



TECHNICAL PROPOSAL FOR
**State of Nebraska, Department of Health
and Human Services (DHHS):
DHHS Consulting Services
Request for Proposal (RFP) Number:
6098 Z1**

BerryDunn

100 Middle Street, Portland, ME 04101
207-541-2200

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Principal**
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Manager**
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Proposal Submitted On:
June 27, 2019

June 27, 2019

Ms. Annette Walton / Ms. Teresa Fleming, Buyers
State Purchasing Bureau
1526 K Street, Suite 130
Lincoln, NE 68508

Dear Ms. Walton and Ms. Fleming:

Thank you for the opportunity to submit this proposal in response to Solicitation Number Request for Proposal (RFP) 6098 Z1 for Consulting Services, issued by the State of Nebraska (State) Department of Administrative Services (DAS) Material Division, State Purchasing Bureau (SPB) on behalf of the Department of Health and Human Services (DHHS).

Berry Dunn McNeil & Parker, LLC (BerryDunn) is an independent consulting and certified public accounting firm that serves clients nationally. Providing project management, Medicaid Management Information System (MMIS) modernization, certification life cycle, system planning and implementation services, and contract/vendor management services to public agencies are strengths of our firm. We have a history of successfully assisting clients with similar efforts, and we welcome the opportunity to assist you on the important initiatives detailed in your RFP.

Our approach is simple: **consistently provide high-quality services and strive for unparalleled client satisfaction.** You can feel confident selecting BerryDunn and our team of experienced professionals—backed by over 400 full-time employees. We have the expertise, proven methodologies, and resources to lead all of the projects detailed in your RFP and successfully support your objectives. As you evaluate which team is right for you, please consider the following:

- We offer an experienced, highly qualified senior team with the expertise and commitment required to support the State's success. Our team is comprised of individuals from both BerryDunn and our strategic partners for this project—JS3 Consulting, LLC (JS3) and POGIS Consulting, LLC (Pogis)—as well as independent consultants, who have dedicated their careers to helping health and human services (HHS) agencies across the country (including DHHS) modernize and transform their Medicaid programs and enterprise-wide systems. For example, this work includes:
 - Providing project management office (PMO) services to the West Virginia Bureau for Medical Services (BMS) in the design, development, implementation (DDI), and Centers for Medicare & Medicaid Services (CMS) certification of its MMIS
 - Collaborating with DHHS on several projects such as MMIS replacement planning, including alternatives analysis and RFP drafting; eligibility and enrollment (E&E) solution procurement and implementation; and Medicaid

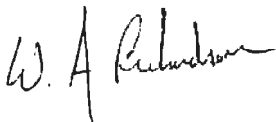
Enterprise Certification Life Cycle (MECL) and Medicaid Eligibility and Enrollment Toolkit (MEET) support.

- Providing PMO services to the Missouri Department of Social Services (DSS) as it begins implementation of two new MMIS modules—the Program Integrity and Business Intelligence Solution/Enterprise Data Warehouse (BIS-EDW) Solutions
- Providing independent verification and validation (IV&V) services to the Ohio Department of Medicaid (ODM) on its modular Ohio Medicaid Enterprise System (OMES) project. BerryDunn is supporting ODM through the replacement of its legacy MMIS system with a modernized, modular Medicaid Enterprise System (MES) that includes Pharmacy Benefit Management (PBM); electronic visit verification (EVV); Provider Network Management; Finance Business, including Claims and Encounters; Health Plan Management; Program Integrity; System Integration; and Customer Relationship Management (CRM).
- We pride ourselves on understanding and building relationships with the people behind processes and technology, including what drives them and how to best influence them to achieve success. Stakeholder engagement and communications will be a critical part of the initiatives detailed in your RFP, and we will incorporate change management concepts into all of our activities to help promote project success.
- We bring complete independence from hardware, software, and information technology (IT) system vendors, which enables our project team to provide the State with objective, unbiased recommendations that are in your best interest.
- We have experience ensuring that the project team resources needed are available to support project success. Our project teams will be available at the right time during all projects that we lead for DHHS, and they will be supported by more than 400 professionals who have the depth of processes, procedures, and best practices that align with that strength.

As a principal in our Government Consulting Group, I am authorized to bind BerryDunn to the commitments made herein and acknowledge the addendums issued with the RFP. Should you have questions, please contact me at 207-842-8023 or brichardson@berrydunn.com.

After 45 years of helping clients, we still appreciate every new opportunity. Thank you for your consideration. We look forward to the opportunity to develop a long and productive relationship with DHHS.

Sincerely,



William A. Richardson, PMP®, ITIL, Prosci® Certified Change Practitioner
Principal

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1 – Corporate Overview

1.1 – Bidder Identification and Information

1.1.1 - The bidder should provide the full company or corporate name, address of the company's headquarters, entity organization (corporation, partnership, proprietorship), state in which the bidder is incorporated or otherwise organized to do business, year in which the bidder first organized to do business and whether the name and form of organization has changed since first organized.

Berry Dunn McNeil & Parker, LLC (BerryDunn) is an independent consulting and certified public accounting firm formed in 1974 and serving clients nationally. BerryDunn has experienced sustained growth and financial stability throughout our 45-year history. We are a privately held company, incorporated and organized to do business in the State of Maine, and currently employ over 400 professionals.

BerryDunn is headquartered at 100 Middle Street, Portland, Maine, 04101, and serves clients nationally through our six office locations shown below.

THE BERRYDUNN OFFICES

Portland, ME
Bangor, ME
Manchester, NH
Glastonbury, CT
Charleston, WV
Phoenix, AZ



Other names under which our organization has been organized and conducted business include:

- Berry, Dunn & McNeil Chartered – from 1974 to 1982
- Berry, Dunn, McNeil & Parker Chartered – from 1982 to 1999

1.2 – Financial Statements

1.2.1 - The bidder should provide financial statements applicable to the firm. If publicly held, the bidder should provide a copy of the corporation's most recent audited financial reports and statements, and the name, address, and telephone number of the fiscally responsible representative of the bidder's financial or banking organization.

If the bidder is not a publicly held corporation, either the reports and statements required of a publicly held corporation, or a description of the organization, including size, longevity, client base, areas of specialization and expertise, and any other pertinent information, should be submitted in such a manner that proposal evaluators may reasonably formulate a determination about the stability and financial strength of the organization. Additionally, a non-publicly held firm should provide a banking reference.

The bidder must disclose any and all judgments, