or estopping the State with respect to any such term or condition, unless the invoice term or condition has been previously agreed to by the State as an amendment to the contract.

JJ. RIGHT TO AUDIT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

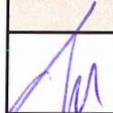
Contractor shall establish and maintain a reasonable accounting system that enables the State to readily audit contract. The State and its authorized representatives shall have the right to audit, to examine, and to make copies of or extracts from all financial and related records (in whatever form they may be kept, whether written, electronic, or other) relating to or pertaining to this contract kept by or under the control of the Contractor, including, but not

limited to those kept by the Contractor, its employees, agents, assigns, successors, and Subcontractors. Such records shall include, but not be limited to, accounting records, written policies and procedures; all paid vouchers including those for out-of-pocket expenses; other reimbursement supported by invoices; ledgers; cancelled checks; deposit slips; bank statements; journals; original estimates; estimating work sheets; contract amendments and change order files; back charge logs and supporting documentation; insurance documents; payroll documents; timesheets; memoranda; and correspondence.

Contractor shall, at all times during the term of this contract and for a period of five (5) years after the completion of this contract, maintain such records, together with such supporting or underlying documents and materials. The Contractor shall at any time requested by the State, whether during or after completion of this contract and at Contractor's own expense make such records available for inspection and audit (including copies and extracts of records as required) by the State. Such records shall be made available to the State during normal business hours at the Contractor's office or place of business. In the event that no such location is available, then the financial records, together with the supporting or underlying documents and records, shall be made available for audit at a time and location that is convenient for the State. Contractor shall ensure the State has these rights with Contractor's assigns, successors, and Subcontractors, and the obligations of these rights shall be explicitly included in any subcontracts or agreements formed between the Contractor and any Subcontractors to the extent that those Subcontracts or agreements relate to fulfillment of the Contractor's obligations to the State.

Costs of any audits conducted under the authority of this right to audit and not addressed elsewhere will be borne by the State unless certain exemption criteria are met. If the audit identifies overpricing or overcharges (of any nature) by the Contractor to the State in excess of one-half of one percent (.5%) of the total contract billings, the Contractor shall reimburse the State for the total costs of the audit. If the audit discovers substantive findings related to fraud, misrepresentation, or non-performance, the Contractor shall reimburse the State for total costs of audit. Any adjustments and/or payments that must be made as a result of any such audit or inspection of the Contractor's invoices and/or records shall be made within a reasonable amount of time (not to exceed 90 days) from presentation of the State's findings to Contractor.

KK. TAXES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The State is not required to pay taxes of any kind and assumes no such liability as a result of this solicitation. Any property tax payable on the Contractor's equipment which may be installed in a state-owned facility is the responsibility of the Contractor.

LL. INSPECTION AND APPROVAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

Final inspection and approval of all work required under the contract shall be performed by the designated State officials. The State and/or its authorized representatives shall have the right to enter any premises where the Contractor or Subcontractor duties under the contract are being performed, and to inspect, monitor or otherwise evaluate the work being performed. All inspections and evaluations shall be at reasonable times and in a manner that will not unreasonably delay work.

MM. CHANGES IN SCOPE/CHANGE ORDERS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The State may, upon the written agreement of Contractor, make changes to the contract within the general scope of the RFP. The State may, at any time work is in progress, by written agreement, make alterations in the terms of work as shown in the specifications, require the Contractor to make corrections, decrease the quantity of work, or make such other changes as the State may find necessary or desirable. The Contractor shall not claim forfeiture of contract by reasons of such changes by the State. Changes in work and the amount of compensation to be paid to the Contractor shall be determined in accordance with applicable unit prices if any, or a pro-rated value.

Corrections of any deliverable, service or performance of work required pursuant to the contract shall not be deemed a modification. Changes or additions to the contract beyond the scope of the RFP are not permitted.

NN. SEVERABILITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

If any term or condition of the contract is declared by a court of competent jurisdiction to be illegal or in conflict with any law, the validity of the remaining terms and conditions shall not be affected, and the rights and obligations of the parties shall be construed and enforced as if the contract did not contain the particular provision held to be invalid.

OO. CONFIDENTIALITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

All materials and information provided by the State or acquired by the Contractor on behalf of the State shall be regarded as confidential information. All materials and information provided by the State or acquired by the Contractor on behalf of the State shall be handled in accordance with federal and state law, and ethical standards. The Contractor must ensure the confidentiality of such materials or information. Should said confidentiality be breached by a Contractor; Contractor shall notify the State immediately of said breach and take immediate corrective action.

It is incumbent upon the Contractor to inform its officers and employees of the penalties for improper disclosure imposed by the Privacy Act of 1974, 5 U.S.C. 552a. Specifically, 5 U.S.C. 552a (i)(1), which is made applicable to Contractors by 5 U.S.C. 552a (m)(1), provides that any officer or employee of a Contractor, who by virtue of his/her employment or official position has possession of or access to agency records which contain individually identifiable information, the disclosure of which is prohibited by the Privacy Act or regulations established thereunder, and who knowing that disclosure of the specific material is prohibited, willfully discloses the material in any manner to any person or agency not entitled to receive it, shall be guilty of a misdemeanor and fined not more than \$5,000.

PP. PROPRIETARY INFORMATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

Data contained in the proposal and all documentation provided therein, become the property of the State of Nebraska and the data becomes public information upon opening the proposal. If the bidder wishes to have any information withheld from the public, such information must fall within the definition of proprietary information contained within Nebraska's public record statutes. **All proprietary information the bidder wishes the State to withhold must be submitted in a sealed package, which is separate from the remainder of the proposal, and provide supporting documents showing why such documents should be marked proprietary.** The separate package must be clearly marked PROPRIETARY on the outside of the package. **Bidders may not mark their entire Request for Proposal as proprietary.** Bidder's cost proposals may not be marked as proprietary information. Failure of the bidder to follow the instructions for submitting proprietary and copyrighted information may result in the information being viewed by other bidders and the public. Proprietary information is defined as trade secrets, academic and scientific research work which is in progress and unpublished, and other information which if released would give advantage to business competitors and serve no public purpose (see Neb. Rev. Stat. § 84-712.05(3)). In accordance with Attorney General Opinions 92068 and 97033, bidders submitting information as proprietary may be required to prove specific, named competitor(s) who would be advantaged by release of the information and the specific advantage the competitor(s) would receive. Although every effort will be made to withhold information that is properly submitted as proprietary and meets the State's definition of proprietary information, the State is under no obligation to maintain the confidentiality of proprietary information and accepts no liability for the release of such information.

QQ. CERTIFICATION OF INDEPENDENT PRICE DETERMINATION/COLLUSIVE BIDDING

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

By submission of this proposal, the bidder certifies that it is the party making the foregoing proposal and that the proposal is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation; that the proposal is genuine and not collusive or sham; that the bidder has not directly or indirectly induced or solicited any other bidder to put in a false or sham proposal, and has not directly or indirectly colluded, conspired, connived, or agreed with any bidder or anyone else to put in a sham proposal, or that anyone shall refrain from bidding; that the bidder has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the proposal price of the bidder or any other bidder, or to fix any overhead, profit, or cost element of the proposal price, or of that of any other bidder, or to secure any advantage against the public body awarding the contract of anyone interested in the proposed contract; that all statements contained in the proposal are true; and further that the bidder has not, directly or indirectly, submitted the proposal price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, or paid, and will not pay, any fee to any corporation, partnership, company association, organization, proposal depository, or to any member or agent thereof to effectuate a collusive or sham proposal.

RR. STATEMENT OF NON-COLLUSION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The proposal shall be arrived at by the bidder independently and be submitted without collusion with, and without any direct or indirect agreement, understanding or planned common course of action with, any person; firm; corporation; bidder; Contractor of materials, supplies, equipment or services described in this RFP. Bidder shall not collude with, or attempt to collude with, any state officials, employees or agents; or evaluators or any person involved in this RFP. The bidder shall not take any action in the restraint of free competition or designed to limit independent bidding or to create an unfair advantage.

Should it be determined that collusion occurred, the State reserves the right to reject a bid or terminate the contract and impose further administrative sanctions.

SS. PRICES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>gm</i>			

All prices, costs, and terms and conditions outlined in the proposal shall remain fixed and valid commencing on the opening date of the proposal until an award is made or the Request for Proposal is cancelled.

Prices quoted on the Cost Proposal form shall remain fixed for the first year of the contract period. Any request for a price increase must be submitted in writing to the State Purchasing Bureau a minimum of 120 days prior to the price increase effective date, and be accompanied by documentation justifying the price increase. Further documentation may be required by the State to justify the increase. The State reserves the right to deny any requested price increase. No price increases are to be billed to any State Agencies prior to written amendment of the contract by the parties.

The State will be given full proportionate benefit of any price decrease during the term of the contract. Contractor represents and warrants that all prices for services, now or subsequently specified, are as low as and no higher than prices which the Contractor has charged or intends to charge customers other than the State for the same or similar products and services of the same or equivalent quantity and quality for delivery or performance during the same periods of time. If, during the term of the contract, the Contractor shall reduce any amount of prices charged to any customers other than the State for the same or similar products or services specified herein, the Contractor shall make an equal or equivalent reduction in corresponding prices for said specified products or services.

Contractor also represents and warrants that all prices set forth in the contract and all prices in addition, which the Contractor may charge under the terms of the contract, do not and will not violate any existing federal, state, or municipal law or regulations concerning price discrimination and/or price fixing. Contractor agrees to hold the State harmless from any such violation. Prices quoted shall not be subject to increase throughout the contract period unless specifically allowed by these specifications.

TT. BEST AND FINAL OFFER

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>gm</i>			

The State will compile the final scores for all parts of each proposal. The award may be granted to the highest scoring responsive and responsible bidder. Alternatively, the highest scoring bidder or bidders may be requested to submit best and final offers. If best and final offers are requested by the State and submitted by the bidder, they will be evaluated (using the stated criteria), scored, and ranked by the Evaluation Committee. The award will then be granted to the highest scoring bidder. However, a bidder should provide its best offer in its original proposal. Bidders should not expect that the State will request a best and final offer.

UU. ETHICS IN PUBLIC CONTRACTING

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

No bidder shall pay or offer to pay, either directly or indirectly, any fee, commission compensation, gift, gratuity, or anything of value to any State officer, legislator, employee or evaluator based on the understanding that the receiving person's vote, actions, or judgment will be influenced thereby. No bidder shall give any item of value to any employee of the State Purchasing Bureau or any evaluator.

Bidders shall be prohibited from utilizing the services of lobbyists, attorneys, political activists, or consultants to secure the contract. It is the intent of this provision to assure that the prohibition of state contact during the procurement process is not subverted through the use of lobbyists, attorneys, political activists, or consultants. It is the intent of the State that the process of evaluation of proposals and award of the contract be completed without external influence. It is not the intent of this section to prohibit bidders from seeking professional advice, for example consulting legal counsel, regarding terms and conditions of this Request for Proposal or the format or content of their proposal.

If the bidder is found to be in non-compliance with this section of the Request for Proposal, they may forfeit the contract if awarded to them or be disqualified from the selection process.

VV. INDEMNIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

1. GENERAL

The Contractor agrees to defend, indemnify, hold, and save harmless the State and its employees, volunteers, agents, and its elected and appointed officials ("the indemnified parties") from and against any and all claims, liens, demands, damages, liability, actions, causes of action, losses, judgments, costs, and expenses of every nature, including investigation costs and expenses, settlement costs, and attorney fees and expenses ("the claims"), sustained or asserted against the State, arising out of, resulting from, or attributable to the willful misconduct, negligence, error, or omission of the Contractor, its employees, Subcontractors, consultants, representatives, and agents, except to the extent such Contractor liability is attenuated by any action of the State which directly and proximately contributed to the claims.

2. INTELLECTUAL PROPERTY

The Contractor agrees it will, at its sole cost and expense, defend, indemnify, and hold harmless the indemnified parties from and against any and all claims, to the extent such claims arise out of, result from, or are attributable to, the actual or alleged infringement or misappropriation of any patent, copyright, trade secret, trademark, or confidential information of any third party by the Contractor or its employees, Subcontractors, consultants, representatives, and agents; provided, however, the State gives the Contractor prompt notice in writing of the claim. The Contractor may not settle any infringement claim that will affect the State's use of the Licensed Software without the State's prior written consent, which consent may be withheld for any reason.

If a judgment or settlement is obtained or reasonably anticipated against the State's use of any intellectual property for which the Contractor has indemnified the State, the Contractor shall, at the Contractor's sole cost and expense, promptly modify the item or items which were determined to be infringing, acquire a license or licenses on the State's behalf to provide the necessary rights to the State to eliminate the infringement, or provide the State with a non-infringing substitute that provides the State the same functionality. At the State's election, the actual or anticipated judgment may be treated as a breach of warranty by the Contractor, and the State may receive the remedies provided under this RFP.

3. PERSONNEL

The Contractor shall, at its expense, indemnify and hold harmless the indemnified parties from and against any claim with respect to withholding taxes, worker's compensation, employee benefits, or any other claim, demand, liability, damage, or loss of any nature relating to any of the personnel provided by the Contractor.

4. SELF-INSURANCE

The State of Nebraska is self-insured for any loss and purchases excess insurance coverage pursuant to Neb. Rev. Stat. § 81-8,239.01 (Reissue 2008). If there is a presumed loss under the provisions of this agreement, Contractor may file a claim with the Office of Risk Management pursuant to Neb. Rev. Stat. §§ 81-8,829 – 81-8,306 for review by the State Claims Board. The State retains all rights and immunities under the State Miscellaneous (Section 81-8,294), Tort (Section 81-8,209), and Contract Claim Acts (Section 81-8,302), as outlined in Neb. Rev. Stat. § 81-8,209 *et seq.* and under any other provisions of law and accepts liability under this agreement to the extent provided by law.

5. ALL REMEDIES AT LAW

Nothing in this agreement shall be construed as an indemnification by one party of the other for liabilities of a party or third parties for property loss or damage or death or personal injury arising out of and during the performance of this lease. Any liabilities or claims for property loss or damages or for death or personal injury by a party or its agents, employees, contractors or assigns or by third persons, arising out of and during the performance of this lease shall be determined according to applicable law.

WW. NEBRASKA TECHNOLOGY ACCESS STANDARDS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

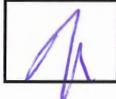
Contractor shall review the Nebraska Technology Access Standards, found at <http://nitc.nebraska.gov/standards/2-201.html> and ensure that products and/or services provided under the contract are in compliance or will comply with the applicable standards to the greatest degree possible. In the event such standards change during the Contractor's performance, the State may create an amendment to the contract to request the contract comply with the changed standard at a cost mutually acceptable to the parties.

XX. ANTITRUST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The Contractor hereby assigns to the State any and all claims for overcharges as to goods and/or services provided in connection with this contract resulting from antitrust violations which arise under antitrust laws of the United States and the antitrust laws of the State.

YY. DISASTER RECOVERY/BACK UP PLAN

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The Contractor shall have a disaster recovery and back-up plan, of which a copy should be provided to the State, which includes, but is not limited to equipment, personnel, facilities, and transportation, in order to continue services as specified under the specifications in the contract in the event of a disaster.

ZZ. TIME IS OF THE ESSENCE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

Time is of the essence in this contract. The acceptance of late performance with or without objection or reservation by the State shall not waive any rights of the State nor constitute a waiver of the requirement of timely performance of any obligations on the part of the Contractor remaining to be performed.

AAA. RECYCLING

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

Preference will be given to items which are manufactured or produced from recycled material or which can be readily reused or recycled after their normal use as per Neb. Rev. Stat. § 81-15,159.

BBB. DRUG POLICY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

Contractor certifies it maintains a drug free work place environment to ensure worker safety and workplace integrity. Contractor agrees to provide a copy of its drug free workplace policy at any time upon request by the State.

CCC. EMPLOYEE WORK ELIGIBILITY STATUS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
<i>AM</i>			

The Contractor is required and hereby agrees to use a federal immigration verification system to determine the work eligibility status of employees physically performing services within the State of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program authorized by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, 8 U.S.C. 1324a, known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of an employee.

If the Contractor is an individual or sole proprietorship, the following applies:

1. The Contractor must complete the United States Citizenship Attestation Form, available on the Department of Administrative Services website at <http://das.nebraska.gov/materiel/purchasing.html>

The completed United States Attestation Form should be submitted with the Request for Proposal response.

2. If the Contractor indicates on such attestation form that he or she is a qualified alien, the Contractor agrees to provide the US Citizenship and Immigration Services documentation required to verify the Contractor's lawful presence in the United States using the Systematic Alien Verification for Entitlements (SAVE) Program.
3. The Contractor understands and agrees that lawful presence in the United States is required and the Contractor may be disqualified or the contract terminated if such lawful presence cannot be verified as required by Neb. Rev. Stat. § 4-108.

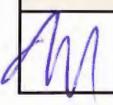
DDD. CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND INELIGIBILITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The Contractor, by signature to this RFP, certifies that the Contractor is not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any federal department or agency from participating in transactions (debarred). The Contractor also agrees to include the above requirements in any and all Subcontracts into which it enters. The Contractor shall immediately notify the Department if, during the term of this contract, Contractor becomes debarred. The Department may immediately terminate this contract by providing Contractor written notice if Contractor becomes debarred during the term of this contract.

Contractor, by signature to this RFP, certifies that Contractor has not had a contract with the State of Nebraska terminated early by the State of Nebraska. If Contractor has had a contract terminated early by the State of Nebraska, Contractor must provide the contract number, along with an explanation of why the contract was terminated early. Prior early termination may be cause for rejecting the proposal.

EEE. POLITICAL SUB-DIVISIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

The Contractor may extend the contract to political sub-divisions conditioned upon the honoring of the prices charged to the State. Terms and conditions of the Contract must be met by political sub-divisions. Under no circumstances shall the State be contractually obligated or liable for any purchases by political sub-divisions or other public entities not authorized by Neb. Rev. Stat. § 81-145, listed as "all officers of the state, departments, bureaus, boards, commissions, councils, and institutions receiving legislative appropriations." A listing of Nebraska political subdivisions may be found at the website of the Nebraska Auditor of Public Accounts.

FFF. OFFICE OF PUBLIC COUNSEL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
			

If it provides, under the terms of this contract and on behalf of the State of Nebraska, health and human services to individuals; service delivery; service coordination; or case management, Contractor shall submit to the jurisdiction of the Office of Public Counsel, pursuant to Neb. Rev. Stat. §§ 81-8,240 et seq. This section shall survive the termination of this contract and shall not apply if Contractor is a long-term care facility subject to the Long-Term Care Ombudsman Act, Neb. Rev. Stat. §§ 81-2237 et seq.

GGG. LONG-TERM CARE OMBUDSMAN

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
AM			

If it is a long-term care facility subject to the Long-Term Care Ombudsman Act, Neb. Rev. Stat. §§ 81-2237 et seq., Contractor shall comply with the Act. This section shall survive the termination of this contract.

2.0 Corporate Overview

2.1 Bidder Identification and Information

Corporate Name: Berry Dunn McNeil & Parker, LLC (doing business as BerryDunn)

Address of Company Headquarters: 100 Middle Street, Portland, Maine 04101

Entity Organization: Limited Liability Corporation incorporated in Maine

Organizational History:

- 1974 to 1982: Berry, Dunn & McNeil Chartered
- 1982 to 1999: Berry, Dunn, McNeil & Parker Chartered
- 1999 to present: Berry Dunn McNeil & Parker, LLC since 1999

2.2 Financial Statements (Confidential and Proprietary)



TD Bank
America's Most Convenient Bank®
One Portland Square
P.O. Box 9540
Portland, ME 04112-9540
T 207 761 8600
F 207 761 8660

tdbank.com

September 8, 2015

RE: Berry, Dunn, McNeil, & Parker, Inc.
100 Middle Street
Portland, Maine 04101

To Whom It May Concern:

Berry, Dunn, McNeil & Parker, Inc. has been a valued customer of TD Bank, N.A. since 1991, always maintaining a satisfactory loan and deposit relationship with the Bank. Over the past twenty three (23) years they have consistently demonstrated the financial capacity and credit worthiness to successfully provide accounting, tax, and business consulting services throughout the Northern New England area.

Berry Dunn is a well regarded customer of the Bank and they have handled their affairs with the utmost integrity.

Please feel free to call me should you have any questions.

Sincerely,



William R. Schad
Vice President

2.3 Change of Ownership

No change in ownership or control of BerryDunn is anticipated during the twelve (12) months following the proposal due date. If any change should occur, BerryDunn agrees to notify the State.

2.4 Office Location

BerryDunn's Government Consulting Group, which is based out of our Corporate Headquarters at 100 Middle Street in Portland, Maine, will be responsible for the performance of this contract.

2.5 Relationships with the State

BerryDunn has been engaged in two projects in the State of Nebraska during the previous two years, as listed below:

- Nebraska Department of Motor Vehicles – Procurement support for Vehicle Title Registration System modernization
 - Contract #: 69061 04
 - Signed November 2015

- City of La Vista, Nebraska – Procurement support for Financial Information System replacement
 - Contract #: No contract number
 - Signed April 2014

2.6 Bidder's Employees Relation to the State

BerryDunn's Project Manager for the EES Project, Beth Jenckes, served as an independent contractor on projects with Nebraska DHHS within the past 24 months. She worked with DHHS from February 2012 to August 2015 in support of implementing the requirements of the Affordable Care Act (ACA). In this role, Beth focused on the policy implementation for compliance. As part of this project, Beth was asked to assist with the cost scoring for the current EES project. Beth did not participate in developing the requirements for the EES RFP or evaluating technical scores.

Our proposed EES IV&V Technical Analyst/Architect, Regina Blazek, worked on multiple projects for Nebraska DHHS (as a contractor for TekSystems) from December 2012 to April 2015, including making modifications to Nebraska's legacy MMIS and Medicaid Eligibility Systems, helping to maintain the systems in compliance with federal mandates. In addition, she supported the Nebraska Aging Management Information System (NAMIS) and the Behavioral Health Connect and Budget Management System. She also worked as part of the General Solutions team to modernize DHHS SQL development and served as Oracle DBA backup.

We do not believe Beth's or Regina's prior work presents a conflict of interest for their proposed roles. If DHHS has any concerns about either Beth's or Regina's proposed role on the team, we would be pleased to discuss this with you.

No other members of BerryDunn's team are or were an employee of the State of Nebraska within the past 24 months. Additionally, no employee of any agency of the State of Nebraska is employed by BerryDunn or is a subcontractor thereof.

2.7 Contract Performance (Confidential and Proprietary)

2.8 Summary of Bidder's Corporate Experience

BerryDunn is a recognized leader in providing objective consulting and advisory services for state Medicaid agencies. For more than 15 years, we have served as a trusted advisor to state Medicaid agencies, assisting our clients to:

- Strengthen business processes and supporting systems in alignment with federal and state regulations
- Plan for, procure, and manage the implementation of new systems, including Medicaid Management Information Systems (MMIS), Health Insurance Exchange (HIX), Integrated Eligibility Systems (IES), Data Warehouse/Decision Support Systems (DW/DSS), Pharmacy, and Electronic Health Records
- Provide IV&V, QA, and technical assistance for large system implementations
- Manage the CMS certification process for federally funded systems
- Evaluate and provide guidance related to enterprise architecture, system design, master data management, and data governance
- Identify and plan for integration and data sharing needs with other systems
- Evaluate and strengthen system security in alignment with nationally recognized standards and regulatory requirements
- Analyze regulatory impacts and adapt policies and procedures
- Provide cost allocation planning, rate setting, and funding analyses

As an independent consulting firm, BerryDunn does not develop or sell hardware or software, nor do we partner with system vendors or integrators.

Clients value the objective perspective we bring to IV&V engagements and our commitment to working collaboratively with our clients, their stakeholders, and vendors to help the project succeed.

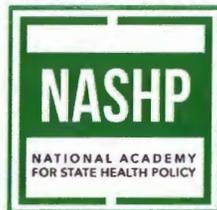
*"BerryDunn has been a true partner to West Virginia and is **unequivocally the best vendor I have worked with in my nearly 30 years of experience.***

They bring high quality people to our projects and have very little turnover in staff, both of which have been key factors contributing to our project successes."

- Mr. Edward Dolly, CIO
Office of Management Information Services, West Virginia Department of Health and Human Resources

Medicaid Thought Leadership

BerryDunn is committed to participating in and serving in leadership roles for industry associations, conferences, and workgroups, including those shown below.



**Private Sector
Technology Group**



Our participation in these associations and events provides an opportunity for our team members to meet with CMS, state Medicaid personnel, and vendors (both mainstream and niche) to check the pulse of the industry, monitor trends, and evaluate solutions – and stay abreast of current developments that we can apply in our IV&V work for Nebraska.

BerryDunn is viewed as a thought leader among state Medicaid agencies, as evidenced by our team members' selection to present at MESC:

- *MMIS Certification Pilot – Make Sure You're Not Flying Blind (2015)*
- *The Power of the SS-A: The Continuing Journey to MITA Maturity (2015)*
- *Using MITA to Support Policy and Strategic Roadmap Development as we Reshape the Medicaid Service Delivery Model (2014)*
- *Cybersecurity: Governance, Compliance, and Lessons Learned (2014)*
- *Iowa and West Virginia: Pilot States for the Transformed Medicaid Enterprise Certification Process (2014)*
- *Flexible Contracting and Contracting Best Practices (2014)*
- *Procurement, Certification, and Incentives in a Post-ACA Regulatory Environment (2014)*
- *Preparing for the Unexpected: Ensuring Enterprise Resilience (2014)*
- *Good Contracts from Good Procurement Processes: Is Your State Getting What it Needs? (2013)*
- *"To-Be" or Not "To-Be": An Industry Panel Discussion on MITA 3.0 (2012)*
- *MMIS Certification: Lessons Learned and Looking Ahead (2012)*
- *RFPs: A Positive Procurement Experience through Planning, Business Process Analysis, and Simplification (2010)*

Summary Matrix and Detailed Project References

In Table 1, we have provided a summary matrix of BerryDunn's relevant experience over the past 15 years. Where contact information is available, we have included this information; however, for several older projects, a client reference is no longer available.

Following the Summary Matrix, we have provided detailed descriptions for the following three current engagements that best relate to the size, scope, and complexity of services requested by DHHS:

- **Missouri Family Support Division –** IV&V for the Missouri Eligibility Determination and Enrollment System DDI. *This project directly relates to the IV&V services requested by DHHS in that several members of our proposed Nebraska IV&V team have been providing these same services for Missouri over the past 30 months.*
- **West Virginia Bureau for Medical Services –** Project Management and QA for MMIS and DW/DSS DDI and Pilot CMS Certification. *In addition to our role providing project management, we have performed QA reviews of vendor deliverables and provided overall QA oversight of development activities. In addition, our work with CMS and West Virginia on the new pilot certification process will benefit DHHS as you undertake certification for the EES and DMA projects, as we will be able to share lessons learned and first-hand perspective on the new certification process.*
- **Massachusetts HIX/IES Entities –** IV&V for HIX/IES DDI. *This project directly relates to the IV&V services requested by DHHS in that several members of our proposed Nebraska IV&V team have been providing these same services for Massachusetts over the past four years.*

*“As the QA services provider, BerryDunn played a critical role in the implementation by **proactively identifying risks and providing insight and an independent perspective...***

*While some of the recommendations provided by BerryDunn were not what the State or the vendor wanted to hear, the recommendations were ‘Best Practice’ and were in the best interest of the project. **BerryDunn made the tough calls time and time again.***

*Throughout the project, BerryDunn was very flexible and **always went that extra mile** in working with the project management team in meeting the ever evolving project needs.”*

- Mr. Ronald Jobel, Contract Manager for the New Hampshire FIRST project

These projects demonstrate BerryDunn’s understanding of large, multi-year Medicaid Enterprise implementations, federal and state requirements for Medicaid systems, and integration with other systems within the Medicaid Enterprise. In addition, these references can speak to BerryDunn’s collaborative IV&V and project management approach and our commitment to working with our clients and their vendors for the success of the project.

Table 1. Summary Matrix of BerryDunn’s Prior Relevant Experience: *A proven history of providing IV&V for enterprise systems and demonstrated experience providing objective advisory services for clients in the state Medicaid Enterprise*

Client	Responsibilities	Original Contract Dates	Actual End Date	Contact Information	Prime vs. Subcontractor
Kentucky Department of Transportation	Point-in-Time IV&V Assessment for Automated Vehicle Information System Implementation	October to November 2015	November 2015	Mr. Glenn Thomas, Director of IT Governance, Commonwealth Office of Technology Phone: (502) 564-6265 Glenn.Thomas@ky.gov	Prime
Maine Department of Health and Human Services	IV&V, QA, and Technical Assistance for MMIS DDI and CMS Certification	April 2008 to June 2012	June 2012	Reference no longer available	Prime
Maryland Health Benefit Exchange	IV&V for HIX/IES Implementation	November 2012 to December 2013	April 2014	Mr. Saleem Sayani, CIO Phone: (410) 767-2234 saleem.sayani@maryland.gov	Prime
Maryland Judiciary	IV&V for Enterprise Financial System Implementation	January 2010 to September 2011	September 2011	Mr. Mark Bittner, Enterprise Project Manager Phone: (410) 260-1139 Mark.Bittner@courts.state.md.us	Prime
Massachusetts HR Division	IV&V for PeopleSoft HR System Modernization	September 2009 to June 2010	June 2010	Mr. Martin Benison, Comptroller Phone: (617) 973-2468 Martin.Benison@state.ma.us	Prime
Massachusetts HIX/IES Entities	IV&V for HIX/IES Implementation	October 2012 to December 2014	June 2017 (anticipated)	Mr. Martin Baker, Senior Director and Principal Investigator Phone: (508) 856-3646 Martin.Baker@umassmed.edu	Prime
Missouri Department of Social Services	MMIS Security Risk Assessment	June to October 2014	October 2014	Mr. Darin Hackmann, Director of Information Systems, MO HealthNet Division Phone: (573) 751-7996 Darin.M.Hackmann@dss.mo.gov	Prime

Client	Responsibilities	Original Contract Dates	Actual End Date	Contact Information	Prime vs. Subcontractor
Missouri Family Support Division	IV&V for Eligibility Determination and Enrollment System Implementation	September 2013 to December 2015	December 2016 (anticipated)	Ms. Jan Heckemeyer, MAGI Team Lead Phone: (573) 751-3425 Jan.heckemeyer@dss.mo.gov	Prime
Missouri Family Support Division	Eligibility Determination and Enrollment System Security Risk Assessment	December 2015 to August 2016	August 2016 (anticipated)	Ms. Jan Heckemeyer, MAGI Team Lead Phone: (573) 751-3425 Jan.heckemeyer@dss.mo.gov	Prime
New Hampshire Dept. of Administrative Services	QA for Statewide Enterprise Resource Planning System Implementation	January 2007 to June 2009	June 2009	Mr. Steve Kelleher, Manager, Department of IT Phone: (603) 223-5708 Steven.kelleher@doit.nh.gov	Prime
New Hampshire Department of Health and Human Services	IV&V for Medicaid Decision Support System Implementation	January 2002 to June 2003	June 2004	Reference no longer available	Prime
Vermont Green Mountain Care Board	Project Management for All-Payer Claims Database	January to December 2014	December 2014	Ms. Susan Barrett, Executive Director Phone: (802) 828-1141 Susan.Barrett@state.vt.us	Prime
West Virginia Bureau for Medical Services	Project Management for MMIS Planning, Procurement, DDI, and Certification	April 2008 to March 2014	April 2018 (anticipated)	Mr. Ed Dolly, CIO Phone: (304) 356-5141 Ed.L.Dolly@wv.gov	Prime
West Virginia Bureau for Medical Services	Project Management for EES Reprocurement	February 2016 to December 2017	December 2017 (anticipated)	See Ed Dolly's contact information above	Prime
West Virginia Bureau for Medical Services	Project Management for DW/ DSS Procurement and DDI	January 2010 to March 2015	March 2015	See Ed Dolly's contact information above	Prime
West Virginia Bureau for Medical Services	Project Manager for EES Modernization	April 2013 to April 2014	April 2014	See Ed Dolly's contact information above	Prime
West Virginia Bureau for Medical Services	QA for MMIS Implementation and CMS Certification	December 2003 to November 2007	November 2007	See Ed Dolly's contact information above	Prime

BerryDunn Reference #1:	Missouri Department of Social Services, Family Support Division IV&V for MEDES Implementation				
Customer Contact Information	Ms. Jan Heckemeyer, MAGI Team Lead Phone: (573) 751-3425 Fax: (573) 751-6564 Jan.heckemeyer@dss.mo.gov				
Contract Type	BerryDunn serves as the Prime Contractor.				
Contractor's Responsibilities	<p>Key Areas of Expertise Demonstrated by BerryDunn:</p> <table border="0"> <tr> <td>IV&V and Quality Assurance</td> <td>Eligibility & Enrollment Functionality</td> </tr> <tr> <td>CMS Gate Review Certification</td> <td>Systems Security</td> </tr> </table> <p><i>"Missouri values our relationship with BerryDunn and considers the extensive partnership as a reflection of their focus on serving as a trusted advisor. As an independent, objective vendor, BerryDunn provides committed and commendable support for Missouri's various engagements. We feel confident BerryDunn will strive to build a similar relationship with your organization."</i></p> <p><i>- Ms. Jan Heckemeyer, MAGI Team Lead</i></p> <p>Project Overview:</p> <p>BerryDunn provides IV&V services for the Missouri Eligibility Determination and Enrollment System (MEDES) implementation, a system that will comply with ACA requirements and take advantage of new eligibility functionality for Medicaid and other human services programs.</p> <p>The primary objective of our services is to evaluate and monitor project issues and risks and provide objective recommendations to mitigate risks and promote successful project outcomes. The scope of our services includes:</p> <ul style="list-style-type: none"> • Monitoring system quality and compliance, including reviewing deliverables, assessing readiness for gate reviews, and evaluating compliance with requirements and applicable laws and regulations • Validating test results and conducting mandated test observation to achieve authorization to connect with the Federal Data Services Hub • Evaluating project management practices, including monitoring the solution vendor's and State's project management activities and evaluating the extent to which key milestones are being achieved • Monitoring costs, including conducting financial reviews for adherence to the cost allocation plan and monitoring progress against payments • Identifying opportunities for reusability, including reusable components and plans for their reuse in other states 	IV&V and Quality Assurance	Eligibility & Enrollment Functionality	CMS Gate Review Certification	Systems Security
IV&V and Quality Assurance	Eligibility & Enrollment Functionality				
CMS Gate Review Certification	Systems Security				

BerryDunn Reference #1:	Missouri Department of Social Services, Family Support Division IV&V for MEDES Implementation
	<p><i>Additional Services Provided by BerryDunn</i></p> <p>BerryDunn was hired to conduct two additional projects for the Department of Social Services, both through competitive procurement:</p> <ul style="list-style-type: none"> • Independent, third party security assessment of the MEDES, a necessary measure in order for the system to maintain Authority to Connect (ATC) status with the Federal Data Services Hub <ul style="list-style-type: none"> ○ Evaluated risk to the continuity of MEDES functions and to the confidentiality, integrity, and availability of critical, personally identifiable information (PII) in the context of best practices and the requirements of CMS' catalog of Minimum Acceptable Risk Controls for Exchanges (MARS-E) and other state and federal privacy and security laws ○ Developed an action plan to mitigate the identified risks ○ Tested and verified controls by developing and executing a System Security Test Plan ○ Developed and completed a Security Assessment Report (SAR) to communicate to CMS the risk assessment findings • MMIS security risk assessment, as a result of a breach of the Health Insurance Portability and Accountability Act (HIPAA) <ul style="list-style-type: none"> ○ Assessed risks related to the development and operation of the MMIS, with a focus on privacy, integrity, and availability of critical, personally identifiable data in the context of best practices and the requirements of HIPAA and other state and federal privacy and security laws ○ Developed plan to mitigate identified risks in the context of the State's current Medicaid systems environment and resources ○ Developed a systematic approach for conducting routine periodic risk assessments that can be executed by State personnel ○ Identified opportunities for strengthening the application development methodology <p>Both security assessments were conducted based on nationally recognized standards and regulatory requirements, including NIST SP 800 series, ISO 27000 series, and HIPAA, among others.</p> <p><i>Our continued selection by the Department of Social Services and its divisions speaks to Missouri's satisfaction with the services provided by the BerryDunn team, as well as the diverse skill-sets and expertise we bring to large-system implementation projects.</i></p>
Team Members	Tim Masse, Bill Richardson, Karen Jones, Andrea Thrash, Eigen Heald, and Yoko McCarthy have worked on our engagements with Missouri.
Original and Actual / Planned Completion Date	Original IV&V Contract Dates: September 2013 to December 2015 Anticipated Completion Date: December 2016

BerryDunn Reference #2:	West Virginia Bureau for Medical Services Project Management for MMIS and DW/DSS DDI and CMS Certification Pilot								
Customer Contact Information	Mr. Ed Dolly, CIO Department of Health and Human Resources Phone: (304) 356-5141 Fax: (304) 558-1130 Email: Ed.L.Dolly@wv.gov								
Contract Type	BerryDunn serves as the Prime Contractor.								
Contractor's Responsibilities	<p>Key Areas of Expertise Demonstrated by BerryDunn:</p> <table border="0"> <tr> <td>Medicaid Enterprise Systems:</td> <td>Project Management</td> </tr> <tr> <td>• MMIS</td> <td>Quality Assurance</td> </tr> <tr> <td>• Eligibility & Enrollment</td> <td>CMS Expedited Pilot Certification</td> </tr> <tr> <td>• DW/DSS</td> <td>MITA SS-A and 3.0 Framework</td> </tr> </table> <p><i>"BerryDunn has been a trusted advisor and objective resource for the State of West Virginia since 2003, providing a range of project management, quality assurance, and IV&V services, as well as Medicaid subject matter expertise to meet the Bureau's evolving needs."</i></p> <p><i>- Mr. Edward Dolly, CIO, West Virginia Department of Health and Human Resources, Office of Management Information Services</i></p> <p>Project Overview:</p> <p>BerryDunn was hired by the Bureau for Medical Services (Bureau, BMS) in 2008 for West Virginia's MMIS replacement. From 2008 to 2012, BerryDunn's team:</p> <ul style="list-style-type: none"> ✓ Conducted West Virginia's MITA SS-A ✓ Developed MMIS functional and technical requirements ✓ Wrote the MMIS RFP and APD ✓ Provided project management through the MMIS procurement <p>The Bureau selected Molina as the MMIS/Fiscal Agent vendor in 2013, at which time our role changed to project management for the DDI. As the State's MMIS PMO, we</p> <ul style="list-style-type: none"> ✓ Managed and monitored DDI activities ✓ Performed QA reviews of Molina deliverables, including design documentation, test plans, training plans, desk level procedures, test cases, test results, project management plan documentation, and project schedules ✓ Managed West Virginia's participation as one of three states in an expedited pilot certification with CMS, which uses a gate review process and checklist that aligns with the MITA 3.0 Framework <p><i>In January 2016, West Virginia's MMIS went live in January 2016 – on time and on budget, without a single change order from the vendor.</i></p>	Medicaid Enterprise Systems:	Project Management	• MMIS	Quality Assurance	• Eligibility & Enrollment	CMS Expedited Pilot Certification	• DW/DSS	MITA SS-A and 3.0 Framework
Medicaid Enterprise Systems:	Project Management								
• MMIS	Quality Assurance								
• Eligibility & Enrollment	CMS Expedited Pilot Certification								
• DW/DSS	MITA SS-A and 3.0 Framework								

BerryDunn Reference #2:	West Virginia Bureau for Medical Services Project Management for MMIS and DW/DSS DDI and CMS Certification Pilot
	<p><i>Additional Services Provided by BerryDunn</i></p> <ul style="list-style-type: none"> • <i>Data Warehouse/Decision Support System</i> <ul style="list-style-type: none"> ○ Managed procurement and DDI of West Virginia's DW/DSS ○ Worked with the State and its vendors to ensure integration among the DW/DSS and other systems in West Virginia's Medicaid Enterprise • <i>Eligibility & Enrollment</i> <ul style="list-style-type: none"> ○ Manage the procurement of a new Eligibility & Enrollment System (currently in the planning stage) ○ Provided project management support for Eligibility and Enrollment System modernization and the implementation of significant enhancements ○ Monitored compliance with the federal rules required to maintain enhanced federal funding for the modernization ○ Evaluated the quality of vendor deliverables prior to their submission to the Bureau ○ Facilitated the Medicaid Eligibility Group and Policy Analysis (MEGPA) workgroup ○ Developed policies to comply with ACA eligibility requirements ○ Managed the implementation of the State's Hospital Based Presumptive Eligibility (HBPE) program, including tracking system development efforts, monitoring testing, and monitoring post-go-live performance <p>BerryDunn's efforts on West Virginia's E&E projects enabled the Bureau to meet aggressive ACA implementation deadlines and helped establish the voice of the Bureau in the eligibility determination process, an area traditionally overseen by other agencies in the Department of Health and Human Resources (DHHR). These efforts have helped ensure that the eligibility determination process aligns with BMS' priorities.</p>
Team Members	Tim Masse, Bill Richardson, Karen Jones, Sudha Ganapathy, Nicolle Field, Brandon Milton, Eigen Heald, Nicole Becnel, and Yoko McCarthy have worked on our engagements with West Virginia.
Original and Actual / Planned Completion Date	<p>BerryDunn was originally contracted from 2003 to 2007 to provide QA oversight of West Virginia's prior MMIS DDI and CMS certification. In 2008, BerryDunn was hired to provide project management for West Virginia's MMIS reprocurement, with optional renewal years extending our contract through May 2015.</p> <p>In March 2015, the Bureau issued a Request for Qualifications (RFQ) for the reprocurement of project management services and again selected BerryDunn, with an initial contract term of May 2015 through May 2018, with three optional renewal years.</p>

BerryDunn Reference #3:	Massachusetts HIX/IES Entities IV&V for HIX/IES Implementation				
Customer Contact Information	Mr. Martin Baker Phone: (508) 856-3646 Fax: No fax number available Email: Martin.Baker@umassmed.edu				
Contract Type	BerryDunn serves as the Prime Contractor for this engagement.				
Contractor's Responsibilities	<p>Key Areas of Expertise Demonstrated by BerryDunn:</p> <table border="0"> <tr> <td>IV&V and Quality Assurance</td> <td>Eligibility & Enrollment Functionality</td> </tr> <tr> <td>CMS Gate Review Certification</td> <td>Systems Security</td> </tr> </table> <p><i>"BerryDunn's collaborative approach has helped to build a strong working relationship among the State entities and vendor project teams. They bring industry expertise and objective recommendations that we trust. I would highly recommend BerryDunn's services."</i></p> <p><i>- Mr. Martin Baker, Senior Director and Principal Investigator, Massachusetts Early Innovator Cooperative Agreement, University of Massachusetts Medical School</i></p> <p>Project Overview:</p> <p>BerryDunn provides IV&V for Massachusetts' HIX/IES implementation. Since 2012, we have served as a collaborative partner to the HIX/IES Entities (UMass Medical School, Massachusetts Executive Office of Health & Human Services, the Commonwealth Connector Authority, and MassIT), including through shifts in administration and project leadership. We provide traditional IV&V services:</p> <ul style="list-style-type: none"> • Identifying issues and risks associated with project management and system development practices • Presenting written findings and recommendations to the Commonwealth Executive Steering Committee, CMS, and CCIIO • Reviewing and compiling comments on system integrator deliverables • Conducting implementation readiness assessments <p>In addition, we provide services that extend beyond traditional IV&V:</p> <ul style="list-style-type: none"> • Reviewing automated code review reports • Reviewing continuous integration reports • Coordinating and executing user acceptance testing • Reporting on expected vs. delivered reusability of project and system components • Conducting a system audit • Documenting the cost allocation plan and methodology • Developing monthly Financial Status Reports for the program 	IV&V and Quality Assurance	Eligibility & Enrollment Functionality	CMS Gate Review Certification	Systems Security
IV&V and Quality Assurance	Eligibility & Enrollment Functionality				
CMS Gate Review Certification	Systems Security				

BerryDunn Reference #3:	Massachusetts HIX/IES Entities IV&V for HIX/IES Implementation
Team Members	Tim Masse, Nicolle Field, Jim Strassenburgh, Eigen Heald, Yoko McCarthy, and Sudha Ganapathy have worked on our IV&V engagement with Massachusetts.
Original and Actual / Planned Completion Date	Original Contract Dates: October 2012 to December 2014 Anticipated Completion Date: June 2017

2.9 Summary of Bidder's Proposed Personnel / Project Management Approach

BerryDunn's IV&V Team – Organized for Success

BerryDunn will lead this project, take full responsibility for the successful completion of tasks and deliverables, and serve as the primary point of contact with the State. Figure C presents BerryDunn's proposed project team organizational structure for this project.

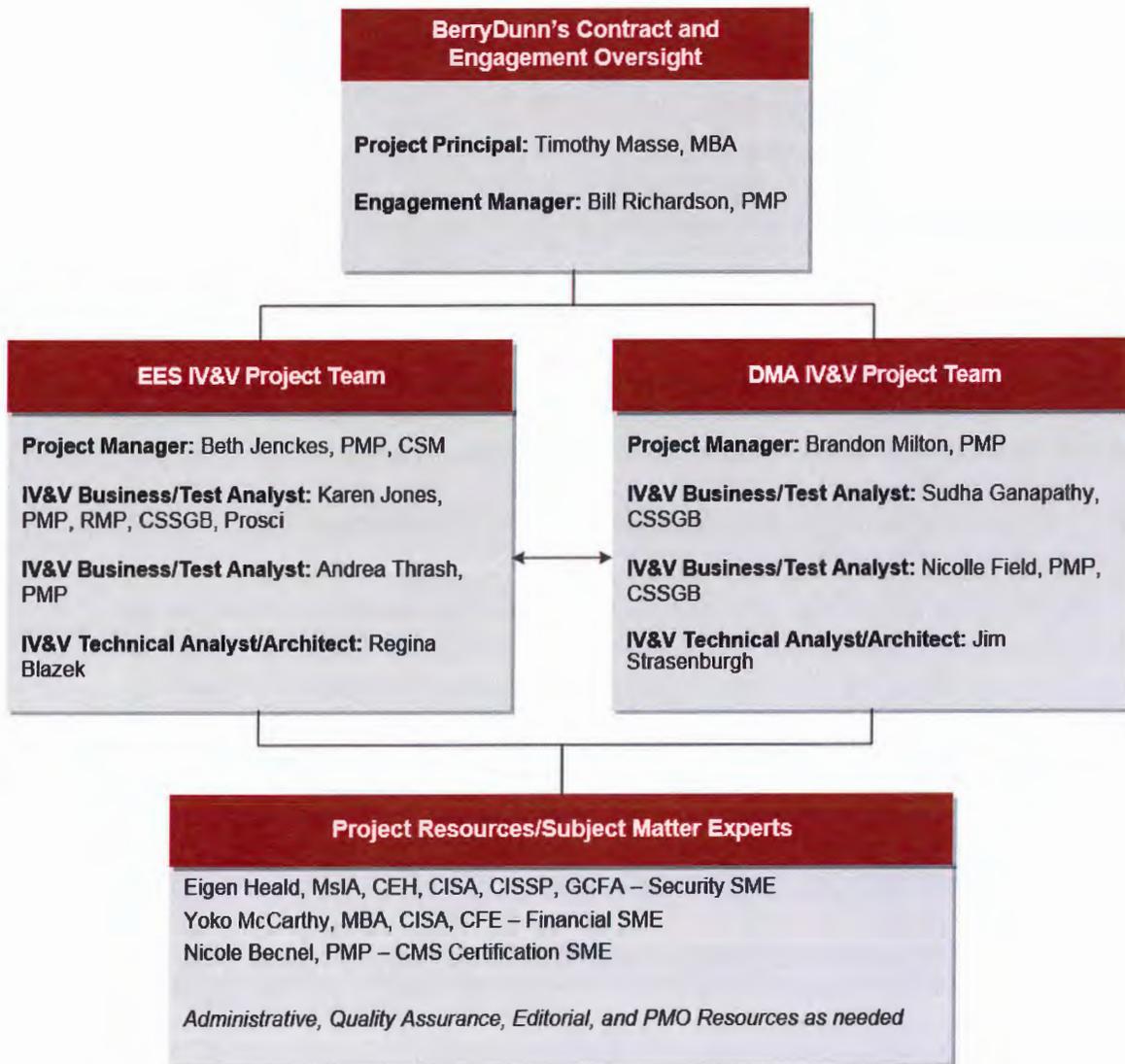


Figure C. Project Team Organizational: A team structured for project success, with collaboration and open lines of communication across the EES and DMA IV&V teams

Project-specific organization charts and staffing roles and responsibilities are provided in Section 3.2.3 to 3.2.4. Resumes are provided in Appendix A.

A key strength of BerryDunn's IV&V and staffing approach is to establish positive and productive working relationships with DHHS and your vendors early in the project.

Our IV&V team will be led by Tim Masse, a Principal in our firm and the leader of BerryDunn's Government Consulting Group, and Bill Richardson, a Senior Manager in our Medicaid Consulting practice. Tim and Bill are serving in these same roles for Missouri's Eligibility Determination and Enrollment System IV&V project and will bring this perspective to DHHS.

Our IV&V teams for the EES and DMA projects will be led by the following individuals:

- **Beth Jenckes** has 18 years of experience leading strategic business and technical projects in state and federal government and the private sector to her role as IV&V Project Manager for the EES Project. In addition, she brings first-hand knowledge and experience with Nebraska's Medicaid landscape through her work providing project management and business analysis for several MLTC initiatives from 2008 to 2015.
- **Brandon Milton** has spent the past five years serving in project management and leadership roles for West Virginia's MMIS re-procurement, MMIS DDI and stabilization, and Data Warehouse/Decision Support System DDI – including leading our QA reviews of vendor deliverables. In addition, he leads our work with CMS for West Virginia's expedited MMIS certification pilot project.

BerryDunn brings a **strong project management discipline** to this engagement, with both our Engagement Manager (Bill Richardson) and IV&V Project Managers (Beth Jenckes and Brandon Milton) certified by the Project Management Institute (PMI) as Project Management Professionals (PMPs). The PMP certification is the industry standard for government consulting professionals. It requires a rigorous examination process and is only awarded to candidates that have successfully completed at least 35 hours of project management training and accrued at least 4,500 hours leading and directing projects.

Our team members' training and demonstrated project management experience – together with BerryDunn's commitment to applying PMI standards and best practices across all of our consulting engagements – will provide DHHS with **confidence that this project will be conducted efficiently and effectively**. In addition, our team's solid understanding of project management principles and best practices provides assurance to the State and CMS in our ability to evaluate the EES and DMA project management processes.

Providing effective IV&V services takes more than knowledge of best practices, technical experience, and subject matter expertise. It requires the IV&V team to **establish credibility early, exercise tact, and model professionalism** in order to build and maintain the trust of State leadership, your stakeholders, and vendors.

The BerryDunn team will work as partners with DHHS, your stakeholders, and vendors toward the achievement of project objectives.

2.10 Subcontractors (Confidential and Proprietary)

BerryDunn will lead this project, taking full responsibility for the successful completion of tasks and deliverables, and serve as the primary point of contact with the State. We have strategically positioned the following to work in collaboration with BerryDunn for this engagement:

- **Beth Jenckes** will serve as IV&V Project Manager for the EES Project and perform approximately 7 to 10 percent of hours under the contract.

- **Regina Blazek** will serve as IV&V Technical Analyst/Architect for the EES Project and perform approximately 7 to 10 percent of hours under the contract.

The total percentage of subcontractor participation on the project will be approximately 15 to 20 percent of hours under the contract.

BerryDunn's Engagement Manager, Bill Richardson, will be responsible for managing and monitoring the performance of our subcontractors. We manage and monitor subcontractor personnel in the same way we manage all of our project personnel, and have established processes for integrating subcontractors into our team so our team structure is "seamless" to the client. All deliverables produced by subcontractors will undergo the same internal Quality Assurance review process as deliverables produced by BerryDunn personnel. In addition, all of our subcontractors will be expected to adhere to BerryDunn's established standards and practices.

3.0 Technical Approach

3.1 IV&V Responsibilities

The cornerstone of IV&V services is to assess the approach and performance of project teams and report activities that may pose a risk or issue to the overall project success while maintaining strong relationships. *BerryDunn takes pride in providing communication that is honest and straightforward, while remaining professional and respectful.*

*While we sometimes don't like to hear the observations or constructive criticism from IV&V, you always delivered it in a **professional, respectful manner** and were **very fair and reasonable**.*

- Jan Heckemeyer, MAGI Team Lead, Missouri MEDES Project

3.1.1 Project Management

3.1.1.i-iii Methodology, approach, and process for project management of Medicaid IV&V activities; sample IV&V Project Schedule; and approach to varying governance models

BerryDunn understands that project management of IV&V services requires a team with strong project management skills combined with unwavering tact that allows us to cultivate a culture of shared learning and continuous process improvement. Our team understands that, as with all projects, the project management approach needs to be flexible to adjust to the priorities of the project. We also understand that because we are not managing the project, we need to approach risks and issues with tact so that we can collaborate with DHHS and your vendors' project teams to be part of the solution.

With this in mind, BerryDunn is excited to propose a team with the right experience to make this a reality for Nebraska, led by Beth Jenckes as our Project Manager for the EES IV&V Project and Brandon Milton for the DMA IV&V Project. The entire BerryDunn team will be supported by BerryDunn's proven approach, methodology, and processes for IV&V project management, which is based on:

- **Efficient and effective communication** between DHHS, the DHHS project team, DHHS business partners, stakeholders, and BerryDunn's project team. We strive to gain a clear understanding of stakeholder expectations through collaboration with internal and external stakeholders, which helps our IV&V team to frame risks, issues, and opportunities within the impacts on stakeholder expectations.
- **Use of BerryDunn's IV&V Toolkit**, which includes our action-focused report development tool, our customized risk, issue, and opportunity tracking and reporting database, and *BerryDunn KnowledgeLink*, a secure web-based SharePoint document repository, to enhance sharing of project materials and information among DHHS and BerryDunn team members (unless DHHS prefers a State-operated repository).

- **Early identification and communication risks, issues, and opportunities** along with recommended responses to mitigate the impact or maximize the opportunity.
- Team members with **knowledge of industry standards and best practices**, including PMI best practices, **and how and when to apply them to this project.**

These underlying principles – combined with BerryDunn’s strong team – will allow us to apply our proven project management approach to support DHHS with the EES and DMA projects.

Our Project Management approach:

- Engages DHHS partners early and often.
- Leverages project activities and tools *across tasks* to optimize use of project team members’ and stakeholders’ time.
- Builds on our team’s knowledge and perspective of the national Medicaid landscape.
- Includes regular monitoring of the evolving federal guidance and regulations related to state Medicaid programs, MMIS implementation efforts, payment reform, and CMS certification to deliver work products that meet federal requirements and reflect the requirements in the RFP.
- Leverages our relationships with other states and national entities such as CMS, NAMD, NMEH, PS-TG, and the New England States Consortium Systems Organization (NESCSO) to bring the most current best practices and lessons learned in Medicaid systems procurement and implementation to the State. Members of our Medicaid Consulting practice are invited to present annually as thought leaders at MESC.
- Leverages our team’s thorough understanding of the MITA Framework, Titles 19 and 21 Federal Medicaid regulations including Part 11 of the State Medicaid Manual, the CMS Seven Conditions and Standards, and the Medicaid Enterprise Certification Toolkit.
- Builds on and/or integrates with existing workflows and systems when possible, including those of the DHHS’ PMO.

Five of BerryDunn’s key team members are certified Project Management Professionals (PMPs), a designation of the PMI.

All of our engagements apply proven project management processes, tools, and techniques based on principles in the PMI’s Project Management Book of Knowledge (PMBOK), version 5, and are scaled to fit the specific needs of each project.

Our approach includes applying standard processes across the project management lifecycle, as shown in Figure D and described below.

Initiation: Establishing Project Structure and Governing Processes

Project initiation is signaled by acceptance of our proposal and successful negotiation of a contract. Based on existing documentation, terms of the contract, and additional input from DHHS, BerryDunn's Project Manager will create the following initial planning deliverables:

- ✓ Comprehensive IV&V Project Management Plan(s) within 30 days after the project initiation that we will use to manage and perform the IV&V services.
- ✓ IV&V Project Schedule for all IV&V project tasks, deliverables, and milestones within 30 days of the project initiation. For a sample IV&V Project Schedule, please refer to Appendix B, as requested in Section IV.B.1.c.ii of the RFP.

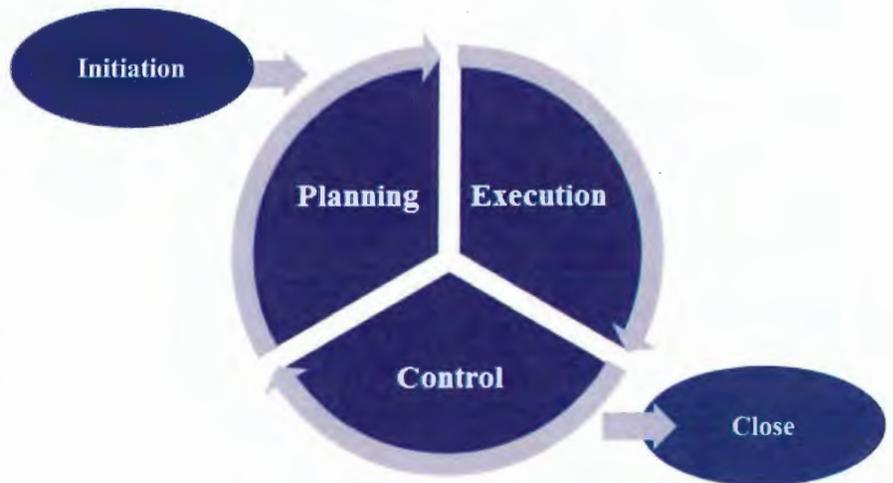


Figure D. Project Management Lifecycle:
Applying a proven and scalable framework for managing our IV&V services

Additional information about BerryDunn's approach to the IV&V Project Management Plans and IV&V Project Schedule are described below.

Planning: An Ongoing Process...

Planning is not a one-time task, but an ongoing project management process. BerryDunn's team understands this well based on our IV&V experience for Medicaid Enterprise system implementation projects, including our current role providing IV&V for Missouri's Eligibility Determination and Enrollment System.

In IV&V, it is important to be flexible and ready to change plans to adapt the project status and realignment of resources to meet the needs of DHHS. In support of this flexibility, BerryDunn's ongoing planning process entails clarifying deliverable expectations, identifying and integrating tasks, estimating level of effort and/or duration, allocating resources, and developing strategies to mitigate significant project risks. BerryDunn's Project Manager will conduct initial planning with the DHHS Project Manager and maintain and update planning documents throughout the engagement.

With a project management approach that is based on collaborating with stakeholders and communicating effectively and efficiently with stakeholders, we understand the need to adapt to

various State governance models. With our IV&V experience in Massachusetts and Missouri, our teams have had to adapt to the differences in the project governance between a State-based marketplace project that includes integrated eligibility (Massachusetts) and an eligibility and enrollment project with an initial focus on Medicaid eligibility. Our teams have adapted and shown their flexibility as both Massachusetts and Missouri have undergone changes in system vendors and significant changes in the governance models. To show our ability to adapt, we have provided project references from both Massachusetts and Missouri and we encourage the Evaluation Committee to speak with our clients to gain their perspectives on BerryDunn's ability to adapt and be flexible in our project planning and management processes.

Execution and Control: Implement, Monitor, Measure, Report, & Mitigate.

Throughout the course of the engagement, BerryDunn's Project Manager will apply knowledge, skills, tools, and techniques to direct project activities, review deliverables, leverage resources, facilitate communication, and monitor team function to achieve the expectations established in the contract and further refined by DHHS through initial and ongoing project planning.

Prior to submitting deliverables to DHHS for approval, the BerryDunn Project Manager will review the deliverables to evaluate fitness of use and compliance with established acceptance criteria. Status Reports provide a snapshot of project health and measure actual progress against expected outcomes. Our Project Manager and team members will explain the techniques we use to the State and listen for input that will help us improve the way the processes fit into the culture of the DHHS organization.

Project Close: Are We There Yet?

Project close activities and deliverables will validate that DHHS' expectations have been met and tasks have been completed as agreed upon. Knowledge transfer activities are designed to ensure a smooth transition of our work to the State.

3.1.1.iv Address the bidder's approach to meeting each requirement in a table that contains the requirement and the contractor's approach to meeting the requirement.

#	Requirements	BerryDunn Approach
1	<p>Must develop and submit comprehensive IV&V Project Management Plan(s) work product for Department approval a maximum of 30 days after the project start, and must manage and perform the IV&V services in accordance with the IV&V Project Management Plan(s)</p>	<p>For both the EES and DMA Projects, BerryDunn will develop and submit a comprehensive IV&V Project Management Plan work product for DHHS review and approval within 30 days after the project start. The IV&V Project Management Plan is a critical deliverable in setting joint expectations between DHHS and BerryDunn for how our team will conduct IV&V. Because the plan will address joint expectations, we will work with DHHS to customize our standard plan that is part of the BerryDunn IV&V Toolkit.</p> <p>Our customizable IV&V Project Management Plan will serve as a discussion tool with DHHS and describe important information such as:</p> <ul style="list-style-type: none"> ✓ How the BerryDunn team will interact with the project governance structure, including escalation paths ✓ How BerryDunn's proposed team is organized to fulfill our IV&V contractual requirements and coordinate with other stakeholders ✓ How and when BerryDunn will communicate with DHHS, your vendors, and other stakeholders on the project ✓ What steps BerryDunn will take for each IV&V deliverable to help ensure we provide quality deliverables to DHHS and your federal partners ✓ What is included in BerryDunn's scope of work, as defined by BerryDunn's contract with DHHS ✓ How the BerryDunn team will manage scope, budget, change, schedule, risks/issues/opportunities, and resources ✓ What BerryDunn's processes are for managing staff and subcontractors, as well as our approach to resource management and coordination with other stakeholders <p>By reviewing our customizable IV&V Project Management Plan with DHHS during initial planning, we will solicit feedback as to what processes will work and what processes need to be adjusted to meet the needs</p>

#	Requirements	BerryDunn Approach
		<p>of the project. With that information, we will update the IV&V Project Management Plan and submit it for DHHS approval within 30 days of the project start. We will then maintain the plan and manage and perform our IV&V services in accordance with the plan.</p>
2	<p>Must Develop IV&V project schedule(s) work products a maximum of 30 days after the project start and update weekly IV&V schedules that coordinates IV&V activities with project schedules.</p>	<p>For both the EES and DMA Projects, BerryDunn will develop an IV&V Project Schedule work product within 30 days after project start. We will meet with the DHHS Project Manager to review the draft IV&V Project Schedule, determine modifications to align it with the EES and DMA project schedules, and submit the updated schedule for DHHS' review and approval.</p> <p>Throughout the project, we will update the schedule weekly to coordinate IV&V activities with the project schedules.</p> <p>We have provided an example of an IV&V Project Schedule developed by BerryDunn for another engagement in Appendix B.</p>
3	<p>Must develop clear lines of communication and collaborative working relationships with project teams, project leadership, and CMS.</p>	<p>We pride ourselves on providing clear communication and building collaborative working relationships with our clients, their project teams, project leadership, and CMS.</p> <p>We are accustomed to working with various project stakeholders such as CMS in our Medicaid consulting projects – whether in Missouri where we respond to questions from CMS about project status or in West Virginia where we participate in regular status calls with CMS and work closely with CMS as a certification pilot state. At all times, we will follow communication processes to keep you informed of sensitive communications, such as those with CMS or other critical stakeholders, so there are no surprises for you.</p> <p>While our IV&V Project Management Plan will define clear lines of communication, a plan cannot specify how to develop collaborative working relationships. Collaborative working relationships are gained by engaging an experienced IV&V team that values the project DHHS is undertaking and understands its importance to the citizens of Nebraska. BerryDunn's IV&V team will build collaboration by connecting with team members on a personal level while maintaining professionalism, something that comes with tactful project management. BerryDunn has done this by</p>

#	Requirements	BerryDunn Approach
		<p>committing to the communities in which we serve. For example:</p> <p><i>In Jefferson City, Missouri, we have invested in our team with three local team members that are part of the BerryDunn family supported by Subject Matter Experts (SMEs) and engagement management from beyond Jefferson City.</i></p> <p><i>In Charleston, West Virginia, our long-term relationship with the Department of Health and Human Resources has led BerryDunn to establish a local office, and invest significantly in the local workforce.</i></p> <p>We are similarly committed to collaborating with DHHS and serving as a long-term partner that is invested in Nebraska's success.</p> <p>We encourage the Evaluation Committee to speak with our references about the strengths of our communication and our collaborative approach to conducting our work.</p>

3.1.2 Independent Assessment and Quality Assurance

IV&V is a discipline that helps an organization build quality into a software implementation project (people, processes, and systems) during the software development life cycle, as shown in Figure E.

There are several factors that we believe are essential to effective IV&V, independent assessments, and quality assurance:

- ✓ Independence and objectivity
- ✓ Open and honest dialogue
- ✓ A “no surprises” philosophy
- ✓ A proactive, active, and engaged IV&V team
- ✓ Clearly documented project goals that are agreed to by project stakeholders to help ensure there are shared expectations regarding desired outcomes and project success

Lastly, and what the above items boil down to, is that an IV&V team can help promote strong project leadership and governance, both of which are essential to project success.

*An effective IV&V team can often assist the larger project team to turn down the “unproductive noise” and help the team members keep their eyes on the project vision and goals – using the project vision, goals/objectives, and priorities to **steer the project and keep it on course.***

In the following sections, we describe BerryDunn’s approach to conducting independent assessments and providing quality assurance as core parts of our IV&V services.

INDEPENDENT
Providing objective review and assessment.

VERIFICATION
Are DHHS and its vendors “doing the right things”?

Nebraska’s EES and DMA Projects =
People + Processes
+ Technology

VALIDATION
Are DHHS and its vendors “doing things right”?

Figure E. Core Tenets of IV&V

3.1.2.i Address the bidder's approach to meeting each requirement in a table that contains the requirement and the bidder's approach to meeting the requirement.

#	Requirements	BerryDunn Approach
1	<p>Must actively participate in the projects and provide ongoing assessments of the projects to proactively identify risks, issues, and opportunities along with associated recommendations for the project team.</p>	<p>BerryDunn is excited to have the opportunity to support DHHS as an independent partner through this innovative project. We're accustomed to providing independent assessments and quality assurance in states such as Maine, Maryland, Massachusetts, and Missouri. We also work with West Virginia to provide independent monitoring and reporting to meet IV&V requirements for its MMIS implementation.</p> <p>With Nebraska's EES implementation already underway, BerryDunn plans to jump into our project work with an initial project assessment. The initial project assessment will focus on validating existing IV&V findings, risks, issues, and opportunities along with identifying any additional ones. Our approach benefits DHHS by ensuring maximum continuity and providing a fresh look at project risks, issues, and opportunities along with recommendations for DHHS and the project team.</p> <p>BerryDunn's initial assessment will be seamless to the project team as it will appear to just be part of our regular assessment work. The initial project assessment will focus on validating the baseline findings, recommendations, risks, issues, and opportunities. This activity will be carried out by the core team of the IV&V Project Manager, Business/Test Analysts, and Technical Analyst/Architect, augmented by other team members as needed.</p> <p>While we research and conduct fact finding for the Initial Project Assessment, we will actively solicit input from the entire project team. As an independent partner for Nebraska's success, we believe that input from the entire project team is a great way for us to identify potential challenges that we can then validate and verify along with offering recommendations. Throughout this process, our team will maintain an open dialog with the DHHS project team to help proactively develop recommendations for addressing these items with DHHS' input. This approach is consistent with our "no surprises" approach and avoids losing time in addressing significant risks and issues.</p> <p>After the initial assessment, we will build off of the baseline reports and assessment processes. We will develop regular reports on project status, risks, issues, and opportunities in concert with DHHS needs and expectations to ensure that the information the state receives is tailored to maximize benefit to the project and efficiently communicate important project information. These assessment and quality assurance processes will then be carried forward to the DMA project when it begins.</p>

#	Requirements	BerryDunn Approach
2	<p>Must assess the progress of the projects against the planned schedules, budgets, and resource utilizations.</p>	<p>After our initial assessment of the project schedule, we will use tools included in Microsoft Project to analyze progress against the planned schedule, budget, and resource utilization, including critical path items. We will identify slipping tasks that may impact deliverables, and rely on the expert judgment of our team to determine project risks and deliverables, such as looking at the duration of specific tasks and evaluating the likelihood of completing that task in the planned duration given complexity, competing priorities, performance from other similar past activities in other projects, and performance of other similar activities in the EES and DMA projects.</p> <p>Schedule delays and slipping tasks can lead to lagging performance in other project areas. Central to this is the idea of the three key project management factors of delivering a project on time, on budget, and with client satisfaction. With this in mind BerryDunn approaches the assessment of projects cognizant of the triple constraints of cost, scope, and schedule.</p> <p>Our approach will help proactively identify areas of project scope, cost, or schedule which are out of sync or consuming an inordinate amount of project resources. Going above and beyond reporting on issues related to schedule slippage, BerryDunn's analysis will provide DHHS with the necessary information to determine project priorities (e.g., delays in schedule being worth potential improvements to quality).</p> <div data-bbox="1023 714 1412 987" style="text-align: center;">  </div>
3	<p>Must assess the projects' resources, managerial responsibilities, and governance structure to identify gaps and provide recommendations.</p>	<p>As part of project initiation we will conduct an initial assessment of the overall Program/Project Management Plan and its subsidiary plans. This review will include a focus on the projects' resources, managerial responsibilities, and governance structure in detail. The purpose of this assessment will be to analyze the project processes defined in the overall Program/Project Management Plan and the extent to which they conform to relevant standards and industry best practices. This review will also identify gaps between the planned resources, managerial responsibilities, and governance and the project realities. Our team will provide recommendations for addressing any issues or risks that we identify.</p> <p>Based on our initial analysis of project management resources, processes, and governance structure, we will incorporate an ongoing review of this topic in our project status reports.</p>

#	Requirements	BerryDunn Approach
4	<p>Must participate in all project meetings unless otherwise directed by DHHS.</p>	<p>BerryDunn will participate in all project meetings to observe the project in action and help develop our project assessments. We are committed to serving as a long-term partner for Nebraska's success and our participation in project meetings will go beyond simply showing up. This involves being actively engaged in all project meetings with the right team members present. While IV&V must and will remain independent and objective, we will work collaboratively and in tandem with DHHS as your partners and communicate the message that <i>our role is about promoting a successful project</i>. With the right team members present and a team with professional tact, we will participate in meetings by asking questions, within DHHS' level of comfort, to spur discussion and help the project adhere to project processes. These questions can be as simple as "did we need to document a project decision" or "how does that impact the project schedule?"</p> <p>Our team of key personnel provides DHHS with leadership, experience, continuity, and familiarity with DHHS' current landscape. In addition, we have proposed a pool of SMEs and project resources to draw upon as specific project needs arise, which will allow us to be <i>flexible and responsive when specific areas of expertise are needed and/or desirable</i>. Given the complexity of this project for Nebraska, we believe this flexibility and scalability is essential to the function of IV&V.</p>
5	<p>Must perform an independent assessment of issues where the implementation contractors and DHHS' project management organization disagree and provide the results of the assessment and recommendation to DHHS leadership.</p>	<p>We are prepared to conduct independent assessment for issues where the implementation contractor's and DHHS' project management organization disagree. In addition to our proposed IV&V team members, we have a deep bench of consulting resources with subject matter expertise in areas such as enterprise architecture, IT privacy and security, and cost allocation planning, which we can leverage for specialized targeted independent assessments.</p> <p>BerryDunn has a long history of providing independent assessments and point-in-time project evaluations for state government clients. For example:</p> <p><i>BerryDunn has been hired by the State of Vermont Office of the CIO to conduct more than 20 independent assessments of large planned technology projects – including the State's planned All-Payer Claims Database and Health Benefit Exchange/Integrated Eligibility System projects. The objective of these reviews is to identify potential risks and issues – prior to contract signing – and provide objective recommendations to mitigate risks and promote project success.</i></p>

#	Requirements	BerryDunn Approach
		<p>BerryDunn's IV&V Toolkit includes an approach for completing independent assessments. We will work with DHHS to agree to the process for conducting independent assessments when we begin project work so that the approach is agreed to before it is needed. We will then work with DHHS to communicate this approach to all stakeholders and solicit feedback to help ensure the approach has buy-in across the project.</p>
6	<p>Must perform one or more reviews of project deliverables and work products including but not limited to infrastructure, system documentation, design, working code, test scenarios, test cases, test results, plans, etc. and provide a detailed assessment of the quality of the deliverables and work products along with recommended changes. Assessment must include a recommendation on whether DHHS should approve the work product or deliverable. Review must address at minimum the following attributes:</p> <ul style="list-style-type: none"> Traceability and adherence to requirements Clarity Completeness Consistency Quality Adherence to applicable laws, rules, and guidelines 	<p>BerryDunn will perform one or more reviews of project deliverables and work products, including (but not limited to) infrastructure, system documentation, design, working code, test scenarios, test cases, test results, plans, etc.</p> <p>We will provide a detailed assessment of the quality of the deliverables and work products, along with recommended changes and a recommendation on whether DHHS should approve the work product or deliverable.</p> <p>Our detailed approach to conducting deliverable reviews and reporting our findings is provided in Section 3.1.2.II.c.</p>
7	<p>Must assess project plans, processes and procedures to identify improvements and whether they are being followed.</p>	<p><i>As a firm, BerryDunn is consistently focused on identifying ways to improve through working collaboratively, learning from each other, promoting knowledge sharing, and better serving our clients. Our IV&V team will bring this continuous process improvement and shared learning mindset to DHHS.</i></p> <p>BerryDunn will assess the project plans, processes, and procedures to look for efficiency and effectiveness both in the planned approach, but also through clear lines of authority and accountability between DHHS and your vendor, among other State and vendor teams, and within the State's teams. We will evaluate</p>

#	Requirements	BerryDunn Approach
		<p>adherence to agreed-upon project management processes such as schedule and scope management to help keep the project on track.</p> <p>In order to evaluate the opportunities for improvements that will benefit DHHS and the respective implementation contractor BerryDunn will review project plans, processes and procedures. This begins with an examination of established project baselines, ensuring that it is being complied with. In addition, an analysis of current procedures to determine if they are being followed will be necessary. Finally, we will examine the level of engagement among stakeholders and examine that the proper processes and tools are being utilized for the project.</p> <p>We have found through work with multiple clients in many states that the key to realizing process improvements is rooted in communication and consistency. Opportunities for improvements will be communicated through regular reports as well as the progress towards fully leveraging the benefits that these improvements can provide DHHS.</p>
8	<p>Must assess project change orders for the following:</p> <ul style="list-style-type: none"> • The change order is following the approved change management plan and processes. • The change order is within the scope of the existing contract. • Cost and resource estimates for the change order are reasonable. • Recommendations for alternate approaches to achieving the outcome of the change order. 	<p>BerryDunn will review the scope, objectives, cost, resource estimates, and requirements for each project change order. Prior to commencing work we will work to fully understand and clarify DHHS expectations and ensure a common understanding among project team members. Understanding DHHS expectations will also help our team understand the scope of the change within the overall project scope, identify alternate approaches that may achieve the same outcome within the scope of the contract, and use expert judgment to identify cost and resource estimates that may not be reasonable.</p> <p>From a project perspective, effective scope and cost management establishes and helps to satisfy stakeholder expectations. To help satisfy stakeholder expectations, we will also assess whether the change order is following the approved change management plan.</p>
9	<p>Must comply with IV&V regulatory requirements detailed in 45 CFR 95.626.</p>	<p>BerryDunn will comply with all IV&V regulatory requirements detailed in 45 CFR 95.626, as we have done in our past Medicaid IV&V engagement for Maine's MMIS and Maryland's HIX/IES and we currently do in our IV&V engagements for Massachusetts' HIX/IES and Missouri's Eligibility Determination and Enrollment System.</p>
10	<p>Must identify areas of unnecessary duplication and overlap between roles on the projects.</p>	<p>As part of our ongoing project assessments, BerryDunn will identify areas of duplication and overlap on the individual projects as well as the across the projects. With our experience on similar large innovative projects and programs portfolios such as the HIX/IES in</p>

#	Requirements	BerryDunn Approach
		<p>Massachusetts and our Medicaid program management experience in West Virginia, we will bring valuable prospective from similar initiatives to help identify opportunities to streamline the complexities of Nebraska's projects.</p> <p>We will work with DHHS and your vendor partners when we identify areas of overlap or duplication to understand the reason for the overlap. We have found that when overlap or duplication exists, there is complex story behind how the duplication arose. Understanding the story allows us to offer recommendations for addressing the duplication and overlap that takes into consideration the full story and the realities of the most challenging aspect of projects, the people that make the project a success.</p>
11	<p>Must assess and verify requirement traceability throughout the project and system development lifecycle of the projects.</p>	<p>Requirements Traceability Matrices (RTM) serve as the backbone for ensuring that DHHS and your stakeholders implement a system that meet your requirements. It is imperative that the RTM clearly identify requirements that are impacted by identified contractual dependencies. This is a critical step in order for IV&V to assess the impact on system functionality. As the IV&V contractor, we take it as our responsibility to understand how dependencies on requirements are being managed and to call out areas where we see items we think requirements and their dependencies are not being managed to meet stakeholder expectations.</p> <p>Validating requirements traceability is critical not only from the development perspective, but also from the certification perspective—requirements traceability can help to demonstrate compliance with certification criteria. <i>We are pleased to bring our recent experience with the CMS Pilot Certification effort to Nebraska to assist with your certification using the new toolkit.</i> We will work with your team to help ensure that traceability starts with the requirements and ends with the certification toolkit. This mindset keeps the impact on the eventual certification at the forefront, easing the certification process.</p> <p>When our team engages in an existing project, one of the first things we request is access to the RTM. We have found that review of the RTM allows our team to quickly assess where the project is and determine whether the vendor team is effectively tracking requirements from validation through testing and into certification. When we engage in an existing project, our focus is on validating the RTM to ensure that the vendor is moving forward with system development in a manner that reflects the intent of the procurement as it was originally intended.</p> <p>From the initial implementation contractor planning documents, we look for evidence that the vendor methods, tools, and processes</p>

#	Requirements	BerryDunn Approach
		<p>are developed and implemented to allow for backward (to the contract) and forward (to test results and certification) requirements traceability. This approach helps to provide DHHS with a high level of confidence that the functionality delivered meets state, federal, contractual, and user requirements.</p>
12	<p>Must develop and monitor project performance metrics which allow tracking project completion against milestones.</p>	<p>We will work with DHHS during project initiation to determine specific performance metrics components, Red – Yellow - Green thresholds, and other aspects of these project performance metrics in order to track project completion against milestones. We will also work with DHHS to understand your expectations of the metrics available from your vendors to help ensure that our planned metrics will match the available information.</p>
13	<p>Must submit criteria for approval for defining a Critical Incident which could adversely affect the outcome of the projects.</p>	<p>As part of project initiation, we will request the current criteria used by DHHS and its current IV&V contractor (if available) and compare this criteria to the process that we use as part of the BerryDunn IV&V Toolkit critical incident process. After comparing the information, we will provide recommendations for refining the criteria, if warranted, to meet DHHS' needs.</p> <p>We will work with DHHS to finalize and implement Critical Incident Reports designed to summarize an incident and document how it may affect the project as well as any discrepancies identified by the IV&V Team. Finally, the Critical Incident Report approach will also address providing recommendations to resolve the incident and mitigate its impact(s).</p>
14	<p>Must notify the Department immediately when the IV&V Contractor discovers any Critical Incident. Provide an Contractor Critical Incident Report for each Critical Incident that summarizes the incident, how it may affect the project, notes any discrepancies found by the IV&V Contractor and provides a proposed action plan to resolve the incident and mitigate its impact.</p>	<p>Upon discovery of a Critical Incident, as defined by criteria approved by DHHS, BerryDunn will notify DHHS. Our method for notifying DHHS will be defined as part of our discussion with DHHS about the Critical Incident Report. We have found that working collaboratively with project team members when a Critical Incident is identified can be more productive in helping to develop a resolution to the Critical Incident than documenting the Critical Incident and "throwing it over the wall." Collaboratively working with DHHS and your vendor partners allows us to collect input from all parties to help formulate the action plan for addressing the critical incident.</p> <p>After notifying DHHS, BerryDunn will prepare the Critical Incident Report. The use of Critical Incident Reports will occur as needed and outside of standard project reporting cycles.</p> <p>The criteria used to define a Critical Incident will focus on a summary of the incident as well thoroughly outlining any discrepancies we may find. In addition, it will define how it may affect the project.</p>

#	Requirements	BerryDunn Approach															
		<p>Figure F is an example matrix defining how a Critical Incident might affect a project based upon its area of impact.</p> <table border="1" data-bbox="673 420 1404 924"> <thead> <tr> <th data-bbox="673 420 812 483">CRITICALITY Areas</th> <th data-bbox="812 420 998 483">Catastrophic Impact Value=4</th> <th data-bbox="998 420 1161 483">Critical Impact Value=3</th> <th data-bbox="1161 420 1323 483">Moderate Impact Value=2</th> <th data-bbox="1323 420 1404 483">Low Impact Value=1</th> </tr> </thead> <tbody> <tr> <td data-bbox="673 483 812 745">Performance and Operation</td> <td data-bbox="812 483 998 745">Failure could cause loss of use of system for extended time, loss of capability to perform all mission objectives. Failure is not ameliorated.</td> <td data-bbox="998 483 1161 745">Failures could cause loss of critical function not resulting in loss of system use, lengthy maintenance downtime, or loss of multiple mission objectives. Failure is partially ameliorated.</td> <td data-bbox="1161 483 1323 745">Failure could cause loss of a single mission objective or reduction in operational capability. Failure is fully ameliorated.</td> <td data-bbox="1323 483 1404 745">Failure could cause inconvenience (e.g., reprogram computer and manual intervention).</td> </tr> <tr> <td data-bbox="673 745 812 924">Development Cost/Schedule</td> <td data-bbox="812 745 998 924">Failure could result in cost overruns large enough to result in unachievable operational capability.</td> <td data-bbox="998 745 1161 924">Failure could result in large cost and schedule overruns. Alternate means to implement function are not available.</td> <td data-bbox="1161 745 1323 924">Failure results in significant schedule delay. Alternate means to implement function are available but at reduced operational capability.</td> <td data-bbox="1323 745 1404 924">Failure results in minor impact to cost and schedule. Problems are easily corrected with insignificant impact to schedule.</td> </tr> </tbody> </table> <p>Figure F: Sample Critical Incident Definitions Matrix</p> <p>A primary function of a Critical Incident Report is to propose a Critical Action Plan (CAP). BerryDunn will develop a CAP that includes the following elements:</p> <ul style="list-style-type: none"> • A description of each finding (deficiency) • Specific strategies, action steps, and timelines to rectify project deficiencies and implement recommendations • Assignment of a responsible party for each action, including a breakdown of planned tasks and timeframes to implement each recommended corrective action • A description of the progress reporting expected and monitoring to be performed to ensure implementation of the CAP • BerryDunn's planned IV&V tasks and timeframes for providing IV&V on-site assistance related to the CAP <p>We will draw upon our team's project management and software implementation experience to develop pragmatic, constructive, and actionable strategies to modify project processes in order to help remediate project deficiencies and improve project performance. Progress on CAP implementation and finding resolution will be included in our regular IV&V Status Report.</p>	CRITICALITY Areas	Catastrophic Impact Value=4	Critical Impact Value=3	Moderate Impact Value=2	Low Impact Value=1	Performance and Operation	Failure could cause loss of use of system for extended time, loss of capability to perform all mission objectives. Failure is not ameliorated.	Failures could cause loss of critical function not resulting in loss of system use, lengthy maintenance downtime, or loss of multiple mission objectives. Failure is partially ameliorated.	Failure could cause loss of a single mission objective or reduction in operational capability. Failure is fully ameliorated.	Failure could cause inconvenience (e.g., reprogram computer and manual intervention).	Development Cost/Schedule	Failure could result in cost overruns large enough to result in unachievable operational capability.	Failure could result in large cost and schedule overruns. Alternate means to implement function are not available.	Failure results in significant schedule delay. Alternate means to implement function are available but at reduced operational capability.	Failure results in minor impact to cost and schedule. Problems are easily corrected with insignificant impact to schedule.
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15	Must interview and observe project management staff and developer staff and observe	Immediately upon project initiation, our team will begin the process of understanding the processes, procedures, and tools being used on the project. This starts with reviewing available documentation.															

#	Requirements	BerryDunn Approach
	<p>project meetings and activities to understand the process, procedures, and tools used.</p>	<p>Armed with questions from our research, we will conduct a series of conversations and information gathering sessions with project stakeholders, including project management and developer staff. We will focus these interviews on filling gaps in our understanding, resolving outstanding questions from our review, and validating any assumptions or potential risks, issues, or findings that we identify. The advantage to both BerryDunn and DHHS is our comprehensive and refreshed knowledge of project processes, procedures, and tools used. As part of the interview process, we may identify conflicting objectives. We will collaborate with the key stakeholders to reach consensus.</p> <p>Throughout the life of the project we will continue this process of understanding the process, procedures, and tools used through research and observation. As needed, we will have conversations with the project management and developer staff to clarify our understanding when we believe that an observation may lead to a risk, issue, or opportunity.</p>
16	<p>Must review and analyze all applicable and available documentation for adherence to accepted, contractually-defined industry standards.</p>	<p>BerryDunn's IV&V team will leverage our standards-based review approach in combination with expert judgment to review applicable and available documentation for adherence to accepted, contractually-defined industry standards. For example, we will compare the project management processes as defined in the Project Management Plan and any subsidiary plans to the relevant industry standards for specific process areas (shown in Table 2, on the following page).</p> <p>We will combine these standards with expert judgment that comes from the perspective we have gained on our work from similar innovative system initiatives such as our work in New Hampshire when New Hampshire was the first state to implement a data warehouse/decision support system that was certified by CMS separately from the MMIS.</p> <p>Where the team finds that any processes do not conform to the standards, we will discuss the risk of that non-conformance to the project and document appropriately. In addition, we will work with DHHS to identify where non-conforming project processes present the greatest risk to the project, understanding at times that non-conformance may be justified and acceptable.</p> <p>We will also use checklists to drive our assessments and deliverable reviews, such as the example in Figure G:</p>

#	Requirements	BerryDunn Approach	
		Review Area	Definition
		Pre-Review: Readiness Checklist	The purpose of this step is to verify the deliverable conforms to basic quality and content expectations and is ready for a detailed state, federal, and IV&V review. The IV&V team will complete this review and notify the State's Project Management Team if the IV&V recommendation is to terminate the review process and return the deliverable to the solution vendor for remediation.
		Review Area 1: Quality Checklist	This review area consists of a set of standard quality criteria to be applied to all solution vendor deliverables: Clarity, Completeness, Consistency, Traceability, and Timeliness.
		Review Area 2: Compliance Checklists	This section validates deliverable compliance with the solution vendor contractual requirements; federal and State laws, rules and guidelines; and industry standards and best practices. It will be tailored to itemize the references applicable to the specific solution vendor deliverable under review.
		Review Area 3: Feasibility Checklist	The criteria in this review area consider the deliverable's feasibility and appropriateness given available time and resources, and the expected scope.
		Review Area 4: Effectiveness Checklist	In this review area, we will assess the effectiveness of the implementation of the process or approach described in the DDI vendor deliverable.

Figure G. Sample Checklist

Checklists contain objective assessment criteria to independently evaluate deliverables and the software. They are an important tool to ensure we assess not only the quality and comprehensiveness of the content, but also what is missing. Our checklists are developed based on contractual requirements, vendor proposals, state and federal requirements, and industry standards and best practices (as shown in Table 2).

We have developed and used checklists in our IV&V work in Maryland, Massachusetts, and Missouri along with our PMO work in West Virginia. These checklists include Project Schedule, Requirements, RTM, System Architecture, and Test Plan review checklists. Using these checklists, metrics, and measurement tools as a starting point, we will tailor them to meet the needs of specific projects, solutions, and/or lifecycle phases within all of the DHHS projects in which we are involved.

Table 2. Relevant Standards and Industry Best Practices by Process Area Applied by BerryDunn – as described in response to #16 above.

Process Area	Relevant Standards
Integration Management: <ul style="list-style-type: none"> • Project Charter • Project Governance • Integrated Change Control 	<ul style="list-style-type: none"> • PMBOK, Project Integration Management (Chapter 4)
Scope Management	<ul style="list-style-type: none"> • PMBOK, Project Scope Management (Chapter 5) • IEEE Standard 830 – Requirements Specification
Schedule Management	<ul style="list-style-type: none"> • PMBOK, Project Time Management (Chapter 6) • PMI Practice Standard for WBS
Configuration Management	<ul style="list-style-type: none"> • IEEE Standard 828 – Configuration Management Plans • PMI Practice Standard for Configuration Management
Cost Management	<ul style="list-style-type: none"> • PMBOK, Project Cost Management (Chapter 7)
Quality Management	<ul style="list-style-type: none"> • PMBOK, Project Quality Management (Chapter 8) • IEEE Standard 730 – Quality Assurance Plans • IEEE Standard 1012 – Software Verification and Validation
Resource Management	<ul style="list-style-type: none"> • PMBOK, Project Human Resource Management (Chapter 9)
Communications Management	<ul style="list-style-type: none"> • PMBOK, Project Communications Management (Chapter 10) • Organizational Change Management best practices
Risk Management	<ul style="list-style-type: none"> • PMBOK, Project Risk Management (Chapter 11) • PMI Practice Standard for Risk Management • IEEE Standard 16085 – Risk Management
Stakeholder Management	<ul style="list-style-type: none"> • PMBOK, Project Stakeholder Management (Chapter 13) • Organizational Change Management best practices • PMI Practice Guide for Managing Change in Organizations

3.1.2.ii Describe the bidder's approach in detail to IV&V including:

- **Project participation at the level of detail necessary to assess the project's health**
- **Risk, issue, and opportunity management**
- **Deliverable review and reporting of deliverable findings**

Approach to project participation at the level of detail necessary to assess the project's health

We understand that in this project environment, close coordination and collaboration with all State and vendor teams will be essential to the success of the EES, DMA, and all DHHS projects, as well as additional systems implementations.

IV&V is "a well-defined standard process for examining the organizational, management, and technical aspects of a project to determine the effort's adherence to industry standards and best practices, to identify risks, and make recommendations for remediation, where appropriate."

45 CFR 95.626

A core tenet of our IV&V methodology is that many software defects and project challenges can be avoided through the use of industry best practices and conscious third party assistance to independently verify and validate project decisions; in other words, prevention versus detection. This concept builds on the fact that it is typically more cost and time effective to *prevent* problems than it is to *correct* them once they have been adopted into the processes of the project or implemented as part of the software product.

States expect their IV&V teams to offer recommendations that prevent problems before they occur and require corrective actions. Nebraska is no exception. BerryDunn is that firm.

Following are **key strategies** to BerryDunn's IV&V approach that help guide our participation in the project at the level of detail necessary to assess the project's health:

- We view ourselves as stakeholders, along with D vendors within the Nebraska Medicaid enterprise, in the success of these projects. We recognize that at times some project stakeholders may not agree with our observations and recommendations. We have found that providing effective IV&V services takes more than knowledge of best practices, technical experience, and subject matter expertise. It requires us to **establish credibility early, exercise tact, and model professionalism** in order to build and maintain trust of our client and contractor leadership and staff. Yet we strive to conduct our work in a way that minimizes impact on project personnel, activities, and schedules.
- **We will establish positive and productive working relationships** with DHHS and your vendors early in the project. One way we do this is by clearly defining the IV&V role. In communications with project partners and stakeholders, we communicate the message that our role is about promoting a successful project. Early issue and risk identification and resolution or mitigation improves the chances of project success. Our team members assess every project situation with an open mind and work with stakeholders to focus on what is best for the project overall.

- We use a proactive issue, risk, and opportunity management approach. **Our policy is “no surprises.”** We will document and communicate new high priority issues and risks to the Project Management Team, as we identify them; we will not wait until the production of the next IV&V report to communicate high priority issues and risks.
- We use checklists to drive our assessments and deliverable reviews. Checklists contain **objective assessment criteria to independently evaluate deliverables and the software.** They are an important tool to ensure we assess not only the quality and comprehensiveness of the content that is present, but also what is missing. Our checklists are developed based on contractual requirements, state and federal requirements, and industry standards and best practices such as IEEE and PMBOK.

Following are **key areas of focus** for BerryDunn’s IV&V team to monitor:

- **Project Management and Governance:** These areas are of particular importance to monitor. Nebraska’s multi-project environment adds complexity to an already challenging and complex program and technology environment. We will be looking for efficient and effective DHHS decision-making, clear lines of authority and accountability between DHHS and your vendors and within the State teams, and adherence to agreed-upon project management processes such as schedule and scope management to help keep the project on track.
- **Interoperability and Reusability:** We understand DHHS’ strategy of planning for interoperability (e.g., interoperability between the CBS and DMA) and reusability of technology investments across DHHS programs and services is critical to achieving the DHHS vision for the transformation of the State’s health and human services, and to comply with federal regulations such as the CMS Seven Conditions and Standards. We have, unfortunately, observed in previous projects that these defining project principles can be compromised when the schedule constraint becomes the primary driver. We will incorporate review criteria related to interoperability and reusability into deliverable review checklists; regularly monitor related vendor practices and DHHS decisions.
- **Federal and State Requirements:** BerryDunn recognizes the importance of planning for compliance from the outset of the project and proactively monitoring compliance throughout the implementation. Our team is very familiar with requirements associated with the CMS Certification process, MITA, the Seven Standards and Conditions, HIPAA, National Institute of Standards and Technology (NIST) security standards, and other federal requirements, as well as standards guiding the State’s IT initiatives. We will keep compliance ‘on the front burner’ throughout the life of the project.

- **End User Needs:** End users' business needs should drive the system, NOT technology. In enterprise-wide transformative technology initiatives such as the DMA project, the focus can easily shift to making the technology work—thereby losing sight of the various stakeholder group and end user needs, which are the real project drivers. Through observation of implementation contractor requirements validation sessions and use of IV&V SMEs in review of business process documentation and functional requirements, BerryDunn's IV&V approach helps to ensure that DHHS' business needs are clearly articulated and understood by the implementation contractor. We also promote DHHS participation in review of test cases and test results as well as testing to make sure the technology and outputs align with user expectations.
- **Testing:** Since testing comes later in projects, it is often the phase that is cut short when schedule is the driver. BerryDunn's IV&V approach emphasizes tasks such as test planning early in the project, comprehensive lifecycle testing including User Acceptance Testing (UAT), and use of SMEs and users in review of test cases to identify defects as early in the project as possible. This approach helps to minimize the time and costs associated with rework.
- **Requirements Traceability:** From the initial implementation contractor planning documents, we look for evidence that the implementation contractor methods, tools, and processes are developed and implemented to allow for backward (to the contract) and forward (to test results and certification criteria) requirements traceability. This approach helps to provide DHHS with a high level of confidence that the functionality delivered meets state, federal, contractual, and user requirements.

IV&V as a Partner to DHHS

BerryDunn believes an IV&V team's most valuable role is that of an independent partner to DHHS – keeping the lines of communication open for constructive and respectful dialogue regarding what is going well (favorable aspects of the project), what is not going well (constructive criticism of the project), and practical recommendations for improvements that can be implemented for the betterment of the project. While maintaining the necessary independence and objectivity, we believe in working in partnership with DHHS to provide technical, business, and project management expertise to help the State understand the consequences of decisions and actions.

The IV&V team assembled by BerryDunn brings a strong core team with a wide range of experience that allows us to view the project from the perspective of the State and implementation contractors. This core team is paired with a pool of additional resources to provide DHHS with deep subject matter expertise. We will serve as guides to navigate the challenges and achieve outcomes that benefit project success.

We will accomplish our work through three primary fact-finding activities as shown in Table 3.

Table 3: Primary IV&V Fact-finding Methods and Examples

Method	Examples
Independent Research and Direct Observation	<ul style="list-style-type: none"> • Vendor development activities • Design sessions • Training sessions • Testing activities • System demonstrations • Direct access to beta sites and/or "sandbox"
Conversations, meetings, and stakeholder interviews	<ul style="list-style-type: none"> • DHHS leadership • Project Management Team • Executive Steering Committee • Vendor team members • CMS Regional Officer • Users: State, local eligibility application processors, and contact center staff
Document Review	<ul style="list-style-type: none"> • Vendor contract documents • Project Management Plan • Budget documents • State and federal regulations and guidance • PMO Status Reports • Vendor deliverables • Design documents • Advance Planning Documents • DHHS planning materials

As part of our approach, we will leverage the BerryDunn IV&V Toolkit comprised of tools we have developed specifically for IV&V engagements for Medicaid enterprise system implementations, such as Review Checklists to be used in the performance of fact-finding and analytical tasks. The purpose of the checklists is to define the criteria against which a specific activity or deliverable will be reviewed. Through our work on MMIS and other large-scale HHS system implementations, BerryDunn has created similar checklists and we will leverage this work to develop and refine the checklists for this project. Figure H provides a snapshot of a checklist for evaluating a sampling of Project Management tasks.

Task Item	Task #	Review Period	Task Description	BerryDunn Task Area Lead	State/ Vendor POC	Approach
Project Management						
Project Sponsorship	PM-1	Initial, Periodic	Assess and recommend improvement, as needed, to assure continuous executive stakeholder buy-in, participation, support, and commitment, and that open pathways of communication exist among all stakeholders.			Interviews Meetings
	PM-2	Initial, Periodic	Verify that executive sponsorship has bought in to all changes that impact project objectives, cost, or schedule.			Attend weekly Executive Meetings Vendor Interviews
Management Assessment	PM-3	Initial, Periodic	Verify and assess project management and organization; verify that lines of reporting and responsibility provide adequate technical and managerial oversight of the project.			Interviews Meetings
	PM-4	Initial, Periodic	Evaluate project progress, resources, budget, schedules, work flow, and reporting.			Deliverable Reviews Interviews Meetings

Figure H: Snapshot of an IV&V Review Checklist

Providing review criteria prior to or early in the development of deliverables increases the likelihood that the vendor’s work products will adhere to the standards and best practices that are critical to a successful project. Review Checklists will be developed, refined, and delivered on an on-going basis to reflect the relevant project lifecycle and review phase.

Another aspect of the BerryDunn IV&V Toolkit is *BerryDunn KnowledgeLink*, our customized Microsoft SharePoint tool designed to share project documentation and facilitate secure online communication and collaboration. *BerryDunn KnowledgeLink* contains the ability to maintain online project calendars, maintain lists of project team members and contact information, and serve as a secure repository for documents created throughout the engagement, including risk matrices, status reports, and other documentation and deliverables.

Part of the BerryDunn IV&V Toolkit is our Status Report Development Tool. This tool allows our team to collaborate in developing our status reports to highlight project risks and issues. The tool helps keep the focus on the risk, issue, opportunity or concern, its impact to the project, and our recommendation for addressing it. Using the Status Report Development Tool to guide this process helps us ensure that all these items are included in our status reports and keep the focus on the impact to the project and recommendations for addressing those.

We understand that every state and every project environment is different, so our tools will be tailored in content and format to reflect the unique needs and characteristics of Nebraska’s projects, including applicable industry and federal and state regulatory standards and guidance.

Proactive Standards-based, Risk-focused IV&V Methodology

BerryDunn will provide a proactive standards-based, risk-focused IV&V methodology to assist DHHS and your vendors to achieve project goals by applying independent and objective assessments. Our standards-based approach relies on relevant standards for Medicaid enterprise systems and IV&V, including:

- ✓ CMS requirements for IV&V, Code of Federal Regulations (CFR), Title 45, Part 95.626
- ✓ CMS' Medicaid Information Technology Architecture (MITA) 3.0 Framework
- ✓ CMS' Medicaid Enterprise Certification Toolkit (MECT)
- ✓ The CMS Seven Conditions and Standards
- ✓ A Guide to the Project Management Body of Knowledge (PMBOK), 5th Edition; the Government Extension to the PMBOK Guide; and applicable Project Management Institute (PMI) Practice Standards
- ✓ IEEE Standards as applicable

We will work collaboratively with DHHS and your partners to help ensure applicable standards and best practices are applied thoughtfully, with expert judgment and a sound understanding of considerations specific to this project.

Our risk-focused approach will work to assist DHHS and your vendors to “increase the likelihood and impact of positive events and decrease the likelihood and impact of negative events” (PMBOK, page 309). PMBOK defines a risk as “...an uncertain event or condition that, if it occurs, has a positive or negative effect on one or more project objectives...” (PMBOK, p. 310). Our approach focuses on the probability of occurrence of risk and its impact on Scope (both project and product scope), Schedule, Cost, and Quality. We will conduct objective assessments of the following to identify risks to the project:

- ✓ The project governance structure—both DHHS and your vendors
- ✓ Project management processes defined in the overall Project Management Plan, including initial reviews of process design and periodic audits of process compliance
- ✓ Project schedule, including ongoing monitoring and assessments of project status
- ✓ Project deliverables and work products, including reviewing requirements and design related documentation, test related documentation, implementation related documentation, and operations and maintenance related documentation
- ✓ Stakeholder (user) buy-in to the process
- ✓ Project team's approach to organizational change management

While BerryDunn has developed and incorporated proven IV&V methodologies into the BerryDunn IV&V Toolkit through our work on many similar large-scale system implementation projects, we understand that each client and each project is unique. As with the tools we use, our IV&V approach will be tailored to reflect the unique needs and characteristics of the respective projects.

Risk, Issue, and Opportunity Management

BerryDunn’s IV&V methodology involves monitoring *issues* (i.e., current challenges that are being faced in the project) and *risks* (i.e., potential problems or opportunities that have not yet occurred, but that require attention and strategies to address the impact of the potential problem or take advantage of the opportunity).

Our risk, issue, and management process starts with identifying risks, issues, and opportunities. Generally, we first identify these items and document them as findings (or concerns) in our reporting. Documenting these items as findings first allows DHHS and its vendor partners time to understand the IV&V perspective and provide input to our team. We leverage conversations with our clients and their vendor partners to make them aware of upcoming concerns or findings and to solicit input about concerns and findings. Sometimes that input is enough to close the finding. At other times the finding becomes a risk, issue, or opportunity in a future report.

BerryDunn manages the risks, issues, and opportunities using our customized Risk and Issue Management Database that is part of BerryDunn’s IV&V Toolkit. The Database allows us to keep historical information about all the findings, risks, and issues we identify over the life of a project. With our knowledge of how findings can change, we designed the database to allow a database entry to be easily downgraded from a finding to a risk or issue without losing prior information or re-entry. For reporting purposes, the Database has the flexibility to select the most recent update to an item or to pull the entire history. The ability to customize report is also accommodated. Finally, and very importantly, the Database allows us to track project action on findings, risks, and issues, as shown in Figure I.

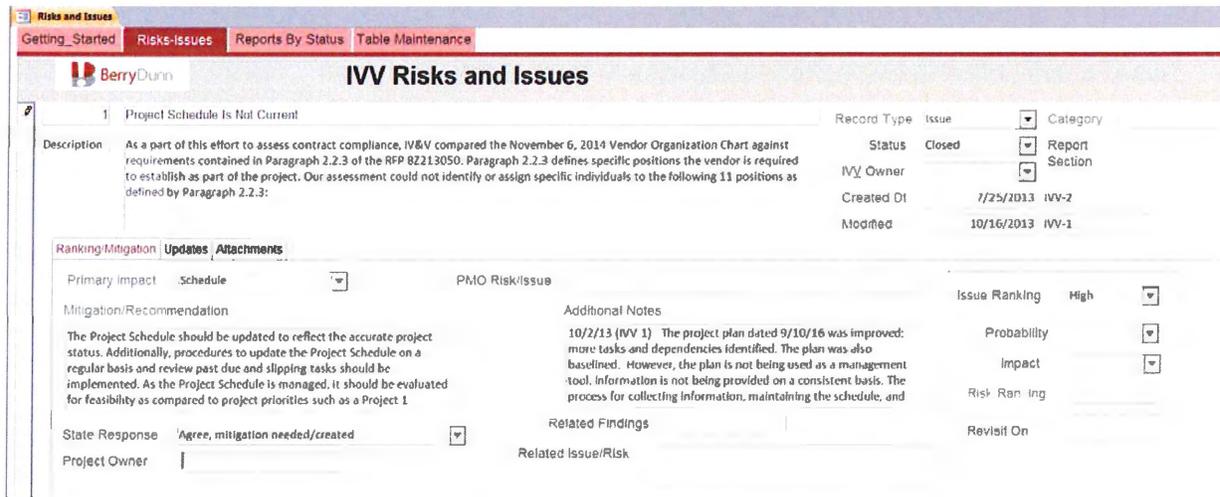


Figure I. Risk and Issue Management Database Entry Screen

As IV&V, we look at all aspects of the project and document our findings. We understand that it is not expected, or even desired, that the State and your project teams attempt to address every finding, risk, issue, or opportunity. Priorities must be set and constraints acknowledged. So, we

have designed our Database with the flexibility to capture the we have a finding, risk, or issue and indicate that the project team chooses to accept the finding, risk, or issue as it is. This allows IV&V to keep a record of it, but not continue to raise items that are not determined a priority for the project.

As we identify findings, risks, and issues, we will assign a priority and impact based on the priority and impact definitions found within our IV&V Project Management Plan. Assigning a priority and impact helps DHHS and your vendor partners prioritize the risks and issues for the overall project.

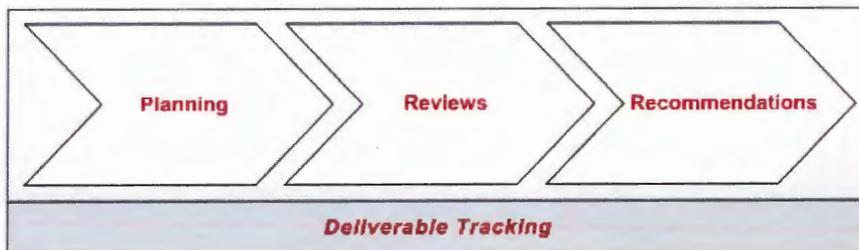
Deliverable review and reporting of deliverable findings

BerryDunn will review all deliverables submitted by the implementation contractors. The purpose of our vendor deliverables review is to:

- ✓ Verify the traceability and adherence to requirements
- ✓ Validate the clarity of the deliverable
- ✓ Validate the completeness of a deliverable
- ✓ Validate the consistency of the deliverable
- ✓ Validate the quality and accuracy of a deliverable
- ✓ Verify that references to external documents (e.g., policies and procedures) are accurate
- ✓ Identify impacts and opportunities to the project, as well as the broader Health Services Enterprise, based on the deliverable
- ✓ Verify that the deliverable meets state, federal, and contractual requirements

BerryDunn recommends reviewing an interim draft of the deliverable once the implementation contractor believes that the document meets the expectations of DHHS. If BerryDunn identifies deficiencies, the comment log for the deliverable will be submitted along with the recommendation that revisions are necessary. When the vendor believes that they have resolved the identified deficiencies, BerryDunn will review the comment responses from the Vendor to confirm that the issues have been remediated.

BerryDunn approaches vendor deliverable reviews from the perspective that it entails four unique tasks – Planning, Reviews, Recommendations, and Deliverable Tracking, as shown below – each of which contains various subtasks as described in additional detail in the following sub-sections.



Planning

In order to develop a set of shared expectations for both the State and your vendors around deliverable reviews, BerryDunn's IV&V Project Management Plan will document our process for deliverable review. We will review these procedures with the DHHS Project Manager to secure buy-in from the appropriate project stakeholders and maintain these procedures as a part of the comprehensive IV&V Plan. BerryDunn will also brief the Implementation contractors and other impacted project stakeholders to ensure the full project team understands the approach that will be used to review vendor deliverables over the course of the project.

There are three additional critical components of the planning process:

1. **Evaluate target deliverable submission timelines:** As part of the initial IV&V Assessment, BerryDunn will evaluate the target submission dates for vendor deliverables. This information will be used to inform our decisions around review team members and plan for any SME necessary SME participation. The timelines will be updated quarterly to reflect changes to the delivery timelines.
2. **Establish Review Teams:** During the planning phase, BerryDunn will identify the review team that will evaluate each required deliverable; this helps to streamline the review process when a deliverable is actually submitted and to plan for our resource needs over the life of the project. In order to determine the review teams, we will consider the skill set(s) needed to conduct the review (drawing from our proposed team of analysts and SMEs, as well as our internally developed consulting skills matrix as warranted when specific areas of expertise are required), as well as the target deliverable submission date, to identify the review team best positioned to review each deliverable. The review teams will be reevaluated quarterly to ensure that all resources are still available to participate in the review at the time the deliverable is planned for our review.

In our practice for reviewing deliverables, BerryDunn evaluates the topic and the skill sets necessary to effectively review the deliverable and to provide relevant feedback. BerryDunn focuses on bringing together team members with diverse backgrounds when assembling review teams. For large or complex documents, we will assign a review team with both a SME and an Analyst to focus on different aspects of the deliverable:

- *Subject Matter Expert:* The SME reviews the substantive content of the deliverable to ensure that it matches with deliverable expectations and previous discussions on the project. SMEs generally follow a specific subject over the course of the project and have experience in the subject area from prior engagements. SMEs generally act as the lead reviewer for deliverables and will follow deliverables from the acceptance criteria development through the deliverable review.
- *Analyst:* The Analyst reviews for readability and document formatting. This involves reviewing the deliverable to ensure that the agreed-upon format was used, that spelling and grammatical errors do not interfere with the flow of the document, and that generally accepted formatting norms for the project are applied.

3. **Establish independent expectations for deliverable expectation documents (DEDs):** To validate our review of deliverables when they are submitted, BerryDunn will identify an Independent set of expectations for each deliverable on the project. This is completed during the planning phase to streamline the review of the deliverables. BerryDunn uses a variety of sources to develop these expectations. These sources may include, but are not limited to:
- The respective RFP that requires the deliverable
 - Previously approved project artifacts (e.g., Project Plan)
 - Best practices developed by IEEE, PMBOK, the MECT Checklists, other regulatory bodies as appropriate, and other state and federal regulations and requirements

Reviews

BerryDunn recognizes that State resources are finite and often stretched across multiple projects. It is BerryDunn's belief that State resources should not be asked to review vendor deliverables until there is a *reasonable expectation that the deliverable is in final draft form* and contains the content expected by the State. To support the DHHS project team and maximize the value of time DHHS resources spend reviewing deliverables, BerryDunn will review and provide feedback on the deliverables submitted by the implementation contractor for the system implementation projects in advance of the DHHS' review. We recommend that DHHS review the deliverable only once we have recommended it for State approval.

BerryDunn uses a standard format Excel comment log to track defects and comments in vendor deliverables. The comment log follows the deliverable from the initial planning stages through deliverable review and can also be used as a resource by the State once the deliverable is recommended for State review and approval. The comment log consists of three primary worksheets: Summary Sheet, Acceptance Criteria, and Comment Sheet, as described further below. BerryDunn will work with the DHS Project Manager to customize the content of each sheet to the specific needs of DHHS projects.

Summary Sheet: The summary sheet contains a dashboard level overview of the deliverable and the results of BerryDunn's review. It contains BerryDunn's approval recommendation for the deliverable, the total number of comments in the document by status and severity, the names of the review team, details around submission date, and when the review was completed. Figure J shows an example of a summary sheet developed by BerryDunn for a previous project.

Tracking Log:	[Enter Document Title]						
Review Status	Recommended for State Approval				Date	Name	
Submission:	1st Submission	Submission:	2nd Submission	Submission:	3rd Submission	Review Team:	
Document Version		Document Version		Document Version			
Pages		Pages		Pages			
Expected Date Received:		Expected Date Received:		Expected Date Received:			
Actual Date Received:		Actual Date Received:		Actual Date Received:			
Due Date to Vendor:		Due Date to Vendor:		Due Date to Vendor:			
Submitted Date:		Submitted Date:		Submitted Date:			
				Total	Open	Resolved	Closed
Major Comments:				0	0	0	0
Minor Comments:				0	0	0	0
Total Comments:				0	0	0	0

Figure J. Screenshot of Sample Summary Sheet

Acceptance Criteria: The Acceptance Criteria sheet contains the agreed-upon expectations specific to the deliverable under review, the review team’s evaluation of whether the deliverable meets each of the expectations, and metrics showing the number and severity of comments related to each expectation. Figure K presents an example set of acceptance criteria for a deliverable.

Consolidated DSD Acceptance Criteria								
ID	Criterion	Considerations	Met?	Observation	Recommended Action	Major	Minor	Total
AC01	Does the DSD chapter contain all letter updates that were discussed during design sessions?					0	0	0
AC02	Does the DSD chapter contain all reports updates agreed to during the reports review process?	Reports details should be consistent with the reports deliverables, D043 and D044.				0	0	0
AC03	Does the DSD chapter resolve all open action items from the design					0	0	0
AC04	Confirm that other unexpected changes are not present in the					0	0	0
AC05	All artifacts updated since soft approval are called out, with a description of changes.					0	0	0
AC06	The requirements mapping appendix is complete and accurate					0	0	0
AC07	Readability - Is the consolidated document easy to read and follow?					0	0	0
AC08	Does the document follow basic DDI project formatting norms and					0	0	0
AC09	Other	This acceptance criteria is used to bucket comments that do not fit neatly into any of the other categories.				0	0	0
Total Open Comments						0	0	0

Figure K. Screenshot of Sample Acceptance Criteria

BerryDunn's goal in tracking the number and severity of comments tied to each expectation is to provide detailed reporting that substantiates the reviewer's approval recommendation for each deliverable. This information also helps guide conversations with the vendor team with regard to focus areas for subsequent deliverable submissions.

Comment Log: The Comment Log contains the full set of comments from the review team that conducted the review. The Comment Log is the source used to populate the metrics. Each comment in the log is assigned a severity, status, and related expectation. This data is used to create the reporting contained in the Summary and Expectations sheets.

- *Actionable Comments:* BerryDunn prides itself in providing clear, concise, and – most importantly – *actionable* comments. The purpose of each comment is to provide the vendor with a clear set of steps to remediate the identified defect.
- *Vendor Responses:* BerryDunn submits the Comment Log to the vendor upon completion of our review. Specific fields in the Comment Log provide the vendor with an opportunity to respond to each comment. When the vendor resubmits a deliverable with updates based on a BerryDunn review, our review team will evaluate whether each response resolves the comment. This allows each individual defect in the deliverable to be tracked from identification to resolution.
- *Comment Export Macro:* BerryDunn understands that lengthy deliverables can result in the creation of hundreds of comments, which makes the delivery of comprehensive comment logs cumbersome. To streamline the creation of the comment logs, BerryDunn's IV&V Toolkit includes a "comment export macro" in Microsoft Word that automatically consolidates comments from the reviewed Word documents and populates the columns in the comment sheet.

Recommendations

Based on the alignment of the submitted document to the expectations contained in the DED, BerryDunn's deliverable review team will make a recommendation about the deliverable's readiness for DHS review and/or approval. This recommendation will be supported by the findings contained in the Comment Log for the deliverable. In the event that the deliverable review team recommends returning a deliverable to the vendor, the metrics contained in the Acceptance Criteria sheet allow the review team to report on the specific expectations that were not met. Further, the Comment Log allows the review team to drill down to an additional level of detail and display each individual comment tied to the expectation in question.

Any time BerryDunn submits a deliverable back to the vendor for rework or to DHHS for review and approval, BerryDunn will make its review team available to meet with deliverable stakeholders to discuss the results of our review. On previous engagements, BerryDunn has found that these walkthroughs of comments can significantly reduce the amount of back-and-forth that takes place during the review process and expedite the completion of the review process.

- Counts of objects such as requirements, use cases, user stories, business processes, interfaces, and change requests to evaluate requirements stability, ensure comprehensive traceability, and manage change
- Estimated/planned versus actual durations, with target milestones/dates, to measure progress/variance, proactively identify potential concerns, and make course adjustments as needed
- Planned/budgeted versus actual costs to measure variance, proactively identify concerns, and take action as needed
- Sprint burndown and velocity for Agile/Scrum projects to evaluate if all planned/committed work is completed by the end of each Sprint (burndown) and to measure (and trend) in story points the average amount of work a Scrum team completes during a Sprint

Using these checklists, metrics, and measurement tools as a starting point, we will tailor them to meet the needs of specific projects, solutions, and/or lifecycle phases within the EES and DMA Projects.

IV&V Artifacts and Work Products

Checklists and project performance dashboards such as those described above are examples of artifacts we utilize when providing IV&V services. The completed checklists show specific results of our reviews, while populated dashboards show specific point-in-time measurements. These work products then feed more formal project deliverables such as reports of observations/findings, associated issues and risks, and practical recommendations for issue resolution and/or risk mitigation.

Other examples of artifacts and work products we have developed that can be leveraged and tailored for our work with DHHS include (but are not limited to) risk and issue matrices, deliverable review report templates, status report templates, presentation templates, and surveys developed in collaboration with our clients to obtain insight into project team members' and other project stakeholders' perspective on project processes and stated goals and objectives.

3.1.2.iii Explain past challenges and common issues along with the recommendations provided to address the issues.

BerryDunn has been working with or serving health and human services programs and healthcare providers in various capacities for more than 30 years. Our consultants have many years of large scale system implementation experience—including extensive experience in the technology and systems that support the delivery of health and human services, such as MMIS, DW/DSS, Integrated Eligibility Systems, and Health Benefit Exchanges. BerryDunn's experience with these types of system deployments provides our team with on-the-ground exposure to the trends that are impacting health and human services agencies.

Based on our team's experience, we have seen several critical areas that have consistently posed challenges to projects like the ones that DHHS is undertaking:

- **Insufficient Project Planning** – Our team has repeatedly observed large systems projects such as MMISs and Eligibility systems that lack sufficient planning for the size of the project. The insufficient planning often manifests itself in the project schedule. A project schedule is a critical tool to help teams manage the timeline and resources. It needs to be realistic to be of help. Realizing the complexities of project schedules, BerryDunn has made recommendations to agree to and implement tools to help plan and manage the project. These tools can be as simple as spreadsheets that look at past team productivity as a way to estimate future productivity and estimate the level of effort to complete project activities. Leveraging our culture of shared learning and continuous process improvement, we're able to help the project team take steps to implement planning tools and continuously improve the project planning techniques.
- **Missing Project Management Plans** -- Along with insufficient project planning in terms of resource and schedule, our team has observed projects with significant aspects of the project management plans missing or not used. When project plans are missing, it is frequently an issue of competing priorities where we are able to offer recommendations for developing simple project management plans and processes that convey just the facts. Conveying the facts is important so that the entire project team is moving in the same direction. When project plans are not used, we have found it is frequently an issue of communicating about the project plans. We are able to offer recommendations around how to communicate about existing project management plans and processes along with updates to the plans and processes so that the entire team is informed and working under the same direction.
- **Lacking Documentation Quality** -- Unfortunately we've observed many projects where there is a lack of attention to the quality of documented deliverables. Even though teams are working well together, the documents that are delivered miss the mark because of a lack of quality or understanding of the objective. These situation appear to not be a big deal on their own, but compounded across the project, they can impact the overall schedule. Working with the project team, we are able to offer practical recommendations to set shared expectations prior to the delivery of the materials such as Deliverable Expectation Documents (DEDs), ways to improve deliverable quality such as internal peer reviews, and ways to expedite the deliverable review process such as live deliverable reviews.
- **Poor System Quality** -- We've observed that our clients usually get an insight into system quality in the testing phase of the project. By the time testing begins there have been several opportunities for the code quality to be negatively impacted. This can include the quality of the requirements, the quality of the design documentations, software development processes, and communication challenges. BerryDunn recommends that addressing system quality issues begin with a root cause analysis to

understand what is driving the code quality issues. Once the root causes or causes are identified, we're able to offer recommendations to help address the quality. For example:

In our current IV&V engagement for the Massachusetts HIX/IES implementation, we recommended involving the testing team during the design phase to capture user acceptance test cases because quality issues were arising during UAT. By doing this, the designs improved to account for the complexities for which current system users were testing. In addition, communication between the design, development, and testing teams improved.

3.1.2.iv Provide examples of opportunities or positive risks reported in past projects where the customer was able to capitalize.

BerryDunn is always on the lookout for opportunities that our clients can leverage to help them meet their business needs and improve project outcomes. Our strong core team that is supported with additional resources offers the experience that will help DHHS identify and capitalize on opportunities. For example:

In our recent work providing project management and quality assurance for West Virginia's MMIS DDI project, BerryDunn's team was able to identify a way to help the client increase communication, decrease turn, and shorten the project schedule.

The MMIS vendor was conducting system integration testing (SIT) and immediately executing prior to the agreed upon client review and approval. The test results were also a deliverable that required client approval. The vendor was creating and executing the scripts to help address schedule concerns while acknowledging the risk of executing the scripts without client approval. BerryDunn was able to help our client capitalize on the vendor's approach by recommending simultaneous reviews of both the test cases and the results by the client rather than reviews of the test cases followed by a review of the results. Our recommendation added further value with real time reviews of test cases and results that did not meet the expectations. This approach:

- **Saved time in the schedule.** *By reviewing the test cases and results simultaneously, the project team was able to reduce multi-stream work and reduce the number of dependencies in the schedule.*
- **Increase efficiency.** *By reviewing the test cases and results simultaneously, both our client and the vendor were able to increase efficiency by comparing the test cases and results to the design only one time rather than looking at it once for the test case and then once a month later when the test results were delivered.*
- **Increased communication and collaboration.** *By reviewing test cases and results that did not meet client expectations jointly, the client and vendor were able to understand each other's perspective better and resolve the issue more quickly, sometimes updating the test case and re-executing it real time to receive preliminary approval.*

BerryDunn's team is excited to work with DHHS, bringing our culture of shared learning to help DHHS capitalize on project opportunities.

3.1.2.v Provide examples of the bidder's deliverable review findings and issue assessments utilized on previous projects.

As part of the IV&V process BerryDunn will report on deliverable review findings. The purpose of reporting on these discoveries is to present our review and assessment data, findings, and recommendations related to the quality of the vendor's deliverables (based on quality indicators shown in Table 4) and the timeliness of the deliverable review process (based on factors described in Table 5).

Table 4. Key Deliverable Quality Indicator Definitions

Indicator of Deliverable Quality	Definition
Clarity	<ul style="list-style-type: none"> • Is the deliverable purpose clear? • Is the content clearly written and presented?
Completeness	<ul style="list-style-type: none"> • Are all documents expected included and complete? • Are all expected sections within documents included and complete?
Comprehensiveness	<ul style="list-style-type: none"> • Is the material presented at the expected level of detail given the phase of the project? • Does the content include inputs from all relevant sources such as JAD sessions, existing system documentation, federal guidance, and the RFP? • Does the approach follow best practices and industry standards?
Accuracy	<ul style="list-style-type: none"> • Is the material presented accurate based on client business and program needs?
Consistency	<ul style="list-style-type: none"> • Is the content consistent within the document and between related documents? • Is the content provided at a consistent level of detail within and between documents?
Submission Format	<ul style="list-style-type: none"> • Are the documents readily accessible to the reviewers (named clearly and correctly, and in a common file format)? • Is the content, including diagrams, legible? • Is the document free of basic spelling, grammatical, and formatting errors?
Contractual Compliance	<ul style="list-style-type: none"> • Does the deliverable satisfy the RFP requirements? • Is traceability to SI Vendor RFP requirements in RFP Work Orders and RFP Exhibit XVI demonstrated?
Regulatory Compliance	<ul style="list-style-type: none"> • Is the deliverable consistent with state and federal regulations and guidance? • Is traceability to state and federal laws, regulations, and guidance as enumerated in SI Vendor RFP Part 4 demonstrated?

Table 5. Key Factors Impacting Deliverable Review Timeliness

Factor Impacting the Deliverable Review Process	Description
Deliverable Quality	See definitions in Table 3 above.
Deliverable Size	Deliverables range in size from a single 15-page Word document, for example, a “Best Practices” deliverable, to multiple Word documents and spreadsheets, for example a “Requirements Packet” deliverable with many Use Cases, plus associated wireframes and storyboards.
Deliverable Complexity	Deliverables vary in their complexity from narrative planning documents to complicated business process models and detailed tax credit calculations and eligibility rules with legal and regulatory implications.
# of Reviewers	<p>Each deliverable has a different review and approval path.</p> <ul style="list-style-type: none"> • Some deliverables require review from several different agency roles, such as legal, operations, finance, communications, and/or program. • Some deliverables require review by more than one business owner • Some deliverables require executive review and approval.
Review Team Readiness and Availability	This factor relates to agency communication, planning, and resource scheduling prior to the receipt of a vendor deliverable, and availability of resources to participate in the review process based on schedules and competing priorities.
Leadership - Review Process	This factor relates to communication and coordination with agency reviewers and the implementation contractor, prior to and during the review process.
Stability of Content	<p>Scope and status of business/program content is in constant flux in this project due to factors such as the following, impacting the content of some deliverables more than others:</p> <ul style="list-style-type: none"> • Business owners’ need to define new programs and policies to align with federal laws and regulations • Decisions related to project scope and schedule • Availability of federal guidance
Quality of Comment Responses (for resubmissions)	The ability for reviewers to efficiently use the Review Form to locate changes made to specific deliverable documents depends in part on the level of detail of responses to comments in the Review Form.

As part of reporting, BerryDunn’s IV&V team will undertake the following tasks to develop deliverable review reports:

- Assess the quantity, quality, and type of comments entered by reviewers on the Deliverable Review Forms, as well as the vendor’s responses
- Analyze the vendor deliverable submission data maintained by the vendor, DHHS, and IV&V
- Review selected meeting artifacts and correspondence related to vendor deliverable development, submission, and DHHS review

We will use a Quality and Review Process Rating Scale, similar to the one shown in Table 6, in our review of each deliverable.

Table 6. Quality and Review Process Rating Scale

Rating Value	Deliverable Quality	Deliverable Review Timeliness	Deliverable Resubmission Timeliness
Did not meet expectations	Based upon the assumption of two submissions that vendor uses in their schedule planning, this value is <u>automatically assigned</u> if a deliverable requires more than two submissions to be approved. This value can also be assigned when other quality deficiencies are present in quantity and/or severity.	Based on the agreed-upon expectation of a 10-day duration for client review of a first submission, this value is <u>automatically assigned</u> if the first review cycle took 12 or more days, allowing for a one-day margin of error due to data inconsistencies. This value can also be assigned when the first submission review duration was less than 12 days, but other factors contributed to a lengthy review process.	Based on the agreed-upon expectation that vendor will resubmit a deliverable within seven days of receiving client comments, this value is <u>automatically assigned</u> if the resubmission period was nine or more days, allowing for a one-day margin of error due to data inconsistencies.
Met expectations	The deliverable was approved after two submissions and quality deficiencies were minimal.	The deliverable took fewer than 12 days to review and presence of other factors did not significantly impede the duration of the review.	The deliverable was resubmitted fewer than nine days after receipt of client comments.
Exceeded expectations	The deliverable was approved after one submission and there were no quality deficiencies.	The deliverable took fewer than 12 days to review and no review factors impeded the duration of the review.	Not applicable.

The following is an example summary of assessments, findings, and recommendations delivered as part of a previous IV&V engagement:



Executive Summary

This IV&V Deliverable Review Report #3 (DRR-3) presents an assessment, findings, and recommendations about the deliverable quality and CLIENT deliverable review process for VENDOR deliverables submitted or resubmitted to the CLIENT between DATE and DATE. This report is the third in a series of four DRRs to be submitted during the course of the CLIENT contract.

DRR-1 presented seven Findings and nine Recommendations. DRR-2 updated the seven Findings and three of the Recommendations based on new data collected during the reporting period. DRR-3 includes a total of 12 Findings and 17 Recommendations, including five new Findings and eight new Recommendations. Detailed data and analysis supporting the findings is provided in Section 2 and Appendix A. One previously reported finding (Finding 6) changed from positive to negative.

Following are highlights of the data and analysis contained in this report.

- This was a very active time period for deliverable reviews. This report includes 93 unique VENDOR deliverables submitted or resubmitted to the CLIENT between DATE and DATE. This is an increase of over 100% from 43 deliverables reviewed during the previous reporting period, which was of a similar duration.
- For the third report in a row, the majority (49 of 55, or 89%) of VENDOR deliverable first submissions did not meet quality expectations.
- Neither VENDOR nor CLIENT is meeting deliverable resubmission or review timeliness expectations as defined by VENDOR's contract. This represents a continuation of VENDOR's poor performance and a deterioration of Commonwealth performance.
 - VENDOR was "very late" (more than 17 days late) with 46% of resubmissions.
 - CLIENT was "very late" (more than 20 days late) with 43% of reviews of first submissions.

Significant Updates to DRR-2 Findings:

Finding 6 (Updated): This reporting period, CLIENT did not meet review timeliness expectations for first submissions (66%) more often than it was able to meet expectations (34%). This is a deterioration in CLIENT performance from the previous two reporting periods.

New Findings and Recommendations:

Finding 01 (New): The following mission critical project planning, technical, and operating documents are not approved.

- *Project Schedule (M9) – Last approved version is M5 from DATE. M9 version was submitted but not reviewed due to evolving project approach.*



- *Stabilization Manual (M9) – Awaiting resubmission of Outline due DATE; full deliverable not submitted.*
- *Implementation Plan (M9) – Awaiting comments from CLIENT; were due DATE.*
- *Contingency/Recovery Plan – Awaiting third submission from VENDOR; was due DATE.*
- *Test Plan (M6) - Awaiting resubmission from VENDOR; due DATE.*
- *Interface Requirements (WT17) and Interface Control Documents (ICD) – State, Federal, Core and Shared, and Carrier - Submitted in April, VENDOR is revising the requirements document and three of the four ICDs.*
- *System Design Document – Awaiting fourth submission from VENDOR; was due DATE.*

Recommendations:

- (.01) (New) Request VENDOR to submit these deliverables with content updated to reflect the current status of the project immediately and request CLIENT reviewers to complete late reviews immediately.

Finding .02 (New). 26 of 27 Technical Detailed Design Deliverables (TDDDs) for functionality in production have not been approved.

Recommendations:

- (.02) (New) Using the approved TDDD Outlines as a starting point, reinforce TDDD content, quality, and approval criteria expectations with VENDOR and CLIENT reviewers. Consistently enforce adherence to these expectations during the review process.
- (.03) (New) Based upon agreed-upon expectations, CLIENT architects should develop a plan to consistently, efficiently, and thoroughly review TDDDs in a timely manner. Conducting live walkthroughs or “war room” type sessions with VENDOR is one approach. Many of the TDDD review comments are questions about the TDDD scope, intent, and design approach. Such questions may be able to be addressed more quickly in a live session with both VENDOR and CLIENT participating.
- (.04) (New) Once the TDDDs are approved, develop a plan to identify gaps between approved designs and live functionality and to align the production system with the approved technical design documentation, or revise TDDDs as needed.
- (.05) (New) Going forward, request VENDOR to include a list of TDDDs and their approval status in the Release Notes.

Finding 3.1 (New): Of the 20 TDDDs which have undergone a complete review cycle, 19 were deficient in Clarity, 18 were deficient in Completeness, and 17 were deficient in Comprehensiveness.

Recommendations:

- See new Recommendation .01 above.



- (4.1 – New) CLIENT should request that VENDOR designate a single individual with technical architecture expertise to perform a final QA of TDDD's prior to submission to ensure clarity, completeness, comprehensiveness, and consistency with established expectations

Finding 5.1 (New): The share of deliverable resubmissions over 43 days late increased significantly, from 21% to 40%.

Finding 6.1 (New): Nearly half of CLIENT reviews of first submissions were more than 20 days late

Finding 7 (Updated): After deliverable quality, review team readiness and leadership – review process are the most frequently occurring factors impacting the deliverable review process (for those deliverable reviews that did not meet timeliness expectations). Leadership – review process replaced number of reviewers as the third most frequently observed timeliness factor

- (8.1- New) CLIENT should develop a process to handle requests for deliverable review and resubmission extensions of five days or longer to ensure proper documentation, timely communication to VENDOR, and assessment of impacts on the project schedule. One option is to do this through the COMMITTEE.
- (10 - New) Require VENDOR to reinstate the contractually-required deliverable walkthroughs. Walkthroughs are an opportunity to level-set and ask questions, which may improve reviewers' ability to complete their reviews on time.

The purpose of this report is to assess and report on the overall quality of VENDOR deliverables and the timeliness of CLIENT's deliverable review process. The report's findings provide insight into VENDOR and CLIENT performance from one perspective, and its recommendations identify opportunities for improvement going forward.

Several project conditions influenced the deliverable submission and review process during the reporting period:

- CLIENT again had to meet deadlines for submitting deliverables to AGENCY for a gate review, this time the Operational Readiness Review (ORR) conducted DATE and closing out requirements for the VENDOR development team, necessitating expedited submission and review processes for several deliverables.
- Again, some functionality was deferred to later releases, so some deliverables actively in the review cycle related to deferred functionality were de-prioritized for CLIENT review, in some cases resulting in the appearance of extended review timelines. Even though the functionality was deferred, there has been no formal suspension of the deliverable review process.



Our review posed and sought to answers to three primary questions, based on the definitions in Table i.1 below:

- 1) *Did the quality of the first submission of the VENDOR deliverable meet CLIENT's expectations?*
- 2) *Did CLIENT meet agreed-upon expectations for timeliness of the deliverable review?*
- 3) *Did VENDOR meet agreed-upon expectations for timeliness of deliverable resubmission?*

Table i.1: Definitions

Rating Value	Deliverable Quality	Deliverable Review Timeliness	Deliverable Resubmission Timeliness
Did not meet expectations	Based upon the assumption of two submissions that VENDOR uses in their schedule planning, this value is <u>automatically assigned</u> if a deliverable requires more than two submissions to be approved. This value can also be assigned when other quality deficiencies are present in quantity and/or severity	Based on the agreed-upon expectation of a 10-day duration for CLIENT review of a first submission, this value is <u>automatically assigned</u> if the first review cycle took 12 or more days, allowing for a one-day margin of error due to data inconsistencies This value can also be assigned when the first submission review duration was less than 12 days, but other factors contributed to a lengthy review process.	Based on the agreed-upon expectation that VENDOR will resubmit a deliverable within seven days of receiving CLIENT comments, this value is <u>automatically assigned</u> if the resubmission period was nine or more days, allowing for a one-day margin of error due to data inconsistencies.
Met expectations	The deliverable was approved after two submissions and quality deficiencies were minimal.	The deliverable took fewer than 12 days to review and presence of other factors did not significantly impede the duration of the review.	The deliverable was resubmitted fewer than nine days after receipt of CLIENT comments
Exceeded expectations	The deliverable was approved after one submission and there were no quality deficiencies.	The deliverable took fewer than 12 days to review and no review factors impeded the duration of the review.	Not applicable.

The diagram below presents the indicators used to assess deliverable quality and deliverable review process effectiveness, and illustrates the relationship between deliverable quality and the deliverable review process. This report does not assess the "Factors Impacting Deliverable Quality" listed in the shaded box. These factors are for the most part internal to VENDOR and not visible to the IV&V team. In addition, the JAD session approach was developed and the majority of the JAD sessions were completed before the start of the IV&V contract.

3.1.3 IV&V Status Meetings and Reporting

BerryDunn’s consultants have a reputation for being outstanding meeting facilitators. Our proposed project team includes experienced facilitators who have the skills necessary to elicit information, encourage collaboration, reach consensus, and develop buy-in with diverse groups of project participants. We know that getting projects completed requires more than just what is learned in project management training – getting stakeholders involved and committed requires consulting and facilitation skills, development of relationships, empathy and gentle reminders, and above all, respect.

BerryDunn has produced reports similar to DHHS’ requested Weekly IV&V Status Report for the Missouri Department of Social Services in our role providing IV&V for Missouri’s Eligibility Determination and Enrollment System implementation and for the Commonwealth of Massachusetts in our role providing IV&V for their HIX/IES implementation. We will work with the DHHS Project Manager to present information in a manner that is useful for the intended audience(s). We understand that the IV&V Status Report serves as an update to the State on the IV&V activities and deliverables, in accordance with our approved IV&V Work Plan.

3.1.3.i Address the bidder’s approach to meeting each requirement in a table that contains the requirement and the bidder’s approach to meeting the requirement.

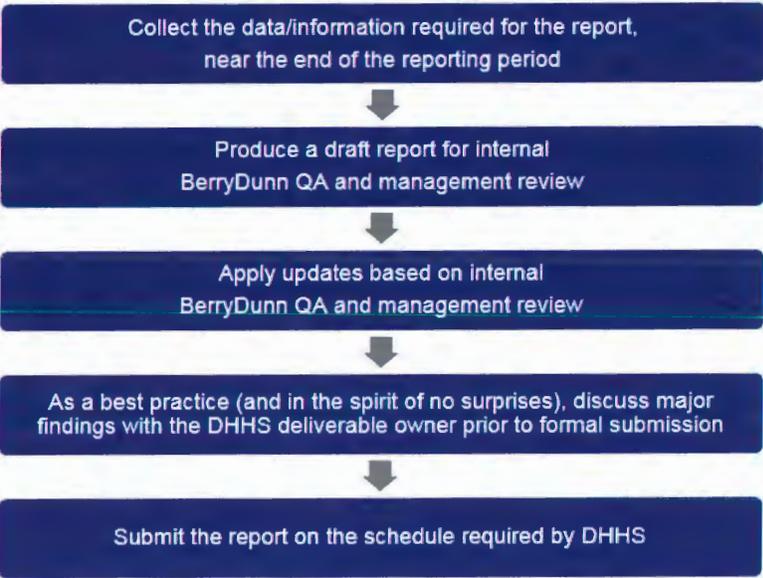
	Requirements	BerryDunn Response
1	<p>Must prepare and submit a weekly status report including activities for the previous week and upcoming activities for the next two weeks that includes the following information:</p> <ul style="list-style-type: none"> • Project meeting participation including an assessment of completed meetings and any recommendations for improvement. • Planned project meetings for IV&V participation. • Project deliverable review activities. 	<p>We understand the value of the weekly status reports. These reports serve as a method to communicate IV&V’s activities and findings to the CMS and DHHS on a consistent, ongoing basis. The reports can be used by project leadership to support calls to action for improvements. In addition, they memorialize the status of the project through the eyes of an independent observer and offer a point of origination for project measurement.</p> <p>As part of reporting IV&V’s activities and findings, BerryDunn will focus on identifying project risks before they become project issues and work with the project team to mitigate risks and realize opportunities.</p> <p><i>Project risks differ from project issues in that issues are current conditions requiring immediate action in order to minimize negative effect achievement of project goals; whereas project risks are uncertain events or conditions that, if they occur, will have a negative (or positive) effect on a project. A risk may evolve into an issue if not properly addressed.</i></p> <p>Karen Jones, one of our proposed IV&V Business/Test Analysts, is certified by the PMI as a Risk Management Professional (RMP). The RMP certification demonstrates Karen’s knowledge and experience in risk management in large and complex project environments, and requires 30 professional development units in risk management topics</p>

Requirements	BerryDunn Response
<ul style="list-style-type: none"> Risks, issues, and opportunities which are new or have been updated since the previous submission. Updated IV&V schedule Critical incidents summarizing the incident, impact to the project, and a proposed action plan to address the incident. Other IV&V activities as defined by DHHS. 	<p>every three years, so DHHS can be assured that our team will keep risk management at the forefront in our assessment of project activities.</p> <p>Risk management is an ongoing activity that begins at the outset of the project and occurs throughout the life of the project. BerryDunn leverages the PMI PMBOK Project Risk Management discipline as a framework for the management and control of risks and issues. Figure M presents key elements of this discipline.</p> <p>Our risk management approach includes the following and has proven successful with the IV&V activities in our current work with Missouri and Massachusetts:</p> <ul style="list-style-type: none"> Identifying the Right Risks. Identifying too many or too few risks can negatively impact risk management processes. It is important to define the difference between risks, issues, and action items, and address each appropriately. This allows project management to focus their efforts on priority risks/issues. Documenting Risks. Consistent and comprehensive documentation of risks and issues facilitates efficient communication, shared understanding, analysis, and other risk management activities. Communicating Risks. Clear and timely communication of risks is essential to the risk management process. We will include a summary of risks in the IV&V Status Report. The weekly and monthly status meetings will be utilized to review risks, plan risk mitigation strategy, make issue recommendations, and address changes in priorities. Effectively Prioritizing Risks. The risks with the highest likelihood and greatest impact will be assigned the highest priority. Defining and Executing Mitigation Plans/Strategies. The development of a mitigation strategy for each risk is central to the success of the IV&V project. The time to look at options, develop an approach, and reach consensus is <i>before the risk becomes a reality</i>. In evaluating risk, we consider whether to avoid, transfer, mitigate, or



Figure M: Key Elements of PMI PMBOK Project Risk Management Framework

Requirements	BerryDunn Response
	<p>accept risk and will work with the DHHS team to determine the risk tolerance and risk threshold.</p> <p>Our IV&V team will work with the DHHS Project Team to develop risk response strategies for positive and negative project risks as required by DHHS. The time to look at options, develop an approach, and reach consensus is before the risk becomes a reality. There are four options for risk mitigation strategy:</p> <p>Avoid – Work to eliminate the risk and protect the project from its impact. For example: Used equipment is less expensive but more likely to need repair. Avoid this by purchasing new equipment with warranties.</p> <p>Transfer – Shift risk to a third party along with ownership of the response. For example: Hire a vendor to perform the task and accept the responsibility of the risk.</p> <p>Mitigate – Work to reduce the probability and/or impact of the risk. For example: Problems with the new software may be reduced by additional testing.</p> <p>Accept – Acknowledge the risk and not take any action unless the risk occurs. For example: DHHS may accept the risk that a natural disaster may damage the office building without taking any preventative measures.</p> <p>BerryDunn will also facilitate the development of contingency plans for select risks and response strategies for selected issues, outlining the steps to be taken if that risk is realized if so desired by DHHS.</p> <p>Based on guidance provided by DHHS as part of the RFP and our experience developing similar reports for other IV&V engagements, the IV&V Weekly Status Report will include (but not be limited to):</p> <ul style="list-style-type: none"> • An IV&V Project Assessment Dashboard and summary of key issues/risks and recommendations to provide a snapshot of project health • Assessment of core project components, including schedule, budget, scope, and quality management • Major activities and deliverables completed in the last reporting period, including vendor deliverables evaluated, artifacts reviewed, meetings attended, observations conducted, and assessment activities completed • Major upcoming activities, planned meeting attendance, and deliverables for the next two weeks and updated IV&V Schedule • Status of existing risks and issues and identification of new risks and issues

	Requirements	BerryDunn Response
		<ul style="list-style-type: none"> • Key project metrics for measuring progress towards completion of project goals and objectives • Recommendations for improvement to DHHS and vendors regarding project management practices and SDLC methodology • Information on Critical Incidents summarizing the incident, impact to the project, and a proposed action plan to address the incident. • Other information as determined in agreement with DHHS, such as scope changes and decisions made
2	<p>Must submit each weekly status report by the DHHS established day and time. DHHS will allow a minimum of one business day from the end of the weekly reporting period for submission.</p>	<p>BerryDunn will provide the Weekly Status Report to the DHHS Project Manager as per the DHHS established day and time. We will work with DHHS during initial project planning to develop a status reporting template that will meet the information needs of the IV&V activities. The method for formulating the report will be to:</p>  <pre> graph TD A[Collect the data/information required for the report, near the end of the reporting period] --> B[Produce a draft report for internal BerryDunn QA and management review] B --> C[Apply updates based on internal BerryDunn QA and management review] C --> D[As a best practice (and in the spirit of no surprises), discuss major findings with the DHHS deliverable owner prior to formal submission] D --> E[Submit the report on the schedule required by DHHS] </pre>
3	<p>Must facilitate a weekly IV&V status meeting with DHHS identified project leadership.</p>	<p>BerryDunn will facilitate, prepare, and provide materials for weekly IV&V status meetings with our counterparts at DHHS, including documents such as Agendas, Meeting Minutes, and support documentation for the meetings we lead. Consistent with the BerryDunn 'no surprises' approach to communicating with our clients, any finding of significance will be raised to DHHS to prevent surprises in the report and to allow corrective actions to begin as soon as possible.</p> <p>Our intent is to effectively communicate project status to DHHS leadership and identify and report on key IV&V activities such as project progress, identifying risks and issues, identifying critical incidents and proposed action plan to address the incident.</p>

	Requirements	BerryDunn Response
		<p>As part of the integrated Project Plan, we will identify the types of documentation BerryDunn will provide at the meetings, together with the standards associated with meeting management to make best use of attendees' time. Following are general guidelines for the project meetings we have used on similar projects:</p> <ul style="list-style-type: none"> ✓ Meetings will begin and end on time. ✓ Meeting participants will be given the schedule of the recurring meeting at the beginning of the project, as well as reasonable notice of meeting time/date changes and cancellation when they occur. ✓ Key meeting participants who cannot attend should send a designee to attend in their stead. ✓ Clearly defined meeting purpose or objectives will be included in the meeting invitation along with the agenda. ✓ Reasonable expectation that meeting participants should have reviewed the status report prior to the meeting. <p>During initial project planning, we will review these general meeting management guidelines with DHHS identified project leadership and determine whether modifications are needed to comply with the State's established standards and guidelines.</p> <p>Productive meeting management does not end when the meeting ends. Once the meeting is over, it is critical to log decisions and action items to document the meeting decisions and next steps. Without this follow-up, the value of the well-facilitated meeting can be lost. In addition to logging the decisions and action items, our team will work with DHHS to follow up on those action items and work them to completion.</p>
4	<p>Must prepare and submit a maximum of five business days after month end a monthly IV&V report that includes the following:</p> <ul style="list-style-type: none"> • Summary of IV&V activities for the past month. • Summary of IV&V activities planned for the next month. • IV&V assessment of the overall project, schedule, budget, scope, and 	<p>As input to the Monthly IV&V Assessment Reports, BerryDunn will participate in selected project meetings to:</p> <ul style="list-style-type: none"> • Assess project status and the health of the relationship between DHHS and its vendors • Monitor project management and development activities • Monitor project progress against published milestones and schedules • Review critical deliverables • Assess compliance with documented processes • Monitor alignment of vendors with contract standards • Monitor system integration touch points with other DHHS and external systems <p>Our initial and periodic assessments of project management plans and processes, requirements and design-related documentation and activities, test related documentation and activities, implementation-</p>

Requirements	BerryDunn Response																																		
<p>quality status in comparison to the project teams' reported status clearly identifying any differences along with the reasoning.</p> <ul style="list-style-type: none"> • Additions or updates to executive level risks, issues, and opportunities along with further recommended actions. • Summary assessment of project deliverables and work products reviewed in the last reporting period. • Other IV&V activities as defined by DHHS. 	<p>related documentation and activities, and operations and maintenance-related documentation and activities will serve to inform these monthly IV&V assessment reports.</p> <p>Throughout the reporting period, BerryDunn will collect the data/information required for the report and document findings from our IV&V assessment activities. We will develop and document recommendations for corrective and mitigating actions, process improvements, or other improvements for consideration by DHHS.</p> <p>Near the end of the monthly reporting period, we will prepare the Monthly IV&V Assessment Report to include documentation of findings from our IV&V assessment activities completed during the reporting period; documentation of recommendations to mitigate risks or correct issues/deficiencies discovered as a result of an assessment completed during the reporting period; and documentation of process or other improvements for consideration by the DHHS.</p> <p>BerryDunn proposes that the Monthly IV&V Status Report will be a narrative report organized into major sections as follows:</p> <p><u>Key Findings and Recommendations:</u></p> <p>This section will identify key findings and recommendations that, based on information gathered as part of IV&V work during the course of this reporting period, provide the greatest opportunity for positive impact to the project.</p> <p><u>Overall IV&V Project Assessment Dashboard:</u></p> <p>The IV&V Project Assessment Dashboard provides an "at-a-glance" look at the overall health of the project (as shown in Table 7).</p> <p style="text-align: center;">Table 7. IV&V Project Assessment Dashboard</p> <table border="1" data-bbox="561 1325 1377 1780"> <thead> <tr> <th colspan="5" style="background-color: #800000; color: white;">IV&V Project Assessment Dashboard</th> </tr> <tr> <th rowspan="2" style="background-color: #cccccc;">IV&V Assessment Area</th> <th colspan="4" style="background-color: #cccccc;">Monthly Period Beginning</th> </tr> <tr> <th style="font-size: small;">dd/mm/yyyy</th> <th style="font-size: small;">dd/mm/yyyy</th> <th style="font-size: small;">dd/mm/yyyy</th> <th style="font-size: small;">dd/mm/yyyy</th> </tr> </thead> <tbody> <tr> <td>1. Schedule Management</td> <td style="background-color: #90EE90;">Green</td> <td style="background-color: #90EE90;">Green</td> <td style="background-color: #90EE90;">Green</td> <td style="background-color: #90EE90;">Green</td> </tr> <tr> <td>2. Budget Management</td> <td style="background-color: #FFFF00;">Yellow</td> <td style="background-color: #FFFF00;">Yellow</td> <td style="background-color: #FFFF00;">Yellow</td> <td style="background-color: #FFFF00;">Yellow</td> </tr> <tr> <td>3. Scope Management</td> <td style="background-color: #FFFF00;">Yellow</td> <td style="background-color: #FFFF00;">Yellow</td> <td style="background-color: #FFFF00;">Yellow</td> <td style="background-color: #FF0000;">Red</td> </tr> <tr> <td>4. Quality Status Management</td> <td style="background-color: #FFFF00;">Yellow</td> <td style="background-color: #FFFF00;">Yellow</td> <td style="background-color: #FFFF00;">Yellow</td> <td style="background-color: #FFFF00;">Yellow</td> </tr> </tbody> </table>	IV&V Project Assessment Dashboard					IV&V Assessment Area	Monthly Period Beginning				dd/mm/yyyy	dd/mm/yyyy	dd/mm/yyyy	dd/mm/yyyy	1. Schedule Management	Green	Green	Green	Green	2. Budget Management	Yellow	Yellow	Yellow	Yellow	3. Scope Management	Yellow	Yellow	Yellow	Red	4. Quality Status Management	Yellow	Yellow	Yellow	Yellow
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4. Quality Status Management	Yellow	Yellow	Yellow	Yellow																															

Requirements	BerryDunn Response										
	<p>The IV&V Assessment Areas will include categories such as overall project, schedule, budget, scope, and quality. These categories will ultimately be determined based on collaboration with the DHHS identified project leadership team. The color-coded matrix shows the ranking for the current reporting period (based on a similar color-coding scheme to that shown in Table 8), as well as the five most recent reporting periods, showing the trend of project health.</p> <p style="text-align: center;">Table 8. Project Assessment Color-Coding Definitions</p> <table border="1" data-bbox="597 636 1344 1318"> <thead> <tr> <th data-bbox="597 636 711 682"></th> <th data-bbox="711 636 1344 682">Definition</th> </tr> </thead> <tbody> <tr> <td data-bbox="597 682 711 846">Gray</td> <td data-bbox="711 682 1344 846">At least one finding within this assessment area could not be determined as a result of missing documentation, planned meetings that did not occur during the reporting period, incomplete understanding of project plans, or information IV&V has been provided but has not yet had time to review.</td> </tr> <tr> <td data-bbox="597 846 711 955">Green</td> <td data-bbox="711 846 1344 955">Findings within this assessment area may or may not result in risks and issues. If risks and issues do exist, agreed-upon risk mitigation and issue resolution plans are in place.</td> </tr> <tr> <td data-bbox="597 955 711 1094">Yellow</td> <td data-bbox="711 955 1344 1094">Findings within this assessment area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory.</td> </tr> <tr> <td data-bbox="597 1094 711 1318">Red</td> <td data-bbox="711 1094 1344 1318">Findings within this assessment area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory. The identified findings, risks, and issues within this assessment area from their perspective significantly affect the likelihood of project success.</td> </tr> </tbody> </table> <p>The dashboard information will be followed by information that clearly identifies the differences between our team’s reporting and the overall project teams’ along with the reasoning for those differenced.</p> <p>IV&V uses a series of questions, based on accepted project management practices, as guidelines in their review of each assessment area. However, their review also includes an assessment of the activities currently affecting the project.</p> <p><u><i>Outstanding Risks and Issues for Management Attention:</i></u></p> <p>Project risks differ from project issues in that issues are current conditions requiring immediate action in order to minimize negative effect achievement of project goals, whereas project risks are uncertain events or conditions that, if they occur, will have a negative (or positive) effect on a project. A risk may evolve into an issue if not properly addressed. With that in mind, <i>With that in mind, if we identify a concern within the</i></p>		Definition	Gray	At least one finding within this assessment area could not be determined as a result of missing documentation, planned meetings that did not occur during the reporting period, incomplete understanding of project plans, or information IV&V has been provided but has not yet had time to review.	Green	Findings within this assessment area may or may not result in risks and issues. If risks and issues do exist, agreed-upon risk mitigation and issue resolution plans are in place.	Yellow	Findings within this assessment area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory.	Red	Findings within this assessment area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory. The identified findings, risks, and issues within this assessment area from their perspective significantly affect the likelihood of project success.
	Definition										
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Green	Findings within this assessment area may or may not result in risks and issues. If risks and issues do exist, agreed-upon risk mitigation and issue resolution plans are in place.										
Yellow	Findings within this assessment area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory.										
Red	Findings within this assessment area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory. The identified findings, risks, and issues within this assessment area from their perspective significantly affect the likelihood of project success.										

	Requirements	BerryDunn Response
		<p><i>project that may have a critical adverse impact on the project's cost, quality or schedule, we will communicate this finding promptly so that it can be addressed timely. In other words, we will still include this finding in our formal assessment report, but we will not delay communication of our concern. Our monthly reporting of risks and issues will focus on updates and additions to the executive level risks, issues, and opportunities.</i></p> <p><u><i>Activities Performed:</i></u></p> <p>This section will show the areas within scope for IV&V services and reflect the key IV&V activities performed related to each project assessment area during the reporting period. Key findings and recommendations resulting from these IV&V activities (assessments, evaluations, reviews, or verifications) are documented in the Key Findings and Recommendations section of this report.</p> <p><u><i>Look-Ahead to Activities Planned:</i></u></p> <p>This section of the report will provide a look-ahead to activities planned during the next reporting period.</p> <p><u><i>Summary Assessment of Reviewed Project Artifacts:</i></u></p> <p>This section will document the project artifacts such as deliverables and other work product that the IV&V team reviewed in the past month and is currently reviewing. The project artifacts will note the status such as "In Review," "Recommended for Approval," and "Recommended for Rework."</p>
5	Must facilitate a monthly IV&V report meeting with DHHS identified leadership.	BerryDunn will facilitate, prepare, and provide materials for monthly IV&V status meetings with DHHS identified leadership and walk through the Status Report. Following each meeting, we will prepare and distribute minutes from the meeting to reflect the decisions and action items from the meeting. For the week when the monthly meeting is scheduled, we propose to combine the weekly and monthly meeting into one as the monthly meeting would provide all the pertinent IV&V activities for the current and previous weeks.
6	Must create the agenda and take the minutes for any IV&V meetings.	BerryDunn's IV&V Toolkit includes a suite of meeting management templates, tools and process documents for meeting facilitation, which includes standard meeting agendas, meeting notes, and action item tracking. We have provided a sampling of these templates in Figures N, O, and P.

Figure N. IV&V Status Review Agenda



IV&V Status Review Agenda

Date		Time	
Location			
Call-in Number			
Organizer			
Note taker			
Attachments			

Meeting Participants			

Attendance Legend A = Absent, P = Present, T = Telephone

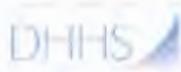
Meeting Purpose: Review weekly IV&V report

Item	Topic and Description	Speaker	Length
1	Review IV&V Status Report		
2	Review new risks and issues		
3	Review risks and issues closed in the last reporting period		
4	Open Discussion		

Open Action Items

ID	Description	Assigned To	Status	Due Date

Figure O. Meeting Minutes



IV&V Status Review Meeting Minutes

Date		Time	
Organizer			
Attachments			

Meeting Participants			

Attendance Legend A = Absent, P = Present, T = Telephone

Meeting Purpose: Review Weekly IV&V report

Item	Topic and Description	Speaker
1	Review IV&V Status Report	
2	Review new risks and issues	
3	Review risks and issues closed in the last reporting period	
4	Open Discussion a. b.	

Action Items Discussion:

ID	Description	Comment/Resolution	Status

Decisions:

ID	Description	Options/Discussion Points	Decision/Made By

Meeting Notes by Topic:

Figure P. Decision Log Entry Form

Project Decisions - New Item □ ×

Edit


Save


Cancel


Paste


Cut


Copy


Attach File


Spelling

Commit
Clipboard
Actions
Spelling

Decision Summary *

Details

Summary of Decision

Description of Decision Point *

A A | B Z U | [Rich Text Icons]

Describe the Decision that must be made.

Context/Notes

A A | B Z U | [Rich Text Icons]

Describe the context of the decision and any additional notes.

Date Created *

5/15/2016

The date the decision point was captured.

Priority

3

Select the priority of the decision.

Date Decision Reached

Enter the date that the decision was reached.

Final Decision

A A | B Z U | [Rich Text Icons]

3.1.3.ii Describe the bidder's process for capturing detailed status on project activities (i.e., scheduled tasks, risks, issues, staffing, communications, etc.) at a detailed level and reporting the information as needed based on the reporting audience.

Listed below is a snapshot of our process for planning and conducting the various ongoing IV&V activities for successful completion of the project:

- ✓ Participate in project meetings as required.
- ✓ Conduct periodic/ongoing independent risk analyses and review of the IV&V project and review analysis results with project leadership.
- ✓ Actively participate in some meetings and act as independent observers in others.
- ✓ Review status reports produced by various areas of the project team and compare the information to the information gathered as part of our IV&V activities.
- ✓ Communicate with project team members informally to gather information about their day-to-day activities, and later in more formalized interviews to understand areas of concerns and recommendations.
- ✓ Become part of the project team; while we do not provide opinion or direction, we are often seen as a sounding board based on previous experience with other projects.
- ✓ Conduct a more in-depth analysis of areas that have historically proven to be areas of concern.
- ✓ Participate in outside technical groups, such as the Private Sector Technology Group (PSTG), conferences, and Medicaid community forums, to stay informed and current, and leverage that knowledge to raise our level of awareness on DHHS' EES and DMA projects.

Leveraging the results of these activities allows us to understand the detailed status of the project activities. We are then able to synthesize this detailed information as needed and tailored to the audience that is receiving the information.

BerryDunn has demonstrated experience providing IV&V services for other MMIS, Eligibility and Enrollment, and other Medicaid enterprise system implementations. Our firm's 15+ years of Medicaid consulting experience – together with the experience of our team members both in Medicaid and other public and private sector areas – enables us to recognize areas of an implementation where problems are likely to occur. We are aware of how to interpret the data and statistics to identify symptoms of quality or schedule concerns.



(State) Eligibility Determination and Enrollment System

Services for

Independent Verification and Validation

Weekly IV&V Status Report Template

For the Period April 14, 2016 – April 28, 2016, 12:00 p.m.

Submitted by:

Karen Jones Project Manager

BerryDunn

100 Middle Street

Portland, ME 04101

Phone: (207) 842-8064

Email: ksjones@berrydunn.com

**Eligibility Determination and Enrollment System
Independent Verification and Validation
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Figure 1: Version History

Version	Date	Description
V1.0	5/2/2016	Submitted version

1 Executive Summary

The purpose of the IV&V Report of Project Risks and Issues is to provide an objective assessment of the overall project health of the Eligibility Determination and Enrollment System (EDES) and identified project risks and issues based on Independent Verification and Validation (IV&V) activities. Visibility into the Department of Health and Human Services (DHHS), Information Technology Services (ITS), vendor team processes, risks and issues reporting, JIRA data, and scheduling is necessary for BerryDunn to conduct this assessment. BerryDunn distributes this report to EDES project leadership and posts the report on the Centers for Medicare and Medicaid Services (CMS) Collaborative Application Lifecycle Tool (CALT).

During this reporting period, IV&V changed the Quality Management Assessment and Schedule Management Assessment from yellow to red.

Section 2.2 Quality Management Assessment documents IV&V's concern (Issue 105) that the test case execution failure rate is at 19%. IV&V has observed the Release 3 execution failure rate trend negative. IV&V is concerned that the release lacks the quality to meet State expectations. IV&V encourages the Solution Vendor and State management to conduct a root cause analysis to identify the source of the current failure rates.

IV&V maintains the Scope Management Assessment at a yellow classification, while the four other assessment areas remain classified as green.

2 IV&V Activities

2.1 This Reporting Period

IV&V activities in progress or completed during this reporting period are listed below.

- **Activity** – description of activity and findings
- **Activity** – description of activity and findings
- **Meetings**—IV&V attended project meetings to aid in assessing the health of the project. Table 2 on the next page lists the project-related meetings IV&V staff attended during this reporting period.

Table 1: Meetings Attended

Meeting Date	Meeting	Attendee(s)

2.2 Next Reporting Period

During the next reporting period, IV&V staff will monitor ongoing project activities. Specific IV&V activities planned for the upcoming week includes:

- **Activity** – description of activity and findings
- **Activity** – description of activity and findings
- **Meetings**—IV&V attended project meetings to aid in assessing the health of the project. Table 2 on the next page lists the project-related meetings IV&V staff attended during this reporting period.

Table 2: Meetings Scheduled to Attend

Meeting Date	Meeting	Attendee(s)

3 Deliverable Review Status

3.1 This Reporting Period

Table 3 below lists the status of deliverables IV&V has recently received or reviewed during the current reporting period. IV&V has submitted a summary of their analysis of the reviewed deliverables.

Table 3: PAQ-Identified or Gate Review–Related Deliverables

Deliverable	Deliverable Received	IV&V Review Status/Recommendation

3.2 Next Reporting Period

Table 4 lists the deliverables scheduled for review in the upcoming week.

Table 4: PAQ-Identified or Gate Review–Related Deliverables Scheduled for Review

Deliverable	Delivery Scheduled	IV&V Review Status

4 Updated IV&V Schedule

This section provides an outlook of tasks scheduled for the next month and highlights any tasks that may need to be rescheduled.

The updated IV&V work breakdown structure (WBS) is located in Appendix C.

5 Overall IV&V Project Assessment Dashboard

The IV&V Project Assessment Dashboard provides an “at-a-glance” look at the overall health of the project. The IV&V Assessment Areas are those identified in the IV&V Services Project Assessment Quotation (PAQ) General Requirements, Task 4, and Item 5. The color-coded matrix shows the ranking for the current reporting period, as well as the five most recent reporting periods, showing the trend of project health.

IV&V uses a series of questions, based on accepted project management practices, as guidelines in their review of each assessment area. However, their review also includes an assessment of the activities currently affecting the project. Refer to Appendix B: Overall Project Health Checklist.

IV&V bases all assessment areas on the requirements and deliverables defined in contracts negotiated with the Solution Vendors for EDES transition, maintenance, and operational support services.

5.1 Organizational Change Management Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Have organizational changes followed a documented change management approval process?
- Are organizational changes being identified, vetted, assessed, and approved/declined in an effective and timely manner?
- Are team roles and responsibilities accurately defined and documented to reflect recent developments?
- Are changes in team roles and responsibilities being communicated to stakeholders in a clear and timely manner?
- Has executive sponsorship bought in to all changes that have an impact on project objectives, costs, or schedule?
- Are there any potential improvements to assure continuous executive stakeholder buy-in, participation, support, and commitment?
- Are training needs being identified, vetted, and assessed in an effective and timely manner?
- Have training plans been developed that identify curriculum, materials, schedule, cost, and audience?
- Are there open and timely pathways of communication among all stakeholders?

5.2 Quality Management Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Is the quality of all products produced by the project being monitored through formal reviews and sign-offs?
- Does the quality management plan reflect the quality assurance activities being conducted?
- Are project self-evaluations being performed in an accurate and timely manner, and are measures being taken to improve the process?
- Are there potential improvements for the project's quality assurance plans, procedures, and organization?
- Does the QA function have an appropriate level of independence from project management?
- Does the QA function effectively monitor the fidelity of all defined processes in all phases of the project?

5.3 Resource Management Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Are any positions unfilled or understaffed?
- Is the project budget adequate for the work-breakdown structure and schedule?
- Are the job assignments, skills, training, and experience of the personnel adequate for effectively completing project tasks within planned timeframes?
- What is the rate and impact of staff turnover, and are staff replacement policies currently effective?
- Do adequate system resources exist?
- Are subcontractors and other external sources of project staff being used effectively?

- Are the obligations of subcontractors and external staff clearly defined?
- Are subcontractors maintaining the required skills, personnel, plans, resources, procedures, and standards to meet their commitment?
- Is staff time being used productively in meetings, and are meetings effectively planned?

5.4 Risk and Issue Management Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Are risks and issues being identified and quantified in a timely and accurate manner?
- Are risks and issues being resolved in a timely and accurate manner?
- Are risk/issue identifications and risk/issue responses being communicated to stakeholders in a clear and timely manner?
- Are the project issue tracking mechanisms effective in documenting issues as they arise, enabling communication of issues to proper stakeholders, documenting a mitigation strategy as appropriate, and tracking the issue to closure?
- Do schedule management and status reporting practices support critical risk mitigation and contingency-planning activities?

5.5 Schedule Management Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Does the project schedule reflect the appropriate level of detail for all aspects of the project?
- Are milestone and completion dates being planned, monitored, and met?
- Does the schedule assign adequate time for planning, development, review, testing, and rework?
- Are changes to the project schedule following the predetermined approval process?
- Have changes to the project schedule been documented in a timely and clear manner?
- Have changes to the project schedule been communicated to stakeholders in a timely and clear manner?
- Is the project plan detailed enough to evaluate the likelihood of achieving the timeline?
- Is the deliverable review/approval cycle timely and effective?
- Do decision-making and problem-solving practices facilitate timely resolutions?
- Are reviews being delayed because of poor deliverable quality?
- Are stakeholders providing BerryDunn with requested reports and documentation in a timely and accurate manner?

5.6 Scope Management Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Is the scope of the project well defined, understood, and documented?
- Is the project plan detailed enough to allow stakeholders to understand the scope of this project?
- Do recent decisions fit within documented scope plans and requirements?
- Have there been any changes in scope?
- Have scope changes followed the documented scope/change management approval process?

- If there have been changes in scope, have these changes been documented accurately and on time?
- If there have been changes in scope, have these changes been communicated to stakeholders in a timely and clear manner?
- Do deliverables reflect documented scope plans and requirements?

5.7 Technical Management Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Are the technical requirements of the systems well understood, well defined, documented, and traceable?
- Does the system comply with approved requirements and the most recent design deliverables?
- Are recent technical developments and updates being accurately documented in a timely manner?
- Do testing plans align with industry standards and build confidence in the integrity of the test process?
- Are technical measurements meeting predetermined targets?
- Does the systems architecture diagram reflect recent developments?
- Are system performance reports being submitted in a timely manner, and are they reflective of recent developments?
- Have requirement specifications been developed for all hardware and software subsystems in a sufficient level of detail to ensure successful implementation?
- Are project restrictions on system and data access creating barriers to task completion?
- Has the State accurately defined the contractor and subcontractor technical input needs and supplied these inputs on schedule?
- Do the system components work individually and, when interfaced and configured, as part of one integrated system?
- Are deliverable dates for technical plans meeting CMS deadlines?
- Are data management policies, procedures, and business rules adequately being addressed?
- Is there adequate scope and schedule planning for the technical training of all stakeholders?
- Is the security plan accurately documented, is it sufficiently detailed, and are targets being met on time?

6 Critical Risk and Issue Analysis

This section includes information about risks and issues that BerryDunn considers a priority for mitigation. The intent of this section is to increase the focus on these highlighted risks. Appendix B: Project Risks and Issues provides a full list of IV&V-identified risks and issues. All issues identified in this section are also included in Appendix B.

Appendix A: Risk and Issue Management

Risk Rating Methodology

Identified risks are assigned a rating based on the probability of the risk occurring and the impact the occurrence of the risk could have on the overall project. The first step is to assign a probability rating to the risk based on the likelihood of the risk occurring. Risks assigned a low-probability rating are considered possible, but not probable. Once the probability is determined, then the impact of the risk, should it occur, is assigned. A risk event can cause an unexpected cost, slip in the schedule, or reduction to the quality or technical performance.

Table 7: Risk Rating Matrix

Probability	Risk Level				
5 (Near Certainty)	5 – Moderate	10 – Moderate	15 – Significant	20 – Significant	25 – Significant
4 (High Likely)	4 – Minimal	8 – Moderate	12 – Moderate	16 – Significant	20 – Significant
3 (Likely)	3 – Minimal	6 – Moderate	9 – Moderate	12 – Moderate	15 – Significant
2 (Unlikely)	2 – Minimal	4 – Minimal	6 – Moderate	8 – Moderate	10 – Moderate
1 (Remote)	1 – Minimal	2 – Minimal	3 – Minimal	4 – Minimal	5 – Moderate
	1	2	3	4	5
	Impact				

After identifying and rating risks, the client must make a decision on how to proceed with managing the risks. The table below is a recommendation of the actions required based on the risk level.

Table 8: Risk Action Table

Risk Value	Risk Level	Definition
15 – 25	Significant	Major disruption likely. Change in approach required. Mitigation required. Management attention required.
5 – 12	Moderate	Some disruption. Alternative approach should be considered. Mitigation recommended. Management attention recommended.
1 – 4	Minimal	Minimal impact. Oversight required ensuring risk remains low. Mitigation not necessary.

Issue Rating Methodology

Issues are rated based on the impact to the project if the issue is not resolved and the urgency in which action must be taken. The issue rating may be updated if the criticality of the issue is reevaluated.

Table 9: Issue Rating Values

Issue Level	Description
High	The issue is preventing or may prevent mission-critical project activities from on time, on budget completion, within scope and quality parameters The issue must be immediately resolved or mitigated before related project work continues.
Medium	The issue is not currently preventing mission-critical project work from proceeding as planned, but will if not addressed or mitigated on a timely basis. Resolution must occur, but work can continue.
Low	The issue is cosmetic in nature and should be resolved, but does not have to be resolved prior to go-live.
Watch	This item has not escalated to a true risk or issue; however, there is concern and should be watched.

Risk and Issue State Response

Once IV&V assigns a rating to the risk or issue, a status must be assigned indicating the agreement with the finding. IV&V updates the status as needed.

Table 10: State Response Values

State Response	Description
TBD	Risk/issue is newly identified and action has not been decided.
Agree, mitigation needed/created	State agrees and will work to address IV&V risk/issue finding. State will provide documentation of planned actions for IV&V purposes.
Agree, no action to be taken at this time	State agrees with risk/issue finding but does not plan to address it at this time.
Disagree, not a risk/issue	State does not agree with risk/issue finding. State does not plan to take any additional actions.

Risk and Issue Status

The Status indicates the flow of the risk/issue, from the point of identification through final closure. The Status should be viewed in concert with the State Response.

Table 11: Risk and Issue Status Values

Status	Description
New	Newly identified risk/issue that has not yet been presented.
Open	Risk/issue presented to the project team but currently unresolved.
Closed	Risk/issue has reached completion and has been resolved or State determines that it is not a risk/issue. Refer to State response.
Escalated	Risk/issue has not been resolved and, after discussion with the State, a decision has been made present the risk/issue to the executive steering committee for guidance or decision.

Open Issues

ID	Title	Description	Status	Issue Ranking	Recommendation	Last Updated	Update	PMO Risk /Issue
	No open issues							

Open Risks

ID	Title	Description	Status	Mitigation Strategy	Prob.	Impact	Last updated	Update	PMO Risk/ Issue
	No open risks								

Appendix C: IV&V WBS

Updated WBS is inserted here.



(State) Eligibility Determination and Enrollment System

Services for

Independent Verification and Validation

Monthly IV&V Status Report Template

For the Period April 14, 2016 – April 28, 2016, 12:00 p.m.

Submitted by:

Karen Jones, Project Manager

BerryDunn

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**Eligibility Determination and Enrollment System
Independent Verification and Validation
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Figure 1: Version History

Version	Date	Description
V1.0	5/2/2016	Submitted version

1 Executive Summary

The purpose of the IV&V Report of Project Risks and Issues is to provide an objective assessment of the overall project health of the Eligibility Determination and Enrollment System (EDES) and identified project risks and issues based on Independent Verification and Validation (IV&V) activities. Visibility into the Department of Health and Human Services (DHHS), Information Technology Services (ITS), vendor team processes, risks and issues reporting, JIRA data, and scheduling is necessary for BerryDunn to conduct this assessment. BerryDunn distributes this report to EDES project leadership and posts the report on the Centers for Medicare and Medicaid Services (CMS) Collaborative Application Lifecycle Tool (CALT).

Statement of assessment areas that were downgraded or upgraded during this time period with an explanation.

The executive summary would contain any additions or updates to executive level risks.

2 IV&V Activities

2.1 This Reporting Period

IV&V activities in progress or completed during this reporting period are listed below.

- **Activity** – description of activity and findings
- **Activity** – description of activity and findings

2.2 Next Reporting Period

During the next reporting period, IV&V staff will monitor ongoing project activities. Specific IV&V activities planned for the upcoming week includes:

- **Activity** – description of activity and findings
- **Activity** – description of activity and findings

3 Deliverable Review Status

3.1 This Reporting Period

This section provides a summary of the deliverable reviewed by IV&V in the last month.

Table 3: PAQ-Identified or Gate Review–Related Deliverables

Deliverable	Deliverable Received	IV&V Review Status/Recommendation

4 Overall IV&V Project Assessment Dashboard

The IV&V Project Assessment Dashboard provides an “at-a-glance” look at the overall health of the project. The color-coded matrix shows the ranking for the current reporting period, as well as the five most recent reporting periods, showing the trend of project health.

IV&V uses a series of questions, based on accepted project management practices, as guidelines in their review of each assessment area. However, their review also includes an assessment of the activities currently affecting the project. Refer to Appendix B: Overall Project Health Checklist.

IV&V bases all assessment areas on the requirements and deliverables defined in contracts negotiated with the Solution Vendors for EDES transition, maintenance, and operational support services. The narrative for each section describes the basis of determination for the assessment ranking.

As part of the IV&V assessment, we will highlight differences in the assessments provided by project teams and IV&V and the reasoning for our assessment.

Table 5: Project Assessment Color-Coding Definitions

	Definition
Gray	At least one finding within this assessment area could not be determined as a result of missing documentation, planned meetings that did not occur during the reporting period, incomplete understanding of project plans, or information IV&V has been provided but has not yet had time to review.
Green	Findings within this assessment area may or may not result in risks and issues. If risks and issues do exist, agreed-upon risk mitigation and issue resolution plans are in place.
Yellow	Findings within this assessment area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory.
Red	Findings within this assessment area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory. The identified findings, risks, and issues within this assessment area from their perspective significantly affect the likelihood of project success.

Table 6: IV&V Project Assessment Dashboard

IV&V Project Assessment Dashboard						
IV&V Assessment Area	Period Beginning					
	4/14/2016	3/31/2016	3/17/2016	3/3/2016	2/18/2016	2/4/2016
1. Overall Project	Green	Green	Green	Green	Green	Green
2. Schedule	Red	Yellow	Yellow	Yellow	Yellow	Yellow
3. Budget	Green	Green	Green	Green	Green	Green
4. Scope	Green	Green	Green	Green	Green	Green
5. Quality	Red	Yellow	Yellow	Yellow	Red	Red

4.1 Overall Project Assessment

The overall project assessment takes into consideration the combined assessment of schedule, budget, scope, and quality along with supporting areas of resources, risk and issue management, and project management.

- What is the level of involvement from executive leadership?
- Are decisions made on a timely basis? Is the impact to scope or schedule due to delayed or unexpected decisions?
- Does the approach to project governance support the project goals?
- Is project leadership available to project teams to provide necessary guidance?
- Is executive leadership a strong project sponsor with the ability to move roadblocks?
- Are any of the other assessment areas of significantly more concern than others? Is that area being addressed?

4.2 Schedule Management Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Does the project schedule reflect the appropriate level of detail for all aspects of the project?
- Are milestone and completion dates being planned, monitored, and met?
- Does the schedule assign adequate time for planning, development, review, testing, and rework?
- Are changes to the project schedule following the predetermined approval process?
- Have changes to the project schedule been documented in a timely and clear manner?
- Have changes to the project schedule been communicated to stakeholders in a timely and clear manner?
- Is the project plan detailed enough to evaluate the likelihood of achieving the timeline?
- Is the deliverable review/approval cycle timely and effective?
- Do decision-making and problem-solving practices facilitate timely resolutions?
- Are reviews being delayed because of poor deliverable quality?
- Are stakeholders providing BerryDunn with requested reports and documentation in a timely and accurate manner?

4.3 Budget Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Is the amount of outstanding accounts receivable and payable directly related to the project and vendors growing?
- Are payment being withheld from the vendors? This can signify a risk to the vendor and impact their ability to retain staff and supply additional resources when needed.
- Is the project budget adequate for the work-breakdown structure and schedule?
- What is the rate and impact of staff turnover, and are staff replacement policies currently effective?
- Do adequate system resources exist?
- Are subcontractors and other external sources of project staff being used effectively?
- Are the obligations of subcontractors and external staff clearly defined?
- Are subcontractors maintaining the required skills, personnel, plans, resources, procedures, and standards to meet their commitment?
- Is staff time being used productively in meetings, and are meetings effectively planned?

4.4 Scope Management Assessment

The assessment of this area is based on the following general guidelines and is amended by project specific criteria.

- Is the scope of the project well defined, understood, and documented?
- Is the project plan detailed enough to allow stakeholders to understand the scope of this project?
- Do recent decisions fit within documented scope plans and requirements?
- Have there been any changes in scope?
- Have scope changes followed the documented scope/change management approval process?
- If there have been changes in scope, have these changes been documented accurately and on time?
- If there have been changes in scope, have these changes been communicated to stakeholders in a timely and clear manner?
- Do deliverables reflect documented scope plans and requirements?

5 Critical Risk and Issue Analysis

This section includes information about risks and issues that BerryDunn considers a priority for mitigation. The intent of this section is to increase the focus on these highlighted risks. Appendix B: Project Risks and Issues provides a full list of IV&V-identified risks and issues. All issues identified in this section are also included in Appendix B.

Appendix A: Risk and Issue Management

Risk Rating Methodology

Identified risks are assigned a rating based on the probability of the risk occurring and the impact the occurrence of the risk could have on the overall project. The first step is to assign a probability rating to the risk based on the likelihood of the risk occurring. Risks assigned a low-probability rating are considered possible, but not probable. Once the probability is determined, then the impact of the risk, should it occur, is assigned. A risk event can cause an unexpected cost, slip in the schedule, or reduction to the quality or technical performance.

Table 7: Risk Rating Matrix

Probability	Risk Level				
5 (Near Certainty)	5 – Moderate	10 – Moderate	15 – Significant	20 – Significant	25 – Significant
4 (High Likely)	4 – Minimal	8 – Moderate	12 – Moderate	16 – Significant	20 – Significant
3 (Likely)	3 – Minimal	6 – Moderate	9 – Moderate	12 – Moderate	15 – Significant
2 (Unlikely)	2 – Minimal	4 – Minimal	6 – Moderate	8 – Moderate	10 – Moderate
1 (Remote)	1 – Minimal	2 – Minimal	3 – Minimal	4 – Minimal	5 – Moderate
	1	2	3	4	5
	Impact				

After identifying and rating risks, the client must make a decision on how to proceed with managing the risks. The table below is a recommendation of the actions required based on the risk level.

Table 8: Risk Action Table

Risk Value	Risk Level	Definition
15 – 25	Significant	Major disruption likely. Change in approach required. Mitigation required. Management attention required.
5 – 12	Moderate	Some disruption. Alternative approach should be considered. Mitigation recommended. Management attention recommended.
1 – 4	Minimal	Minimal impact. Oversight required ensuring risk remains low. Mitigation not necessary.

Issue Rating Methodology

Issues are rated based on the impact to the project if the issue is not resolved and the urgency in which action must be taken. The issue rating may be updated if the criticality of the issue is reevaluated.

Table 9: Issue Rating Values

Issue Level	Description
High	The issue is preventing or may prevent mission-critical project activities from on time, on budget completion, within scope and quality parameters. The issue must be immediately resolved or mitigated before related project work continues.
Medium	The issue is not currently preventing mission-critical project work from proceeding as planned, but will if not addressed or mitigated on a timely basis. Resolution must occur, but work can continue.
Low	The issue is cosmetic in nature and should be resolved, but does not have to be resolved prior to go-live.
Watch	This item has not escalated to a true risk or issue; however, there is concern and should be watched.

Risk and Issue State Response

Once IV&V assigns a rating to the risk or issue, a status must be assigned indicating the agreement with the finding. IV&V updates the status as needed.

Table 10: State Response Values

State Response	Description
TBD	Risk/issue is newly identified and action has not been decided.
Agree, mitigation needed/created	State agrees and will work to address IV&V risk/issue finding. State will provide documentation of planned actions for IV&V purposes.
Agree, no action to be taken at this time	State agrees with risk/issue finding but does not plan to address it at this time.
Disagree, not a risk/issue	State does not agree with risk/issue finding. State does not plan to take any additional actions.

Risk and Issue Status

The Status indicates the flow of the risk/issue, from the point of identification through final closure. The Status should be viewed in concert with the State Response.

Table 11: Risk and Issue Status Values

Status	Description
New	Newly identified risk/issue that has not yet been presented.
Open	Risk/issue presented to the project team but currently unresolved.
Closed	Risk/issue has reached completion and has been resolved or State determines that it is not a risk/issue. Refer to State response.
Escalated	Risk/issue has not been resolved and, after discussion with the State, a decision has been made present the risk/issue to the executive steering committee for guidance or decision.

Open Issues

ID	Title	Description	Status	Issue Ranking	Recommendation	Last Updated	Update	PMO Risk /Issue
	No open issues							

Open Risks

ID	Title	Description	Status	Mitigation Strategy	Prob.	Impact	Last Updated	Update	PMO Risk/ Issue
	No open risks								

Appendix C: IV&V WBS

Updated WBS is inserted here.

3.1.3.iii Describe the bidder's methods for determining and reporting overall project, schedule, budget, scope, and quality status (i.e., determining whether a project is red, yellow, or green, and providing defined criteria as to what constitutes each type of status).

BerryDunn's core team of Medicaid consulting professionals is experienced in assessing and reporting on project status. BerryDunn relies on a combination of defined assessment criteria and expert judgment. Section 3.1.3.ii addresses our approach to gathering detailed information that supports our project status reporting. As part of BerryDunn's IV&V Toolkit, we will provide defined criteria for our assessment process. We will work with DHHS during project initiation Plan to define and customize our criteria as we develop the IV&V Project Management Plan.

3.1.3.iv Provide the bidder's status report templates, including instructions and procedures for completing the templates.

On the following pages, we have provided templates of the IV&V Weekly Status Report and the IV&V Monthly Status Report to correspond to the requirements outlined in the RFP. The assessment areas in the templates list the questions that are used to help assess the rating of the area. The outcome (number of questions where the respond indicates a problem and the impact of that particular question), combined with the information determined through discussions, interviews, deliverable reviews, and other analysis, we evaluate project health and set the ranking for each assessment area. Section 3.1.3 describes our overall approach.

BerryDunn brings Nebraska proven processes and procedures. We continuously refine our process to ensure that we adapt to the needs of our clients and evolve in concert with them. We welcome the opportunity to explain our approach in more detail and adjust to meet the innovative approach Nebraska has selected.



Eligibility Determination and Enrollment System

Services for

Independent Verification and Validation

Bi-Weekly IV&V Report of Project Risks and Issues

For the Period April 16, 2015 – April 30, 2015 12:00 p.m. CDT

Submitted by:

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██████████ Eligibility Determination and Enrollment System
Independent Verification and Validation
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Figure 1: Version History

Version	Date	Description
V1.0	5/4/2015	Submitted version

1 Executive Summary

The purpose of the Bi-Weekly IV&V Report of Project Risks and Issues is to provide an objective assessment of the overall project health of the ██████ Eligibility Determination and Enrollment System (the project) and identified project risks and issues based on Independent Verification and Validation (IV&V) activities. Visibility into the ██████ the State ██████ State MMIS), The solution vendor ██████ State IT) team processes, risks and issues reporting, JIRA data, and scheduling is necessary for BerryDunn to conduct this assessment. BerryDunn distributes this report to the project leadership and posts the report on the Centers for Medicare & Medicaid Services (CMS) Collaborative Application Lifecycle Tool (CALT).

IV&V evaluates the project assessment areas based on potential risk to the overall project success. The IV&V team currently classifies five of seven assessment areas as red, one as yellow, and one as green. Additionally, the Project Management Office (PMO) has assigned an overall red status to the project.

The Executive Summary focuses on the overarching risks and issues that have the most impact on project status. Addressing these concerns offers the greatest opportunities for improving project health. The primary risk that IV&V is tracking, risk 71, relates to issues resulting from the overall project management effort. Improvements to project management may help project performance and allow the team to mitigate persistent issues and risks.

IV&V had observed increased activity in Project I scope definition and scheduling; however, the overall the project management remains an area of concern. The draft roadmap, delivered April 23, 2015, extends the completion of Project I to October 2016. This exceeds the original delivery of Project I by more than two years. The PMO Council members are currently reviewing the draft roadmap and corresponding work breakdown structure (WBS) and deciding the acceptability of this proposed schedule change.

In addition to the draft roadmap, the solution vendor presented the State with three timing options for implementing the upgrade of the Solution Application product. At the April 27, 2015 Business Architecture Council (BAC) meeting, the State requested the solution vendor provide a recommendation for the upgrade timing from a perspective of business impacts. IV&V does not anticipate a decision on the roadmap or schedule until the Solution Application update implementation is decided.

IV&V continues to monitor resource management and the solution vendor's staff turnover. The State, State MMIS, and State IT have commented on the negative impact the loss of experienced staff members has on the overall project.

Report Overview

Below are summaries of IV&V's findings from the current reporting period for each section of the report. Findings can occur in multiple ways and may relate to previously identified issues or risks. When this occurs, the IV&V team updates the issue or risk to include any additional information, potential project

impacts, or additional recommendations. IV&V has noted existing issues or risks numbers throughout the report for reference in Appendix C, which lists the IV&V identified issues and risks.

Overall IV&V Project Assessment Dashboard – This week, IV&V classified five of the seven assessment areas as red. There is also one assessment area classified as yellow and one as green.

Organizational Change Management Assessment – There are no current findings associated with organizational change management.

Quality Management Assessment – IV&V performed a review of the project design document templates and noted inconsistent format and level of content detail. This may affect the quality of code development and testing.

Resource Management Assessment – State project team members have reported that the loss of project knowledge due to the solution vendor staff turnover is impacting the effectiveness of meetings and design sessions. IV&V will continue monitor staff turnover and onboarding processes.

Risk and Issue Management Assessment – IV&V has observed improvement in the closure of open action items, but open high priority issues persist. This assessment area remains yellow.

Schedule Management Assessment – The project continues to operate without an approved roadmap or project schedule. State stakeholders plan to review the roadmap and schedule documents and provide feedback to the solution vendor.

Scope Management Assessment – IV&V has observed actions aimed at strengthening scope management processes and encourages the PMO Council to incorporate approval process that will help manage scope for upcoming releases.

Technical Management Assessment – IV&V continues to classify this area as red, due in part to the high inventory of critical and major non-production bugs over one year old.

Schedule Assessment – The solution vendor delivered an updated draft of the roadmap and WBS on April 23, 2015. The schedule is currently under review by the PMO Council to determine acceptance of the proposed schedule changes.

Risk and Issue Analysis – This section of the report identifies the risk or issue consider most critical to the project success. Appendix C documents risks and issues recently opened or closed. Risks and issues in an open status with updates are also included in Appendix C.

2 Overall IV&V Project Assessment Dashboard

The IV&V Project Assessment Dashboard provides an “at-a-glance” look at the overall health of the project. The IV&V Assessment Areas are those identified in the IV&V Services Project Assessment Quotation (PAQ) General Requirements, Task 4, and Item 5. The color-coded matrix shows the ranking for the current reporting period, as well as the five most recent reporting periods, showing the trend of project health.

IV&V uses a series of questions, based on accepted project management practices, as guidelines in our review of each assessment area. However, our review also includes an assessment of the activities currently affecting the project. Refer to Appendix B Overall Project Health Checklist.

Table 1: Project Assessment Color-Coding Definitions

	Definition
Gray	At least one finding within this Assessment Area could not be determined as a result of missing documentation, planned meetings that did not occur during the reporting period, incomplete understanding of project plans, or information IV&V has been provided but has not yet had time to review.
Green	Findings within this Assessment Area may or may not result in risks and issues. If risks and issues do exist, agreed-upon risk mitigation and issue resolution plans are in place.
Yellow	Findings within this Assessment Area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory.
Red	Findings within this Assessment Area have resulted in risks and issues. BerryDunn is not aware of whether or not agreed-upon risk mitigation and issue resolution plans are in place, or does not find them satisfactory. The identified findings, risks, and issues within this Assessment Area from our perspective significantly affect the likelihood of project success.

Table 2: IV&V Project Assessment Dashboard

IV&V Project Assessment Dashboard						
IV&V Assessment Area	Bi-Weekly Period Beginning					
	04/16/2015	04/02/2015	03/19/2015	03/05/2015	02/19/2015	02/05/2015
1. Organizational Change Management	Green	Green	Green	Green	Green	Green
2. Quality Management	Red	Red	Red	Red	Red	Yellow
3. Resource Management	Red	Red	Red	Red	Red	Red
4. Risk and Issue Management	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
5. Schedule Management	Red	Red	Red	Red	Red	Red
6. Scope Management	Red	Red	Red	Red	Red	Red
7. Technical Management	Red	Red	Red	Red	Red	Red

2.1 Organizational Change Management Assessment

There are no current findings related to Organization Change Management.

2.2 Quality Management Assessment

As specified in IV&V Issue 73, IV&V reported our concerns regarding the project quality management. This issue included a recommendation for the solution vendor to conduct root cause analysis to aid in improving the project application quality. This analysis could help identify the potential source of application quality issues such as design, coding, system testing, or some combination. The solution vendor has not provided any feedback indicating that analysis has occurred or the outcome.

During this reporting period, IV&V reviewed samples of completed the project design documents for format and level of detail consistency. The Solution Application, Financials, and Plan Enrollment design documents are inconsistent in both format and content level as noted below:

- Solution Application design documents and the Financial design documents contain interface requirements, the Plan Enrollment design document does not.
- Solution Application design documents include pseudo code level specifications for some business rule definitions, but the design documents for Plan Enrollment and Financials do not.
- The table of contents for the different Solution Application design documents is inconsistent between the various design document.
- Solution Application design documents excludes “version” identification within the title page, Plan Enrollment and Financials design document includes version numbers on the title page.
- Each version of a Solution Application document is stored separately. The subsequent version of the Plan Enrollment and Financials design documents are maintained as updates to the same document.

Inconsistent design specifications may contribute to issues with coding and test case development. IV&V recommends the solution vendor and the State establish format and content level expectations and use these as criteria for approving design documents.

2.3 Resource Management Assessment

IV&V first documented the solution vendor’s high staff turnover rate (Issue 75) in October 2014. IV&V’s analysis is based on the high level of staff changes indicated on organization charts from October 15, 2014 through April 9, 2015. The April 9, 2015 chart showed a 14% staff change rate, down from 56%. State project stakeholders have reported the loss of project knowledge is impacting the effectiveness of meetings and design sessions, resulting in the need to revisit discussions and assist new staff with project orientation. On March 26, 2015, IV&V requested the solution vendor training and onboarding documentation; however, they have not provided the information as of this report. Based on the ongoing staff turnover, not having a strong training plan and cross training for critical tasks leaves the project at risk.

2.4 Risk and Issue Management Assessment

In December 2014, IV&V changed the classification of this area from green to yellow due to the high volume of open and past due risks and issues. IV&V analysis on April 14, 2015 identified five of 14 high priority issues past due. As of April 28, 2015, only one high priority issue was past due. It was noted that the due dates on five past due issues had been extended.

IV&V has observed improvement in the closing of action items. At the time of our analysis on April 14, 2015, 31 of 43 action items were past due. As of April 28, 2015, there were 11 past due action items. During the weekly management level meetings, many action items are assigned to the limited number of the solution vendor staff in attendance. As a result, numerous action items are assigned to three or four of the same the solution vendor staff. Their ability to address the action items by the determined due date may not be feasible. IV&V encourages the solution vendor to be diligent in documenting, delegating, and tracking action item assignments.

2.5 Schedule Management Assessment

The project schedule and roadmap have been in revision since mid-February 2015 when project leadership determined the Release 1.5 release was not ready to be deployed. Since this time, the project has been operating without an approved plan, leaving the project with an undefined target date and no mechanism to measure project delivery success. Without a current version of these project management tools, it is unclear how the solution vendor manages the project schedule. IV&V recommends the PMO Council agree on a plan for the review and finalization of the WBS and corresponding roadmap.

Due to project delays, the implementation of dates defined in PAQ [REDACTED], section 2.1.4 (Project I-June 30, 2014 and Project II-December 31, 2015) is not feasible. The draft roadmap shows Project I completing October 2016. It is our recommendation that the State and State IT determine the necessary steps based on [REDACTED] procurement guidelines to plan for the likelihood of contract extension or procurement.

2.6 Scope Management Assessment

As part of the effort of revising the project Roadmap and WBS, The solution vendor and State management worked together to determine the universe of functionality to be included in the Release 1.5 release and to strengthen the scope management process, which was been identified as risk in the April 20, 2015 Bi-Weekly IV&V Report of Project Risks and Issues. IV&V observed that the scope for Release 1.5 previously was not clearly defined and communicated to all project teams. This resulted in confusion regarding which the project tickets were planned for the release. The list of tickets to be included is now been agreed upon and communicated in the pre-release notes provided by the solution vendor. The PMO Council is working to refine the process for reviewing and approving scope request changes for a specific release. Such scope request changes represent the need to include a project ticket into a specific release and do not indicate a change in requirements or contracted functionality. IV&V will continue to assess this process for potential risks.

2.7 Technical Management Assessment

Production Bug Updates

IV&V reviewed the status of Production JIRA tickets to assess contract compliance as it relates to production problem resolution. Our review of the July 24, 2015 Defect Metrics workbook identified unresolved critical and major production system problems (bugs) between 10 and 303 days old. The age of these unresolved bugs suggests they exceed the contract terms as specified in Requirement CCM-6 (Attachment 4 – Technical Requirements, Request for Proposal (RFP [REDACTED])), which specifies that serious and significant production issues be resolved within five business days. Without the establishment of a schedule for problem resolution, the State and The solution vendor are at risk of being non-compliant with the terms of RFP [REDACTED].

SIT Exit Criteria

The Master Test Plan Version 6.2 delivered on March 4, 2015 outlines exit criteria for System Integration Testing (SIT) requiring that “No Severity 1 and 2 outstanding defects” remain before proceeding to UAT. The solution vendor has not been held to this standard for past deliveries. IV&V recommends the PMO Council review the SIT exit criteria and update the Master Test Plan to reflect the accepted exit criteria or work with the solution vendor to determine an approach to bring the process into compliance.

3 Schedule Assessment

On April 23, 2015, the solution vendor released a draft roadmap and WBS. These documents are currently under review by the State, State MMIS, State IT, PMO, and IV&V. IV&V concentrated schedule assessment activities on the areas below for this reporting period.

- **Plan Enrollment and Financials.** IV&V has conducted a preliminary review of the roadmap and WBS documents and noted that UAT for Release R1.5 and UAT for Plan Enrollment/ Financials (Release R1.8) overlap. As a result, State MMIS staff resources and systems testing resources may have scheduling conflicts, placing the completion of the plan as scheduled at risk.
- **Release 1.5** – IV&V is reviewing the roadmap and WBS, documenting any concerns prior to approval.
- **COLA and FPL** – Based on observations from COLA/FPL status meetings and input received during discussions with the State staff, this effort remains on schedule. However, technical issues with the UAT environment encountered the week of April 27, 2015 place the May 4, 2015 implementation date for COLA/FPL at risk. To complete UAT by this date may require State and The solution vendor staff to work the weekend of May 2, 2015.

4 Risk and Issue Analysis

This section includes information about risks and issues that BerryDunn considers to be of the highest priority for mitigation. The intent of this section is to increase the focus on these highlighted risks. Appendix C: Project Risks and Issues provide a full list of IV&V-identified risks and issues. All issues identified in Section 4 are also included in Appendix C.

IV&V may report risks and issues similar to those identified by the PMO. The column, “PMO Related Risk/Issues” provides a cross-reference to the PMO-managed risk and issue list maintained on the project SharePoint site. Cross-referenced items address similar issues, though the descriptions may be slightly different. For conciseness, once an item has been cross-referenced, it will not necessarily be included in the Bi-Weekly IV&V Report of Project Risks and Issues, but IV&V will address the issue as part of the larger project risk and issue discussions. However, IV&V may reintroduce the item in this report if the risk/issue warrants additional attention.

IV&V considers the risk described below as the most critical during this reporting period.

Risk 71: Inadequate project management practices. The solution vendor has not incorporated accepted project management practices into the day-to-day operations of the project. Missed delivery dates (Issue 72), quality issues (Issue 73), poor project communications (Risk 74), and resource turnover (Issue 75) are systematic of a lack of project management structure and discipline.

The project is at risk of not successfully completing Project I (MAGI) and Project II (Non-MAGI) implementation. Recalculate missed project dates and determine the corresponding project budget impact.

Recommendation: Implementing the recommendations for Issue 72, 73, and 75 and Risk 74 would be a first step in reducing the risk related to this issue.

Update (4/27/2015): Risk probability unchanged. Risk remains open. IV&V will continue to monitor.

Appendix A: Risk and Issue Management

Risk Rating Methodology

Identified risks are assigned a rating based on the probability of the risk occurring and the impact the occurrence of the risk could have on the overall project. The first step is to assign a probability rating to the risk based on the likelihood of the risk occurring. Risks that are possible but not probable are assigned a low probability rating. Once the probability is determined, then the impact of the risk, should it occur, is assigned. A risk event can cause an unexpected cost, slip in the schedule, or reduction to the quality or technical performance.

Table 3: Risk Rating Matrix

Probability	Risk Level				
5 (Near Certainty)	5 – Moderate	10 – Moderate	15 – Significant	20 – Significant	25 – Significant
4 (High Likely)	4 – Minimal	8 – Moderate	12 – Moderate	16 – Significant	20 – Significant
3 (Likely)	3 – Minimal	6 – Moderate	9 – Moderate	12 – Moderate	15 – Significant
2 (Unlikely)	2 – Minimal	4 – Minimal	6 – Moderate	8 – Moderate	10 – Moderate
1 (Remote)	1 – Minimal	2 – Minimal	3 – Minimal	4 – Minimal	5 – Moderate
	1	2	3	4	5
	Impact				

After identifying and rating risks, a decision must be made on how to proceed with managing the risks. The table below is a recommendation of the actions required based on the risk level.

Table 4: Risk Action Table

Risk Value	Risk Level	Definition
15 – 25	Significant	Major disruption likely. Change in approach required. Mitigation required. Management attention required.
5 – 12	Moderate	Some disruption. Alternative approach should be considered. Mitigation recommended. Management attention recommended.
1 – 4	Minimal	Minimal impact. Oversight required ensuring risk remains low. Mitigation not necessary.

Issue Rating Methodology

Issues are rated based on the impact to the project if the issue is not resolved and the urgency in which action must be taken. The issue rating may be updated if the criticality of the issue is reevaluated.

Table 5: Issue Rating Values

Issue Level	Description
High	The issue is preventing or may prevent mission-critical project activities from being completed on time, on budget, and/or within scope and quality parameters, and must be immediately resolved or mitigated before related project work continues.
Medium	The issue is not currently preventing mission-critical project work from proceeding as planned, but will if it is not addressed or mitigated on a timely basis. Resolution must occur, but work can continue.
Low	The issue is cosmetic in nature and should be resolved, but does not have to be resolved prior to Go-live.
Watch	While this item has not escalated to a true risk or issue, it is of concern and should be watched.

Risk and Issue State Response

Once a rating has been assigned to the risk or issue, a status must be assigned indicating the agreement with the finding. The status is updated as needed.

Table 6: State Response Values

State Response	Description
TBD	Risk/issue is newly identified and action has not been decided.
Agree, mitigation needed/created	State agrees with risk/issue finding and will address it. State will provide documentation of planned actions for IV&V purposes.
Agree, no action to be taken at this time	State agrees with risk/issue finding but does not plan to address it at this time.
Disagree, not a risk/issue	State does not agree with risk/issue finding. No actions will be taken.

Risk and Issue Status

The Status indicates the flow of the risk/issue, from the point of identification through final closure. The Status should be viewed in concert with the State Response.

Table 7: Risk and Issue Status Values

Status	Description
New	Newly identified Risk/issue that has not yet been presented.
Open	Risk/issue presented to the project team but currently unresolved.
Closed	Risk/issue has reached completion and has either been resolved or State determines that it is not a risk/issue. Refer to State Response.
Escalated	Risk/issue has not been resolved and, after discussion with the State, has been presented to the Executive Steering Committee.

Appendix B: Overall Project Health Checklist

Table 8: Assessment Area Checklist

Organizational Change Management
Have organizational changes followed a documented change management approval process?
Are organizational changes being identified, vetted, assessed, and approved/declined in an effective and timely manner?
Are team roles and responsibilities accurately defined and documented to reflect recent developments?
Are changes in team roles and responsibilities being communicated to stakeholders in a clear and timely manner?
Has executive sponsorship bought in to all changes that have an impact on project objectives, costs, or schedule?
Are there any potential improvements to assure continuous executive stakeholder buy-in, participation, support, and commitment?
Are training needs being identified, vetted, and assessed in an effective and timely manner?
Have training plans been developed that identify curriculum, materials, schedule, cost, and audience?
Are there open and timely pathways of communication among all stakeholders?
Quality Management
Is the quality of all products produced by the project being monitored through formal reviews and sign-offs?
Does the Quality Management Plan reflect the Quality Assurance activities being conducted?
Are project self-evaluations being performed in an accurate and timely manner, and are measures being taken to improve the process?
Are there potential improvements for the project's Quality Assurance plans, procedures, and organization?
Does the QA function have an appropriate level of independence from project management?
Does the QA function effectively monitor the fidelity of all defined processes in all phases of the project?

Resource Management
Are any positions unfilled or understaffed?
Is the project budget adequate for the work-breakdown structure and schedule?
Are the job assignments, skills, training, and experience of the personnel adequate for effectively completing project tasks within planned timeframes?
What is the rate and impact of staff turnover, and are staff replacement policies currently effective?
Do adequate system resources exist?
Are sub-contractors and other external sources of project staff being used effectively?
Are the obligations of sub-contractors and external staff clearly defined?
Are sub-contractors maintaining the required skills, personnel, plans, resources, procedures, and standards to meet their commitment?
Is staff time being used productively in meetings, and are meetings effectively planned?
Risk/Issue Management
Are risks and issues being identified and quantified in a timely and accurate manner?
Are risks and issues being resolved in a timely and accurate manner?
Are risk/issue identifications and risk/issue responses being communicated to stakeholders in a clear and timely manner?
Are the project issue tracking mechanisms effective in documenting issues as they arise, enabling communication of issues to proper stakeholders, documenting a mitigation strategy as appropriate, and tracking the issue to closure?
Do schedule management and status reporting practices support critical risk mitigation and contingency planning activities?

Schedule Management
Does the project schedule reflect the appropriate level of detail for all aspects of the project?
Are milestone and completion dates being planned, monitored, and met?
Does the schedule assign adequate time for planning, development, review, testing, and rework?
Are changes to the project schedule following the predetermined approval process?
Have changes to the project schedule been documented in a timely and clear manner?
Have changes to the project schedule been communicated to stakeholders in a timely and clear manner?
Is the project plan detailed enough to evaluate the likelihood of achieving the timeline?
Is the Deliverable Review/Approval cycle timely and effective?
Do decision making and problem solving practices facilitate timely resolutions?
Are reviews being delayed because of poor deliverable quality?
Are stakeholders providing BerryDunn with requested reports and documentation in a timely and accurate manner?
Are meetings effectively focusing key decision-makers on problem solving, and are their formats efficient?
Scope Management
Is the scope of the project well defined, understood, and documented?
Is the project plan detailed enough to allow stakeholders to understand the scope of this project?
Do recent decisions fit within documented scope plans and requirements?
Have there been any changes in scope?
Have scope changes followed the documented scope/change management approval process?
If there have been changes in scope, have these changes been documented accurately and on time?
If there have been changes in scope, have these changes been communicated to stakeholders in a timely and clear manner?
Do deliverables reflect documented scope plans and requirements?

Technical Management
Are the technical requirements of the systems well understood, well defined, documented, and traceable?
Does the system comply with approved requirements and the most recent design deliverables?
Are recent technical developments and updates being accurately documented in a timely manner?
Do testing plans align with industry standards and build confidence in the integrity of the test process?
Are technical measurements meeting predetermined targets?
Does the systems architecture diagram reflect recent developments?
Are system performance reports being submitted in a timely manner, and are they reflective of recent developments?
Have requirement specifications been developed for all hardware and software subsystems in a sufficient level of detail to ensure successful implementation?
Are project restrictions on system and data access creating barriers to task completion?
Has the State accurately defined the technical inputs the contactor and subcontractors need and supplied these inputs on schedule?
Do the system components work individually and, when interfaced and configured, as part of one integrated system?
Are deliverable dates for technical plans meeting CMS deadlines?
Are data management policies, procedures, and business rules adequately being addressed?
Is there adequate scope and schedule planning for the technical training of all stakeholders?
Is the security plan accurately documented, is it sufficiently detailed, and are targets being met on time?

Appendix C: Project Risks and Issues

The following tables document new risks and issues identified in this reporting period, risks and issues closed during this reporting period, and risk and issues that remain open. The intent is to review this list with project management and determine a ranking and mitigation strategy. Appendix A: Risk and Issue Management explains BerryDunn’s approach to risk and issue status and rating. Note: only the most recent update is included in this report. IV&V will provide a complete list of updates upon request.

New Issues for Reporting Period

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
	No issues opened							

New Risks for Reporting Period

ID	Title	Description	Status	Mitigation Strategy	Probability	Impact	Updated	Update	PMO Risk/Issue
	No risks opened								

Issues Closed During This Period

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
45	Different Naming Conventions used on the Roadmap, JIRA, Deploy Schedule, and Release Notes	IV&V has been tracking a release within the following tools: Roadmap, JIRA, Deployment Schedule and Release Notes. Our research indicates that naming conventions used within each of these toolsets, describing the same body of work, is often different. One example includes the use of Release 1.5 vs [REDACTED]. This creates confusion for project stakeholders when tracking a body of work thru the Software Development Life Cycle.	Closed	Low	The Roadmap, JIRA, Deployment Schedule and Release Notes are primary communication tools between The solution vendor and the other the project stakeholders. IV&V recommends that The solution vendor evaluate the process for naming conventions of a body of work and apply it uniformly across all tools to ensure the proper clarity.	4/27/2015	Improvement observed. Release number and name are being tracked on the project Roadmap and subsequent references made to JIRA, release notes, and schedules. IV&V is closing issue.	

Risks Closed During This Period

ID	Title	Description	Status	Mitigation Strategy	Probability	Impact	Updated	Update	PMO Risk/Issue
	No Risks Closed								

Open Issues

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
41	Project schedule conflicts exist between the contract, the Executive Steering Committee approved schedule, and the solution vendor Roadmap	The current project delivery dates do not align with the delivery dates as outlined in the contract or the delivery dates approved by the Executive Steering Committee. The disagreement on scheduled delivery dates is indicative of a lack of cohesiveness among the stakeholders and agreed upon objectives. Without an aligned project plan, it is impossible to assess whether the project team can achieve project completion by December 2015.	Open	High	The PMO Council should reach consensus to delivery dates that align with the project objective. Performance measurements and escalation procedures should be established and enacted at the first indication of delay.	4/15/2015	An amended contract with The solution vendor remains pending.	Risk 71, Issue 85, Issue 86, Issue 92
47	The project design documentation is absent and/or lacks depth.	The absence of design documentation or the lack of detail contained in the project design documentation can cause delays in the project schedule. The SIT Manager indicated that the SIT team has had to seek out the missing information to complete SIT activities.	Open	High	The project team should develop procedures to ensure that the project documentation is available to all the project stakeholders. Additionally, the project team should consider allocating a portion of the business analyst time involved in the project design process to support the SIT team. This	4/27/2015	The PMO conducted a meeting with The solution vendor on April 21, 2015 to discuss the project document management process. PMO requested a review of all design document	Issue 129

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
					will help ensure the SIT team has a clear understanding of the design so that planning of SIT activities can occur.		templates. IV&V will continue to monitor.	
50	Timely Delivery of Comprehensive Deployment Schedule	The UAT team considers the deployment schedule delivered by The solution vendor to be a critical artifact used in the UAT planning process. November 17, 2014 was the last deployment schedule delivered by The solution vendor. Without receipt of a comprehensive deployment schedule, the UAT team and other project stakeholders will have difficulty in planning and forecasting delivery dates of their project activities.	Open	High	The project team should develop processes, which outline the expectations regarding the content, frequency and delivery of the Deployment Schedule.	4/27/2015	The solution vendor delivered an updated roadmap on April 23, 2015 with projected UAT delivery dates included. However, The solution vendor has not recently delivered a deployment schedule.	
56	The State's JIRA is not being used to log production JIRA tickets, which conflicts with requirement CCM-9 found in RFP	State staff has limited access to information regarding production issues because The solution vendor's JIRA is the tool used to record production tickets. This provides no visibility into the critical and major production the project bugs.	Open	High	Per contract requirement CCM-9, The solution vendor should move ██████'s production JIRA tickets to the State's repository.	4/15/2015	No additional progress noted. IV&V will continue to monitor.	Issue 114

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
	Attachment #4.							
64	The project architectural documentation is deficient.	The IV&V the project Architecture Assessment identified instances of missing, incomplete, or outdated architectural documentation. Additional observations concluded that the architectural review found that content within the System Design Document (SDD) and the Disaster Recovery Plan (DRP) was inconsistent. The absence of accurate, up-to-date architectural material specific to the project may cause ambiguity and confusion for the solution vendor and State architects planning for the project modifications. This may delay design or result in improperly designed the project systems.	Open	High	The project team should develop an authoritative listing of key the project architectural material. The authoritative material should be brought up-to-date or created if missing. All documents should be approved by the appropriate the project stakeholders and posted to the project SharePoint. On an ongoing basis, the project team should apply timely revisions to the documentation as architectural changes are introduced to help ensure that there is a clear, up-to-date understanding of the technical components of the project.	4/27/2015	The solution vendor has a new solution architect, who will be on-site in the Jefferson City office the week of April 20, 2015.	Issue 133
66	The project planning documents do not sufficiently capture	The effort required to update architectural documentation needs to be planned. Without capturing the task and time	Open	High	The project team should develop project plans that clearly reflect the activity and effort involved in	4/27/2015	The solution vendor has a new solution architect, who will be on-	Issue 133

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
	architectural documentation deliverables.	involved in updating or creating these materials, the documentation activity will not occur or will become an afterthought. This practice will result in architectural material that is out of date and not reflective of what is in production.			bringing architectural documentation up-to-date with each the project production deploy. Architectural documentation should be updated, approved and distributed concurrent with UAT activities. This will help ensure that current documentation is available to the project team immediately upon implementation.		site in the Jefferson City office the week of April 20, 2015.	
67	The [REDACTED] WebSphere Service Registry and Repository product is not being utilized as the project service catalog.	A service catalog should contain the authoritative listing of the System Oriented Architecture (SOA) services inventory for the project and include both the connection information and interface definitions for how a service functions and used to communicate on the Enterprise Service Bus (ESB). Absence of such a listing may weaken tracking and modification of the project services and limit	Open	High	The solution vendor should utilize the capabilities of the [REDACTED] WebSphere Service Registry and Repository product to create the project service catalog to track service changes, which will help strengthen governance and improve service reporting within the project.	4/27/2015	PMO Issue 135 reassigned from Lisa Smith to Keith Huhn. The solution vendor is to complete the project services catalog inventory and post to State IT secure drive by April 30, 2015.	Issue 135

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
		stakeholder visibility of such services.						
69	State IT technical staff have indicated that limited architectural information is available to them which may contribute to project delays in design, development and testing.	<p>IV&V suggests that elevated collaboration and information sharing between The solution vendor and State technical staff could be strengthened, providing State IT a clearer understanding of the project technical architecture, services flows, networks, etc.</p> <p>The State IT team needs to understand the current the project technical environment to evaluate the impact of future architectural designs. Additionally, lack of sufficient notice of upcoming modifications, hampers State architect's ability to provide feedback and fully test the system prior to deployment to production.</p>	Open	High	The project team should consider augmenting the solution vendor technical team with State IT technical experts. Recommended activities for State IT architects could include; participation in technical design sessions; review of "to be" technical solutions; or creation and review of test cases and SIT test results. Further, it is recommended that The solution vendor present their SIT approach to State staff for the key technical processes to help ensure all testing considerations are accounted for in the end-to-end testing approach.	4/27/2015	Training of State IT staff on Solution Application software is underway. Assessment of progress will occur the week of May 18, 2015.	Issue 136
72	Missed the project delivery dates.	The project repeatedly failed to meet scheduled delivery dates as indicated in JIRA tickets, WBS documents, and roadmaps. Missing delivery dates can	Open	High	We encourage project stakeholders to conduct a root cause analysis to determine why dates are continually missed. In order	4/28/2015	The project Release 1.4.1 is scheduled for implementation by the week of	

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
		generate the need to create mitigation plans for both The solution vendor and State activities. Mitigation plans may include unplanned workarounds that may place the health of the project at further risk. The project is pushed to operate in a reactionary mode and often forced to make difficult decisions to allow inadequately tested or flawed code to be implemented to meet a deadline, resulting in further clean up. Continued missed delivery dates may contribute to a decrease in State trust and confidence in The solution vendor's ability to meet both short and long-term project objectives.			to meet scheduled delivery dates, the design, scope, and any specific deadlines must be clearly identified. Estimates for resources and duration cannot be accurately calculated until this information is known. We recommend The solution vendor, the PMO, and State management work together to develop accurate estimates and subsequent schedules. This will help set expectations and identify critical integration touch points or deadlines. Frequent project status information is needed to quickly identify and address any potential roadblocks. The process should be continually refined to improve the estimating accuracy.		April 11, 2015 and the Prod Fix 5 release is scheduled for implementation on June 1, 2015. IV&V will monitor the progress of these two releases to assess potential improvements in meeting project delivery dates, resulting from revised The solution vendor project management methods.	
73	High volume of bug defects in production and UAT	IV&V has observed a continued high defect rate in production and UAT. Contributing to the	Open	High	The solution vendor team should conduct a root cause analysis to identify the	4/15/2015	No noted improvements. IV&V will	Issue 94

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
		<p>defects may be unknown or poorly defined requirements, incomplete design, poor coding, poor estimation techniques and insufficient testing. The lack of communication between the external entities (The solution vendor, the State, and State MMIS) and internal communication among The solution vendor teams appears to influence quality outcomes. IV&V suspects that System Integration Testing (SIT) executes without an understanding of State policies and expected outcomes, and results go unconfirmed by UAT. Quality problems go undetected until UAT, which contributes to missed delivery dates. The State must decide to accept the deployment of code with known bugs or delay implementation and forfeit schedule commitments.</p>			<p>issues which impact the quality of functionality delivered to UAT. Consideration should be given to implementing gate reviews that define entrance/exit criteria for each of the Software Development Life Cycle (SDLC) phases. Business Analysts and/or Subject Matter Experts should be fully engaged to help ensure design is correct and understood. The project team should develop and document a process that addresses the elements that lead to testing failures. Definition, calculation, and agreement of acceptable defect measurements are essential in measuring quality improvements. Communication of acceptable thresholds is essential.</p>		<p>continue to monitor.</p>	

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
75	The project is negatively impacted by The solution vendor high staff turnover rate.	IV&V has documented a high turnover rate of The solution vendor staff beginning in September 2014. The December 17, 2014 organization chart compared to the February 19, 2015 organization chart shows a 56% staff change rate with 45 additions and 29 losses. The effect on the project includes staff orientation time, lost project knowledge and loss of experience. The State project teams have complained about the need to answer previously addressed questions and revisit policy explanations and design decisions. Transition procedures do not address the loss of project knowledge and consistency.	Open	High	The solution vendor team should take immediate action to stabilize the project resources. We recommend analysis of the resignation or termination reasons to help identify modifications to recruiting. Orientation processes should be reviewed to ensure that staff understand the project and are prepared to collaborate with state staff. Development of transition and on-boarding procedures may help to mitigate the impact of staff turnover. The State and State MMIS should exercise the review and staff reassignment and replacement procedures outlined in the RFP Section 4.20 to help ensure staff replacement meet the necessary qualifications. The solution vendor should provide an updated	4/27/2015	Delivery of the next The solution vendor organization chart is the week of May 11, 2015. IV&V will continue to monitor.	Issue 93

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
					organization chart on a consistent basis.			
34	Solution Application Testing	<p>Testing in Solution Application must successfully complete for the following CMS tests:</p> <ul style="list-style-type: none"> • H3 - SSA Compliance • H4 - Verify Lawful Presence • H7 - VLP Close Case • H8 - Verify Current Household Income • H9- Verify Household Income and Family Size • H14 - MEC ESI • H31 - Employee MEC. <p>As of January 17, 2014, only the Middleware for the above referenced CMS Tests are successfully completed. Full successful testing, per CMS, must include Solution Application testing. On January 17, 2014, Solution Application testing for all above referenced tests was scheduled. According to The solution vendor, a bug discovered in the Development</p>	Open	Medium	The solution vendor should work with CMS to isolate and work through the identified bugs. Doing so would allow The solution vendor to develop a fix to help Solution Application function properly and allow testing to be successful.	4/27/2015	The project roadmap delivered by The solution vendor on April 23, 2015 indicated IV&V observation/UAT for H9, H14, and H31 begins the week of September 7, 2015. IV&V will continue to monitor.	Issue 44



ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
		<p>environment cancelled testing. The solution vendor was unable to determine whether the bug was on their end or CMS'. Testing resumes during the week of January 20, 2014.</p> <p>On January 30, 2014, Solution Application testing resulted with an unexpected error arising on the first test, suspending testing. The solution vendor is working with CMS to determine exactly what the error was and to resolve this issue. Per The solution vendor, as of February 5, 2014 the issue remains unresolved.</p> <p>The inability to complete these tests impacts automated verification of application information.</p>						
59	Clearly defined and agreed upon testing methodologies of the production support JIRA tickets is not present. The solution vendor	The lack of a mutually agreed upon testing methodology for production support tickets results in testing expectations conflicts. This may jeopardize the production release timelines and	Open	Medium	The solution vendor and the State should develop, document and formalize the testing methodology for the production support tickets and share with the project stakeholders.	4/28/2015	IV&V has completed review of the project Master Test Plan and recommends modifications; findings provided	Issue 124

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
	promotes "break fix" testing of production tickets while the State promotes comprehensive UAT.	the quality of the project product as UAT rejects test results.					to The solution vendor and PMO.	
65	Despite the institution of a Technical Architecture Council (TAC), it appears that the project does not have a structured architectural review and approval process for implementing architectural change	IV&V review of the Technical Architecture Council Charter_V2.doc dated June 14, 2013, indicates that the TAC is a forum for managing the architecture of the project enterprise and an avenue to address technical related items. Discussion with State IT personnel revealed that the TAC has no architectural approval authority and merely functions as an entry point into the State's architectural escalation process. The TAC body was not intended to function in a capacity whereby all authoritative the project architectural design and changes were formally reviewed and approved.	Open	Medium	The project team should modify the TAC Charter to accurately reflect the role of the TAC committee and the architectural review process to be followed. Formalized engagement of key technical stakeholders from The solution vendor and State IT will help ensure collaborative architectural decision-making across the project team	4/27/2015	PMO Issue 137 indicates updates to the TAC Charter are due May 7, 2015. IV&V will continue to monitor.	Issue 137

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
68	An inventory listing of all current Interface Control Documents (ICDs) for the project is absent.	<p>The IV&V the project Architecture Assessment revealed the absence of a comprehensive, current the project ICD listing. In today's environment, various scans of JIRA and SharePoint are necessary to get a complete picture of all interfaces impacted by an impending change. This may present design delays as well as cause uncertainty in determining which ICDs is the most up-to-date.</p> <p>Developers will spend time researching impending change to the project interfaces if an inventory listing of ICDs is not available. This may result in misidentification of an interface that needs to be changed, causing delays in design.</p>	Open	Medium	The project team should create and maintain an inventory listing of all current ICDs as the project interfaces are changed and added. The listing should be available to the project state project team on the project SharePoint site or State JIRA.	4/27/2015	<p>IV&V review of the cross reference file posted to SharePoint shows inaccuracy of content.</p> <p>Examples include:</p> <p>1) INT-9, the ICD named "ICD - the project-282 - DOLIR Income Match - Employment History" is not linked to JIRA the project-2680 as indicated in the spreadsheet; 2) INT-10, the ICD named "ICD Design INT-10/F-10.1" is not linked to JIRA the project-816 or the project-287 as indicated in the spreadsheet.</p> <p>IV&V has shared</p>	Issue 138

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
							with PMO. Issue will remain open.	
61	Project Schedule Maintenance	<p>Although schedules (MS Project WBSs) have been created to plan the project 1 activities (e.g., MAGI Release 3, Plan Selection and Financials, State MMIS, the State, etc.) these schedules are not being updated regularly with actual results. The State-driven WBSs (the State, State MMIS and State IT) are not in alignment with the most recent the project Roadmap (last updated on January 6, 2015). IV&V recommends updating each the project WBS weekly.</p> <p>In addition, when WBS updates indicate projected delays, project managers would report potential delays in a timely manner, again weekly, to State and The solution vendor management to help assess the effect on the project Roadmap.</p> <p>This issue consolidates and adapts Issues 30 and 35, to address in part the termination</p>	Open	N/A	State and The solution vendor project managers are recommended to meet weekly to discuss progress and to agree to tasks status, then in turn apply to appropriate WBS.	4/28/2015	The solution vendor distributed a revised the project Roadmap and the project Master WBS Plan on April 23, 2015. State management is reviewing these new documents, with signoff pending assessing the impact of implementing a new release of Solution Application (Version 6.0.5.6). The State management has requested The solution vendor to present their recommended	

ID	Title	Description	Status	Issue Ranking	Recommendation	Updated	Update	PMO Risk/Issue
		of Agile methodologies and the improvement WBS detail previously reported as issues.					implementation approach.	
63	Contractually Required The solution vendor Deliverables Including System Documentation Not Provided	IV&V began reporting in our December 15, 2014 Bi-Weekly Report of Risks and Issues on missing contractually required The solution vendor deliverables, including System Documentation. The PMO began including this listing in their PMO Council Metrics Report on November 7, 2014.	Open		The solution vendor and State project management should take steps to bring the delivery of documentation and other deliverables in alignment with the contract.	4/15/2015	All preceding IV&V comments remain applicable. We will not provide further comment until the receipt of the documentation referenced by this issue.	

Open Risks

ID	Title	Description	Status	Mitigation Strategy	Probability	Impact	Updated	Update	PMO Risk/Issue
44	Annual Renewals/Reinvestigations	Annual renewals/reinvestigation volume and workload may exceed the State's ability to be current by December 31, 2014. State and The solution vendor project management has established contingency plans to accommodate the absence of the project	Open	Discuss with Jerry Patton the plan and status for preparing a contingency strategy.	Likely	Medium	4/28/2015	Further updates to this risk will not be made until the implementation of the project Release 1.5 (Release 1.5), which is scheduled for the	Issue 84

ID	Title	Description	Status	Mitigation Strategy	Probability	Impact	Updated	Update	PMO Risk/Issue
		functionality required to process renewals/reinvestigations. Due to the critical nature of this activity, the project management will monitor this activity closely, with IV&V periodically checking the progress of this effort.						week of September 21, 2015.	
60	Training and/or documentation for the Maintenance and Operations component of the project system does not exist.	The State has not received training on the day-to-day maintenance and operation of the project system. Documentation is not available.	Open	The State should consider integrating State staff into the production support team in an effort to acquire knowledge in all facets of the project operations. This will help ensure the State is knowledgeable in the Maintenance and Operations of the project should contractual relationships be severed.	High Likely	High	4/15/2015	No evidence to support mitigation of risk. IV&V will continue to monitor.	
70	The State is at risk for exposing	The project solution does not provide for database-level	Open	The solution vendor team should	Unlikely	High	4/27/2015	The production Solution	Risk 104

ID	Title	Description	Status	Mitigation Strategy	Probability	Impact	Updated	Update	PMO Risk/Issue
	personally identifiable information (PII) and personal health information (PHI).	<p>encryption on the staging and production environments. This is a contractual requirement of the project integrator and is included in Attachment 4 – Technical Requirements, Section 13, Privacy and Security, of RFP [REDACTED].</p> <p>The solution vendor is providing encryption of data in transit. The solution vendor indicated they could not obtain capable resource to implement data at rest services. As a result, State IT is providing the software and encryption services for data at rest.</p>		implement database-level encryption to the staging and production environments.				<p>Application database had encryption at rest applied on April 19, 2015.</p> <p>Encryption at rest remains outstanding on three production environments including FileNet, Hadoop servers, and database backups. IV&V will continue to monitor.</p>	

ID	Title	Description	Status	Mitigation Strategy	Probability	Impact	Updated	Update	PMO Risk/Issue
71	Inadequate project management practices	The solution vendor has not incorporated accepted project management practices into the day-to-day operations of the project. Missed delivery dates (Issue 72), quality issues (Issue 73), poor project communications (Risk 74), and resource turnover (Issue 75) are systematic of a lack of project management structure and discipline.	Open	The project is at risk of not successfully completing Project I (MAGI) and Project II (Non-MAGI) implementation. The project dates have already been missed and need to be recalculated. The corresponding project budget will be impacted as well. Implementing the recommendations for Issue 72, 73 and 75 and Risk 74 would be a first step to reducing the risk related to this issue.	Likely	High	4/27/2015	Risk probability unchanged. Risk remains open. IV&V will continue to monitor.	
74	Miscommunication among project stakeholders impacts responsiveness	The project approach to communication may result in incomplete information and miscommunication. This may impact the projects ability to make informed decisions and be responsive to project	Open	The lack of sufficient client communication protocols presents confusion and misunderstanding, distracting the teams from focusing on	High Likely	Medium	4/15/2015	No noted improvement. IV&V will continue to monitor.	



ID	Title	Description	Status	Mitigation Strategy	Probability	Impact	Updated	Update	PMO Risk/Issue
		<p>stakeholders. IV&V has observed the following: Multiple The solution vendor staff deliver the project status updates, each of which is influenced by the person's exposure to the overall project and their area of focus.</p> <p>Identifying the contents of a specific release is challenging for the State and State MMIS. Planning documents become obsolete without being updated and distributed. Changes to the release contents may change without client input.</p> <p>Status reports and progress reports on specific activities are delivered sporadically and with no consistent distribution list. Updates to complex tracking efforts such as account transfer are often delivered verbally, making it difficult to compare information and track progress.</p>		<p>critical implementation activities and putting the project schedule at risk.</p> <p>The solution vendor team should develop comprehensive client communication protocols. This may require an evaluation of the Communication Management Plan for needed enhancements including identification of roles and responsibilities. Written documentation procedures should specify definition of templates, headers, footer, versioning, etc. Affected project team members should be included in rollout of updated procedures and protocols.</p>					



ID	Title	Description	Status	Mitigation Strategy	Probability	Impact	Updated	Update	PMO Risk/Issue
		Document templates often do not include basic identifying information such as header, footer, page number, creation date, revision history, and version tracking.		Documentation that does not meet the basic requirements should be returned for correction.					



Eligibility Determination and Enrollment System

Services for
Independent Verification and Validation

Biweekly Status Report of IV&V Services

For the Period: April 21, 2016 – May 5, 2016, 12:00 p.m.

Submitted by:
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**Eligibility Determination and Enrollment System (EDES)
Independent Verification and Validation**

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Table 1: Version History

Version	Date	Description
V1.0	5/9/2016	Submitted

1 Executive Summary

The Biweekly Status Report of Independent Verification and Validation (IV&V) Services documents information related to IV&V activities performed and deliverables submitted and approved, as well as risks and issues influencing the provision of IV&V services. The Biweekly IV&V Report of Project Risks and Issues, delivered every other week on an alternating basis with this Biweekly Status Report, separately addresses risks and issues related to the Missouri Eligibility Determination and Enrollment System (EDES) project. IV&V distributes this report to EDES project leadership and posts the report on the Centers for Medicare and Medicaid Services (CMS) Collaborative Application Lifecycle Tool (CALT). To encourage timely mitigation, IV&V reports recently identified high-priority risks and issues in this report.

IV&V collaborates with EDES stakeholders—such as the State Eligibility Agency (SEA), Medicaid HealthNet Division (MHD), Information Technology (IT), and Project Management Office (PMO) Council—and the solution vendors in the success of the EDES project. In their IV&V role, since their objective is to identify project risks, issues, and strategies that require attention, many of their observations and comments are critical in nature. Their findings generally omit strengths they may identify during the reporting period.

IV&V Project Management

During the current reporting period—April 21, 2016, through May 5, 2016—IV&V continued to monitor and assess EDES project work and the planning activities associated with the EDES Project. The intent of IV&V's activities is to identify potential risks and issues that may influence the overall EDES project health and success.

IV&V's activities focused on Release 1.10 joint testing efforts, including review of the weekly EDES Program Status Reports, Solutions Vendor Status Reports, and related JIRA dashboards. The statistics provided in these items provided data for analyzing bug error rates encountered during joint testing. The information obtained in these reports, and information derived from Solutions Vendor and PMO work breakdown structures (WBS), provided a basis for analyzing potential effects on the completion of Release 1.10 and 1.10.1.

2 IV&V Activities for This Reporting Period

IV&V activities in progress or completed during this reporting period are listed below. IV&V will document findings resulting from their activities that may represent a risk or issue to the project in an upcoming Biweekly IV&V Report of Project Risks and Issues.

- **Release 1.10 Bug Error Rate**—IV&V reviewed Release 1.10 test case failure statistics as reported in the weekly EDES Program Status Report Dashboards and related JIRA dashboards to assess potential impacts to project progress.
- **WBS Review**—IV&V reviewed the active Solutions Vendor WBSs posted on April 22 and April 29, 2016, to assess whether Solutions Vendor had applied previously communicated IV&V recommendations. Tasks reported as slipping or behind schedule were compared to the overall Release 1.10 plan to determine the impact of delays and incorporated into the May 2, 2016, Biweekly IV&V Report of Project Risks and Issues.
- **Cúram 6.2 Upgrade**—IV&V monitored Cúram 6.2 upgrade activities, including the review of the Project Assessment Quotation (PAQ) and Solutions Vendor WBS associated with this effort. Anomalies within the WBS were recorded, along with identification of tasks that were behind or projected to be behind schedule.
- **Contract Compliance**—IV&V finalized a comparison of the contents of Solutions Vendor Service Contract 210619001, Appendix C, against the Release 1.4.1 through Release 1.10.1 JIRA tickets to assess contract compliance.
- **Organizational Change Management (OCM)**—IV&V monitored OCM planning and deployment activities by attending OCM/SEA Working Group Meetings and reviewing the corresponding April 22 and April 29, 2016, Solutions Vendor WBS. The objective of these activities is to identify concerns related to communication between the OCM/SEA team and the EDES development and testing teams.
- **Technical Components**—In addition to monitoring single sign-on and identifying management design activities, IV&V tracked EDES project team efforts related to system architecture, environment configuration, and the CMS System Security Plan (SSP) Workbook. IV&V monitored the status of Release 1.10 time travel testing for Release 1.10. Monitoring included reviewing testing information as presented in the weekly PMO and Solutions Vendor status reports, and attending daily testing touchpoint meetings.
- **Payment Error Rate Measurement (PERM)** —IV&V monitored SEA's efforts to address CMS's request to establish a remediation strategy for correcting eligibility determination assignments identified during Rounds 1 and 2 PERM testing. IV&V conducted this effort by periodically meeting with SEA staff to discuss the status of remediation efforts.
- **Meetings**—IV&V attended project meetings to aid in assessing the health of the EDES project. Table 2 on the next page lists the project-related meetings IV&V staff attended during this reporting period.

Table 2: Meetings Attended

Meeting Date	Meeting	Attendee(s)

3 Planned Activities for Next Period

During the next reporting period, IV&V staff will monitor ongoing project activities. Specific IV&V activities planned for the upcoming two-week period include:

- **PERM**—IV&V will monitor SEA's efforts to address CMS's request to establish a remediation strategy for correcting eligibility determination assignments identified during Rounds 1 and 2 of PERM testing. IV&V will attend planning and status meetings as scheduled, and meet with SEA staff as needed.
- **Release 1.10 Bug Error Rate**—IV&V will evaluate Release 1.10 joint testing test case failure statistics as reported in the weekly EDES Program Status Report. These statistics will aid IV&V in assessing potential impacts to project progress, specifically the effect on Release 1.10 joint testing and UAT.
- **OCM**—IV&V will assess the business processes and communication practices associated with Release 1.10. IV&V will document potential concerns identified during weekly EDES management meetings and Organizational Change Management Workgroup Meetings.
- **WBS Review**—IV&V will review the Solutions Vendor and PMO WBS associated with Release 1.10, focusing on joint testing and UAT testing efforts, including potential slippage beyond the revised deployment date of June 5, 2016, for this release.
- **Cúram 6.2 Upgrade**—IV&V will track Cúram 6.2 upgrade activities through assessment of the Solutions Vendor WBS to monitor task dates and completion.
- **Technical Components**—In addition to monitoring single sign-on and identifying management design activities, IV&V will track EDES project team efforts related to system architecture, environment configuration, and the CMS SSP Workbook. IV&V will also monitor the status of Release 1.10 time travel testing for Release 1.10. This monitoring effort will include reviewing time travel testing activity information presented in the weekly PMO and Solutions Vendor status reports.

Appendix A: Deliverable Review Status

Table 3 below lists the status of deliverables IV&V has recently received or reviewed during the current reporting period. IV&V has submitted a summary of their analysis of the reviewed deliverables.

Table 3: PAQ-Identified or Gate Review–Related Deliverables

Deliverable	Deliverable Received	IV&V Review Status/Recommendation
Solutions Vendor Master Test Plan V4.4	April 27, 2016	Review is complete, with recommendation not to accept.
Customization Analysis of Cúram Upgrade in EDES from v6.0.5.3 to v6.2	April 27, 2016	Review is complete, with concerns reported directly to EDES project director.
Configuration Management Plan v3.9	April 28, 2016	Review is complete, with request to ensure past and future review comments be addressed (applied as appropriate).
Software License Management Plan 20160428	April 28, 2016	In progress.

3.1.3.v Provide examples of similar weekly status reports used in previous projects.

The Biweekly IV&V Report of Project Risks and Issues is a redacted version of a report recently prepared for another IV&V client. Per that contract, BerryDunn was to produce a weekly IV&V report that includes identified risks and issues, deliverable review status, meetings attended, and the activities planned for the upcoming week. The client later modified the requirement to have IV&V prepare a Biweekly IV&V Status Report and a Biweekly IV&V Report of Project Risks and Issues. The reports are produced on alternating weeks. This allowed more time to address risks and issues from one reporting period to the next.

3.1.3.vi *Provide examples of the IV&V's previous monthly status reports from other projects.*

In Section 3.1.3.iv, we have provided a template of the IV&V Monthly Status Report that BerryDunn will deliver to Nebraska. As stated in 3.1.3.v, our current IV&V contracts stipulate the production of either weekly or biweekly reports to provide the same information requested in Nebraska's monthly report. BerryDunn will work with DHHS to modify our proposed template to meet the State's needs and ensure the desired information is provided. We can easily adjust our delivery period to meet your needs.

3.1.4 CMS and MITA Compliance

"BerryDunn's team played a key role in supporting my team's decision to accept or reject the work plans, project deliverables, and recommendations of the DDI contractors. The BerryDunn team provided education and supported the CMS certification process from the beginning and often helped to remind my staff of the rules under which CMS governs these projects.

The Steering Committee members and I were impressed with their ability to effectively communicate risks and challenges with the project and their willingness to support the difficult decisions that we had to make in order to meet the goals and objectives of the project."

- Ms. Brenda Harvey, Former Contract Manager for Maine DHHS, speaking to BerryDunn's IV&V services for Maine's MMIS implementation

BerryDunn places significant importance on monitoring the evolving CMS and MITA compliance policies and procedures by:

- Building on our team's knowledge and perspective of the national Medicaid landscape.
- Monitoring the evolving federal guidance and regulations related to state Medicaid programs, MMIS implementation efforts, payment reform, and CMS certification.
- Leveraging our relationships with other states and national entities such as CMS, the NAMD, NMEH, PS-TG, and NESCSO to bring the most current best practices and lessons learned in Medicaid systems procurement and implementation to DHHS.
- Expanding our team's thorough understanding of the MITA 3.0 Framework, Titles 19 and 21 Federal Medicaid regulations, including Part 11 of the State Medicaid Manual, the CMS Seven Conditions and Standards, and the Medicaid Enterprise Certification Toolkit.

3.1.4.i Address the bidder's approach to meeting each requirement in a table that contains the requirement and the contractor's approach to meeting the requirement.

#	Requirements	BerryDunn Approach
1	Must provide IV&V services for CMS in support of the MECL in accordance with guidance to be released in the new MECT.	BerryDunn will provide IV&V services for CMS in support of the MECL in accordance with guidance to be released in the new MECT. Please see our response in Section 3.1.4.ii for more information on our understanding of CMS' expectations for IV&V contractors and our approach to providing IV&V for CMS in support of the MECL.
2	Must periodically, as needed, produce exception based Certification Progress Reports in the format required by CMS. The report must utilize the MECT checklists and MMIS Critical Success Factors (CSFs) and must objectively illustrate the strengths and weaknesses of the project and provide recommendations for correcting any identified weakness.	<p>BerryDunn will comply with the CMS format and guidelines to develop and produce exception based Certification Progress Reports. Our reports leverage MECT checklists and CSFs for the design, development, testing, and go-live preparations. These reports will provide DHHS leadership and designated stakeholders with an independent and objective assessment of management and technical aspects of the project.</p> <p>In addition to the CSFs, the Certification Progress Report will describe our approach to gathering information and the scope of our evaluation. The report will describe project advances since the last progress report as well as risks and issues identified that may affect project success. The Certification Progress Report will also include project updates related to MITA maturity and the CMS Seven Conditions and Standards.</p>
3	Must submit the monthly IV&V report to CMS.	<p>BerryDunn will develop a Monthly IV&V Report that documents project activity from the IV&V perspective and submit this report simultaneously to both CMS and the state per the CMS IV&V Guidelines.</p> <p>As the Monthly IV&V Report documents historical information, in support of a proactive approach, we recommend holding weekly discussions with DHHS and your vendors, with a focus on responses to prioritized risks and issues along with a dashboard that provides metrics to support project health assessment.</p> <p>For additional information on our reporting approach, please see Section 3.1.3.</p>
4	Must participate in meetings with CMS as directed by CMS or DHHS.	BerryDunn will take part in all meetings with CMS as directed by CMS or DHHS. We value our role as the IV&V contractor both in terms of independently partnering with DHHS for success of the project and being CMS's "eyes

#	Requirements	BerryDunn Approach
		<p>and ears to the project.” We understand the important role that CMS plays in Medicaid Enterprise systems projects and the need for a strong relationship between CMS and DHHS supported by the IV&V contractor.</p> <p>BerryDunn will participate in CMS meetings to address findings documented in our reports and to clarify guidance received from CMS. We will work with both CMS and DHHS to help ensure that our communications are clear and transparent in the spirit of “no surprises.” Our team of Key Personnel provides DHHS with leadership, experience, continuity, and familiarity with DHHS’ current landscape. In addition, we have proposed a pool of SMEs and project resources to draw upon as specific project needs arise, which will allow us to provide additional support and expertise to DHHS to respond to IV&V-based questions.</p>
5	<p>As directed by DHHS, must coordinate and participate in the planning, preparation, and performance of CMS project reviews (Gate reviews, readiness reviews, certification reviews, etc.).</p>	<p>We recognize that the systems planned for implementation across the DHHS Enterprise require multiple levels of federal review and certification. Whether it is the comprehensive certification process required by CMS for the MMIS or IRS oversight of Federal Tax Information, or the less formal integration of eligibility components into the MMIS certification process, we recognize the need for careful planning around interactions with the State’s federal partners.</p> <p>BerryDunn’s IV&V team will coordinate and participate in the planning, preparation, and performance of CMS project reviews, including gate reviews, readiness reviews, and certification reviews.</p> <p>For those components that require federal certification or review, we will enter the IV&V effort with those tasks in mind from the beginning, coordinating and participating in the planning, preparation, and performance of CMS project reviews as required by CMS and directed by DHHS.</p> <p>Through our experience on the CMS certification pilot in West Virginia, we have developed an understanding of what is needed to successfully pass through each gatepost of the new certification process and will apply those lessons learned to our work with DHHS. We approach this work with a focus on guiding vendors towards the development of design and testing artifacts that will serve the dual purposes of validating that the</p>

#	Requirements	BerryDunn Approach
		<p>solution satisfies the needs of DHHS, while also satisfying the documentation needs of the certification process. We have found that a small resource investment early in the documentation development process can reap significant rewards and efficiencies when it comes to preparing for the certification process.</p> <p>For more information on our approach to supporting the CMS gate review process, please see Section 3.1.4.iii.</p>
6	<p>In preparation for certification milestone reviews, must evaluate documents and evidence along with any working modules / code applicable to that particular review, and complete the reviewer comments portion of the relevant Medicaid Enterprise Certification Checklists. The completed checklists are appended to the Certification Progress Report. Progress report must be delivered with the necessary lead time as required by CMS prior to the scheduled MMIS certification milestone review. The certification progress reports must be provided to CMS at the same time they are presented to the state.</p>	<p>BerryDunn is currently providing project management for West Virginia's MMIS CMS certification effort, which is being conducted using the CMS pilot MMIS certification methodology. In this role, BerryDunn is working with the State and the Vendor on a variety of tasks related to certification. To date, BerryDunn has assisted in verifying the State's alignment with new Certification Checklists, evaluating documents and evidence, identifying gaps, working with the State to evaluate the impact of those gaps, and remediating those gaps that must be closed.</p> <p>As the State progresses through this pilot certification process, BerryDunn is identifying many new and valuable lessons learned related to this new approach to certification. We will leverage those lessons learned to enhance the IV&V services we provide for Nebraska.</p> <p>In our role providing IV&V for DHHS, BerryDunn will build upon lessons learned with West Virginia's CMS pilot certification to evaluate documents and evidence, along with any working modules/code applicable to that particular review, in preparation for certification milestone reviews. In addition, we will complete the reviewer comments portion of the relevant Medicaid Enterprise Certification Checklists. Our process to prepare for certification milestone reviews involves the following:</p> <ol style="list-style-type: none"> 1. Review traceability of MECT requirements to project artifacts, for example test cases for the operational readiness review (ORR) gate review. 2. Request corresponding evidence documents that are planned to be presented to CMS for the gate review. 3. Validate that evidence documents match the traceability and identify risks related to evidence that may not meet CMS's needs.

#	Requirements	BerryDunn Approach
		<ol style="list-style-type: none"> 4. Document and prioritize draft findings, issues, risks, and recommendations. Review significant findings with DHHS certification owner. 5. Develop draft findings for certification readiness, conduct internal BerryDunn QA and management review and update process. 6. As a best practice (in the spirit of no surprises), review the draft initial reports with DHHS deliverable owner prior to formal submission 7. Submit formal draft findings for certification readiness for DHHS review and approval, obtain any additional feedback, and finalize the IV&V Project Plan. <p>We will deliver certification progress reports in advance of the scheduled MMIS certification milestone review in accordance with CMS requirements. The certification progress report will be delivered simultaneously to both CMS and the state per the CMS IV&V Guidelines.</p>
7	<p>Must periodically submit project progress data to the CMS dashboard on a schedule required by CMS.</p>	<p>BerryDunn will submit project progress data to the CMS dashboard on a schedule required by CMS. We will use the Certification Progress Reports, which include the Medicaid Enterprise Certification Checklists, to provide project progress data for the CMS dashboards.</p> <p>See additional information in Sections 3.1.4.ii and 3.1.4.vi for confirmation of our approach to producing this information.</p>
8	<p>Must assess impacts of projects to MITA business, informational, and technical architecture maturity.</p>	<p>As part of project initiation and ongoing IV&V services BerryDunn will assess impacts of projects to MITA business, informational, and technical architecture maturity, leveraging our MITA 360 lifecycle management approach, as described in Section 3.1.4.v.</p> <p>Currently, we are providing project management for West Virginia’s MMIS implementation, which includes participation in a CMS Pilot MMIS Certification. As part of this initiative, we have updated West Virginia’s MITA SS-A to align with the 3.0 Framework and maintain West Virginia’s SS-A on an ongoing basis to reflect changes to maturity levels as new systems are implemented and enhancements are made to existing systems and processes. The certification pilot has also helped to shape West Virginia’s MITA SS-A process and align the MMIS</p>

#	Requirements	BerryDunn Approach
		implementation with the CMS MITA checklist moving forward.
9	<p>Must track traceability of project activities and requirements through the entire project to CMS critical success factors and certification checklist criteria as applicable to the project to secure ongoing enhanced funding.</p>	<p>Based on our MMIS certification experience in West Virginia where we are currently leading the certification effort with CMS on the State's behalf, we are familiar with CMS's new approach to certification that leverages gate reviews to complete incremental certification reviews. West Virginia is one of several states engaged in the pilot process to certify MMISs incrementally. This proactive approach reduces the reliance on a "big bang" of certification where the system is certified as a whole or not after implementation. This provides the opportunity for DHHS to work with CMS to identify and address certification risks prior to them becoming issues that prevent certification.</p> <p>Similar to the proactive approach that CMS takes with certification, we propose a proactive approach to assessing certification readiness. Requirements traceability underpins our approach. We accomplish this by working with DHHS and CMS to verify that requirements are traced through project artifacts to the certification requirements found in the MECT, including the critical success factors, by the project team responsible for requirements traceability. Likewise, we verify that all certification requirements are mapped backwards to a functional or system requirement in one or more of the procurements. This approach allows us to validate that MECT requirements are met without waiting until a certification gate review is imminent and all attention must turn to that gate review.</p> <p>Establishing traceability to requirements helps provide a proactive approach to certification readiness.</p> <p>CMS Seven Conditions and Standards</p> <p>The CMS Seven Conditions and Standards (7CSs) are a set of federal requirements published at 42 Code of Federal Regulations (CFR) §433.112 that is a condition for certain state Medicaid- and health insurance-related systems to qualify for enhanced federal financial participation (FFP). The CMS 7CSs are integrally tied to two other critical federal initiatives that will impact Nebraska's procurements: the MITA framework and CMS certification of state MMIS systems:</p>

#	Requirements	BerryDunn Approach
		<ul style="list-style-type: none"> • MITA – Under §433.112(b)(11), CMS establishes that one of the 7CSs is integration of MITA with a focus on increasing the State Medicaid Enterprise’s maturity levels in the business, architecture, and data areas. In providing additional context to this particular standard, CMS confirmed that they will not evaluate states for ‘compliance’ with MITA because of the focus under MITA of identifying as-is and to-be maturity levels. This creates an inherent flexibility for states as they seek enhanced federal funding for new IT system implementations. Instead of creating a “one size fits all” requirement that applies to all states, CMS acknowledged that every state is different and, as long as the state displays a commitment to increasing its maturity level (generally in the form of its MITA Roadmap), a system implementation can qualify for enhanced Federal Financial Participation (FFP). • CMS Certification – CMS has shown a desire to integrate the 7CSs into its MMIS Certification process. New certification checklists published by CMS for states participating in pilot certification efforts contain criteria derived from the 7CSs. States that integrate CMS’ 7CSs compliance into their system implementations early in the process will have an advantage when the time comes to initiate the CMS certification process. <p>BerryDunn approaches the 7CSs from a holistic perspective. We understand that compliance with the 7CSs represents more than just satisfying federal requirements for enhanced federal funding; it provides a guiding set of principles for states as they look to transition from outdated, and often antiquated, systems to modern IT solutions like the one that Nebraska has planned.</p>
10	Must perform all functions required by CMS for all CMS reviews.	<p>BerryDunn will perform all functions required by CMS for all CMS reviews as directed by DHHS. BerryDunn strives to be a trusted advisor to our clients and to CMS. In that role, we will join DHHS in CMS meetings as requested and assist with addressing concerns that may be raised. We provide clarification to any findings we have documented and address any level of concern with may have. BerryDunn has been recognized by our clients as providing honest and easily understood documentation without adding to the drama that can sometimes occur on</p>

#	Requirements	BerryDunn Approach
		<p>a project facing risks and issues. We will work with DHHS to clarify any guidance provided and assist in monitoring the incorporation of that guidance. We are committed to serving as a partner to DHHS' certification effort and intend to help foster and support the strongest relationship possible between the State and CMS.</p>
11	<p>Must coordinate certification activities for the project including review of certification packet materials from the DMA implementation contractor. Must evaluate and make recommendations about the state artifacts that are required for MMIS certification milestone reviews. A list of required artifacts is included in the CMS Medicaid Enterprise Certification Toolkit.</p>	<p>As the PMO for West Virginia Department of Health and Human Resources, we have worked with the State, CMS, and the MMIS Vendor on a variety of tasks related to the certification pilot. Key to this effort, we facilitated a relationship between West Virginia executive leadership and the CMS central and regional offices. This relationship resulted in West Virginia being selected to participate in a pilot for the new CMS Certification gate review process using the revised MECT and checklists. As part of this BerryDunn worked to verify the State's alignment with new CMS Certification Checklists, identifying gaps, evaluating their impact, and remediating those which must be closed. In order to review and evaluate the state artifacts that are required for MMIS certification milestone reviews BerryDunn will evaluate and make recommendations based upon our experience with MMIS certification efforts.</p> <p>We will leverage our experience in West Virginia to help coordinate the certification activities for the project, including the certification packet materials from the DMA implementation contractors. Based on our experience in West Virginia, we are very comfortable providing this level of coordination for DHHS.</p>
12	<p>Must review all new or updated documentation, guidance, and rules promulgated by CMS applicable to the project and provide summary impacts to the project along with any recommendations.</p>	<p>BerryDunn's IV&V team will review all new or updated documentation, guidance, and rules promulgated by CMS applicable to the project and provide summary impacts to the project, along with any recommendations, as described in Section 3.1.4.vi.</p> <p>We make it a priority to stay up to date on issues and trends impacting our state Medicaid clients, as well as payers, providers, and recipients of government funded healthcare. To that end, BerryDunn supports several industry organizations and conferences each year—through sponsorships, presentations, and attendance—that are focused on Medicaid and the current healthcare landscape, including:</p> <ul style="list-style-type: none"> American Health Care Association

#	Requirements	BerryDunn Approach
		<ul style="list-style-type: none"> • Healthcare Financial Management Association (HFMA) • Healthcare IT Connect • Health Information Management Systems Society (HIMSS) • Medicaid Enterprise Systems Conference (MESOC) • National Council for Behavioral Health • National Association of Medicaid Directors (NAMD) • National Association for Medicaid Program Integrity (NAMPI) • National Academy for State Health Policy (NASHP) • National Rural Health Association • The Medicaid Innovations Conference <p>In addition, we stay closely attuned to CMS guidance and rules by participating in CMS industry meetings and briefings, as well as industry associations such as PS-TG and NMEH – all of which help to ensure we remain current on CMS documentation, guidance, and rules, and are able to support clients with understanding the impacts to their organizations.</p>
13	Must perform any IV&V services and roles required by CMS or DHHS necessary to secure the enhanced funding.	<p>CMS enhanced funding is critical to the budgetary success of any Medicaid-related project. As an integral provider in the Medicaid IV&V landscape, BerryDunn devotes significant staff resources to participating in committees, panels, and conferences to ensure our information is current and accurate. We have developed communication lines within our staff to ensure the information is documented and disseminated to project managers and staff working on Medicaid projects. We are committed to providing stewardship to DHHS in any way possible to help ensure the success of your project while remaining true to our IV&V obligations.</p>

3.1.4.ii. Describe the bidder’s understanding of CMS’ expectations for an IV&V contractor and approach to compliance with CMS expectations.

The MECT Walkthrough presentation to the PS-TG in April 2016 emphasized the role of IV&V in relation to project management and modular development. Under the new CMS MECT approach, certification awareness begins at the state’s initial consultation with CMS for RFP development and continues through maintenance and operations.

CMS is looking for the IV&V contractor to provide validation to ensure the Medicaid Enterprise Certification Lifecycle (MECL) guidelines are followed in accordance with the MECT. Certification preparations will begin at project kickoff. An important part of BerryDunn's IV&V approach is to validate that the vendors responsible for the implementation trace the project requirements to the MECT as they also trace the project requirements to design, development, testing, and go-live preparations. The MECT, including any new guidance, becomes another category to include in the project Requirements Traceability Matrix (RTM).

In addition to tying project requirements to the MECT via the RTM early in the project, our IV&V approach verifies that there is a planned and executive certification educational component that occurs early in the project. This educational component helps inform participants in the project about how the certification process works and helps the project teams better prepare for certification.

Throughout our IV&V engagement with Nebraska, we will provide IV&V services for CMS in support of the new released MECL and guidance to be released in the new MECT. As a trusted advisor to West Virginia's Medicaid program, we have been working collaboratively with CMS and West Virginia to pilot the new MECT. Our team will bring this expertise to Nebraska by leveraging the same subject matter experts (SMEs) that assisted with this work in West Virginia.

3.1.4.iii. Describe in detail the bidder's approach to supporting the CMS gate review process for the EES project.

For many years, certification meant a series of marathon review sessions with CMS representatives conducted over the course of a one-week CMS on-site visit. These sessions were followed up with a massive document submission, a lengthy CMS review period, and ultimately a pass/fail determination of whether the system achieved certification. A negative determination from CMS at this late stage in the implementation process often signified a need for time-consuming and often costly rework and remediation.

In an effort to move away from the "all or nothing" approach to certification, CMS has launched a pilot program and released the MECL that ties certification to the software development lifecycle SDLC. This approach is similar to the "Gate Review" process that CMS developed to provide oversight of Health Benefit Exchange and Eligibility and Enrollment projects (as shown in Figure Q), which takes states through a progression of gatepost reviews that examine system design, operational readiness, and other factors that are critical to a successful implementation.

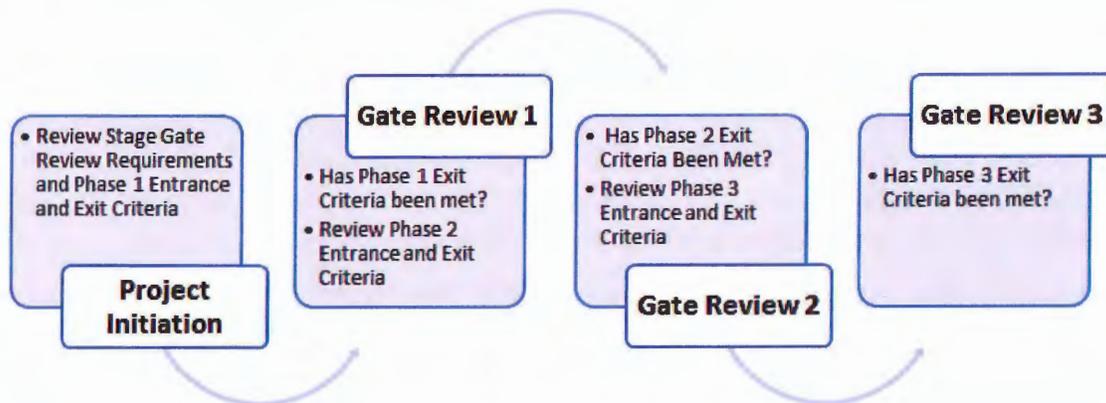


Figure Q. CMS “Gate Review” Process

Through our role serving as PMO for West Virginia’s MMIS, we have worked with the State, CMS, and the MMIS Vendor on a variety of tasks related to the certification pilot. To date, BerryDunn has assisted in verifying the State’s alignment with new CMS Certification Checklists, identifying gaps, working with the State to evaluate the impact of those gaps, and remediating those gaps that must be closed. We have conducted two of the three CMS gate reviews. The third and final gate review will take place approximately six months after the January 2016 MMIS go-live. As the State progresses through the pilot certification process, BerryDunn is identifying many new and valuable lessons learned related to this new approach to certification.

In addition to our work on West Virginia’s pilot MMIS certification, BerryDunn has supported the following states on projects related to the gate review and CMS certification process, which provides our team with valuable perspective in supporting Nebraska’s certification efforts and collaboration with CMS:

- *Missouri:* Since 2013, BerryDunn has been responsible for supporting CMS gate review activities; verifying and validating that the design and functionality proposed by the State’s Eligibility Determination and Enrollment System Vendor complies with the CMS Seven Conditions and Standards in order to ensure that the State maintains eligibility for enhanced federal funding.
- *Massachusetts:* As part of BerryDunn’s IV&V services for Massachusetts’ HIX/IES implementation beginning in 2012, we have evaluated deliverables submitted by the DDI vendor against relevant federal, state, and contractual requirements. Compliance with the CMS Seven Conditions and Standards was a critical component of these reviews and laid the groundwork for the Commonwealth to demonstrate that its solution qualified for enhanced funding.
- *Maine:* From 2008 to 2012, BerryDunn provided QA, IV&V, and Technical Assistance to Maine DHHS for its MMIS implementation. In addition, we provided project management support to the State as it progressed through a traditional

CMS Certification process, for which Maine's MMIS achieved unconditional CMS certification in December 2011.

- *New Hampshire:* From 2003 to 2005, BerryDunn supported New Hampshire Department of Health and Human Services in achieving CMS certification for the first stand-alone Medicaid Decision Support System (DSS) in the nation in our role providing IV&V of the DSS implementation.

For the EES project, we have developed an approach that builds upon our successful work on the CMS certification pilot in West Virginia and the gate reviews in Massachusetts and Missouri, which has provided us with an understanding of what is needed to successfully pass through each gatepost. We will focus on guiding vendors towards the development of design and testing artifacts that will serve the dual purposes of validating that the solution satisfies the needs of DHHS, while also satisfying the documentation needs of the certification process. ***We have found that a small resource investment early in the documentation development process can reap significant rewards and efficiencies when it comes to preparing for the certification process.***

3.1.4.iv. Describe in detail the bidder's approach to coordination of the CMS certification of the DMA project.

BerryDunn has supported several states, including Missouri, Massachusetts, New Hampshire, and West Virginia through the CMS certification process. From 2008 to 2012, BerryDunn provided QA, IV&V, and Technical Assistance to the State of Maine for its MMIS implementation. In addition, we provided project management support to the State as it progressed through a traditional CMS Certification process, for which Maine's MMIS achieved unconditional CMS certification. BerryDunn's approach to Maine's certification process focused on the following:

- **Collaboration:** BerryDunn worked closely with the State and its Vendor to confirm that each MECT criteria was met and to develop clear and concise presentations illustrating how the criteria were met.
- **Preparation:** BerryDunn facilitated informational sessions on CMS certification to prepare key project stakeholders for the process. BerryDunn also conducted a simulated certification review to further prepare State decision-makers for the CMS review.
- **Proactivity:** In preparing for CMS' on-site visit, BerryDunn worked with the State's Project Team to proactively identify potential CMS findings and develop corrective action plans for those findings. BerryDunn worked with CMS and the State's Project Team to deliver significant amounts of supporting documentation to CMS ahead of the on-site visit, allowing CMS to prepare specific questions related to the State's implementation, and resulting in more valuable and targeted conversations.
- **Lessons Learned:** Following the certification process, BerryDunn developed and delivered a Certification Completion Report to the State. This report detailed both strengths and weaknesses in the certification effort, which provided the State with the opportunity to institutionalize those practices that worked well, and highlighted areas where future improvement may be possible

Most recently, BerryDunn leveraged our experience in Maine to support West Virginia in their certification activities, which included piloting the new CMS MECT. West Virginia's new MMIS went live in January 2016. BerryDunn has worked in concert with West Virginia preparing for and facilitating two certification visits from CMS to date. We look forward to the opportunity to leverage our unique experience to support Nebraska's certification process.

3.1.4.v. Describe the bidder's approach to assessing the impacts of a project on MITA maturity levels.

Recognizing the value that the MITA Framework brings to state Medicaid Enterprises, BerryDunn has worked with our clients to implement a **“360 degree MITA lifecycle management” approach** to Medicaid system planning, procurement, and implementation projects. Our MITA 360 approach provides a framework for states to continually assess and analyze their MITA maturity levels throughout the lifecycle of their various systems initiatives (e.g., MMIS, DW/DSS, Eligibility & Enrollment) as business processes and information and technical architecture evolve.



As part of project initiation and our ongoing IV&V services BerryDunn will assess impacts of projects to MITA business, informational, and technical architecture maturity, leveraging our MITA 360 lifecycle management approach to routinely monitor progress.

We have applied our MITA 360 lifecycle management approach in our work providing project management for West Virginia's MMIS implementation, which includes participation in a CMS Pilot MMIS Certification. As part of this project, we updated West Virginia's MITA SS-A to align with the 3.0 Framework. We continue to maintain West Virginia's SS-A on an ongoing basis to reflect changes to maturity levels as new systems are implemented and enhancements are made to existing business processes and information and technical architecture. The certification pilot has also helped to shape West Virginia's MITA SS-A process and align the MMIS implementation with the CMS MITA Checklist moving forward.

All of our team members are experienced with the MITA 3.0 Framework, the CMS Seven Conditions and Standards, and recent changes from the ACA and other federal and state laws, mandates, and guidance. In addition, they have demonstrated experience with industry standards and best practices related to quality, QA, and quality control principles and techniques.

3.1.4.vi. Describe the bidder's approach to monitoring for documentation, guidance, and regulations from CMS.

We have tremendous experience helping our state Medicaid clients to understanding of the regulatory requirements and political and fiscal landscape impacting their operations. For example:

BerryDunn has supported the State of West Virginia in planning for and implementing several new Medicaid requirements that resulted from the ACA.

Following are some of the specific reform initiatives we supported:

- *BerryDunn facilitated a workgroup to review West Virginia's Medicaid eligibility rules with the object of updating the rules to comply with new requirements under the ACA. Policy review sessions required careful balancing of competing interests of systems, policy, and finance stakeholders. In addition, we supported the State through a comprehensive end-to-end review of the State's Medicaid Policy Manual and applied updates to policies based on the decisions reached in the policy review sessions.*
- *BerryDunn conducted an independent assessment of West Virginia's Children's Health Insurance Program (CHIP) to evaluate policy, finance, business process, and system impacts of ACA-regulations on West Virginia's CHIP program. We are currently providing project management for the implementation of recommendations from our analysis.*

As part of project initiation and our ongoing IV&V services, BerryDunn's IV&V team will review documentation, guidance, and rules disseminated by CMS that are applicable to this project. Throughout the lifecycle of all projects, we will review additional applicable documentation, as well as new guidance and rules, and document their impact to DHHS along with any recommendations.

Our objective is to ensure that all project stakeholders have the information they need to make informed decisions that support their projects. BerryDunn's IV&V team will work with the DHHS team to develop impact and risk response strategies for negative project impacts and risks resulting from new guidance or rules. This process will involve assessing options, developing an approach, and reaching consensus before the identified impacts become a reality.

The individuals serving on the BerryDunn team are veteran Medicaid consultants. In addition to the valuable IV&V experience our team brings to this project, members of our team have years of hands-on Medicaid Enterprise systems DDI, operations and maintenance, and solutions delivery experience, including experience with multiple software development methodologies. This experience is just as valuable to this project, because *our team understands the perspective of vendors, developers, and systems integrators and can provide realistic recommendations based on their experiences and lessons learned from working "in the trenches" on large Medicaid systems projects.* Given the complexity of this project for Nebraska, we believe this flexibility and scalability is essential to the function of IV&V.

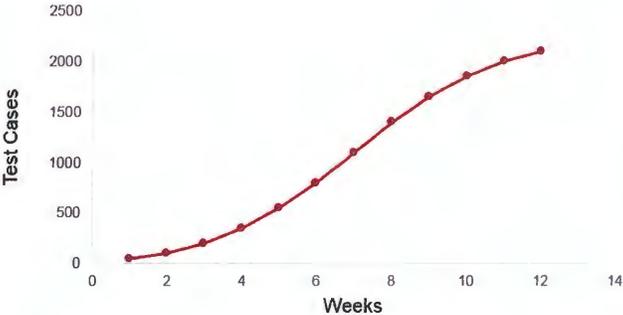
3.1.5 Operational and System Readiness

BerryDunn has the knowledge and expertise in the areas of various stages of testing, including Browser Compatibility Testing, System Integration Testing (SIT), and User Acceptance Testing (UAT), as well as Operational and System Readiness planning to support DHHS across its IT portfolio. BerryDunn will work with DHHS' vendors when developing Operational and System Readiness Review Plan to ensure that resources across the project team are being used efficiently and to avoid any duplication of effort. Once BerryDunn develops the initial version of the review plan, we will review it with the State, as we would any deliverable, and make updates based on feedback from our partners on the DHHS team. Once we have made all requested updates, we will request signature approval of the deliverable and move forward with implementing the plan.

Our team will provide Operational and System Readiness assessment services for DHHS, beginning with the development of an Operational and System Readiness Review Plan deliverable for DHHS' review and approval. This plan will focus on our process for evaluating and monitoring the readiness of all stakeholders to adopt the new technology. The content of this deliverable will be tailored to the specific solution that is being deployed. However, at a minimum it will contain our approach for assessing training, communications, governance structure, instructional and supporting documentation, and the measures of success.

3.1.5.i Address the bidder's approach to meeting each requirement in a table that contains the requirement and the bidder's approach to meeting the requirement.

	Requirements	BerryDunn Response
1	<p>Must assess project testing activities including test scenarios, cases, and results including traceability of testing to project requirements. Assessment must include whether additional test scenarios or cases are needed to sufficiently test the project requirements.</p>	<p>Since testing often comes later in projects, it is sometimes this phase that is cut short when schedule is the driver. BerryDunn's IV&V approach emphasizes test planning early in the project, as well as comprehensive lifecycle testing including UAT, and use of SMEs and users in review of test cases to identify concerns as early in the project as possible. <i>This approach helps to minimize the time and costs associated with rework.</i></p> <p>We have supported states in the planning, assessment, and execution of testing efforts across a wide spectrum of complex IT projects. We will leverage this experience to assess the testing activities on DHHS' portfolio of project.</p> <p>BerryDunn will conduct assessment of the project testing activities and report findings and recommendations to DHHS. This will be accomplished by a series of tasks including, but not limited to:</p> <ul style="list-style-type: none"> • Obtain the up-to-date testing Plan(s) • Review the overall test approach for testing completeness and effectiveness

Requirements	BerryDunn Response																												
	<ul style="list-style-type: none"> • Obtain the detailed test scenarios/cases • Evaluate the traceability of the test scenarios to project requirements • Provide recommendations for additional test scenarios or cases to be developed/included if the traceability evaluation finds that the existing cases do not adequately meet all requirements • Review a sample of test cases for comprehensiveness and ability to test required functionality • Conduct periodic reviews of test results for completeness • Review the approach to defect tracking and resolution • Review and assess the testing documentation in terms of completeness, accuracy, conciseness, readability and understandability • Identify and document project risks • Document findings and recommendations in the weekly and Monthly IV&V Assessment Report <p>Results of this assessment area will serve as input to the weekly and Monthly IV&V Assessment Reports. Our review of the Test Plan will include an assessment of the structured data testing approach to ensure that the system operates correctly and conforms to the requirements and design. We will also assess the extent to which the testing plan tests the readiness of the user organizations to work with the systems upon production implementation.</p> <p>We will conduct periodic analyses of the Test execution effectiveness. This analysis will help determine the extent to which the testing efforts be completed within the timeframe defined in the Project Schedule. A graph of the cumulative execution of test cases over scheduled test period should be in an S-curve distribution, similar to that shown in Figure R.</p>  <table border="1"> <caption>Data for Figure R: Test Execution Effectiveness</caption> <thead> <tr> <th>Weeks</th> <th>Test Cases</th> </tr> </thead> <tbody> <tr><td>0</td><td>0</td></tr> <tr><td>1</td><td>50</td></tr> <tr><td>2</td><td>100</td></tr> <tr><td>3</td><td>200</td></tr> <tr><td>4</td><td>350</td></tr> <tr><td>5</td><td>550</td></tr> <tr><td>6</td><td>800</td></tr> <tr><td>7</td><td>1100</td></tr> <tr><td>8</td><td>1400</td></tr> <tr><td>9</td><td>1700</td></tr> <tr><td>10</td><td>1900</td></tr> <tr><td>11</td><td>2050</td></tr> <tr><td>12</td><td>2100</td></tr> </tbody> </table> <p>Figure R. Test Execution Effectiveness</p>	Weeks	Test Cases	0	0	1	50	2	100	3	200	4	350	5	550	6	800	7	1100	8	1400	9	1700	10	1900	11	2050	12	2100
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	Requirements	BerryDunn Response																																										
2	<p>Must assess defect resolution and retesting activities to validate defect was appropriately resolved</p>	<p>BerryDunn will conduct assessments of testing results, including defect resolution, and will report findings and recommendations to DHHS.</p> <p>To support the assessment of defect resolution and retesting activities, we will look to the systems vendor to produce the necessary inventory of defects that are in various stages of completion and the information to show retesting activities. We will work with the vendor to explain the metrics that are needed. By reviewing the inventory report created (Table 9), we can provide defect removal metrics.</p> <p style="text-align: center;">Table 9. Defect Removal Inventory</p> <table border="1" data-bbox="662 772 1382 1220"> <thead> <tr> <th data-bbox="662 772 777 846"></th> <th colspan="5" data-bbox="777 772 1382 804" style="text-align: center;">In</th> </tr> <tr> <th data-bbox="662 804 777 846">Severity</th> <th data-bbox="777 804 922 846">Submitted</th> <th data-bbox="922 804 1050 846">Progress</th> <th data-bbox="1050 804 1187 846">Resolved</th> <th data-bbox="1187 804 1292 846">Closed</th> <th data-bbox="1292 804 1382 846">Total</th> </tr> </thead> <tbody> <tr> <td data-bbox="662 846 777 919">1 – Critical</td> <td data-bbox="777 846 922 919"></td> <td data-bbox="922 846 1050 919"></td> <td data-bbox="1050 846 1187 919"></td> <td data-bbox="1187 846 1292 919"></td> <td data-bbox="1292 846 1382 919"></td> </tr> <tr> <td data-bbox="662 919 777 993">2 – High</td> <td data-bbox="777 919 922 993"></td> <td data-bbox="922 919 1050 993"></td> <td data-bbox="1050 919 1187 993"></td> <td data-bbox="1187 919 1292 993"></td> <td data-bbox="1292 919 1382 993"></td> </tr> <tr> <td data-bbox="662 993 777 1066">3 – Medium</td> <td data-bbox="777 993 922 1066"></td> <td data-bbox="922 993 1050 1066"></td> <td data-bbox="1050 993 1187 1066"></td> <td data-bbox="1187 993 1292 1066"></td> <td data-bbox="1292 993 1382 1066"></td> </tr> <tr> <td data-bbox="662 1066 777 1140">4 – Low</td> <td data-bbox="777 1066 922 1140"></td> <td data-bbox="922 1066 1050 1140"></td> <td data-bbox="1050 1066 1187 1140"></td> <td data-bbox="1187 1066 1292 1140"></td> <td data-bbox="1292 1066 1382 1140"></td> </tr> <tr> <td data-bbox="662 1140 777 1220">Total</td> <td data-bbox="777 1140 922 1220"></td> <td data-bbox="922 1140 1050 1220"></td> <td data-bbox="1050 1140 1187 1220"></td> <td data-bbox="1187 1140 1292 1220"></td> <td data-bbox="1292 1140 1382 1220"></td> </tr> </tbody> </table> <p>By comparing the defect inventory for a current assessment period to a prior assessment period, we will determine if a significant inventory of unresolved defects is building. Organizing the analysis by severity level allows DHHS to prioritize corrective action.</p> <p>We will also leverage the reporting of defects by the vendor to review defect resolution. Using the information about resolved defects during the reporting period, our team will assess the defects to help ensure that defects are being resolved according to the business requirements. This assessment will also help us validate the vendor's processes that support defect resolution, such as development and testing. Looking at the defect break/fix process often provides insight into a vendor's processes and can highlight areas of concern such as configuration management and release management that can otherwise be challenging to gain insight into.</p>		In					Severity	Submitted	Progress	Resolved	Closed	Total	1 – Critical						2 – High						3 – Medium						4 – Low						Total					
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	Requirements	BerryDunn Response
3	<p>Must develop and submit a comprehensive System and Business Operations Readiness Review Plan work product for each project for Department approval a minimum of 90 days prior to the acceptance testing schedule date in the project work plan.</p>	<p>We take a holistic view to system acceptance, generally focused on the results of comprehensive operational readiness testing and implementation planning, thereby examining not only system readiness, but also organizational readiness. At the most basic level, system acceptance is all about going live:</p> <p style="text-align: center;"><i>Is the DHHS team comfortable accepting the system developed by vendor for deployment to production?</i></p> <p>This is an exciting decision, but one that comes with significant risk and trepidation no matter the circumstance. Based on our years of implementation experience and our IV&V perspective, we will offer guidance and insights to our project partners when it comes time to decide whether to accept any system, with a focus on the following elements:</p> <ul style="list-style-type: none"> <p>System Readiness – We will evaluate the readiness of the system based on the results of prior testing efforts and additional testing at the end-to-end business process level in the form of operational readiness testing. Validating that the solution can progress from beginning to end of each business process, including downstream impacts, is critical to providing assurance that the system will perform as needed once deployed to production. The objective of this testing is to evaluate whether DHHS users will be able to effectively complete their job functions from start to finish when they log into the system on day one.</p> <p>One of the primary elements that our team uses to assess system readiness is defect tracking. Through UAT and operational readiness testing that has taken place, has the vendor shown that there are no defects that will impact critical business processes? If there are critical defects, we will help assess whether identified workarounds are sufficient or if the defect should hold up acceptance of the system.</p> <p>Organizational Readiness – The other aspect that must be taken into consideration, which lies outside the system itself, is the readiness of the vendor to conduct the implementation and DHHS organizational units to adopt the new technology. When it comes to acceptance of the system, it is the outcome of these two activities that is critical.</p> <p>Operational Readiness – In evaluating the organization's readiness for operations, our team will examine the outcomes of the operational readiness tasks such as Training, Communication, Governance Structure, Instructional and Supporting Documentation, and Measures</p>

Requirements	BerryDunn Response
	<p>of Success. For example, what were the outcomes from the training that took place? Did the evaluations submitted by staff show that they learned how to use the system to accomplish their day-to-day work responsibilities? Have the impacted external stakeholder groups been notified of changes to their day-to-day operations that will accompany deployment of the new solution?</p> <ul style="list-style-type: none"> Implementation Planning – Our team will evaluate whether the vendor has a fully developed plan for cutover. Does the vendor have an implementation playbook or some other documentation that defines all the tasks that must be undertaken to successfully deploy the system? Has the vendor briefed DHHS on this approach and do all stakeholders who play a role in the deployment know what they need to do and when? <p>We will develop a comprehensive System and Business Operations Readiness Review Plan for DHHS approval a minimum of 90 days prior to the acceptance testing schedule date. This Plan will address our approach to assessing the readiness of these diverse areas. We will review the plan with DHHS, solicit feedback, apply updates, and submit for approval so that we may begin using it to assess system and business readiness for implementation and system acceptance.</p> <p>At a minimum our System and Business Operations Readiness Review Plan will address how we will:</p> <ul style="list-style-type: none"> Obtain the formal Implementation Plan and related artifacts upon delivery to DHHS Review the Implementation Plan for completeness Review the Implementation Checklist for completeness and consistency with the Implementation Plan Review the Implementation Schedule for consistency with the overall Project Schedule and consistency with the Implementation Plan Review testing results from the various testing phases Review the results of training Review the communications regarding systems and business operations to assess the adequacy of communication related to business and systems readiness Identify and document project risks Review status of findings and recommendations in the Monthly IV&V Status Report

	Requirements	BerryDunn Response
4	<p>Must conduct a system and business operational readiness review and assessment and provide the results to DHHS.</p>	<p>The BerryDunn team will provide a System and Business Operational Readiness review and assessment based on the Operational Readiness Review Plan developed and submitted to DHHS for approval. We plan to provide finding from this assessment in our regular status reporting so that findings can be acted upon as they are identified.</p> <p>Through our experience providing IV&V for other Medicaid system implementations, we have found that it is important to provide findings about system and business readiness as they are identified rather than waiting too close to the planned system implementation. Providing these findings as they are identified provides the project team sufficient time to address the findings that are prioritized as preventing system implementation prior to the planned implementation. If DHHS prefers a separate assessment report, we will be pleased to work with them to define that report.</p>

3.1.5.ii Describe the Bidder's Approach to Operational and System Readiness.

As described in our response in Section 3.1.5.i (above), we view Operational and System Readiness as an overarching objective to our IV&V activities. With each weekly and monthly IV&V report, we are reporting risks, issues, and opportunities that may impact or benefit the success of the project. Our objective is to ensure that the Operational and System Readiness Assessment confirms the guidance that IV&V has been providing and there are no surprises.

3.1.5.iii Provide an example of a readiness review plan utilized for other projects.

Appendix C – Sample Operational Readiness Assessment Plan provides an example of a standard project plan used by BerryDunn to plan, conduct, and deliver an Operational Readiness Assessment Plan (ORA). Based on our experience, we recommend that the ORA be completed and delivered at least six weeks prior to the scheduled go-live date to provide time for the state and vendors to remediate IV&V findings documented in the ORA. The information in the ORA should have been included in prior weekly and monthly status reports. Slippage in overall project schedules may prevent IV&V from reviewing components of the assessment until later in the vendor delivery schedule.

3.1.5.iv Provide examples of operation and system readiness review reports used on previous projects.

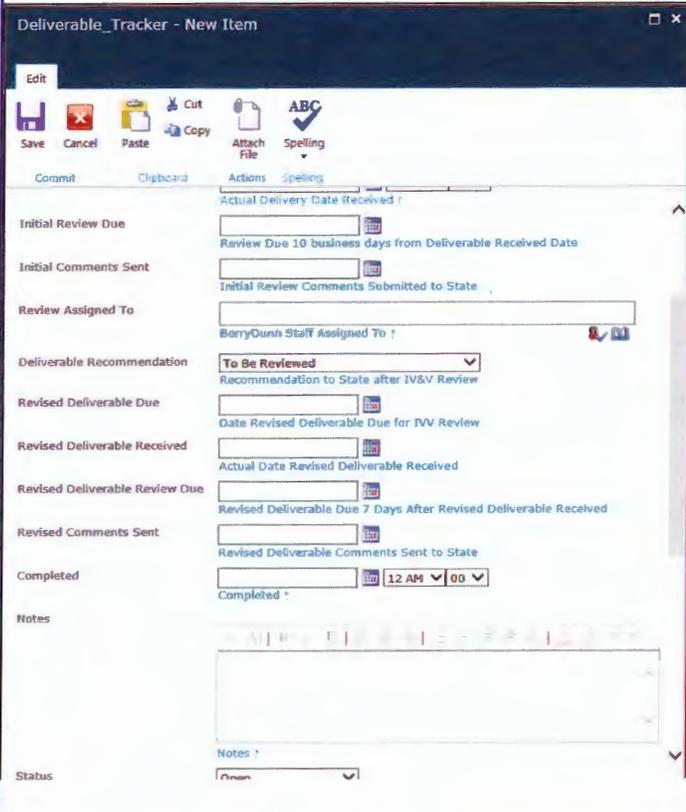
An example of an Operational Readiness Assessment (ORA) report has been provided in Appendix D – Sample Operational Readiness Assessment Report. The format shown has been used previously in Massachusetts and Missouri. The format indicates the information that would be included as part of the report. Section 1.2.1 of the example describes the assessment areas and the assessment criteria. Section 1.2.2 of the example describes the assessment areas and the assessment criteria. If there are multiple findings for an assessment area, the overall impact of the cumulative findings will determine the ranking assigned to the assessment area.

3.1.6 IV&V Deliverables and Work Products

As we have documented in our Technical Approach (Section 3.0 of this proposal), BerryDunn understands DHHS' work product and deliverable expectations and we are committed to meeting or exceeding those expectations. We place great importance on products that are timely, complete, organized, and meet our high quality standards. Documents are reviewed by BerryDunn project leadership and our internal quality control prior to delivery.

3.1.6.i Address the bidder's approach to meeting each requirement in a table that contains the requirement and the contractor's approach to meeting the requirement.

	Requirements	BerryDunn Response
1	<p>For each project, must fulfil all IV&V contractor responsibilities and submit a monthly deliverable including activities and work products completed within the month:</p> <ul style="list-style-type: none"> • The monthly IV&V report • Weekly status report materials for the month • IV&V project work product and deliverable assessments completed within the month • Critical incident reports • Requirements traceability matrix updates • CMS and MITA compliance activities • IV&V work plan updates • IV&V work products 	<p>As discussed in the sections above, BerryDunn is fully committed to fulfilling the IV&V contract responsibilities for DHHS and submitting a monthly deliverable that describes the activities and work products completed in the prior month, including:</p> <ul style="list-style-type: none"> • The monthly IV&V report • Weekly status report materials for the month • IV&V project work product and deliverable assessments completed within the month • Critical incident reports • Requirements traceability matrix updates • CMS and MITA compliance activities • IV&V work plan updates • IV&V work products
2	<p>Must perform work and submit work products and deliverables for State review and approval in accordance with the approved IV&V work plan scheduled dates.</p>	<p>BerryDunn will perform our work and submit work products and deliverables for review and approval by DHHS in accordance with the approved IV&V work plan scheduled dates. We will review the schedule during project initiation and gain approval on the updated schedule. Thereafter, we will manage our work to the approved schedule and only make modifications to dates in agreement with DHHS.</p>
3	<p>Must provide a tracking capability for tracking of work product and deliverable submission and review status.</p>	<p>For each project, BerryDunn establishes a Deliverable Tracker tool (as shown in Figure S) to capture deliverable due dates, delivery dates, review status, and document and comment log links. The Deliverable Tracker is designed to address multiple review cycles and support the generation of reports such as Upcoming Deliverables, Deliverables by Status, and Assignments by User/Reviewer. The Deliverable</p>

Requirements	BerryDunn Response
	<p>Tracker and reports can be modified to meet the DHHS needs and the specific project. Our team has found that this level of comprehensive tracking is essential to maintaining effective oversight of project deliverables.</p> <p style="text-align: center;">Figure S. Deliverable Tracker Entry Form</p> 
<p>4 Must submit any changes to previously approved deliverables for approval through the review process.</p>	<p>Certain deliverables and work products are considered living documents; meaning the document should be updated as the project continues. Each subsequent update to the original document will go through the rigorous quality review as the original. BerryDunn will work closely with the DHHS project team to incorporate updates and submit the changes for review by the designated DHHS and vendor staff for comment and approval.</p> <p>Our documentation maintenance process will be addressed as part of the IV&V Change Control Plan, which we will include as part of our IV&V Management Plan.</p>

3.2 Organizational Staffing

3.2.1 Address the bidder's approach to meeting each requirement in a table that contains the requirement and the contractor's approach to meeting the requirement.

	Organizational Staffing	BerryDunn Response
1	<p>Must provide an organizational structure which reflects coordinated activities among DHHS, IV&V, EES, DMA and other contractors.</p>	<p>The BerryDunn IV&V approach focuses on building effective, collaborative relationships with our clients and their vendors from Day 1 and throughout the project. We will embed our team within your organization and work side-by-side with DHHS and your vendor teams so we are viewed as a contributing member of the project and invested in the success of the project.</p> <p>In an engagement such as this where there are multiple BerryDunn teams on different projects, we structure our team to include an Engagement Manager, who will oversee the work of both our EES and DMA IV&V teams, meet regularly with the two teams, maintain a big picture view of DHHS' project landscape and our IV&V work, and ensure consistency and coordination between the two BerryDunn teams.</p> <p>In addition, our EES and DMA Project Managers will meet at least weekly to share information that will benefit both projects. Prior to the DMA team beginning their work in 2017, the EES team will provide an orientation to the IV&V methodologies, tools, templates, and processes to help ensure consistency across the two projects.</p>
2	<p>Must provide criminal background investigations on all personnel and follow-up investigations every five years. Must report individuals who have criminal activity identified to DHHS.</p>	<p>Many of our contracts involve access to sensitive data and information; accordingly, we are accustomed to conducting criminal background investigations for our project personnel.</p> <p>We confirm that BerryDunn will provide criminal background investigations on all personnel and follow-up investigations every five years. In addition, we will report to DHHS any individuals who have criminal activity identified over the course of the contract.</p>
3	<p>Must provide all key positions identified IV.C.1.,</p>	<p>We have proposed team members to fill all key positions identified in Section IV.C.1 of the RFP. These key personnel are identified in Section 3.2.2 below.</p>

	Organizational Staffing	BerryDunn Response
4	Must maintain an Organizational Chart and project contact list.	<p>Within our proposal (Section 3.2.4), we have provided our proposed Organizational Chart for the EES and DMA projects. At the outset of each project, we will provide an Organizational Chart and contact list for all team members assigned to each project and maintain this as part of our IV&V Project Management Plan.</p>
5	Must acquire DHHS approval for key staff and key staff replacements.	<p>We understand that DHHS has final approval over any key staff assignments and key staff replacements to perform contract work.</p> <p>Our Engagement Manager, Bill Richardson, will submit resumes for any proposed key personnel and key staff replacements and provide DHHS the opportunity to interview applicants as part of the approval process.</p>
6	Must not reassign or replace key personnel without the prior written approval of DHHS.	<p>BerryDunn will not reassign or replace key personnel without prior written approval of DHHS. We understand and will comply with the requirements for replacing key personnel described in Section IV.C.1 (paragraphs 4-6) on page 43 of the RFP.</p>
7	Must provide monthly IV&V staff as proposed.	<p>BerryDunn will provide the monthly IV&V staff as proposed. All of our EES key personnel are available and committed to serving in their proposed roles beginning July 1, 2016.</p> <p>Because the start of the DMA project is more than nine months out from the submission date of this proposal, we respectfully request the opportunity to review our staffing plan for this project as the project start date gets closer. While we have strived to develop a realistic staffing approach for the DMS with team members we anticipate will have availability at that time, we know that circumstances may arise that could lead to adjustments to the staffing plan. Should changes to staffing arise, we will comply with the requirements for replacing key personnel described in Section IV.C.1 (paragraphs 4-6) on page 43 of the RFP.</p>

3.2.2 Names and resumes of key staff for the DMA and EES projects

Table 10 identifies our proposed team members to fill the key positions for the EES and DMA projects, together with a brief description of how they meet the required and preferred qualifications described in Section IV.C.1 of the RFP (and as amended in Addendum 5). In addition, we have described the other team members we propose to work on these projects.

Note: We have proposed separate teams for the EES and DMA projects; however, if the EES project is completed prior to the initiation of the DMA project, we may recommend transitioning one or more EES team members to the DMA project to help build continuity across the two projects and leverage this knowledge of Nebraska’s Medicaid landscape. We will gain DHHS’ approval prior to adjusting the staffing approach from what we have proposed.

Resumes for all of our proposed team members are provided in **Appendix A**.

Table 10. Key BerryDunn Resources for the EES and DMA projects

Key Position	Qualifications	BerryDunn Proposed Team Member
EES Key Personnel		
EES IV&V Project Manager	<p>A minimum of five (5) years of experience in managing or in a key management position for a large-scale healthcare IT development project that encompasses the full system development life cycle from initiation through post implementation; and</p> <p>Previous experience following a standard PM methodology and in using various project management tools in developing project plans, delivering tasks, and tracking timelines and resources.</p> <p>Previous Medicaid experience is preferred.</p> <p>Previous IV&V experience is preferred.</p> <p>PMI certification is preferred.</p>	<p>Beth Jenckes will serve as our IV&V Project Manager for the EES Project. Beth has 18 years of experience leading strategic business initiatives and technical projects. She has served in management and leadership roles through the full lifecycle of information system modernizations and large-scale healthcare projects for more than five years – from pre-RFP requirements definition and business process definition to implementation oversight and test execution. Her experience spans projects in state and federal government, healthcare IT, insurance, transportation, engineering, and education environments.</p> <p>A certified PMP and Certified Scrum Master, Beth has experience following industry-standard project management methodology and using various project management tools, including Microsoft Project, Primavera, Clarity reports, and SharePoint.</p> <p>Beth has gained considerable Medicaid experience through her work with Nebraska DHHS on multiple projects since 2004, most recently managing the agency’s implementation of requirements associated with the ACA, including Modified Adjusted Gross Income Eligibility Income Standards and Provider Screening and Enrollment.</p>

Key Position	Qualifications	BerryDunn Proposed Team Member
		<p>While Beth's work has been primarily focused on project management, business analysis, application development, and database administration, she has worked on projects with IV&V teams and brings a clear understanding of the distinct roles between IV&V, project management, and application development roles.</p>
<p>Two EES IV&V Business / Test Analysts</p>	<p>A minimum of five (5) years of experience in business / test analyst responsibilities on projects of similar scope.</p> <p>Previous Medicaid experience is preferred.</p> <p>Previous IV&V experience is preferred.</p>	<p>Karen Jones has dedicated 30+ years to working with state health and human services agencies on large system planning and implementation projects. She has a unique blend of business, technical, project management, and IV&V expertise – beginning her career as a Systems Engineer with EDS and serving in a range of technical and management positions with increasing levels of responsibility for Medicaid and related system initiatives of similar size and scope to Nebraska's EES Project.</p> <p>A certified PMP and PMI-RMP, Karen has most recently been leading BerryDunn's team providing IV&V for Missouri's Eligibility Determination and Enrollment System implementation for the past 32 months. Prior to joining BerryDunn in 2013, Karen worked with Nebraska DHHS on Medicaid planning initiatives.</p> <p>Andrea Thrash has over 15 years of experience in project management and business process engineering, with a strong background in system implementations for clients in the healthcare, government, and insurance arenas.</p> <p>Andrea is currently serving as part of BerryDunn's IV&V team for Missouri's Eligibility Determination and Enrollment System implementation.</p> <p>Prior to her work with BerryDunn's IV&V team, she served as Project Manager and Business Analysis Manager for Arkansas' and Missouri's EES implementation projects. She also oversaw a multi-vendor Business Analyst Team to ensure all requirements and functional design documentation for the Cúram software met state and federal healthcare mandates.</p>

Key Position	Qualifications	BerryDunn Proposed Team Member
EES IV&V Technical Analyst / Architect	<p>A minimum of five (5) years of experience as a solutions architect for solutions of a similar size and scope.</p> <p>Previous IV&V experience is preferred.</p> <p>Previous Medicaid experience is preferred.</p>	<p>Regina Blazek is an experienced senior software engineer and technical analyst with 18 years of experience. From 2012 to 2015, Regina worked with Nebraska DHHS to provide technical, architectural, and engineering leadership and expertise for multiple projects, including making modifications to Nebraska’s MMIS and Medicaid Eligibility systems, the Nebraska Aging Management Information System (NAMIS), and the Behavioral Health Contract and Budget Management System.</p> <p>In addition to her Medicaid and broader health and human services experience, Regina has served in software engineering, architect, and technical analyst roles for system development projects in the e-commerce, banking, and retail industries.</p> <p>While Regina’s work has been primarily focused on system engineering and technical analysis, she has worked on projects with IV&V teams and understands the distinct roles between IV&V, project management, and application development.</p>
DMA Key Personnel		
DMA IV&V Project Manager	<p>A minimum of five (5) years of experience in managing or in a key management position for a large-scale healthcare IT development project that encompasses the full system development life cycle from initiation through post implementation; and</p> <p>Previous experience following a standard PM methodology and in using various project management tools in developing project plans, delivering tasks, and tracking timelines and resources.</p> <p>Previous Medicaid experience is preferred.</p> <p>Previous IV&V experience is preferred.</p> <p>PMI certification is preferred.</p>	<p>Brandon Milton will serve as our IV&V Project Manager for the DMA Project. Brandon has more than seven years of experience working in the government arena – five of which entailed serving in project management and leadership roles for West Virginia’s MMIS re-procurement, MMIS DDI and stabilization, and Data Warehouse/Decision Support System DDI. He has also served in a lead role in our work with CMS for West Virginia’s participation as one of three states on an MMIS certification pilot project.</p> <p>West Virginia was exempted from hiring an IV&V contractor and gained CMS’ approval to have BerryDunn complete QA reviews of MMIS vendor deliverables. As Project Manager, Brandon oversaw these reviews and the delivery of objective feedback to the State. The State’s MMIS went live in January 2016 – on time and on budget, without a single change order – which speaks to the quality and attention of our project management services, our proactive risk management and mitigation approach, and the thoroughness of our QA reviews.</p>

Key Position	Qualifications	BerryDunn Proposed Team Member
		<p>A certified PMP, Brandon is experienced applying PMI standards and practices on the engagements he leads. He regularly uses industry standard project management tools to develop project plans, deliver tasks, and track timelines and resources.</p>
<p>Two DMA IV&V Business / Test Analysts</p>	<p>A minimum of five (5) years of experience in business / test analyst responsibilities on projects of similar scope.</p> <p>Previous Medicaid experience is preferred.</p> <p>Previous IV&V experience is preferred.</p>	<p>Sudha Ganapathy has 24 years of experience in systems development, analysis, testing, and quality assurance. The past 15 years, she has dedicated her career to working with state Medicaid agencies. From 2000 to 2015, Sudha worked with large Medicaid Enterprise systems vendors, serving in a range of roles from software engineer for Oklahoma's and Louisiana's MMIS to QA Team Lead, with responsibility for defining QA strategy, estimates, and roadmaps; creating and executing test cases; analyzing and reviewing written test cases; and identifying and rectifying defects.</p> <p>Since June 2015, Sudha has served as part of BerryDunn's team providing project management for West Virginia's MMIS DDI, supporting UAT in the MITA business area of Provider Management. In addition, she assisted with managing the transition from West Virginia's existing Eligibility & Enrollment System vendor to a new vendor by identifying risks and issues prior to the transition, tracking defects, and providing feedback on process documents such as the Incident Management Report and Problem Management Report.</p> <p>Nicolle Field has more than ten years of experience working with healthcare providers, payors, and government health and human services agencies to improve the quality and cost of healthcare using data, analytics, and technology solutions.</p> <p>Since 2014, Nicole has been providing project management to support West Virginia's MMIS implementation and stabilization, with a focus on reviewing vendor deliverables and providing feedback to help ensure quality. In addition, she supported West Virginia's MITA 3.0 Lifecycle Maintenance and Technical Assistance project by facilitating information gathering sessions, updating MITA 3.0 documentation, and reviewing documentation with</p>

Key Position	Qualifications	BerryDunn Proposed Team Member
		<p>State SMEs to gain approval on content.</p> <p>Nicole served as Test Coordinator as part of BerryDunn's IV&V team for the Massachusetts HIX/IES implementation. In this role, she provided oversight and leadership for the BerryDunn and State testing resources and was responsible for joint customer/vendor testing, daily status reporting, weekly defect reporting, resource planning, content development, and facilitation of testing team meetings.</p> <p>Nicolle is a PMI-certified PMP. Both Sudha and Nicolle are Certified Six Sigma Green Belts, which benefits DHHS by bringing a structured and proven process improvement discipline to our work.</p>
<p>DMA IV&V Technical Analyst / Architect</p>	<p>A minimum of five (5) years of experience as a solutions architect for solutions of a similar size and scope.</p> <p>Previous IV&V experience is preferred.</p> <p>Previous Medicaid experience is preferred.</p>	<p>Jim Strassenburgh is a seasoned IT architect and operations technical manager of proven experience delivering large-scale, complex, IT solutions and conducting IV&V for large, multi-vendor system implementations.</p> <p>Since 2012, Jim has served in lead technical / architect roles as part of BerryDunn's IV&V team for Massachusetts' and Maryland's HIX/IES implementations and Missouri's Eligibility Determination and Enrollment System implementation. Through these projects, Jim has gained expertise with CMS formal and boundary testing, blueprint testing, and attestations; review and validation of major vendor releases; and requirements related to reusability. In addition, he has led architecture reviews, reviewed vendor deliverables, tracked progress, documented risks and issues, and served as a technical liaison with our state clients and their stakeholders.</p> <p>Prior to joining BerryDunn in 2012, Jim applied his technical expertise on multiple large data center infrastructure initiatives.</p>

Additional BerryDunn Project Team Resources

Our team of key personnel will be supported by the following BerryDunn resources:

- **Project Principal** – Tim Masse will serve as Project Principal, ensure BerryDunn’s full commitment to this engagement, and serve as a resource to our team and DHHS on large-scale Medicaid Enterprise system implementations. Tim leads BerryDunn’s Government Consulting Group and focuses primarily on leading our Medicaid Consulting engagements. He is currently overseeing our IV&V engagements for Missouri’s Eligibility Determination and Enrollment System implementation and Massachusetts’ HIX/IES implementation. He has also led IV&V and QA engagements for Maine’s MMIS implementation, New Hampshire’s Medicaid Decision Support System implementation, and West Virginia’s MMIS implementation – all of which achieved successful CMS certification.
- **Engagement Manager** – Bill Richardson will provide oversight of our EES and DMA IV&V teams, serve as Contract Manager, and ensure continuity across the BerryDunn IV&V teams. Bill has been working with state Medicaid agencies on MMIS, Eligibility, and related large-system implementation projects for 15 years. Most recently, he has been providing engagement management on our IV&V services contract for the Missouri Family Support Division’s Eligibility Determination and Enrollment System implementation.
- **Subject Matter Experts (SMEs)** – Our core IV&V teams will be supported by BerryDunn team members that bring deep expertise in areas such as systems security, CMS certification, and financial analysis. We have leveraged team members’ expertise on other IV&V engagements to conduct focused assessments and “deep dive” reviews of vendor deliverables and development activities. Our clients have appreciated this additional subject matter expertise being “a phone call away” and available as a resource for our IV&V team and the State.
- **Internal PMO and QA Resources** – All BerryDunn projects are supported by the following resources:
 - Our internal Program Management Office establishes and maintains standards, tools, and templates for effective management of our engagements and consistency across projects based on PMI standards.
 - Our Quality Assurance team conducts editorial reviews and proofing of all BerryDunn deliverables and documentation prior to submission to clients.

3.2.3 Staffing Plan for each project

Our staffing plan provides DHHS with approximately **4.0 FTEs for the EES Project and 4.0 FTEs for the DMA Project** to meet the needs of the core IV&V activities, as well as additional focused reviews. This staffing approach will benefit DHHS and the projects by providing:

- ✓ Consistent and dedicated core teams for the EES and DMA Projects that will work side-by-side with DHHS and your vendors and are invested in the success of the projects
- ✓ Experienced engagement oversight that will help to ensure consistency across the two projects and collaboration among the IV&V teams, DHHS, and your vendors
- ✓ Flexibility to bring in Subject Matter Experts (SMEs) with expertise in areas such as systems security, CMS certification, and financial analysis, and can conduct “deep dive” reviews of vendor deliverables and development activities based on specific project needs
- ✓ The ability to scale our team based on the SDLC phase and evolving status of EES and DMA vendor deliverables

We have used a similar staffing approach for our Medicaid Enterprise IV&V and QA oversight engagements in Maine, Maryland, Massachusetts, Missouri, New Hampshire, and West Virginia, and have found that this approach has benefitted our clients and their projects by providing a strong core team – together with a level of flexibility and scalability – to successfully perform IV&V services.

Table 11 describes the roles and responsibilities for BerryDunn project team members, as well as the estimated full-time equivalent (FTE) allocation for each role to the project.

Table 11. BerryDunn Project Team Roles, Responsibilities, and Estimated FTEs

Project Role/Names	Responsibilities
Engagement Oversight	
<p>Timothy Masse, MBA <i>Project Principal</i></p> <p>Bill Richardson, PMP <i>Engagement Manager</i></p> <p>.20 FTE</p>	<ul style="list-style-type: none"> • Provide contract management and project oversight • Oversee the EES and DMA IV&V teams and ensure continuity and collaboration between the two teams • Provide subject matter expertise in the areas of IV&V, state and federal regulatory requirements, program compliance, and large-scale health and human services systems implementations • Participate in meetings and presentations with State leadership and other key stakeholders, as appropriate • Maintain overall responsibility for the quality of BerryDunn services and deliverables • Ensure the full commitment of BerryDunn to this engagement • Approximately 50% of this team’s work will be conducted on-site at DHHS offices.

Project Role/Names	Responsibilities
EES Project Team	
<p>Beth Jenckes, PMP, CSM, ITIL <i>IV&V Project Manager for EES</i></p> <p>1.0 FTE</p>	<ul style="list-style-type: none"> • Serve as Primary point of contact for the EES IV&V engagement • Develop and maintain EES IV&V Project Management Plan and Project Schedule • Lead project initiation and project close-out activities • Plan and allocate BerryDunn’s IV&V resources • Perform day-to-day project and staff oversight • Maintain clear lines of communication and coordination of team members, both within our IV&V team and between our IV&V team and the DHHS, CMS, and vendor teams • Participate in project meetings with DHHS and vendor personnel • Perform issue and risk management • Prepare Weekly IV&V Status Reports and Monthly IV&V Reports and facilitate weekly and monthly review meetings • Conduct fact-finding, review, and analysis activities • Oversee deliverable creation • Provide Medicaid, eligibility, and ACA subject matter expertise • Work on-site at DHHS offices a minimum of 90%
<p>Karen Jones, PMP, PMI-RMP, Andrea Thrash, PMP <i>IV&V Business/Test Analysts</i></p> <p>1.7 FTE</p>	<ul style="list-style-type: none"> • Support IV&V project planning and kick-off preparations • Create, refine, and maintain IV&V checklists, reports, and monitoring and tracking tools • Conduct fact-finding, review, and analysis activities to identify gaps and evaluate project risks, with a focus on project management and testing processes • Participate in project meetings with DHHS and vendor personnel • Review and evaluate vendor deliverables and work products • Assess project testing activities, including test scenarios, cases, and results • Evaluate operational readiness • Provide IV&V services for CMS in support of the certification process • Develop IV&V deliverables and work products, including providing input into the Monthly IV&V Report and Weekly Status Reports • Work on-site at DHHS offices a minimum of 50%, to include requirements and design meetings and system readiness activities
<p>Regina Blazek <i>IV&V Technical Analyst/Architect</i></p> <p>1.0 FTE</p>	<ul style="list-style-type: none"> • Support IV&V project planning and kick-off preparations • Create, refine, and maintain IV&V checklists, reports, and monitoring and tracking tools • Conduct fact-finding, review, and analysis activities to identify gaps and evaluate project risks, with a focus on systems development, information architecture, data architecture, modularity, and integration with other systems

Project Role/Names	Responsibilities
	<ul style="list-style-type: none"> • Participate in project meetings with DHHS and vendor personnel • Review and evaluate vendor deliverables and work products • Evaluate operational readiness • Provide IV&V services for CMS in support of the certification process • Develop IV&V deliverables and work products, including providing input into the Monthly IV&V Report and Weekly Status Reports • Work on-site at DHHS offices a minimum of 90%, to include technical requirements and design meetings
DMA Project Team	
<p>Brandon Milton, PMP <i>IV&V Project Manager for DMA</i></p> <p><i>1.0 FTE</i></p>	<ul style="list-style-type: none"> • Serve as Primary point of contact for the DMA IV&V engagement • Develop and maintain DMA IV&V Project Management Plan and Project Schedule • Lead project initiation and project close-out activities • Plan and allocate BerryDunn’s IV&V resources • Perform day-to-day project and staff oversight • Maintain clear lines of communication and coordination of team members, both within our IV&V team and between our IV&V team and the DHHS, CMS, and vendor teams • Participate in project meetings with DHHS and vendor personnel • Perform issue and risk management • Prepare Weekly IV&V Status Reports and Monthly IV&V Reports and facilitate weekly and monthly review meetings • Conduct fact-finding, review, and analysis activities • Oversee deliverable creation • Provide Medicaid, eligibility, and ACA subject matter expertise • Work on-site at DHHS offices a minimum of 90%
<p>Sudha Ganapathy, ITIL, CSSGB Nicolle Field, PMP, CSSGB <i>IV&V Business/Test Analysts</i></p> <p><i>1.7 FTE</i></p>	<ul style="list-style-type: none"> • Support IV&V project planning and kick-off preparations • Create, refine, and maintain IV&V checklists, reports, and monitoring and tracking tools • Conduct fact-finding, review, and analysis activities to identify gaps and evaluate project risks, with a focus on project management and testing processes • Participate in project meetings with DHHS and vendor personnel • Review and evaluate vendor deliverables and work products • Assess project testing activities, including test scenarios, cases, and results • Evaluate operational readiness • Provide IV&V services for CMS in support of the certification process • Develop IV&V deliverables and work products, including providing input into the Monthly IV&V Report and Weekly Status Reports

Project Role/Names	Responsibilities
<p>Jim Strassenburgh <i>IV&V Technical Analyst/Architect</i></p> <p>1.0 FTE</p>	<ul style="list-style-type: none"> • Work on site at DHHS offices a minimum of 50% to include requirements and design meetings and system readiness activities • Support IV&V project planning and kick-off preparations • Create, refine, and maintain IV&V checklists, reports, and monitoring and tracking tools • Conduct fact-finding, review, and analysis activities to identify gaps and evaluate project risks, with a focus on systems development, information architecture, data architecture, modularity, and integration with other systems • Participate in project meetings with DHHS and vendor personnel • Review and evaluate vendor deliverables and work products • Evaluate operational readiness • Provide IV&V services for CMS in support of the certification process • Develop IV&V deliverables and work products, including providing input into the Monthly IV&V Report and Weekly Status Reports • Work on-site at DHHS offices a minimum of 50%, to include technical requirements and design meetings
Project Resources/SMEs	
<p>Subject Matter Experts:</p> <ul style="list-style-type: none"> - Eigen Heald, MsIA, CEH, CISA, CISSP, GCFA - Nicole Becnel, PMP - Yoko McCarthy, MBA, CFE, CISA <p>.10 FTE</p>	<ul style="list-style-type: none"> • Augment our core team and provide subject matter expertise and advisory services in specific areas of focus, including: <ul style="list-style-type: none"> ○ Eligibility and Enrollment ○ IT Security ○ Medicaid Enterprise Systems ○ Medicaid Policy ○ System Testing ○ CMS certification ○ Financial Analysis • We anticipate that most work performed by the SMEs will be conducted off-site; however, they can provide on-site support based on the needs of the project

3.2.4 Organizational Chart for each project team

On the following pages, we have provided organizational charts for the EES and DMA IV&V Project Teams (Figures T and U).

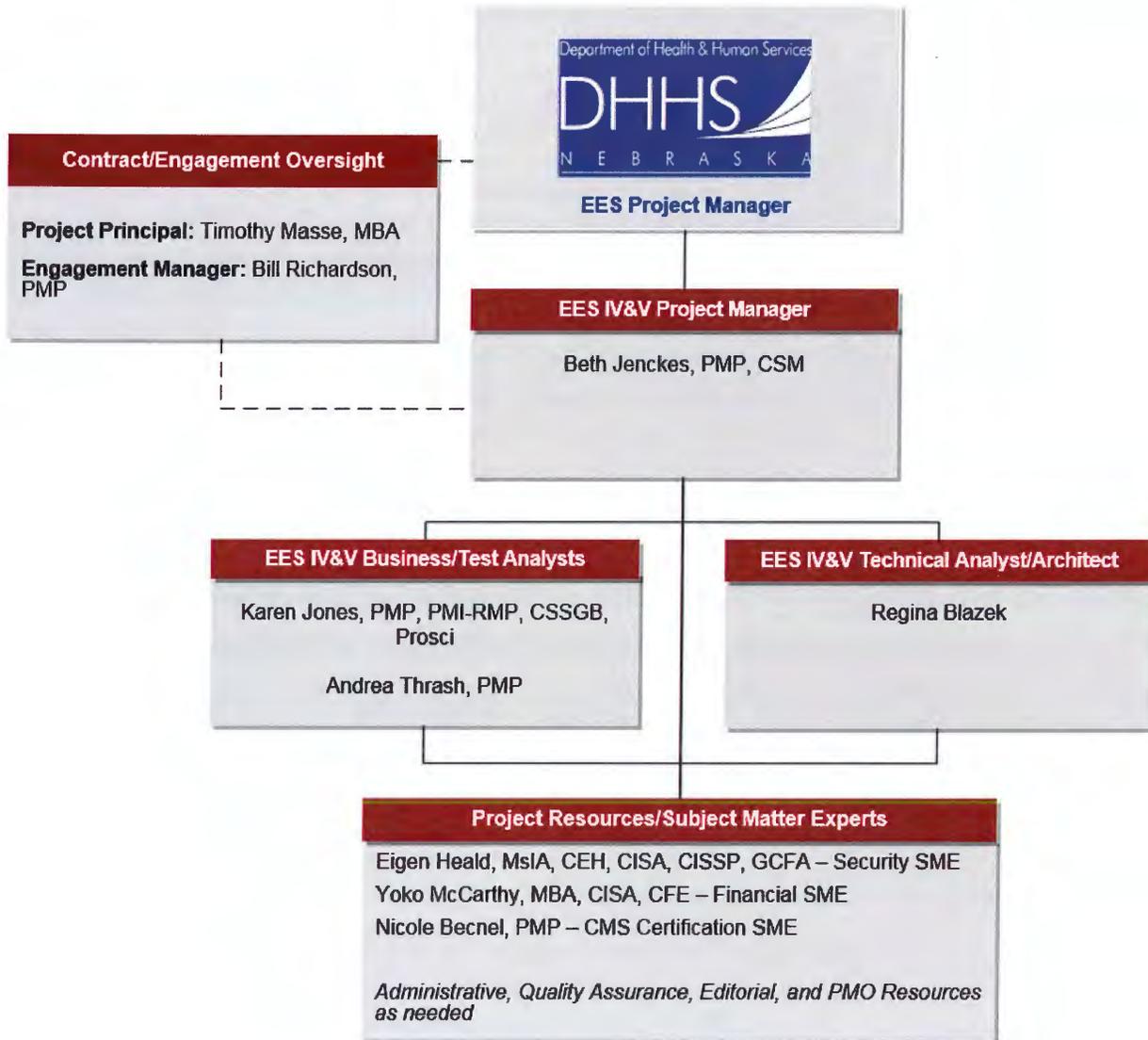


Figure T. BerryDunn's IV&V Team for the EES Project

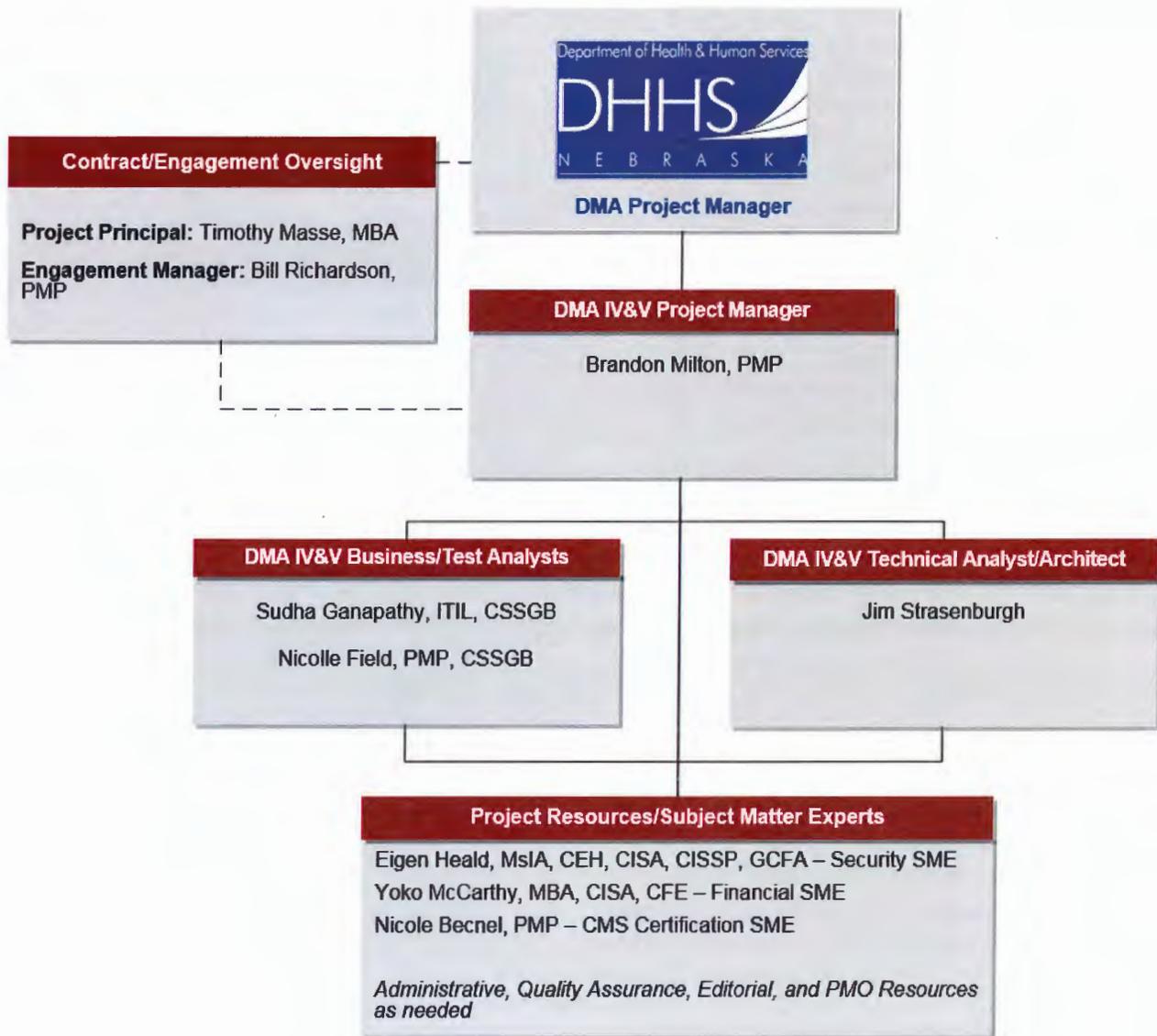


Figure U. BerryDunn's IV&V Team for the DMA Project

3.2.5 Strategy and approach to maintaining the appropriate number of staff for each position

BerryDunn recognizes that the quality of our services and our organization depends on the talents and capabilities of our employees. We further understand that **client satisfaction depends upon continuity of personnel assignments.**

BerryDunn has always made staff retention a top priority. We focus on:

- **Hiring the right candidates.** BerryDunn's Human Resources Department has established processes for recruiting, screening, and hiring full-time employees and subcontractors nationally. These processes help to ensure we hire individuals that are the right fit for our firm's culture and for our client engagements – thereby strengthening our ability to maintain continuity of personnel assignments.
- Providing opportunities for **professional challenge and growth.** We encourage each individual to work with management to develop his/her own plans for growth and success within our firm. We maintain a Professional Growth Continuum and each employee creates his or her own Individual Development Plan, updated annually, that:
 - Aligns employee goals with firm goals
 - Describes the specific competencies the individual plans to achieve
 - Sets forth plans for professional development to help achieve individual goals
 - Provides each person with a clear path for professional and personal growth
- **Building for the long term.** We invest in continuing professional education and the development of our employees. All BerryDunn professional employees are required to complete a minimum of 120 hours of Continuing Professional Education (CPE) every three years. Typically our consulting team members exceed this requirement by participating in workshops and conferences, obtaining and maintaining relevant professional and technical certifications, and participating in internal training sessions relevant to the clients we serve.

Core Tenets of BerryDunn's Hiring and Staff Management Practices:

- *Hire candidates with the **right skill-sets and expertise** for the role they will fill and that fit within BerryDunn's culture*
- *Provide **opportunities for professional challenge and growth***
- ***Build for the long term** by providing opportunities for continuing education*
- *Provide **objective feedback** to facilitate growth*
- *Allow employees to **maintain an appropriate work and personal life balance***
- ***Invest in the communities in which we work** – through local recruiting, support for local businesses, and opportunities for staff to contribute to local organizations*

- **Utilizing objective feedback to facilitate growth.** At least twice each year, personnel are encouraged to provide performance evaluations for other BerryDunn team members, including supervisor, peer, and upward evaluations. Additionally, team members are encouraged to seek out performance evaluations to provide them with feedback regarding their work and assist them in identifying opportunities for growth and improvement. Any time a consultant is engaged on a project for more than 40 hours, the Project Manager for the engagement is expected to provide a written evaluation for the team member.

As a result of our hiring and staff management practices, **our turnover rate is significantly below similar companies in our industry.** *This level of continuity on client engagements increases efficiency, helps to ensure an appropriate level of staffing, and minimizes the time required of client personnel to introduce a new member of the engagement team to its operations.*

Plans to Minimize Impact of Personnel Changes

While BerryDunn prides itself on low staff turn-over and continuity on projects, we recognize that staffing changes are likely to occur on multi-year engagements. During project planning, we will work with DHHS to document an agreed-upon process for bringing new people onto the project, replacing key personnel, and gaining DHHS' approval for staffing changes, in alignment with DHHS' procedures described in Section IV.C.1 of the RFP.

In the event we need to draw upon backup personnel, we have established processes to provide new project team members with the information they need to gain an understanding of the history of the project and quickly get up to speed on the current status of the project. This helps to minimize the impact of changes to project personnel and facilitate a seamless hand-off of responsibilities. We applied these processes in our recent transition of key personnel on an IV&V engagement:

We have been working with the Missouri Department of Social Services since October 2013 to provide IV&V for Missouri's Eligibility Determination and Enrollment System project. We recently transitioned to a new IV&V Project Manager from our original IV&V Project Manager, who had served in this role for 32 months. We viewed this transition as a growth opportunity for one of our Senior Analysts, who has been working on this project for more than a year, knows the project and client well, and is well qualified to step into this leadership role.

In planning for the transition, we chose a timeframe when the project would not be negatively impacted by a change in this important role. Additionally, we built in time for mentoring and preparing the new IV&V Project Manager to serve in this role prior to completing the transition.

We communicated plans to transition our Project Manager well in advance of the transition date to allow time to address the State's concerns. Our client at the State of Missouri was fully supportive of this planned transition. We encourage you to speak with our client in Missouri to inquire about our commitment to providing a seamless transition to the IV&V project.

Proven Processes for Maintaining Key Personnel Roles

When looking to fill a position on any project, we will first consider the skill-sets and availability of BerryDunn's team of consultants, as well as our diverse pool of subcontractors with whom we have had prior successful relationships, to evaluate level of fit for the position. If internal and subcontractor candidates are not available, we will draw upon the experts on BerryDunn's Human Resources and Recruiting team. Because we work with clients nationally, our recruiting efforts focus on finding the right individuals based not only on their qualifications but also on the geographical needs of the client. BerryDunn is committed to supporting the local workforce by recruiting and hiring locally.

During the hiring stage, candidates are required to take the Predictive Index® (PI®) behavioral assessment. The PI® is a science-based assessment that provides BerryDunn management with accurate, actionable data quantifying the unique motivating needs and behavioral drives of employees and potential employees. The results of the PI® are used by managers to analyze, align, and optimize our individuals and teams. The PI® is work-related, free of bias, valid, and reliable. It is designed to help employers comply with the Equal Employment Opportunity Commission's (EEOC's) Uniform Guidelines on Employee Selection Procedures.

On a short-term basis, should the need arise to have a back-up for any team member (e.g., due to an illness, vacation, or other reason), we will work with our internal management team and our Resource Managers to identify qualified resources with the availability and expertise to fill the role and avoid a gap in services for DHHS.

3.3 Logistics

3.3.1 Address the approach to meeting each requirement in a table that contains the requirement and the contractor's approach to meeting the requirement.

	Requirements	BerryDunn Response
1	Must store all work products in DHHS designated repository and using designated folder structure.	In our IV&V role on other Medicaid projects, we are accustomed to working within clients' established work sites and following established protocol and procedures—such as project repositories (e.g., SharePoint collaboration sites), folder structures, templates, and naming conventions. BerryDunn agrees to store all work products in DHHS designated repository and using the designated folder structures.
2	Must have controlled access to all contractor facilities where any contract related work is performed in compliance with privacy and security requirements.	BerryDunn will comply with this requirement. As a Certified Public Accounting and Consulting firm, we routinely handle sensitive client information. Accordingly, we place significant emphasis on maintaining a secure work environment, which includes the physical security of our facilities. All BerryDunn offices require an employee-issued security card to enter office space. Our Portland, Maine, Office (where our data center is located) has around the clock security guards that check on the server room as part of their rounds.

3.3.2 Provide an overview and describe the bidder's facilities where the contractor staff may perform work when not on-site in Lincoln.

In our experience, co-location of team members is critical to the success of an IV&V project of this size and scope and we have planned for a significant on-site IV&V presence throughout the project. We also recognize there will be times during the project that require more on-site activities than others, and that some tasks can be conducted just as effectively off-site and minimize disruptions to the project team's day-to-day operations. For planning purposes, we estimate that every day during the project, a minimum of two people will work on-site at DHHS offices for both the EES and DMA projects, although often this number will be greater. This will enable our team to be available when needed to cover meetings and/or participate in project activities.

When members of our team are performing work when not on-site in Lincoln, they will work from one of BerryDunn's established office facilities or from their home offices. Our offices and employees' home offices are all equipped with the necessary technology and infrastructure for our employees to work effectively, including printers, phone systems, teleconferencing, video-

conferencing, and web-based project management tools (such as SharePoint and GoTo Meeting). Additionally, all of our consultants are provided with the necessary technology to enable them to work effectively regardless of their location. We encourage the Evaluation Committee to ask our references about our commitment to meeting project needs regardless of the work location of our team members.

Our IV&V Project Managers will review project tasks with DHHS and determine appropriate off-site activities to ensure that off-site work will not negatively impact the project. Examples of potential work that may be conducted off-site include selected vendor deliverable reviews and development/review of BerryDunn project deliverables. No services will be performed offshore.

3.4 Privacy and Security

3.4.1 Address the approach to meeting each requirement in a table that contains the requirement and the contractor's approach to meeting the requirement.

	Requirements	BerryDunn Response
1	Must develop and submit a Privacy and Security Plan work product that includes a description of how contractor safeguards all state information that is transmitted within contractors systems (i.e. email). The plan must be approved by DHHS prior to the contractor having access to project materials.	BerryDunn will develop and submit a Privacy and Security Plan that describes how we will safeguard all State of Nebraska information that is transmitted within our systems. We understand that this plan must be approved by DHHS prior to our team having access to project materials. See responses to Sections 3.4.2 through 3.4.6 for additional information on our privacy and security procedures and approach to meeting this requirement.
2	Must comply with all security and privacy laws, regulations, and policies, including HIPAA, and related breach notification laws and directives.	<p>As a Certified Public Accounting and Consulting firm, BerryDunn regularly handles sensitive client information. Accordingly, we have always placed significant emphasis on complying with security and privacy laws, regulations, and policies, including HIPAA and related breach notification laws and directives.</p> <p>Additionally, within our Government Consulting Group, we have a dedicated team of consultants that works with states to evaluate the strength of their security procedures and develop strategies to strengthen compliance and minimize risks. For example, we were hired by the Missouri Department of Social Services to conduct Security Risk Assessments for Missouri's Eligibility Determination and Enrollment System and MMIS. This requires our team to have a thorough understanding of these laws, regulations, and policies – both at the federal and state levels – and how they apply to our clients' information systems and associated policies and procedures. This knowledge is also leveraged in evaluating and strengthening our internal practices.</p> <p>For our work with the State of Nebraska, we will comply with all security and privacy laws, regulations, and policies, including HIPAA, and related breach notification laws and directives.</p>
3	Must provide initial and ongoing privacy and security and HIPAA compliance training to all employees and contract	All BerryDunn employees are required to complete training on privacy, security, and HIPAA compliance, both upon their initial employment with BerryDunn

	Requirements	BerryDunn Response
	personnel assigned to the project prior to providing access to PHI.	and on an annual basis. We will review our current training materials with DHHS to gain approval for the training. Prior to any of our proposed Nebraska IV&V team members (including employees and subcontractors) gain access to PHI, they will be required to complete the training and provide a certificate of completion to the DHHS Contract Manager. On an annual basis, our team members will complete the annual refresher training and provide evidence of completion to DHHS.
4	Must take all reasonable industry recognized methods to secure the system from un-authorized access.	<p>As noted in response to #2 above, BerryDunn regularly handles sensitive client information. Accordingly, we take significant steps toward maintaining the security of our systems from unauthorized access.</p> <p>For our work with Nebraska, we will take all reasonable industry recognized methods to secure our systems from unauthorized access. Additional information on our approach to maintaining the security of our systems is described in Sections 3.4.2 through 3.4.6 below.</p>
5	Must permanently destroy all confidential data and protected health information entrusted to the contractor for the performance of the contract upon approval of DHHS.	<p>We agree to permanently destroy all confidential data and protected health information entrusted to BerryDunn for the performance of the contract.</p> <p>Prior to obtaining confidential data and protected health information, we will prepare and gain DHHS approval on a written plan that describes who will have access to the information, how the information will be used and securely maintained, and when and how the information will be permanently destroyed. Prior to beginning the destruction of confidential data and information, we will gain DHHS' written authorization to proceed.</p>

3.4.2 Description of the proposed strategy, methodology, and capabilities for systems, operational, and physical security.

As a Certified Public Accounting and Consulting firm, we handle large amounts of confidential client information. Following are specific steps we have in place to manage our firm's security and the security, confidentiality, and integrity of customers' data:

- **Information Security Management, Risk Assessment, and Risk Mitigation:**
 - Our firm's Compliance Officer, Dennis Lemieux, is responsible for monitoring and managing our compliance with laws and regulations impacting our firm, including the maintenance of firm-wide information security.
 - Our Technology Advancement Committee (TAC) meets three times per year to evaluate our technology practices, including security and risks associated with our use of technology and planned technology projects. The TAC meets annually to review all security policies.
 - The firm has a bi-annual third-party security review performed, the results of which are reviewed by our TAC to determine steps required to mitigate known risks.
- **Organization of Information Security:** The firm has a written Information Security Policy, which applies to all BerryDunn employees, subcontractors, temporary staff, and interns who use BerryDunn computing or networking resources and applies to all computers, software, network systems, and information appliances owned or administered by BerryDunn. The Information Security Policy:
 - Includes guidelines and requirements associated with handling of personal and sensitive information
 - Defines roles, responsibilities, and procedures for Information Owners, Custodians, and Users in order to maintain appropriate levels of information security and access to confidential or sensitive information
 - Defines the firm's Internet Security Policy
 - Provides policies and guidelines associated with passphrases, social media, electronic mail, personal software, backup and maintenance of data, and personal use of firm information systems
- **Human Resources Security:** Employees are required to participate in an annual Human Resources training program, which addresses a range of topics including HIPAA and protection of confidential and sensitive information. In addition, we have procedures in place to maintain the confidentiality of firm-related employee data.
- **Physical and Environmental Security:** Our offices require an employee-issued security card to enter office space. Our Portland, Maine, Office (where our data center is located) has around the clock security guards that check on the server room as part of their rounds. We also monitor our servers for uptime, temperature, disk space, and other metrics. The firm's data center is protected by a battery backup system, backup cooling,

and a generator. All data is backed up to encrypted tape and taken off site to a third party vendor daily.

- **Communications and Operations Management:** Our firm's Compliance Officer manages security-related communications and operations.
- **Information Access Controls:** BerryDunn personnel have access to confidential client information on a "need to know" basis. We have the capability of locking down certain files on our server, as warranted, to restrict access to those who are approved to view the data.

The Firm has developed a separate and comprehensive Electronic Media Policy, which all staff members and subcontractors are required to review and sign. This policy is intended to protect the integrity of our systems and to make certain our systems are used only for appropriate purposes.

All sensitive data that is stored on BerryDunn's mobile devices must be encrypted using software or hardware provided by BerryDunn's IT Department. We maintain standards for the use of User IDs and Passphrases in order to access information systems. In addition, we maintain written policies regarding the release of information to third parties, backup and maintenance of data, and theft protection.

- **Information Security Acquisition Development and Maintenance Lifecycle.** Our TAC meets three times per year and is responsible for reviewing information system acquisitions and evaluating the security and potential risks associated with systems being considered by our firm.
- **Business Continuity.** BerryDunn maintains a Disaster Recovery Plan, which includes control measures (i.e., preventive, detective, and corrective measures) to reduce various threats that may impact our firm and our operations. We maintain a high availability virtual machine cluster that allows our servers to move between physical devices and even between offices in the event of the loss of a physical server in our datacenter or the loss of the data center itself.
- **Secure File and Message Transfer.** BerryDunn utilizes a secure file and message transfer system called Thru Certified Online Delivery to send confidential messages and sensitive files via the Internet. Benefits of this secure system include:
 - This service has a high security certification
 - File deliveries are certified
 - Data is encrypted while it is being transferred across the Internet and while it is being temporarily stored on the Thru servers
 - Files are password protected
 - The system does not require our clients to install any software

- BerryDunn requires all subcontractors to comply with our firm's written policies and any client-specific requirements when conducting work on an engagement. BerryDunn has an established subcontractor orientation and training, which addresses our required security policies and procedures.

3.4.3 Sample Privacy and Security Plan from a previous project.

BerryDunn has not developed a formal Privacy and Security Plan for previous projects; however, we have regularly provided and review BerryDunn's Privacy and Security Policies and Procedures and our approach to handling secure client information with our clients. In addition, all BerryDunn employees and subcontractors engaged on a project are required to comply with our Privacy and Security Policies and Procedures and any project-specific requirements for handling sensitive information.

In addition, as part of our IT Security Assessment engagements, we routinely evaluate clients' Privacy and Security Plans and provide recommendations for strengthening the plans to address potential risks and known gaps.

3.4.4 Privacy and Security Plan template with instructions and procedures for completing the template.

On the following pages, we have provided a Privacy and Security Plan template, which we will review with DHHS during initial planning to refine and complete according to established privacy and security standards for this engagement.

Nebraska EES and DMA IV&V Privacy and Security Plan Template

Effective May 18, 2018
Draft for Proposal Submission

PURPOSE OF THIS PLAN

The purpose of this template is to describe policies and procedures that apply to any BerryDunn team member (employee or subcontractor) that provides IV&V services for the Nebraska Eligibility and Enrollment System (EES) and/or Data Management and Analytics (DMA) projects.

This Privacy and Security Plan is intended to assure that the BerryDunn team maintains the privacy and security of confidential information related to the EES and DMA projects. All team members must follow these policies and procedures.

BerryDunn Privacy and Security Officer: Name, Telephone, Email

Nebraska DHHS Privacy and Security Officer: Name, Telephone, Email

DEFINITION OF CONFIDENTIAL INFORMATION

This section will provide a definition of confidential information as it relates to the EES and DMA projects and describe the types of information that may be accessed by the IV&V team that are considered confidential.

ACCESS CONTROLS

This section will describe reasons that IV&V team members may access confidential information and how confidential information is authorized and accessed.

WORK-SITE PRACTICES

This section will describe specific procedures for employees' individual workstations that may contain confidential information, such as:

- Protocol for locking workstations when unattended and closing down computers at the end of the day
- Procedures for storing electronic and paper copies of confidential information
- Procedures for handling and securing information on laptops and other portable electronic devices
- Limitations around sharing information with other team members (electronically, via phone, and in person)

PASSPHRASE PROCEDURES

This section will describe policies and procedures associated with passphrases for accessing the BerryDunn or State network, email, software, and project collaboration sites.

TRANSMITTING CONFIDENTIAL INFORMATION

This section will describe procedures for transmitting information via email, voicemail, fax, other electronic methods (e.g., electronic data interchange, fire transfer protocol, or third-party secure document delivery service), and physical means via courier (e.g., FedEx or UPS).

In addition, this section will describe procedures for securing information on electronic media (e.g., CDs, thumb drives),

RETAINING AND DISPOSAL PROCEDURES

This section will describe procedures for retaining and disposing of confidential information.

IDENTITY VERIFICATION PROCEDURES

This section will describe procedures for verifying the recipient's identity before disclosing any confidential information to an outside individual or entity to ensure that the disclosure is a permitted and authorized disclosure.

SANCTIONS

This section will describe disciplinary actions for cases when an individual has failed to comply with the policies and procedures set forth in this document.

MITIGATION STRATEGIES

This section will describe the high-level steps BerryDunn will take to address potential disclosure of confidential information, as agreed upon with Nebraska DHHS.

Attachments:

- *BerryDunn's Information Security Policy*
- *BerryDunn's Internet Security Policy*
- *BerryDunn's Privacy and Security Training Overview*
- *BerryDunn's Human Resources Policies and Procedures*

3.4.5 Description of how workforce privacy and security awareness is supported.

Employees are required to participate in a Human Resources training program, both upon hire and on an annual basis, which addresses a range of topics including HIPAA and protection of confidential and sensitive information. In addition, all employees are required to read the firm's Information Security Policy and submit a signed form stating that they have read the policy.

3.4.6 Description of the approach to monitoring attempted security violations and the actions that will be taken when security violation attempts are made, as well as breaches.

BerryDunn has a comprehensive set of procedures in place to maintain and monitor the security of our information systems:

- **Password/Passphrase Policy** – BerryDunn requires that each employee accessing information systems have a unique user ID and private passphrase (password). We have established procedures related to the number of characters and complexity of the passphrase, minimum and maximum number of days in which passphrase can be used, procedures for storing and sharing passphrases, and number of invalid log-in attempts before an account will be disabled.
- **Detecting Unauthorized Access** – BerryDunn's IT Department monitors unauthorized access to our systems or network through our firewall IPS system, Symantec Endpoint Control, as well as through our Dell Secure Works SIEM and alerting system. If we detect unauthorized access, we take whatever steps are necessary to rectify the situation. If we do not have the expertise in house, we will exercise our retainer with Dell Secure Works for expert help and guidance to respond to a complex data breach.

Following are additional questions we are occasionally asked by clients related to BerryDunn's information security procedures, together with our responses:

Q: Is any sensitive client information transmitted over HTTP (e.g., in personal e-mail accounts like Hotmail, Gmail, or an Internet fax utility, such as EFax)?

A: No, all sensitive information is sent one of two secure email services which are Commonwealth Financial Network's secure email service or Thru Inc.'s Secure Enterprise Certified Secure Delivery system.

Q: Is training in place to ensure that new and current employees understand when to utilize secure e-mail or secure file transfer?

A: Yes, all employees are trained during orientation and refresher training is available periodically and by request by Practice Group Managers. All employees are annually tested for knowledge of the firm's security policies and annually take a test as part of their recertification.

Q: Which hard drive encryption utility is installed on laptops used for business purpose?

A: All Firm laptop hard drives are configured with full disk encryption by WinMagic. All encryption utilizes pre-boot authentication. The Firm does not have any desktop computers.

Q: What portable media encryption product or pre-encrypted portable media products do you use?

A: All firm laptops utilize WinMagic Portable Media Encryption. All computers (with the exception of a handful of administrative stations) have a software policy that will not allow placing unencrypted data on removable media.

Q: What type of hardware firewalls will/do you employ?

A: The firm utilizes two Fortinet FortiGate 310 series security appliances with IDS/IPS.

Q: How do you secure your wireless networks?

A: The firm utilizes the WPA2 Enterprise security protocol to allow firm laptops access to internal resources. Separate unsecured guest wireless access is provided for BerryDunn clients that require authenticating to a captive portal. This traffic is segregated from all other traffic and is only granted access to the Internet. Both networks are also protected by web filtering technology.

Q: If needed, how is remote access to the office network configured?

A: The firm has two methods of remote access. We utilize a Citrix Netscaler (TLS 1.2 encryption) for web based remote access and a traditional IPSEC VPN (AES encryption). Both systems require a user ID, passphrase and RSA SecurID for multi-factor authentication.

Q: Which antivirus and malware protection software is implemented?

A: The firm currently utilizes Symantec Endpoint Protection.

Q: How often are antivirus definitions updated?

A: Every four hours.

Q: How often are full virus scans performed on office computers?

A: Weekly

Q: Describe you patch management process.

A: We manage patches for all Microsoft products in conjunction with their monthly patch cycle via WSUS. All other applications are patched as needed via our software deployment mechanism, SpecOps Deploy.

Following are Q&As related to BerryDunn's SharePoint project collaboration site, BerryDunn KnowledgeLink.

Q: Describe the technical configuration of *BerryDunn KnowledgeLink* including version numbers and patch levels.

A: *Application and Web Server:* Windows 2008 R2 SP1

Database Server: Windows: SQL Server 2012 SP1

Web Service: Internet Information Server Version 6.1 SP1

Q: Describe BerryDunn policies and procedures that address access security controls regarding *BerryDunn KnowledgeLink*.

A: BerryDunn has several policies and procedures that address *BerryDunn KnowledgeLink* access controls which are attached to this document and include:

- Password reset procedure
- *BerryDunn KnowledgeLink* Security Change Request
- Bi-annual third party security assessments
- Password Policies
- Quality assurance and security test of all new project sites

Q: Explain your patch management process in updating *BerryDunn KnowledgeLink*.

A: The *BerryDunn KnowledgeLink* application/web server and database server receive monthly OS updates in accordance with our server patching schedule. The SQL server is patched on the 3rd Tuesday of every month and application servers are patched on the 4th Tuesday of every month. Patches are first downloaded by our WSUS server, reviewed, approved, and then installed on less mission critical systems first. We then continue to install the patches based on the schedule I mentioned previously.

Q: How does Berry Dunn approach "zero-day vulnerabilities"?

A: *Identification:* As soon as we are alerted of a zero-day vulnerability, we investigate to learn more about the issue.

Preparation: We immediately start our incident response process. This may include some planning based on the information we gathered during identification.

Containment: We use the information and strategy obtained during preparation to contain the malware.

Eradication and Recovery: After we contain any outbreak we then move on to eradicate the malware and start any necessary recovery tasks.

Lessons Learned: After all incidents the people involved meet to discuss lessons learned and what could have been done better. A report on all major incidents is prepared and submitted to the Director of Operations. All security incidents are then reviewed annually by the Firm's Management Committee.

Q: What other services are present and/or are hosted on that same server as *BerryDunn KnowledgeLink*, if any?

A: *BerryDunn KnowledgeLink* does not host any other services except the *BerryDunn KnowledgeLink* client collaboration sites.

Q: Describe *BerryDunn KnowledgeLink* authentication and authorization controls.

A: *BerryDunn KnowledgeLink* uses standard Microsoft Active Directory based user ID and password authentication for clients, employees and subcontractors authentication.

Q: Describe any backup processes, procedures, and systems for *BerryDunn KnowledgeLink*:

A: *BerryDunn KnowledgeLink* is a virtual server and the Firm backs up the entire server as well as backing up the database as a separate backup job. We keep all monthly backups for one year, daily backups for 2 weeks and weekly backups for 6 weeks. We maintain 30 days of backups on our disk backup as well as the tape backups referenced above. All tape backups are encrypted with 256bit AES encryption and stored off site in a fireproof secure environment.

Q: Explain business resumption regarding *BerryDunn KnowledgeLink* in case of disaster recovery requirements

A: *BerryDunn KnowledgeLink* is hosted on a high availability hyper-converged virtual environment. If any host is lost the servers can be rebooted on another server in the cluster. This high availability infrastructure is in a server room with redundant cooling, battery backup system and generator. Our hyper-converged infrastructure is also replicated to a secondary location. The generator is tested twice a year.

The *BerryDunn KnowledgeLink* system can also be restored from backup within a relatively short period of time.

Q: How do you ensure accounts only have access to the services/data for which they have been authorized?

A: We ensure that accounts only have the access to the services/data that they have been authorized by following our *BerryDunn KnowledgeLink* Security Change Request and only allowing the project manager to determine access levels. The project manager is the person that is most intimately familiar with the clients security needs and the individual accounts level of 'need to know'.

We also run a database job that disables all *BerryDunn KnowledgeLink* accounts that have not been used in 12 months and then deletes them after they have been disabled for 18 months.

Q: How do you verify users before password resets?

A: When a request is made to reset an Active Directory password for an employee or subcontractor our helpdesk verifies the identity of the person by asking for their name and last four digits of their social security number.

For client accounts for *BerryDunn KnowledgeLink* we do not identify the person but run a process to reset the password. This process automatically emails the password to the email address on record used to originally set up the account. This password is sent using an encrypted email service.

Q: What are your first time password use and change requirements for *BerryDunn KnowledgeLink*?

A: When we set up a SharePoint account for a client the system generates a random password and emails it directly to the client. The client is not required to change the password. Employees and subcontractors are required to change their password on accounts set up for them.

Q: Describe your policy on generic or shared accounts.

A: Excerpt from BerryDunn Password Policy:

Sharing Passphrases:

If employees need to share computer-resident data, they must use Thru Certified Delivery, public directories or folders on local area network servers, mobile media exchange, a password protected shared local data folder, and other mechanisms.

Passphrases must never be shared with or revealed to others. System administrators and other technical information systems staff may ask a worker to reveal their personal passphrase. Only share your passphrase with an IT department employee that you know and recognize. Never give your passphrase to a stranger that tells you they are an IT employee. After the IT employee is finished working with your passphrase you must change it within 24 hours. If a user believes that his or her user ID and passphrase are being used by someone else, the user must immediately notify the System Administrator or IT Manager.

Incorrect login attempts and any policy regarding lockout and timeouts

After five failed login attempts the account is locked for 15 minutes.

Q: Explain Berry Dunn auditing cycle / policy of *BerryDunn KnowledgeLink* to ensure it is up to date with all required controls

A: The Firm engages the McMillen Group to perform an annual security audit of all Firm technology, policies and procedures. This is reviewed by the IT Director, Director of Operations and the Management Committee. Necessary changes are planned and scheduled for mitigation when appropriate.

The Firm also issues an internal report every year that covers all security issues, events and responses for the prior 12 months. This is also reviewed by the IT Director, Director of Operation and the Management Committee.

Q: What types of antimalware / virus systems used to protect *BerryDunn KnowledgeLink* and how often are they updated?

A: *BerryDunn KnowledgeLink* is protected by Symantec Client Security. Malware definitions are updated every four hours if they have been made available by the manufacturer. The Firm's

firewalls also have anti-malware scanning engines and logs and systems are monitored by the Firms SIEM (Security Information and Event Management) system which monitors servers, firewalls and network traffic.

Q: What are the logon features used to capture successful and failed logon attempts, and how long are these logs kept for?

A: We keep failed and successful logon attempt logs for 30 days. Of course we can also restore log files from backups for the last year of logon attempts if warranted. These logs are also being monitored by the Firms SIEM system.

Q: What types of physical controls are in place to protect the *BerryDunn KnowledgeLink* server from unauthorized access?

A: Following are physical controls in place:

- Primary and backup cooling of the server room.
- On premise security guards check server room and monitor temperatures during their rounds.
- Cooling system is monitored and email alerts are sent out if the room reaches thresholds for temperature or humidity.
- Building requires after hours sign in with a security guard to gain access to any office space.
- Server room and IT area is protected by key card access and access logs are kept for several year.
- Building has CATV security cameras for lobby areas and perimeter security.
- Stairwells doors are protected by key card access and access logs are kept for several years.

Appendix A – Resumes

William Richardson, PMP – Engagement Manager



Bill Richardson is a Senior Manager in BerryDunn's Government Consulting Group with 15 years of experience providing project management, requirements definition, system design, development, and testing for large state Medicaid, eligibility, and related health and human services systems. He has demonstrated expertise leading large projects and bridging the gap between technical and business stakeholders.

Relevant Experience

Missouri Department of Social Services (2013 to present). As the Engagement Manager for BerryDunn's IV&V engagement for Missouri's Eligibility Determination and Enrollment System (MEDES), Bill brings his experience in eligibility and large systems projects to this modified agile system development lifecycle (SDLC) project. BerryDunn reviews the project and reports on project issues and risks, offering recommendations to address issues and mitigate risks. BerryDunn also conducts reviews of the project in preparation for CMS Gate Reviews.

West Virginia Department of Administration (2013 to present). Bill serves as Engagement Manager, overseeing a team of BerryDunn consultants and subcontracted resources to evaluate needs associated with the West Virginia Children's Health Insurance Program (WVCHIP) to help bring them into compliance with ACA requirements. This project includes transitioning WVCHIP from their current Third Party Administrator to a Medicaid Management Information System (MMIS).

West Virginia Bureau for Medical Services (2011 to present).

Eligibility and Enrollment: Bill currently provides oversight on the Eligibility and Enrollment project, which includes analyzing the Patient Protection and Affordable Care Act (PPACA, ACA) impacts on Medicaid eligibility policy and facilitating the decision making process and subsequent policy updates and State Plan Amendments (SPAs).

ICD-10: Bill helped in the initiation of the Bureau's ICD-10 compliance project, drafting the I-APD and developing the project schedule. Bill served as the project manager at the start of the project and continues to act as a project SME.

Data Warehouse/Decision Support System (DW/DSS) Procurement Evaluation: Bill provided project management for the evaluation of proposals in response to the Bureau's DW/DSS RFP. This included developing evaluation packets for the evaluation committee.

PPACA Planning Project: Bill served as the project manager for the PPACA Planning Project, which provided project management of projects necessary to come into compliance with the ACA such as enhanced payments for primary care providers and hospital-based presumptive eligibility.

ACS, A Xerox Company – Government Healthcare Solutions (2001 to 2011).

As **Systems Delivery Manager for ACS Health Enterprise Program**, Bill provided team leadership and implementation management for internal and client facing phases of the development and deployment of the ACS Health Enterprise system. In this role, he oversaw teams of business analysts, testers, and developers; directed the creation of an automation

testing process to expedite testing of claim exceptions and reduce costs and risk; proactively identified risks and developed plans to mitigate risk and loss; led efforts to develop and document standard and repeatable processes for use across the organization; and implemented a risk-based testing methodology to manage schedule constraints while maintaining deployment quality.

As **Project Manager/Lead for North Dakota's MMIS**, Bill was responsible for the business design of the State of North Dakota's largest-ever IT project. He developed and adapted processes to overcome challenges of deployment of the system under a new methodology; managed scope expectations by focusing on minimizing enhancements to the system; managed the creation of use cases and design artifacts; led the development of North Dakota's requirements analysis document for all business functionality related to healthcare claims adjudication and payment; led the alignment of the North Dakota deployment with the MITA Framework; and provided weekly maintenance of multiple work plans.

As **Consultant for the Mississippi Envision Project**, Bill provided design, development, and unit testing of healthcare claims back-end processing modules. He documented and enhanced functionality based on change requests; modified utilization review and prior authorization healthcare claims processing modules; and documented processes based on client input and analysis of the State's legacy system.

As an **Analyst for the Georgia Health Partnership Project**, Bill completed development and unit testing of non-inpatient healthcare claim pricing, editing, and mass adjustment modules.

Education and Professional Affiliations

Bachelor of Science in Business, University of Minnesota, Carlson School of Management
Certified Project Management Professional, Project Management Institute

References (Proprietary and Confidential)

Elizabeth Jenckes, PMP, CSM, ITIL – IV&V Project Manager for EES Project



Elizabeth is an innovative project leader, management consultant, and information technology professional with 18 years of experience leading strategic business initiatives and technical projects in state and federal government. She has a proven ability to establish effective working relationships and bridge barriers to understanding at all levels of an organization, and is able to partner with customers and technical staff to ensure that all work is begun with clear objectives and completed to customer specifications. She is an experienced systems engineer, operations research analyst, database administrator, and software application developer with track record of success and increased responsibility in technical roles on critical business and government projects.

Relevant Experience**Nebraska Department of Health and Human Services (August 2010 to August 2015).**

Program Manager (February 2012 to August 2015): As a program management consultant for Medicaid implementation of Affordable Care Act (ACA), Elizabeth monitored federal publishing of ACA regulations and tracked ongoing status of completion for Medicaid ACA projects. She coached program staff in project leadership and managed key projects focusing on compliance scope, maximizing federal funding, and integration with state requirements. Projects included:

- Modified Adjusted Gross Income (MAGI) Eligibility Income Standards
- Hospital Presumptive Eligibility
- Provider Screening and Enrollment
- Pay Medicaid Physicians Medicare rates
- Administrative Simplification Operating Rules: Eligibility & Claims Status, Electronic Funds Transfer and Remittance Transactions, Health Plan Identifier, and Certification Compliance
- Pharmacy Drug Rebate Data Quality
- DHHS Compliance with Department of Labor Fair Labor Standards Act
- Advanced Planning Document (APD) template development used to gain enhanced federal funding on many ACA projects

Regulatory Business Analyst (August 2010 to January 2012): Elizabeth provided research summaries and compliance requirements for Medicaid executives, managers, and staff responsible for implementing new mandates. This included completing a gap analysis to identify Medicaid work required to comply with the Affordable Care Act. She represented DHHS in a study to determine national conversion methodology for new ACA MAGI eligibility groups. She also analyzed ACA Alternate Benefit Plan requirements and developed detailed gap analyses of past, present, and “To Be” coverage for Medicaid benchmark benefit plans.

Nebraska Department of Health and Human Services (June 2008 to July 2009). Elizabeth served as the Business Process Lead for DHHS’ Medicaid Management Information System (MMIS) replacement project. She presented business process diagrams to state and vendor teams to facilitate shared understanding of logical design objectives, as well as researched, collaborated with business analyst team members, and coordinated approval of project standard for business process diagrams based on Business Process Modeling Notation (BPMN) standard. Elizabeth also partnered

with cross-functional services design team lead to plan, lead design review sessions, assign and review work, and review deliverables; and developed the methodology used to train vendor developers, schedule work, and track progress for logical design.

ACI Worldwide (July 2007 to February 2008). Elizabeth served as the Project Director for the implementation of the first “On Demand” product hosting capability offered by Applied Communications, Inc. (ACI). Her project team included executives, project managers, team leads, network and system administrators, software developers, and data and system architects. The project required extensive interaction with two independent commercial data centers.

Physicians Mutual Insurance Company (March 2005 to November 2006). As the Technical Project Leader, Elizabeth led project integrating new agent commission payment system with legacy systems in this major re-engineering initiative. She was also a member of the implementation planning team for business-critical effort spanning all areas of IT and impacting most business departments. Deliverables were implemented on time and within budget for all phases.

Nebraska Department of Health and Human Services (May 2004 to February 2005). As the Senior Business Project Manager, Elizabeth led state executive management and leaders of 11 internal work groups to develop the strategy and plan to accomplish major change initiative involving the closing of state facilities. The Plan included vision, scope, project organizational and resource requirements, budget, constraints, change control process, quality plan, communications plan, deliverables, activities, dependencies, and project timeline. On a second engagement for DHHS, she led top management team from across the state to develop a road map for accomplishing their top five outcomes in Protection and Safety. She then presented the road map to federal officials.

Education and Professional Affiliations

Master of Science in Applied Mathematics, Creighton University

Bachelor of Science in Operations Research, U.S. Air Force Academy

Certified Project Management Professional, Project Management Institute

Certified ScrumMaster (CSM)

Focused Advanced Facilitation Training

IT Service Management (ITIL), Foundation Certificate

IBM Certified Database Administrator, DB2 Universal Database V8.1 for Linux, UNIX, and Windows

Microsoft Certified Solution Developer (MCSD), Visual Basic 6, SQL Server 7

FAST Facilitation Session Leader Training

References (Proprietary and Confidential)

Karen Jones, PMP, PMI-RMP, CSSGB, Prosci – IV&V Business/Test Analyst for EES Project



Karen Jones is an experienced project manager who has dedicated 30+ years to working with state health and human services agencies on large system planning and implementation initiatives. She has a unique blend of business, technical, and project management expertise, serving in a range of technical and management positions with increasing levels of responsibility for Medicaid and related system initiatives.

Relevant Experience

Missouri Family Support Division (2013 to present) Karen serves as the project manager for BerryDunn's independent verification and validation (IV&V) contract with Missouri Family Support Division (FSD) and Information Technology Services Division (ITSD) implementation of the Missouri Eligibility Determination and Enrollment System (MEDES). She leads a team that assesses project health; identifying potential risks and issues, and offer recommendations for mitigation. The areas of oversight include FSD, MHD, ITSD, the PMO vendor, and the system integrator.

K Jones & Associates. (1991 to 2013) As an Independent Consultant, Karen provided project management, technical, and procurement support to a number of clients.

Nebraska Medicaid and Long-Term Care: Karen worked with the State of Nebraska to complete the State's MITA State Self-Assessment, including training, MITA session facilitation, and business process modeling. She served as Project Lead for the MMIS Replacement Alternatives Analysis and provided support for Nebraska's ACA Project.

Ohio Department of Jobs and Family Services: Karen served as the project manager for Ohio's contract with First Data to provide business process reengineering and organizational change management to support the Department's MMIS replacement project.

Massachusetts Executive Office of Health and Human Services: Karen served as the Massachusetts NewMMIS Functional Manager for HP, with responsibility for the operations side of the MMIS implementation. In this role, she managed staff tasked with RFP requirements validation, system and operational design, gap analysis, and deliverable production.

FourThought Group (1998 to 2002). As Executive Project Director, Karen provided management and oversight to FourThought staff to ensure the execution of activities on the following projects:

Washington Department of Social and Health Services: Karen managed the requirements definition, gap analysis, and process re-engineering activities and oversaw the development of an RFP for Washington's MMIS replacement.

Missouri Department of Social Services: Karen worked with Missouri DSS and Medstat in the development of fraud and abuse detection algorithms using Medstat's Advantage Suite software.

Tennessee Bureau of TennCare: Karen managed FourThought's contract with EDS for the implementation of EDS' interchange system. In this role, she was responsible for management of requirements validation, pilot demonstrations, training needs assessment, training curriculum development, and integrated system testing activities.

Centers for Medicare and Medicaid Services: Karen served as Project Director working with CMS on its MITA initiative. In this role, she facilitated MITA visioning sessions for state and

industry participants at the 2003 MMIS conference and participated in a presentation to industry stakeholders to introduce the initiative.

Alabama Medicaid Agency: Karen managed user acceptance testing activities for the State of Alabama during EDS' MMIS implementation. She developed the user acceptance testing plan and methodology to track the status of testing activities; worked with EDS to resolve issues; and coordinated the UAT results documentation to be used in the CMS certification process.

Kansas Department of Social and Rehabilitation Services: Karen served as Technical Project Manager for Verizon's (formerly GTE Data Services) MMIS implementation contract. In this role, she oversaw all system design, coding, testing, implementation, and documentation activities to ensure adherence to the project schedule.

Missouri Division of Family Services: As a Senior Systems Analyst for GTE Data Services MMIS contract with Missouri, Karen was responsible for implementation of State task requests and enhancements for the State's claims subsystem and other supporting systems, as contracted by the Division of Family Services.

EDS (1979 to 1991). Karen held several management and technical positions, with increasing levels of responsibility. She served as Executive Program Director, responsible for EDS' contract with the State of Connecticut including contract management, compliance, contract negotiation, and customer relationships. As Systems Engineer Team Leader, Karen was involved in projects concerning Connecticut's MMIS, Georgia's and Arkansas' MMIS, and Florida's Department of Health and Rehabilitative Services.

Education and Professional Affiliations

Certified Project Management Professional, Project Management Institute

Risk Management Professional, Project Management Institute 6/10/2014

Certified Six Sigma Green Belt

Prosci-certified Change Management Professional

References (Proprietary and Confidential)

Andrea L. Thrash, PMP – IV&V Business/Test Analyst for EES Project



Andrea Thrash is a PMP-certified project manager with over 15 years of experience in project management and business process engineering. She has a strong background in system development and implementation, as well as industry experience in insurance, healthcare, and government. She is versatile in leading technical, business, and methodology related projects, bringing a balance of technical, business, critical thinking, and relationship building to successfully execute strategic initiatives. Her experience includes building program management offices, PMO

governance, and staff development.

Relevant Experience

State of Missouri Medicaid Project (2012 to 2015; 2016 to present). Andrea is currently serving as a Business Analyst as part of BerryDunn's IV&V team for the Missouri Eligibility Determination and Enrollment System implementation project. Previously, as an employee of EngagePoint, she conducted an assessment of business requirements/analysis and Change Control processes. This entailed recommending process and resource changes, which streamlined efficiency and productivity and reduced staff by 1.5 FTE.

State of Arkansas Medicaid Project (2012 to 2015). Andrea worked as a Project Manager and Business Analysis Manager with Arkansas's eligibility and enrollment system, where she defined and implemented project processes for newly formed project team including business requirements/analysis, testing, defect management, scope and change control. Her position also required managing a multi-vendor Business Analyst Team to ensure all requirements and functional design documentation for the Cúram software met state and federal healthcare mandates. She was responsible for end-to-end requirements a multi-vendor Business Analyst Team to ensure all requirements and functional design documentation for the Cúram software met state and federal healthcare mandates and integration into the eligibility and enrollment system and interface to MMIS, and for working with stakeholders to define scope and timeline for development and implementation of system features.

Colonial Life & Accident Insurance Company (2002 to 2011). On various consulting projects for Colonial Insurance, Andrea served as a Senior Project Manager, Project Manager, and Business Analyst.

As a Senior Project Manager, she was responsible for the company's highest priority projects including TIBCO BPM implementation, telephony implementation using I3 software, growth initiatives, and sales & marketing tools. She provided project governance for development of a BPM customer solution, moving the team toward an iterative methodology.

She also served as Program Manager for the company's 2010 seven strategic growth initiatives. For this project, she managed development of prototype and business case for a new innovative user interface concept for the next generation work management system/BPM platform using Microsoft UI pivot technology. She also led the successful development of a new marketing presentation tool using outside vendor.

Prior to 2010, she led multiple projects in the developmental cycles of a \$35MM enterprise-level, web-based insurance enrollment system and its offline counterpart. Her responsibilities ranged from

strategic planning, program and project management, PMO development, leading business analysts and managing the quality assurance efforts. Many of the projects she managed were within the enrollment system program, related to the initial design and flow, price quote, electronic signature process, product portfolio, and the offline component with data synching. She also introduced and implemented business processes, use cases, documentation templates and methodologies that served as process guidelines for a project team spanning multiple departments. This led to an iterative and more agile development process and was adopted throughout the PMO and IT organizations.

Comsys (1997 to 1998). As a Consultant to the Mobil Oil Corporation, Andrea developed and implemented a strategic training program for interfacing legacy systems with new financial systems. The rollout involved six business units across the US with approximately 400 people being trained.

Education and Professional Affiliations

Bachelor of Arts in Accounting, Ouachita Baptist University
Certified Project Management Professional, Project Management Institute
Certified Trainer MPG (Managing Personal Growth) – Blessing & White consultants
Train-the-Trainer Graduate – NYNEX Business Center Learning Network

References (Proprietary and Confidential)

Regina Blazek – IV&V Technical Analyst/Architect for EES Project



Regina is an experienced senior software engineer, with 18 years of work experience in multiple industries, including government health and human services, e-commerce, banking, and retail. She has strong analytical skills, a broad range of computer expertise, and excellent problem-solving skills with the capacity to employ these skills through several styles of software development lifecycle and crisis management.

Relevant Experience

Nebraska Department of Health and Human Services (December 2012 to April 2015). As a subcontractor with TekSystems, Regina provided technical, architectural, and engineering leadership and expertise for multiple projects, including making modifications to Nebraska's legacy MMIS and Medicaid Eligibility systems, the Nebraska Aging Management Information System (NAMIS), and the Behavioral Health Contract and Budget Management System. She also worked as part of the General Solutions team to modernize DHHS SQL development and served as Oracle DBA backup. As Technical Lead, Regina was responsible for the complete documentation process, including definition of project specifications and architecture.

Independent Computer Software Professional (October 2009 to present). As an independent consultant, Regina offers specialization in Filebound custom coding as well as Content and Imaging Management Solutions, Reporting, User Experience development and management, N-Tier Security. She specializes in Image management, E-Commerce (Retail), E-Commerce (Service-Bureau), Banking (Service-Bureau), Internet Application Development as well as Desktop Application Development.

Marex Group Inc. / FileBound Inc. (August 2008 to October 2009). Regina was the Technical Lead and Senior Software Engineer for Custom Coding, responsible for designing and developing custom solution projects including development of WIN Form applications, web applications, web services, and custom ASP.net website solutions incorporating complex JQuery solutions with plug-in customization and nested controls including incorporation of ASP.NET MVC URL routing to controller classes and mapping URL parameters to controller action methods. She created a custom solution to report audit trail information using advanced JQuery date plug-in, and participated in the online development community of the plug-in with solutions for nesting the control multiple times in a single page solution and correction of a bug within the primary JQuery library to accommodate the plug-in.

eSellerate / Mindvision (A Digital River Company) (July 2005 to August 2008). As Senior Software Engineer, Regina's projects including but were not limited to enhancing and modernizing the content management system for presentation through the custom web stores. By applying .NET technologies, she added enhancements to the return process to isolate return components, e.g., Shipping, tem, Coupon etc., as well as expanding the Intranet customer management system.

Telcor, Inc. (July 2004 to June 2005). As Senior Software Engineer, Regina provided architectural support defining and maintaining solution scope and mentored junior team members. She also created project documentation and assigned code tasks to team, working diligently to ensure projects maintained scope perspective to ensure that revenue matched product development.

Cabela's (February 2001 to June 2004). For Cabela's as a Programmer Analyst III, Regina participated in the specific team to develop the server side content management tools using the Dynamo server to support the dynamic content of the Cabela's Internet site. She also developed, deployed, and maintained the Cabela's Intranet project. Regina regularly performed system administration on IIS Servers and SQL/2000 Server and Apache Tomcat, including the Tomcat/IIS integration on the Intranet.

First Commerce Technologies (February 1998 to September 2000). Regina was a Programmer Analyst II, maintaining and routinely modifying the loan system core application to ensure regulatory compliance. She was also responsible for troubleshooting system errors and failures and reconfigured equipment. She participated in a leadership role of a team effort in establishing standardized source control protocols and code review process.

Education and Professional Affiliations

COBOL Certification Program (equivalent to Associate degree core for COBOL) - Creighton Institute of Business and Management 1998

Member of Association of Information Technology Professionals

References (Proprietary and Confidential)

Brandon Milton, MBA, PMP – IV&V Project Manager for DMA Project



Brandon is a Senior Consultant in BerryDunn's Government Consulting Group with more than seven years of experience working in the government arena, including work as a consultant in support of state health and human services initiatives and work with the U.S. Senate in support of U.S. Senator Susan Collins.

Relevant Experience**West Virginia Bureau for Medical Services.**

MMIS Design Development and Implementation (September 2013 to present). Brandon is currently serving as a Project Manager for the design, development, and implementation of West Virginia's Medicaid Management Information System (MMIS). Brandon's work on the project has included oversight of system design sessions and Fiscal Agent system integration testing activities. He is currently responsible for managing the project team and providing oversight of the deliverable review process as well as User Acceptance Testing (UAT) activities. He is also leading the State's participation in a CMS Pilot certification project for certification of the new MMIS.

Data Warehouse and Decision Support System (September 2012 – August 2013). Brandon previously provided project management services for the Bureau's Data Warehouse and Decision Support System (DW/DSS) implementation. Brandon's work on the DW/DSS project included the facilitation of requirements validation sessions; working with the State in identifying potential data suppliers; and working with the selected suppliers to determine the data feeds they will provide the DW/DSS. He facilitated design sessions between the State, data suppliers, and vendor to determine the data elements that would make up each of the data feeds. In addition, he developed test cases for user acceptance testing (UAT) of the DW/DSS to provide end users with assurance that the system processes information as it was designed to.

Data Warehouse and Decision Support System (January 2012 – August 2012). Prior to his role as project manager for the data warehouse and decision support system implementation Brandon provided project management support services for the project. In this role he assisted with the development of the project charter, requirements validation, review of project deliverables for adherence to project quality standards, and development of status reporting deliverables for the client.

Provider Enrollment Application (November 2011 – December 2011). Brandon previously provided project management support services for the design, development, and implementation of a provider enrollment application. The provider enrollment application allowed for the online processing of Medicaid providers applications to participate in the program. His role was that of project contributor and business analyst. He created status reporting deliverables, assisted the project manager in executing the project according to the project management plan.

MMIS Re-Procurement Project (July 2011 – October 2011). Brandon provided project management support for the MMIS Re-Procurement project. This project involved the development of an RFP for a Medicaid management information system (MMIS) for the state of

West Virginia. Brandon's role on the project was that of project contributor and business analyst. He participated in the gathering of requirements for the RFP and helped to score vendor proposals in response to the RFP.

Office of US Senator Susan M. Collins. Brandon served as Mail Director for the Office of U.S. Senator Susan M. Collins in Washington, D.C., with responsibility for designing, implementing, and managing process improvements to streamline paperless mail operation involving a staff of 75 across eight offices in Maine and Washington, D.C. He reduced response time to constituent inquiries from 30 days to as little as two days and downsized the mailroom staff from four to two employees. In addition, he supervised eight legislative correspondents and six interns; screened and edited outgoing correspondence on behalf of Senator Collins; and created and managed an amendment tracking system for major legislation, including the FY2010 budget, the American Recovery and Reinvestment Act (ARRA) of 2009, and multiple appropriation bills.

Senator Susan Collins Campaign. As a Team Leader for Senator Susan Collins' campaign, Brandon supervised a team of eight people in weeks leading up to the election, coordinated phone banks and canvassing trips in Bangor area, helped with advanced planning and preparation for campaign events. The election resulted in Senator Collins(R) defeating her opponent by 23 percentage points in a year where Republicans suffered major losses across the country.

Education and Professional Affiliations

Master of Business Administration, University of New Hampshire

Bachelor of Science in Business Administration and Political Science, University of Maine

Certified Project Management Professional, Project Management Institute

References (Proprietary and Confidential)

Sudha Ganapathy, ITIL, LSSGB – IV&V Business/Test Analyst for DMA Project



Sudha Ganapathy is a highly driven, seasoned quick learner with more than 24 years of extensive experience in the IT area. Experienced in development, system analysis and quality assurance. Team Lead experience in Quality Assurance with ability to work with diverse levels of individuals across the organization. Proven success implementing and maintaining software programs using PL/I, Cobol, DB2, IMS, various IBM utility programs, Easytrieve and SQL, creating test cases for unit and integration testing and production support. Demonstrated ability in partnering with internal clients and analyzing projects, fine tuning existing processes, creating new ones and leading team to successful completion of projects.

Relevant Experience

West Virginia Bureau for Medical Services (2015 to present). As a Senior Consultant with BerryDunn, Sudha is assisting with the User Acceptance Testing (UAT) for the Bureau's Medicaid Management Information System (MMIS) procurement in the Provider Management MITA business area. She reviews and assists with modifying the Doc Matrix, the primary document that drove the Provider Enrollment Web Portal options based on Provider Types.

Additionally, she assisted with the WV RAPIDS transition facilitation project by identifying and documenting risks/issues prior to the transition of RAPIDS from one vendor to another. She assisted with tracking PCR's (defects) and creating reports to capture the aging of the defects, and reviewed and provided feedback on process documents such as the Incident Management Report and Problem Management Report.

XEROX – Government Health Solutions/Cognizant Technology Solutions (2012 to 2015). As a Team Lead for the Architecture and Letter related functional areas, Sudha defined QA Strategy, estimates, and roadmaps with on-site & offshore working model for the sprint process and after the project was implemented in production. Additionally, she created and executed test cases, analyzed and reviewed written test cases and provided feedback to team members, and created and conducted various knowledge transfer sessions as needed. She conducted triage meetings as necessary with the functional team, development team and Quality Assurance team to identify and rectify defects and complete testing activities as per schedule, and communicated project progress to management team on a consistent and thorough basis.

AFFILIATED COMPUTER SERVICES, INC (ACS) (2007 to 2012). Sudha worked as a Systems Consultant Sr. Analyst / Provider Team Sub-System Lead, which involved analyzing business use cases, user interface specifications and user requirement specification documents to create effective test scenarios and test cases. Additionally, she conducted online training to team members and provided statistics and reports to management as required; created and executed quality test plans, test cases, and test scripts to comprehensively validate the functionality components of the Provider/Security Subsystems using Rational tools; and frequently interacted with various groups within Enterprise such as Functional Analysts, Database Support Team, and Development Teams to investigate/analyze/resolve problems with the application/functionalities.

UNISYS (2000 to 2006). As a Software Engineer for the HealthCare, OK and LA Medicaid Management Information System, Sudha supported Louisiana Medicaid Management Information System. Converted several Easytrieve programs to COBOL, successfully promoting them to

production. Developed several COBOL programs for TPL (Third Party Liability) system, Management and Administrative Reporting Subsystem (MARS) and Claims system. Member of Medicaid Eligibility Determination System (MEDS) enhancement team, that modified and tested several Management and Administrative Reporting Subsystem (MARS) programs to accommodate new recipient processing files. Conducted testing/verifying and provided Quality Assurance support to testing team for additional programs within critical staffing and time constraints. Assisted Team Lead with implementing modifications to International Classification of Diseases/ Healthcare Common procedure Coding System, ICD9/HCPCS code crosswalk in compliance with HIPAA regulations. Assisted with several portions of the documentation of HIPAA Wave 3 changes. Conducted Regression Testing for Mental Health and Mental Health Rehab HIPAA Wave 3 changes and Regression/System Testing for Personal Care Services-LTC, HIPAA Wave 3. Performed User Acceptance Testing process for HIPAA Wave 3 Local Code Conversion, creating various test cases (32 cases) to successfully test scenarios for Mental Health and Mental Health Rehabilitation. Partnered with team members in formulating their test cases to ensure testing was conducted and completed on time. Led Acceptance Testing for McKesson HBOC ClaimCheck project in Project Leader's absence, ensuring required tests were completed successfully a timely manner. Coordinated transition of components from Acceptance Test region to production region. Developed and presented systems training document to internal Systems group. Performed several upgrades to ClaimCheck software and databases.

Education and Professional Affiliations

ITIL® Foundation Certificate in IT Service Management – March 2016

Lean Six Sigma Green Belt Certification from University of Southern Maine – March 2016

Bachelor of Arts, Computer Science – Rutgers University, New Brunswick, NJ

SDNBV College, TamilNadu, India – Major: Chemistry, Minor: Mathematics and Physics

References (Proprietary and Confidential)

Nicolle Field, PMP, CSSGB – IV&V Business/Test Analyst for DMA Project



Nicolle is a Senior Consultant in BerryDunn's Government Consulting Group with more than 10 years of experience providing results-oriented services to improve the quality and cost of health care using data, analytics, and technology solutions. She has demonstrated expertise in the areas of operational, program, and project management; and healthcare analytics, enterprise technology and program implementation.

Relevant Experience**BerryDunn (2014 to Present).***West Virginia Bureau for Medical Services (2014 to Present).*

- Nicolle supported the MITA 3.0 Lifecycle Maintenance and Technical Assistance project to develop West Virginia's MITA 3.0 SS-A, which was accepted by CMS in 2015 without revisions. As a business analyst on the project, she participated in business process information gathering sessions and updated MITA 3.0 documentation based on the State's input and feedback. She also reviewed documentation with SMEs and conducted document approval sessions.
- Nicolle is currently providing consulting services to support the MMIS implementation and stabilization. She has primarily been focused on reviewing vendor deliverables and providing feedback to help ensure quality and has also provided assistance related to the care management portion of the implementation.
- Nicolle is serving as the Project Manager to support West Virginia's efforts to add CHIP data to the existing DW/DSS. She is responsible for managing the day-to-day activities of the BerryDunn team, coordinating with the State's vendors, monitoring the project schedule, overseeing the development of deliverables, reviewing deliverables produced by vendors, monitoring and managing issues and risks, providing project status updates to the State, and facilitating and participating in project meetings as needed.

Vermont Agency of Human Services (2015 to Present). Nicolle is Lead Business Analyst on this project to develop uniform reporting requirements and business processes via Vermont's Health Services Enterprise (HSE) to support state and federal reform initiatives. This project entails evaluation of existing reporting requirements and data collection for specialized programs across Vermont's Medicaid agency and three sister agencies; development of a standardized, streamlined, and integrated list of core data elements; and the development of "As-Is" and "To-Be" business process maps to support specialized programs to be incorporated within the new HSE/MMIS platform.

Arizona Health Care Cost Containment System (2014 to 2015). Nicolle supported the Personal Health Record (PHR) portion of the AHCCCS TEFT Grant project by facilitating meetings and interviews with key stakeholders to gather requirements, researching PHR systems available in the market, and assisting with grant related reporting and other activities as needed.

Massachusetts HIX/IES Entities (2014). Nicolle served as the Test Coordinator in support of the Massachusetts HIX/IES implementation as part of BerryDunn's IV&V services team. In this role,

she provided oversight and leadership for the BerryDunn and State testing resources and was responsible for joint customer/vendor testing, daily status reporting, weekly defect reporting, resource planning, content development, and facilitation of testing team meetings.

Lumeris (2013). Nicolle provided strategic consulting and account management services to a payer and a health system moving from fee-for-service to value-based care in her role as Senior Consultant with Lumeris, a health care technology and services company.

Optum (2010 to 2013). As Solution Client Manager, Nicolle supported small to large payer accounts, and served as primary point of contact for customers related to product questions, issues, training needs, best practices, ASP/BPO operations, invoicing, and contractual items.

Health Dialog (2006 to 2010). Nicolle served in positions of increasing responsibility for Health Dialog, a provider of population health management, health care analytics, and decision support services. She managed several payer accounts and provided technical support for receiving client data, building data warehouses, and generating campaign lists.

Ingraham (2001 to 2006). As Application Developer and Reporting Specialist for this not-for-profit organization providing integrated community-based and clinical programs, Nicolle planned, developed, implemented, and provided training and ongoing support for Ingraham's EHR; and collaborated with clinical and compliance teams to determine requirements for application enhancements based on workflow, regulatory requirements, reporting needs, and billing requirements.

Education and Professional Affiliations

Bachelor of Arts in Social Work, University of Southern Maine
Project Management Professional (PMP)
Certified Six Sigma Green Belt (Lean)

References (Proprietary and Confidential)

Jim Strassenburgh, BA – IV&V Technical Analyst/Architect for DMA Project



Jim Strassenburgh is a seasoned IT architect and operations technical manager of proven experience delivering large-scale, complex, IT solutions and conducting IV&V for large, multi-vendor system implementations. He has held senior technical positions as both employee and independent consultant for over 20 years developing architecture and operations to support some of the largest infrastructures known, including working as Data Center Infrastructure Architect for an Oracle Competency Center.

Relevant Experience**BerryDunn (2012 to present).**

Massachusetts HIX/IES Entities (2014 to Present). Jim serves as IV&V Technical Lead for Massachusetts' HIX/IES implementation, with responsibility for CMS Formal and Boundary testing; Blueprint testing; review and validation of major vendor releases; architecture review, ICD, and other technical content; and engaging with vendors, senior Commonwealth leadership, and architects.

Missouri Department of Social Services (2014). Jim conducted a systems architecture review of the Missouri Eligibility Determination and Enrollment System reporting, including high-level infrastructure, data flows, and system artifacts. In addition, he reviewed IBM's systems architecture report, observed required testing activities, and provided independent feedback as part of our IV&V Monthly Report.

Maryland Health Benefit Exchange (2012 to 2014). As IV&V Technical Lead, Jim assessed technical aspects of Maryland's HIX/IES implementation, tracked progress, developed risks and issues, developed ways to further classic IV&V work creating deep dive sessions and architecture flows, supported CMS attestations (reports) and Blueprint certifications, served as technical liaison, and worked to build strong relations across various stakeholders and vendors.

Rochester Institute of Technology (2010 to 2011). Jim served as lead in building a shared services computing model and the construction of a new green data center facility for one of the largest private universities in the country. In this role, he:

- Developed new service processes and chargeback models based on shared services
- Assessed multiple data center inventories and new data center sizing
- Developed formal RFIs and RFPs
- Provided budgeting and financial modeling, including ROI assessments
- Developed a disaster recovery solution
- Assessed security infrastructure, including IPS/IDS, security compliance, and firewall

Xerox (2008 to 2009). As Data Center Infrastructure Architect, Jim developed an enterprise SOA platform using an Oracle SOA stack; assisted in deploying new enterprise provisioning, alarming, and ticketing services; conducted a company-wide assessment of VMware infrastructure of Europe and North American data centers; and researched and recommended "Self-DR" solutions for Xerox, leveraging North American data centers

NYFIX, Inc. (2000 to 2006). As Vice President for Systems and Systems Architecture, Jim was responsible for all new project initiatives, core infrastructure technology, and systems level operations, including:

- Management of infrastructure operations, including over 65% of all order flow volume to the New York Stock Exchange (NYSE), including 1500 booths on the Exchange Floor
- Development of provisioning system and automated change controls for the company
- Expansion of operations into Europe and Asia, with 24x7x365 operational support
- Management of infrastructure security, with rollout of Kerberos based infrastructure services
- Management of multiple generations of data center technology change, including three data center migrations
- Compliance with SEC infrastructure requirements, including archiving, trading logs, and timekeeping subsystems
- Design of storage infrastructures using EMC technologies
- Architecting of Hot-Hot HA datacenter design and BCP/DR strategy for all services
- Implement Tibco Service Bus publish-subscribe model for building out reliable market data infrastructure

MetroSource, Corp. (1995 to 2012). Jim formed and led this hybrid consulting and software development company, providing systems architecture, data center virtualization, and business continuity services, including:

- Development of systems infrastructure documentation for Performance Engineering environment for Paychex
- Development of comprehensive, high availability Java commercial software product
- Development of after-hours trading system for Japan to support high volume retail equity trading system
- Designed and implemented high availability architecture for AT&T's Internet service, WorldNet

EDUCATION

Bachelor of Arts in Philosophy, St. Lawrence University

REFERENCES (Proprietary and Confidential)

Eigen Heald, MsIA, CEH, CISA, CISSP, GCFA – Security SME



Eigen has been a Manager in BerryDunn's Consulting Group since May 2006 and manages our technology assurance services, including conducting security assessments. Prior to BerryDunn, Eigen worked for an international financial services firm as a security consultant. She has led numerous security assessments and evaluations for clients that demand a high level of security and availability from their information systems. Eigen is well versed in a wide range of security and technical standards, including.

- Federal Identity, Credential, and Access Management (FICAM) Roadmap and Implementation Guidance
- Federal Information Security Management Act of 2002 (FISMA)
- CMS Minimum Acceptable Risks Standards (MARS) E (for Exchanges) Appendix B (For Moderate-level data)
- IRS Publication 1075: Tax Information Security Guidelines for Federal, State and Local Agencies
- HIPAA and the HITECH Act
- CMS Technical Reference Architecture (TRA), v.2.1 and supplements
- FEDERAL INFORMATION PROCESSING STANDARDS PUBLICATIONS:
 - FIPS 200 – Minimum Security Requirements for Federal Information and Information Systems
 - FIPS 199 – Standards for Security Categorization of Federal Information & Information Systems
- National Institute of Standards and Technology Special Publications:
 - NIST SP 800-30 Rev.1 Guide for Conducting Risk Assessments
 - NIST SP 800-39 – Managing Information Security Risk
 - NIST SP 800-53 Rev.4 - Security and Privacy Controls for Federal Information Systems & Organizations
 - NIST SP 800-61 Rev.2 – Computer Security Incident Handling Guide

Relevant Experience**BerryDunn (2007 to Present).**

Missouri Department of Social Services, Family Services Division (2014). Eigen served as Senior Security Analyst for BerryDunn's engagement conducting the Independent Security Assessment of the Missouri Eligibility Determination and Enrollment System (MEDES), which is required for Missouri's continued Authority to Connect status with the Federal Data Services Hub. This assessment requires identification and assessment of security risks related to the development and operation of the MEDES functions and to the confidentiality, privacy, integrity, and availability of personally identifiable data in the context of best practices and the requirements of CMS' catalog of Minimum Acceptable Risk Controls for Exchanges and other state and federal privacy and security laws. This project also included the development of a Risk Assessment for the findings identified during the assessment.

Massachusetts HIX/IES Entities (2012 to 2014). Eigen served as Lead Analyst on BerryDunn's System Audit team for our engagement providing IV&V of Massachusetts' HIX/IES implementation, working to verify that required security controls are in place. Our Systems Audit work involved evaluating the implementation against nationally recognized standards and regulatory requirements, including NIST 800-53, NIST 800-53A, IRS Pub. 1075, CMS MARS-E and various other Federal and State requirements to verify the Commonwealth's compliance with these standards. She also served as a SME for security requirements associated with IRS Safeguards for FTI data and CMS' Seven Conditions and Standards.

Missouri Department of Social Services, MO HealthNet Division (2014). Eigen served as Senior Security Analyst leading the security risk assessment of Missouri's MMIS, based on the IRS Safeguard Program SCSEMs and regulatory requirements, including NIST SP 800-53 Rev. 3 and HIPAA. As part of the assessment, our project team developed an action plan to help MHD, ITSD, and the vendor to address known risks; identify opportunities to strengthen the application development methodology for ongoing maintenance and development of the MMIS; and establish a framework for the State to conduct routine security assessments of data and information systems going forward.

West Virginia Department of Health and Human Resources (2009). Eigen conducted a security assessment of specific aspects of logical access controls for West Virginia's Eligibility, Child Welfare, and Child Support systems. The logical access controls were considered for each application, host operating system, and database. The review was initiated by DHHR management as part of an on-going effort to be proactive in developing sound security and risk management controls. Based on the assessment, Eigen provided a written description of the security systems, practices, and controls currently in place; prioritized risks identified as a result of the assessment; and developed recommendations for addressing risks.

Education and Professional Affiliations

Eigen maintains the following certifications and degrees:

Certified Information Systems Security Professional (CISSP) 07/2004

Certified Information Systems Auditor (CISA) 09/2005

Certified Ethical Hacker (CEH) 02/2006

Certified Novell Engineer (CNE) 03/2000

Certified in the Governance of Enterprise IT (CGEIT) 05/2008

GIAC Certified Forensic Analyst (GCFA) 01/2010

Master's Degree in Information Assurance, Norwich University 06/2004

Eigen is a member of ISACA, ISC2 and the Association of Certified Fraud Examiners, New England Chapter. She has authored numerous articles on security and technology topics and is a regular speaker at various conferences.

Nicole Becnel, PMP – Certification SME



As a Project Management Professional and Manager with BerryDunn, Nicole Becnel brings valuable expertise in her field as a health care IT professional with over 14 years of experience. Her experience includes project management, requirements definition, system design, development, and testing for large health information systems. She is currently working in West Virginia on the State's Provider Enrollment project.

Relevant Experience**West Virginia Bureau for Medical Services (2005 to present).**

Project Manager for West Virginia Provider Enrollment (2011 to present). Nicole continues to apply her Medicaid and Project Management expertise as Project Manager for West Virginia Provider Enrollment project. In this role, Nicole supports the client with her project management and subject matter expertise as they implement health care reform. This work has included implementation of provider enrollment screening requirements for various provider classifications to reduce potential fraud and abuse. Nicole has also assisted the client with provider outreach activities including presentations and training at the WV Provider Workshops held throughout the state.

Project Manager for West Virginia 5010/D.0 Implementation (2011 to 2012). Nicole served as the project manager for the successful implementation of the 5010/D.0 standards required by federal mandate. In this role, Nicole supported the client with her project management and subject matter expertise during the conversion of Health Insurance Portability and Accountability Act (HIPAA) Accredited Standards Committee (ASC) X12 version 4010A1 to ASC X12 version 5010 and National Council for Prescription Drug Programs (NCPDP) version 5.1 to NCPDP version D.0. This work included deliverable review, SME advisory services, user acceptance testing (UAT) plan assistance and operational readiness assessment.

Project Manager for MIHMS Provider Enrollment (2008 to 2010): In this role, Nicole served as project manager and subject-matter expert for the provider re-enrollment and maintenance implementation project which created an online tool for enrollment, re-enrollment and maintenance for Maine's provider community consisting of approximately 8,000 providers. Nicole managed large and complex configuration projects and provided expertise to other implementation initiatives, including conversion, reporting and interface development. Upon development completion, Nicole monitored interdepartmental impact documented complex design, business and technical processes for customer satisfaction; provided application training for the providers; prepared gap analysis and collaborated in the development of project scope estimates, detailed project plans and timelines.

Quality Manager for West Virginia MMIS Operations (2006 to 2008): Nicole managed the development, implementation and evaluation of quality management and risk management activities to ensure project compliance with all budget, time and quality specifications to assure client requirements. As Quality Manager, Nicole successfully directed on-time delivery of the NPI initiative in an accelerated time frame, successfully provided on-site support to BMS during the CMS certification evaluation; facilitated best practice cross communication; and, met customer expectations by monitoring, evaluating and assigning corrective actions.

Contract Configuration Lead for West Virginia MMIS Operations (2005 to 2006): Nicole developed, implemented and documented processes and standards to ensure successful completion of reports. Additionally, she analyzed business processes to transition the configuration to meet the current application. Working with the client, Nicole identified required changes and ensured issues were identified, tracked, reported, and resolved in a timely manner. She was also responsible for creating a report card and trending analysis report tracking deliverables and report progress.

Education and Professional Affiliations

Bachelor of Arts in Speech and Hearing Science, University of South Florida
Project Management Professional, Project Management Institute

Yoko McCarthy, MBA, CISA, CFE – Financial SME



Yoko McCarthy is Senior Consultant in BerryDunn's Government Consulting Group specializing in financial compliance, risk management, project management, audit, and information security. She is a highly motivated leader with strong data analysis, planning and organization, and change management skills and a thorough understanding of business goals, objectives, and processes.

Relevant Experience**BerryDunn (2013 to present).**

- *Massachusetts HIX/IES Entities.* BerryDunn is currently providing IV&V for Massachusetts' HIX/IES implementation. Yoko is leading the Financial Review task area of our IV&V services, providing monthly financial status reporting, documentation of cost allocation methodologies, review of System Integrator's invoices, and assistance of change request review. Her major responsibilities include review of the financial management process and tools for this project with over \$300 million budget to ensure integrity of the financial data, correct use of various funding sources based on the approved cost allocation methodology, and efficiency of the financial management process. In addition, she has assisted with the development of IAPD-U's, which have resulted in the Commonwealth receiving over \$110 million in federal funds under Title XIX.
- *Missouri Department of Social Services, Family Support Division.* Yoko served as Project Manager for BerryDunn's engagement to conduct an Independent Security Assessment of the Missouri Eligibility Determination and Enrollment System (MEDES), which is required for Missouri's continued Authority to Connect status with the Federal Data Services Hub. This assessment required identification and assessment of security risks related to the development and operation of the MEDES functions and to the confidentiality, privacy, integrity, and availability of critical, personally identifiable data in the context of best practices and the requirements of CMS' catalog of Minimum Acceptable Risk Controls for Exchanges and other state and federal privacy and security laws. This project also included the development of an action plan to mitigate the risks identified during the assessment.
- *Missouri Department of Social Services, MoHealthNet Division.* Yoko served as part of BerryDunn's team to conduct a security risk assessment of Missouri's Medicaid Management Information System (MMIS), based on nationally recognized standards and regulatory requirements, including NIST SP 800 series, ISO 27000 series, and HIPAA, among others. As part of the assessment, BerryDunn's team developed an action plan to help MHD, ITSD, and the vendor to address known risks; identified opportunities to strengthen the application development methodology for ongoing maintenance and development of the MMIS; and established a framework for the State to conduct routine security assessments of data and information systems going forward.
- *MNsure.* Yoko served as Project Manager for the FY2015 programmatic audit of Minnesota's health insurance exchange, which was conducted in compliance with 45 CFR 55 to ensure

that internal controls and processes governing eligibility determination and enrollment were maintained.

- *Vermont Health Connect (VHC)*. Yoko served as Project Manager for the FY2015 financial and programmatic audit of Vermont's health insurance exchange. BerryDunn is providing a Yellowbook audit in compliance with 45 CFR 55 to ensure that internal controls and processes governing eligibility determination and enrollment were maintained. Yoko managed all phases of the engagement including developing and maintaining the work plan. Additionally, she coordinated and monitored the internal resources and participated in fact-finding meetings.
- *HealthSource Rhode Island (HSRI)*. Yoko served as the Project Manager for the FY2014 financial and programmatic audit of Rhode Island's health insurance exchange, which was conducted in compliance with 45 CFR 55 to ensure that internal controls and processes governing eligibility determination and enrollment were maintained.

Massachusetts Office of the State Auditor (2004 to 2012). Yoko was employed with the Massachusetts Office of the State Auditor (OSA) for eight years, with responsibility for the following activities:

- *Data mining and analysis for the Medicaid Audit Unit* – Yoko analyzed Medicaid data, EBT card transactions data, and lottery winner data for welfare fraud analysis for the Bureau of Special Investigations; prepared quarterly reports for the legislature; served as a member of the OSA data mining committee; and analyzed the results of various surveys.
- *Management of Payroll and Personnel Data* – Yoko managed the budget projections for personnel expenses that account for 85% of the total \$17.2 million budget of five accounting lines through on-going financial analysis; prepared cost allocation reports; ensured the accuracy of the payroll and reconciled it on a bi-weekly basis; assisted the Deputy Auditor in the preparation of annual spending plans for the Governor's Office and fiscal budget maintenance documents for the House and Senate Ways and Means Committees; and assisted the HR Director in data management of the Halogen performance and talent management software.

Education and Certifications

MBA, specializing in Finance, Information Systems, and Supply Chain Services Management, University of Massachusetts, Boston, MA

Bachelor of Arts in Economics, Kobe College, Hyogo, Japan

Certified Fraud Examiner

Certified Information Systems Auditor

Professional Organizations

Member of Association of Government Accountants, the Association of Certified Fraud Examiners, and ISACA

Timothy F. Masse, MBA – Project Principal



Tim Masse is a Principal in our firm and leads BerryDunn's Government Consulting Group. He has 22 years of experience consulting in the areas of strategic business and technology planning, independent project oversight, operational planning, business process improvement, procurement and vendor negotiations, and change management. Tim has provided project leadership for projects with state health and human service agencies in Arizona, Connecticut, Louisiana, Maine, Massachusetts, Missouri, New Hampshire, Vermont, and West Virginia.

Relevant Experience**BerryDunn (1989 to present).**

- **Massachusetts HIX/IES Entities (2012 to present).** BerryDunn is currently working with Massachusetts Executive Offices of Health and Human Services, the Commonwealth Connector Authority, and the University of Massachusetts Medical School (collectively known as the HIX/IES Entities) to provide IV&V services for implementation of their Health Insurance Exchange/Integrated Eligibility System (HIX/IES). Tim serves as Project Principal and Contract Manager for BerryDunn's IV&V services team. He oversees the quality of all services and deliverables provided by our team to the Commonwealth, provides oversight of subcontractors, and provides subject matter expertise to our team and the Massachusetts HIX/IES Entities on HIX, Medicaid, MITA, project management, IV&V, and large-scale system implementation.
- **Missouri Department of Social Services (2013 to present).** Tim is currently serving as Project Principal for BerryDunn's IV&V engagement for the Missouri Eligibility Determination and Enrollment System (MEDES) implementation. He provides oversight and management, as well as Medicaid and eligibility system subject matter expertise.
- **West Virginia Bureau for Medical Services (2003 to 2012).** Tim served as Project Principal for our West Virginia engagement until 2012. He oversaw the quality of all services provided by BerryDunn and our subcontractors, provided contract management, and provided subject matter expertise to our team and the State for the following projects:
 - MITA SS-A
 - MITA Phase II Implementation
 - MMIS Planning and Re-procurement, APD Development, and MMIS Implementation Project Management
 - Data Warehouse/Decision Support System Re-procurement
 - Project Support for Eligibility System Modernization
 - Healthcare Reform Planning, Implementation, and Advisory Services
 - State Medicaid Health IT Planning and HIT IAPD Development
 - Portfolio Governance and Project Management Office
 - QA Oversight of MMIS Implementation, resulting in CMS Certification of a fully non-mainframe, client-server technology-based MMIS in the country

- **Maine Department of Health and Human Services (DHHS) (2008 to 2012).** Tim oversaw the project, which provided IV&V services for the MaineCare Management Information System and Fiscal Agent Solution (MMIS/FAS) development, implementation, and certification. This included providing ongoing monitoring of project tasks, identifying risks and issues and developing mitigation strategies, monitoring vendor and State project personnel, communications, and activities, overseeing the quality of all services and deliverables provided by our team to DHHS as well as our subcontractors, and providing subject matter expertise on Medicaid, MITA, project management, IV&V, and large-scale system implementation oversight
- **Vermont Agency of Human Services (2011).** Tim oversaw BerryDunn's work to conduct a Risk Assessment and Cost/Benefit Analysis for the State's Medicaid Enterprise Solution analysis. Additionally, he helped develop the Medicaid Enterprise Solution I-APD.
- **Connecticut Department of Public Health (2007 to 2008).** Tim oversaw the project team conducting a licensing system needs assessment for the Connecticut DPH, including an assessment of current processes and systems and the development of functional requirements for a new professional licensing system. He ensured sufficient firm resources were provided to the team, reviewed project deliverables, and provided subject matter knowledge and support.
- **Vermont Office of Health Access (2007).** BerryDunn conducted an assessment for the Office of Health Access to analyze alternatives for migrating from the State's legacy MMIS system. Tim oversaw the project team that worked to develop a long-term strategic plan for the MMIS. The team evaluated the State's IAPD for MMIS strategy, including the State's approach to MMIS, HIPAA compliance, benefits management, and global clinical record application.

Education and Professional Affiliations

Master's in Business Administration, Bentley College

Bachelor of Science, Economics, University of New Hampshire

Appendix B – Sample IV&V Project Schedule

On the following pages, we have provided an excerpt of a project schedule from one of BerryDunn's current IV&V engagements.

ID	Task Name	Duration	Predecessor	Start	Finish	% Complete	Work
1	Sample IV&V Project Schedule	429 days		Tue 10/9/12	Fri 5/30/14	26%	0 hrs
2	<i>IV&V Start: IV&V Services Initiated</i>	0 days		Tue 10/9/12	Tue 10/9/12	0%	0 hrs
3	Monthly IV&V Services	429 days		Tue 10/9/12	Fri 5/30/14	46%	0 hrs
4	IV&V Task 1: Manage IV&V Services	388 days		Wed 10/10/12	Fri 4/4/14	47%	0 hrs
5	1.1 IV&V Services Project Management Plan	100 days		Wed 10/10/12	Tue 2/26/13	99%	0 hrs
6	✓ Draft and submit IV&V Services Project Management Plan Outline and Sample.	30 days	2	Wed 10/10/12	Tue 11/20/12	100%	0 hrs
7	✓ Review of IV&V Services Project Management Plan Outline.	14 days	6	Wed 11/21/12	Mon 12/10/12	100%	0 hrs
8	Finalize and obtain approval of the IV&V Services Project Management Plan Outline and Sample.	15 days	7	Tue 12/11/12	Mon 12/31/12	99%	0 hrs
9	✓ Draft and submit IV&V Services Project Management	3 days	8	Tue 1/1/13	Thu 1/3/13	100%	0 hrs
10	✓ Schedule and conduct deliverable walk-through with the Client	1 day	9	Fri 1/4/13	Fri 1/4/13	100%	0 hrs
11	✓ Client Review of IV&V Services Project Management Plan.	13 days	10	Mon 1/7/13	Wed 1/23/13	100%	0 hrs
12	✓ Finalize and obtain approval of the IV&V Services Project Management Plan.	24 days	11	Thu 1/24/13	Tue 2/26/13	100%	0 hrs
13	✓ <i>Task Complete: IV&V Services Project Management Plan Approved</i>	0 days	12	Tue 2/26/13	Tue 2/26/13	100%	0 hrs
14	↻ 1.2 IV&V Monthly Review and Assessment Report	388 days		Wed 10/10/12	Fri 4/4/14	36%	0 hrs
15	✓ 1.2 IV&V Monthly Review and Assessment Report 1	18 days		Wed 10/10/12	Fri 11/2/12	100%	0 hrs
16	✓ Develop Monthly Review and Assessment Report	16 days	2	Wed 10/10/12	Wed 10/31/12	100%	0 hrs
17	✓ Deliver Monthly Review and Assessment Report	2 days	16	Thu 11/1/12	Fri 11/2/12	100%	0 hrs
18	✓ 1.2 IV&V Monthly Review and Assessment Report 2	23 days		Thu 11/1/12	Mon 12/3/12	100%	0 hrs
21	✓ 1.2 IV&V Monthly Review and Assessment Report 3	25 days		Mon 12/3/12	Fri 1/4/13	100%	0 hrs
24	✓ 1.2 IV&V Monthly Review and Assessment Report 4	27 days		Mon 12/31/12	Tue 2/5/13	100%	0 hrs
27	✓ 1.2 IV&V Monthly Review and Assessment Report 5	21 days		Fri 2/1/13	Fri 3/1/13	100%	0 hrs
30	1.2 IV&V Monthly Review and Assessment Report 6	26 days		Fri 3/1/13	Fri 4/5/13	0%	0 hrs

ID	Task Name	Duration	Predecessor	Start	Finish	% Complete	Work
33	1.2 IV&V Monthly Review and Assessment Report 7	25 days		Mon 4/1/13	Fri 5/3/13	0%	0 hrs
36	1.2 IV&V Monthly Review and Assessment Report 8	28 days		Wed 5/1/13	Fri 6/7/13	0%	0 hrs
39	1.2 IV&V Monthly Review and Assessment Report 9	25 days		Mon 6/3/13	Fri 7/5/13	0%	0 hrs
42	1.2 IV&V Monthly Review and Assessment Report 10	25 days		Mon 7/1/13	Fri 8/2/13	0%	0 hrs
45	1.2 IV&V Monthly Review and Assessment Report 11	27 days		Thu 8/1/13	Fri 9/6/13	0%	0 hrs
48	1.2 IV&V Monthly Review and Assessment Report 12	25 days		Mon 9/2/13	Fri 10/4/13	0%	0 hrs
51	1.2 IV&V Monthly Review and Assessment Report 13	24 days		Tue 10/1/13	Fri 11/1/13	0%	0 hrs
54	1.2 IV&V Monthly Review and Assessment Report 14	26 days		Fri 11/1/13	Fri 12/6/13	100%	0 hrs
57	1.2 IV&V Monthly Review and Assessment Report 15	25 days		Mon 12/2/13	Fri 1/3/14	79%	0 hrs
60	1.2 IV&V Monthly Review and Assessment Report 16	28 days		Wed 1/1/14	Fri 2/7/14	0%	0 hrs
63	1.2 IV&V Monthly Review and Assessment Report 17	25 days		Mon 2/3/14	Fri 3/7/14	0%	0 hrs
66	1.2 IV&V Monthly Review and Assessment Report 18	25 days		Mon 3/3/14	Fri 4/4/14	0%	0 hrs
69	1.3 Executive Team Briefings	353 days		Mon 11/5/12	Wed 3/12/14	29%	0 hrs
70	1.3 Executive Team Briefings 1	5 days		Mon 11/5/12	Fri 11/9/12	100%	0 hrs
71	Develop Executive Team Briefing Presentation	4 days	17,2	Mon 11/5/12	Thu 11/8/12	100%	0 hrs
72	Conduct Executive Team Briefing	1 day	71	Fri 11/9/12	Fri 11/9/12	100%	0 hrs
73	1.3 Executive Team Briefings 2	2 days		Tue 12/4/12	Wed 12/5/12	100%	0 hrs
76	1.3 Executive Team Briefings 3	3 days		Mon 1/7/13	Wed 1/9/13	100%	0 hrs
79	1.3 Executive Team Briefings 4	2 days		Wed 2/6/13	Thu 2/7/13	100%	0 hrs
82	1.3 Executive Team Briefings 5	3 days		Mon 3/4/13	Wed 3/6/13	100%	0 hrs
85	1.3 Executive Team Briefings 6	3 days		Mon 4/8/13	Wed 4/10/13	0%	0 hrs
88	1.3 Executive Team Briefings 7	3 days		Mon 5/6/13	Wed 5/8/13	0%	0 hrs

ID	Task Name	Duration	Predecessor	Start	Finish	% Complete	Work
91	1.3 Executive Team Briefings 8	3 days		Mon 6/10/13	Wed 6/12/13	0%	0 hrs
94	1.3 Executive Team Briefings 9	3 days		Mon 7/8/13	Wed 7/10/13	0%	0 hrs
97	1.3 Executive Team Briefings 10	3 days		Mon 8/5/13	Wed 8/7/13	0%	0 hrs
100	1.3 Executive Team Briefings 11	3 days		Mon 9/9/13	Wed 9/11/13	0%	0 hrs
103	1.3 Executive Team Briefings 12	3 days		Mon 10/7/13	Wed 10/9/13	0%	0 hrs
106	1.3 Executive Team Briefings 13	3 days		Mon 11/4/13	Wed 11/6/13	0%	0 hrs
109	1.3 Executive Team Briefings 14	3 days		Mon 12/9/13	Wed 12/11/13	0%	0 hrs
112	1.3 Executive Team Briefings 15	3 days		Mon 1/6/14	Wed 1/8/14	0%	0 hrs
115	1.3 Executive Team Briefings 16	3 days		Mon 2/10/14	Wed 2/12/14	0%	0 hrs
118	1.3 Executive Team Briefings 17	3 days		Mon 3/10/14	Wed 3/12/14	0%	0 hrs
121	1.4 Deliver IV&V Weekly Status Report	375 days		Mon 10/22/12	Mon 3/31/14	0%	0 hrs
198	1.5 Issue and Risk Tracking and Reporting Plan	103 days		Wed 10/10/12	Fri 3/1/13	76%	0 hrs
199	Submit a proposed Issue and Risk Tracking and Reporting Plan Outline and sample for review.	28 days	2	Wed 10/10/12	Fri 11/16/12	100%	0 hrs
200	Revise Issue and Risk Tracking and Reporting Plan Outline based upon feedback received.	20 days	199	Mon 11/19/12	Fri 12/14/12	100%	0 hrs
201	<i>IV&V Milestone: Issue and Risk Tracking and Reporting Plan Outline Approved</i>	0 days	200	Fri 12/14/12	Fri 12/14/12	99%	0 hrs
202	Develop the Issue and Risk Tracking and Reporting Plan in accordance with the approved outline.	20 days	201	Mon 12/17/12	Fri 1/11/13	100%	0 hrs
203	Schedule and conduct a walk-through of the Issue and Risk Tracking and Reporting Plan.	10 days	202	Mon 1/14/13	Fri 1/25/13	100%	0 hrs
204	Finalize and obtain approval of the Issue and Risk Tracking and Reporting Plan.	25 days	203	Mon 1/28/13	Fri 3/1/13	0%	0 hrs
205	<i>Task Complete: Issue and Risk Tracking and Reporting Plan Approved</i>	0 days	204	Fri 3/1/13	Fri 3/1/13	0%	0 hrs
206	1.6 IV&V Dashboard	130 days		Tue 10/9/12	Mon 4/8/13	0%	0 hrs
207	Develop the IV&V Dashboard in accordance with the approved outline.	99 days	2	Tue 10/9/12	Fri 2/22/13	0%	0 hrs
208	Schedule and conduct a walk-through of the IV&V Dashboard.	1 day	207FS+6 days	Tue 3/5/13	Tue 3/5/13	0%	0 hrs
209	Review of IV&V Dashboard	10 days	208	Wed 3/6/13	Tue 3/19/13	0%	0 hrs
210	Finalize and obtain approval of the IV&V Dashboard.	14 days	209	Wed 3/20/13	Mon 4/8/13	0%	0 hrs

ID	Task Name	Duration	Predecessor	Start	Finish	% Complete	Work
211	<i>Task Complete: IV&V Dashboard Approved</i>	0 days	210	Mon 4/8/13	Mon 4/8/13	0%	0 hrs
212	IV&V Task 2: Review Deliverables	120 days		Tue 10/9/12	Tue 3/26/13	60%	0 hrs
213	SI Deliverable Review Report Outline	120 days		Tue 10/9/12	Tue 3/26/13	60%	0 hrs
214	Develop SI Deliverable Review Report Outline.	96 days	2	Tue 10/9/12	Tue 2/19/13	75%	0 hrs
215	Client review of SI Deliverable Review Report Outline.	10 days	214	Wed 2/20/13	Tue 3/5/13	0%	0 hrs
216	Finalize and obtain approval of SI Deliverable Review Report Outline.	14 days	215	Wed 3/6/13	Mon 3/25/13	0%	0 hrs
217	<i>Task Complete: SI Deliverable Review Report Outline Approved</i>	0 days	216	Tue 3/26/13	Tue 3/26/13	0%	0 hrs
218	IV&V Task 9: Perform Financial Reviews	428 days		Wed 10/10/12	Fri 5/30/14	58%	0 hrs
219	9.1 Cost Allocation Plan/Methodology	102 days		Wed 10/10/12	Thu 2/28/13	91%	0 hrs
220	Develop a Cost Allocation Plan/Methodology outline and sample for review.	47 days	2	Wed 10/10/12	Thu 12/13/12	100%	0 hrs
221	Client review of the Cost Allocation Plan/Methodology outline and sample.	3 days	220	Fri 12/14/12	Tue 12/18/12	100%	0 hrs
222	Finalize and obtain approval of the Cost Allocation Plan/Methodology outline.	13 days	221	Wed 12/19/12	Fri 1/4/13	100%	0 hrs
223	<i>Task Complete: Cost Allocation Plan/Methodology Outline Approved</i>	0 days	222	Fri 1/4/13	Fri 1/4/13	100%	0 hrs
224	Develop and submit Cost Allocation Plan/Methodology using approved outline.	30 days	223	Mon 1/7/13	Fri 2/15/13	100%	0 hrs
225	Schedule and conduct walk-through of Cost Allocation Plan/Methodology.	2 days	224	Mon 2/18/13	Tue 2/19/13	0%	0 hrs
226	Client review of Cost Allocation Plan/Methodology.	3 days	225	Wed 2/20/13	Fri 2/22/13	0%	0 hrs
227	Finalize and obtain approval of Cost Allocation Plan/Methodology.	4 days	226	Mon 2/25/13	Thu 2/28/13	0%	0 hrs
228	<i>Task Complete: Cost Allocation Plan/Methodology Approved</i>	0 days	227	Thu 2/28/13	Thu 2/28/13	0%	0 hrs
229	9.2 Financial Management Plan	102 days		Wed 10/10/12	Thu 2/28/13	67%	0 hrs
230	Develop Financial Management Plan outline and sample for review.	28 days	2	Wed 10/10/12	Fri 11/16/12	100%	0 hrs
231	Client review of Financial Management Plan outline and sample.	5 days	230	Mon 12/31/12	Fri 1/4/13	100%	0 hrs

ID	Task Name	Duration	Predecessor	Start	Finish	% Complete	Work
232	Finalize and obtain approval of Financial Management Plan outline.	16 days	231	Fri 1/4/13	Fri 1/25/13	100%	0 hrs
233	<i>Task Complete: Financial Management Plan Outline Approved</i>	0 days	232	Fri 1/25/13	Fri 1/25/13	100%	0 hrs
234	Develop and submit Financial Management Plan using approved outline.	15 days	233	Mon 1/28/13	Fri 2/15/13	0%	0 hrs
235	Schedule and conduct walk-through of Financial Management Plan.	2 days	234	Mon 2/18/13	Tue 2/19/13	0%	0 hrs
236	Client review of Financial Management Plan.	3 days	235	Wed 2/20/13	Fri 2/22/13	0%	0 hrs
237	Finalize and obtain approval of Financial Management Plan.	4 days	236	Mon 2/25/13	Thu 2/28/13	0%	0 hrs
238	<i>Task Complete: Financial Management Plan Approved</i>	0 days	237	Thu 2/28/13	Thu 2/28/13	0%	0 hrs
239	9.3 Financial Status Reporting	368 days		Wed 10/10/12	Fri 3/7/14	83%	0 hrs
240	Financial Status Report Outline	58 days		Wed 10/10/12	Fri 12/28/12	100%	0 hrs
241	Develop and submit Financial Status Report Outline	39 days	2	Wed 10/10/12	Mon 12/3/12	100%	0 hrs
242	Client Review of Financial Status Report Outline	8 days	241	Tue 12/4/12	Thu 12/13/12	100%	0 hrs
243	Finalize and obtain approval of Financial Status Report Outline	16 days	242	Fri 12/7/12	Fri 12/28/12	100%	0 hrs
244	<i>Task Complete: Financial Status Report Outline Approved</i>	0 days	243	Fri 12/28/12	Fri 12/28/12	100%	0 hrs
245	9.3 Financial Status Reporting 1	1 day		Wed 2/13/13	Wed 2/13/13	100%	0 hrs
246	9.3 Financial Status Reporting 2	1 day		Thu 3/7/13	Thu 3/7/13	0%	0 hrs
247	9.3 Financial Status Reporting 3	1 day		Fri 4/5/13	Fri 4/5/13	0%	0 hrs
248	9.3 Financial Status Reporting 4	1 day		Tue 5/7/13	Tue 5/7/13	0%	0 hrs
249	9.3 Financial Status Reporting 5	1 day		Fri 6/7/13	Fri 6/7/13	0%	0 hrs
250	9.3 Financial Status Reporting 6	1 day		Fri 7/5/13	Fri 7/5/13	0%	0 hrs
251	9.3 Financial Status Reporting 7	1 day		Wed 8/7/13	Wed 8/7/13	0%	0 hrs
252	9.3 Financial Status Reporting 8	1 day		Fri 9/6/13	Fri 9/6/13	0%	0 hrs
253	9.3 Financial Status Reporting 9	1 day		Mon 10/7/13	Mon 10/7/13	0%	0 hrs
254	9.3 Financial Status Reporting 10	1 day		Thu 11/7/13	Thu 11/7/13	0%	0 hrs
255	9.3 Financial Status Reporting 11	1 day		Fri 12/6/13	Fri 12/6/13	0%	0 hrs
256	9.3 Financial Status Reporting 12	1 day		Wed 1/8/14	Wed 1/8/14	0%	0 hrs
257	9.3 Financial Status Reporting 13	1 day		Fri 2/7/14	Fri 2/7/14	0%	0 hrs

ID	Task Name	Duration	Predecessor	Start	Finish	% Complete	Work
258	9.3 Financial Status Reporting 14	1 day		Fri 3/7/14	Fri 3/7/14	0%	0 hrs
259	9.4 Financial Review Report	105 days		Mon 1/6/14	Fri 5/30/14	0%	0 hrs
260	Develop and submit Financial Review Report outline and sample	10 days		Mon 1/6/14	Fri 1/17/14	0%	0 hrs
261	Client review of Financial Review Report Outline	10 days	260	Mon 1/20/14	Fri 1/31/14	0%	0 hrs
262	Finalize and obtain approval of Financial Review Report Outline	10 days	261	Mon 2/3/14	Fri 2/14/14	0%	0 hrs
263	Develop and submit Financial Review Report using approved outline.	59 days	262	Mon 2/17/14	Thu 5/8/14	0%	0 hrs
264	Schedule and conduct walk-through of Financial Review Report.	1 day	263	Fri 5/9/14	Fri 5/9/14	0%	0 hrs
265	Client review of Financial Review Report.	10 days	264	Mon 5/12/14	Fri 5/23/14	0%	0 hrs
266	Finalize and obtain approval of Financial Review Report	5 days	265	Mon 5/26/14	Fri 5/30/14	0%	0 hrs
267	<i>IV&V Milestone: Financial Review Report Approved</i>	<i>0 days</i>	<i>266</i>	<i>Fri 5/30/14</i>	<i>Fri 5/30/14</i>	<i>0%</i>	<i>0 hrs</i>
268	IV&V Task 10: Conclude IV&V Services	61 days		Tue 10/9/12	Tue 1/1/13	0%	0 hrs
269	10.1 IV&V Final Report	61 days		Tue 10/9/12	Tue 1/1/13	0%	0 hrs
270	Develop outline and sample for review.	2 days		Tue 10/9/12	Wed 10/10/12	0%	0 hrs
271	Client review of outline and sample.	10 days	270	Thu 10/11/12	Wed 10/24/12	0%	0 hrs
272	Finalize and obtain approval of outline.	14 days	271	Thu 10/25/12	Tue 11/13/12	0%	0 hrs
273	<i>Task Complete: Final Report Outline Approved</i>	<i>0 days</i>	<i>272</i>	<i>Tue 11/13/12</i>	<i>Tue 11/13/12</i>	<i>0%</i>	<i>0 hrs</i>
274	Develop and submit Final Report using approved outline	10 days	273	Wed 11/14/12	Tue 11/27/12	0%	0 hrs
275	Schedule and conduct walk-through of Final Report.	1 day	274	Wed 11/28/12	Wed 11/28/12	0%	0 hrs
276	Client review of Final Report.	10 days	275	Thu 11/29/12	Wed 12/12/12	0%	0 hrs
277	Finalize and obtain approval of Final Report.	14 days	276	Thu 12/13/12	Tue 1/1/13	0%	0 hrs
278	<i>Task Complete: Final Report Approved</i>	<i>0 days</i>	<i>277</i>	<i>Tue 1/1/13</i>	<i>Tue 1/1/13</i>	<i>0%</i>	<i>0 hrs</i>
279	Milestone Based IV&V Services	379 days		Tue 10/9/12	Fri 3/21/14	14%	0 hrs
280	SI Stage 1: Requirements, Design and Development	252 days		Tue 10/9/12	Thu 9/26/13	21%	0 hrs
281	SI M1: Project Start up	0 days				0%	0 hrs
282	SI M2: Business Analysis and High-Level Design	129 days		Tue 10/9/12	Fri 4/5/13	54%	0 hrs
283	System Audit Dimensions and Resources Plan Outline	129 days		Tue 10/9/12	Fri 4/5/13	54%	0 hrs
284	Develop and deliver compliance requirements checklist (matrix)	59 days	2	Tue 10/9/12	Fri 12/28/12	100%	0 hrs

ID	Task Name	Duration	Predecessor	Start	Finish	% Complete	Work
285	Develop high-level Work plan for System Audit	43 days	2	Tue 10/9/12	Thu 12/6/12	100%	0 hrs
286	Obtain approval of System Audit Work plan	60 days	285	Fri 12/7/12	Thu 2/28/13	0%	0 hrs
287	Develop a System Audit Dimensions & Resources outline and sample for Client Review	11 days	286	Fri 3/1/13	Fri 3/15/13	0%	0 hrs
288	Review of the System Audit Dimensions and Resources outline and sample.	10 days	287	Mon 3/18/13	Fri 3/29/13	0%	0 hrs
289	Finalize and obtain approval of the System Audit Dimensions and Resources outline.	5 days	288	Mon 4/1/13	Fri 4/5/13	0%	0 hrs
290	<i>Task Complete: System Audit Dimensions and Resources Plan Outline Approved</i>	0 days	289	Fri 4/5/13	Fri 4/5/13	0%	0 hrs
291	SI M3: Design Establishment Review	0 days				0%	0 hrs
292	SI M4: Code Drop 1 (Planned Completion 3/15/13)	172 days		Tue 10/9/12	Wed 6/5/13	15%	0 hrs
293	IV&V Task 3: Validate Automated Code Review Results for Code Drop 1	70 days		Tue 1/15/13	Mon 4/22/13	37%	0 hrs
294	Automated Code Review Results Report Outline	54 days		Tue 1/15/13	Mon 4/1/13	85%	0 hrs
301	Automated Code Review Results Report for Code Drop 1	45 days		Tue 2/19/13	Mon 4/22/13	0%	0 hrs
309	IV&V Task 4: Validate Continuous Integration Results for Code Drop 1	143 days		Tue 10/9/12	Thu 4/25/13	0%	0 hrs
310	Continuous Integration Review Outline	104 days		Tue 10/9/12	Fri 3/1/13	0%	0 hrs
316	Continuous Integration Review Report for CD1	48 days		Tue 2/19/13	Thu 4/25/13	0%	0 hrs
324	IV&V Task 7: Verify Reusability for Code Drop 1	108 days		Mon 1/7/13	Wed 6/5/13	17%	0 hrs
325	Reusability Reports - Outlines and Samples	69 days		Mon 1/7/13	Thu 4/11/13	36%	0 hrs
330	Expected Reusability Report: Code Drop 1	39 days		Fri 4/12/13	Wed 6/5/13	0%	0 hrs
336	Delivered Reusability Report: Code Drop 1	40 days		Fri 3/29/13	Thu 5/23/13	0%	0 hrs
344	SI M5: Code Drop 2 (Planned Completion - 9/13/13)	252 days		Tue 10/9/12	Thu 9/26/13	17%	0 hrs
345	IV&V Task 3: Validate Automated Code Results for Code Drop 2	94 days		Mon 3/4/13	Fri 7/12/13	0%	0 hrs
346	<i>Dependency: SI Automated Code Review Results for Received</i>	0 days		Mon 3/4/13	Mon 3/4/13	0%	0 hrs
347	Automated Code Review Report for Code Drop 2	94 days		Mon 3/4/13	Fri 7/12/13	0%	0 hrs

Appendix C – Sample Operational Readiness Assessment Plan

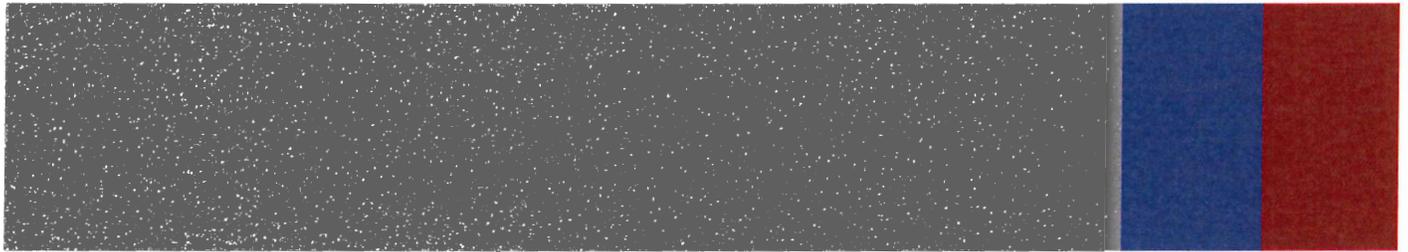
Task Name	Duration	Start	Finish	Predecessors
M: System and Business Operational Readiness Review and Assessment	105.4 days	Thu 1/1/15	Thu 5/28/15	
Task #1: Prepare System and Business Operations Readiness Review Plan	16.7 days	Thu 1/1/15	Fri 1/23/15	
Develop System and Business Operations Readiness Review Plan	5 days	Thu 1/1/15	Wed 1/7/15	
Schedule Plan Walk Through Meeting with DHHS	0.2 days	Thu 1/8/15	Thu 1/8/15	3
Conduct Plan Walk Through	0.5 days	Thu 1/8/15	Thu 1/8/15	4
Review Plan and Provide Feedback	5 days	Thu 1/8/15	Thu 1/15/15	5
Modify Plan and Resubmit	3 days	Thu 1/15/15	Tue 1/20/15	6
Receive Approval of Plan	3 days	Tue 1/20/15	Fri 1/23/15	7
M: Task #1 Complete	0 days	Tue 1/20/15	Tue 1/20/15	7
Task #2: Operational Readiness Assessment Report Deliverable Expectation Document	21.7 days	Thu 1/1/15	Fri 1/30/15	
Develop Operational Readiness Assessment Report Deliverable Expectation Document (DED)	8 days	Thu 1/1/15	Mon 1/12/15	
Schedule DED Walk Through Meeting with DHHS	0.2 days	Tue 1/13/15	Tue 1/13/15	12
Conduct DED Walk Through	0.5 days	Tue 1/13/15	Tue 1/13/15	13
Review DED and Provide Feedback	5 days	Tue 1/13/15	Tue 1/20/15	14
Modify DED and Resubmit	5 days	Tue 1/20/15	Tue 1/27/15	15
Receive Approval of DED	3 days	Tue 1/27/15	Fri 1/30/15	16
M: Task #2 Complete	0 days	Tue 1/27/15	Tue 1/27/15	16
Task #3: Conduct Operational Readiness Assessment	33 days	Tue 1/20/15	Fri 3/6/15	
Assessment Preparation	20 days	Tue 1/20/15	Tue 2/17/15	
Identify DHHS, Vendors, and Other Staff to be Involved in the Assessment	3 days	Tue 1/20/15	Fri 1/23/15	9
Determine Roles and Responsibilities for the Assessment	3 days	Fri 1/23/15	Wed 1/28/15	22
Establish Communication Approach	4 days	Wed 1/28/15	Tue 2/3/15	23
Determine Interviews to Perform	5 days	Tue 2/3/15	Tue 2/10/15	24
Develop Interview Questions Based on Assessment Area	5 days	Tue 1/27/15	Tue 2/3/15	16
Review Interview Questions and Provide Feedback	5 days	Tue 2/3/15	Tue 2/10/15	26
Modify Interview Questions	5 days	Tue 2/10/15	Tue 2/17/15	27
Assess Project Participants Understand of Go-Live Activities to Complete	23 days	Tue 2/3/15	Fri 3/6/15	
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	31
Request and Receive Report of Activities to be Completed Prior to Go-Live	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	33

Task Name	Duration	Start	Finish	Predecessors
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	34
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	35
Assess Organizational Readiness of Operation and Business Process	23 days	Tue 2/3/15	Fri 3/6/15	
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	39
Request and Receive Report of Operation and Business Processes	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	41
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	42
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	43
Assess Status of End-User Training	23 days	Tue 2/3/15	Fri 3/6/15	
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	47
Request and Receive Report of End-User Training to be Conducted	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	49
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	50
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	51
Assess Status of Vendor Deliverables	23 days	Tue 2/3/15	Fri 3/6/15	
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	55
Request and Receive Report of Vendor Deliverables and Status	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	57
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	58
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	59
Assess System Development Status	23 days	Tue 2/3/15	Fri 3/6/15	
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	63
Request and Receive Report of "Critical Path" System Development and Status	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	65
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	66
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	67
Assess Interface Readiness	23 days	Tue 2/3/15	Fri 3/6/15	

Task Name	Duration	Start	Finish	Predecessors
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	71
Request and Receive Report of Critical Interfaces and Status	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	73
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	74
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	75
Assess Reporting Readiness	23 days	Tue 2/3/15	Fri 3/6/15	
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	79
Request and Receive Report of Critical Reports and Status	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	81
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	82
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	83
Assess System Testing Status (Includes SIT, UAT, and Regression Testing)	23 days	Tue 2/3/15	Fri 3/6/15	
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	87
Request and Receive Report of System Testing, Defect Resolution, and Retesting	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	89
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	90
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	91
Assess System Security	23 days	Tue 2/3/15	Fri 3/6/15	
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	95
Request and Receive Report of System Security Audit Results and Defect Resolution	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	97
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	98
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	99
Assess Project Support Structure	23 days	Tue 2/3/15	Fri 3/6/15	
Conduct Interviews for Assessment Area	5 days	Tue 2/17/15	Tue 2/24/15	28
Document Interview Notes	3 days	Tue 2/24/15	Fri 2/27/15	103
Request and Receive Report of Impacted Support Structures and Status	10 days	Tue 2/3/15	Tue 2/17/15	24
Confirm Report with Project Teams Leadership	5 days	Tue 2/17/15	Tue 2/24/15	105

Task Name	Duration	Start	Finish	Predecessors
Work with Teams to Establish Checklist and Sign Off Process	5 days	Tue 2/24/15	Tue 3/3/15	106
Determine Status of Task for Operational Readiness Report	3 days	Tue 3/3/15	Fri 3/6/15	107
M: Task #3 Complete	0 days	Fri 3/6/15	Fri 3/6/15	28,36,44,52,60,68,76,84,92,100,108
Task #4: Operational Readiness Assessment Report	13.7 days	Fri 3/6/15	Thu 3/26/15	
Develop Operational Readiness Assessment Report	10 days	Fri 3/6/15	Fri 3/20/15	109
Perform Quality Assurance Review and Editing	3 days	Fri 3/20/15	Wed 3/25/15	112
Schedule Report Walk Through Meeting with DHHS	0.2 days	Wed 3/25/15	Wed 3/25/15	113
Conduct Report Walk Through	0.5 days	Wed 3/25/15	Thu 3/26/15	114
M: Task #4 Complete	0 days	Thu 3/26/15	Thu 3/26/15	115
Task #5: Scheduled Project Go-Live	0 days	Thu 5/28/15	Thu 5/28/15	116FS+45 days

Appendix D – Sample Operational Readiness Assessment Report



IV&V Operational Readiness Assessment

Version 1.0

Submitted by:

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**Project Operational Readiness Review
Independent Verification and Validation**

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Figure 1: Version History

Version	Date	Description
V1.0	[Publish Date]	Submitted version

Executive Summary

This section describes the purpose of this point-in-time project Operational Readiness Assessment is to share observations and offer recommended corrective actions related to DHHS and your vendors' readiness to perform critical business operations and system functions prior to go-live. BerryDunn's evaluation is based on the project gate review and phase entrance and exit criteria established for the project and defined by the Centers for Medicare and Medicaid Services (CMS). The information contained in this report is intended to meet the requirements of our contract with the State and to support the State's preparation for the CMS Operational Readiness Review activities.

Table 1: Readiness Designation of Assessment Areas

At Significant Risk (2) 	At Risk (5) 	At Minimal Risk (3) 
<ul style="list-style-type: none"> • Project Participants Understand Activities Remaining Prior to Go-Live • System Testing 	<ul style="list-style-type: none"> • Deliverables From Vendor(s) • Reporting • System Development • System Security • Training 	<ul style="list-style-type: none"> • Interfaces • the project Support Structure • Organizational Readiness

Conclusion

This section provides a conclusion of the report findings.

Acknowledgements

This section acknowledges the assistance from project team members in providing information.

1.0 Introduction

Purpose

This section explains the purpose of the Operational Readiness Review

Operational Readiness Assessment Methodology

Approach

This section explains the approach used to gather information for the review. Upon completion of fact-finding and analysis, BerryDunn assigned each assessment area a readiness designation based on the likelihood it will be ready for operations on the project go-live scheduled date.

Table 2: Readiness Designation Indicators and Definitions

Indicator	Readiness Designation Definitions
	At Significant Risk: Activities are late based on the project schedule, have risks that are not mitigated, and may not be able to be completed on a schedule that indicates they will be ready for project go-live.
	At Risk: Activities are late based on the project schedule and have risks that are not well controlled and will likely cause the area to continue to track late. However, with appropriate risk mitigation and issue resolution strategies, it may be possible to bring activities back on track, and/or running late can be accommodated in the overall schedule so that activities will be ready for project go-live.
	At Minimal Risk: Activities are at minimal risk based on dates established in the project schedule. Mitigation strategies for any identified risks are effective, and the activities have been and/or are expected to be completed on a schedule that indicates they will be ready for project go-live. Regular monitoring should be performed to promptly identify new risks.

Operational Readiness Assessment Areas

This section describes the assessment areas used to assess the project readiness for go-live are based on industry best practices and BerryDunn's experience performing IV&V for large-scale state system implementations, refined to meet the specific requirements of the project implementation. The assessment areas focus on the project system components but include key non-system components and operational activities critical for project go-live operations.

Table 3: Assessment Areas and Descriptions

Assessment Areas		
ID	Project Activity	Description
1	Project Participants Understand Activities Remaining Prior to Go-Live	All project activities and tasks must be adequately communicated to the responsible individuals and adequate resources must be designated to complete them. Succinct communications regarding outstanding project activities is required to ensure project participants are working on the most appropriate outstanding items, prioritized in an order of importance so the most critical

Assessment Areas		
ID	Project Activity	Description
		items are completed first. Development of a clear list of go-live readiness criteria (what things must be true before the system is ready for live operation) should be developed and used to communicate progress toward go-live.
2	Organizational Readiness	This project activity considers how operation and business processes will impact organizations (State Agency, Solutions Vendor) and external stakeholders, whether operational responsibilities have been documented and communicated, and if these organizations are ready to assume the project-based responsibilities.
3	Training	The project personnel need appropriate end-user training in preparation for live operations. Without proper training, staff will not be adequately prepared to perform their daily responsibilities in the project environment.
4	Deliverables from Vendor(s)	All deliverables identified in the contract between vendor(s) and the State should be provided and accepted (signed off on) by the State prior to live operation. In the event that modifications have been made to allow certain deliverables to be accepted after go-live, the deliverables schedule should be updated to reflect these decisions. Deliverables that are intended to document the results of a testing phase, for example, should be used by the State as a means by which the phase can be evaluated and whether or not the project implementation should proceed to the next phase.
5	System Development	All systems considered to be on the "critical path" have completed their development, integration, and configuration activities prior to go-live.
6	Interfaces	This assessment area relates to the various interfaces that are being developed during the implementation of the project. The development of interfaces is critical to ensure full system functionality to users. Interfaces should be tested along with the testing of other system functionality and signed off on by the State.
7	Reporting	As part of the project implementation the State will identify standard reporting needed. Areas where custom reporting needs exist will also need to be identified and the vendor(s) and the State will need to develop a plan to create them. High quality, reliable, properly formatted and complete reports are key indicators for how project stakeholders will ultimately define project success.
8	System Testing	The State must be assured that appropriate testing methodologies have been implemented to prove that the project is capable of meeting expectations set in the overall Testing Plan delivered by the vendor(s). Furthermore, testing must prove the system is able to operate in the live environment without

Assessment Areas		
ID	Project Activity	Description
		significant system errors, bugs, performance issues or other issues that could jeopardize daily operations.
9	System Security	A critical component of this project is the appropriate planning for and implementation of system security. With the various components of the system being integrated from several different entities (Solutions Vendor), understanding/documenting the overall system security architecture will be critical as part of overall system preparedness. Testing the security architecture against the documented plan is a key component of go-live preparedness.
10	the project Support Structure	With any enterprise-wide system implementation, there is a large impact on the support structure in the organization. The implementation of the project has similar implications and will require dedicated roles with Solutions Vendor. Ensuring that appropriate support structures are in place for all stakeholders will be critical for go-live.

Fact-Finding Methods

This section describes the process used to complete the ORA. BerryDunn reviewed State and vendor deliverables, project artifacts, and status reports. In addition, the team conducted focused interviews with project team members, and several informal discussions with State and vendor staff, and attended several meetings to collect additional information and verify observations from document reviews.

Table 4: Documents Reviewed for Operational Readiness Assessment contains a list of documents reviewed during development of this report, Table 5: Individuals Interviewed for Operational Readiness Assessment lists the individuals interviewed, and Table 6: Meetings Attended for Operational Readiness Assessment lists the meetings attended.

Table 4: Documents Reviewed for Operational Readiness Assessment

Deliverable	Document Date	Author

Table 5: Individuals Interviewed for Operational Readiness Assessment

Individuals Interviewed	Affiliation	Date

Table 6: Meetings Attended for Operational Readiness Assessment

Meetings Attended	Date

Assumptions and Constraints

This section outlines assumptions and constraints that impacted the development of this report.

2.0 Operational Readiness Assessment Results

Observations and Recommended Corrective Actions by Assessment Area

The tables below provide readiness designations, observations, and recommended corrective actions for each of the 10 readiness assessment areas based on fact-finding activities completed for each.

1. Assessment Area (for areas listed 1.2.2)	
Readiness Designation R	
Observations	Recommended Corrective Actions
<p><i>Description of observations for this assessment area</i></p> <p><i>Assessment may include multiple areas of review for this assessment area with recommended corrective actions detailed.</i></p>	<ul style="list-style-type: none"> • <i>Recommended corrective actions detail provided</i>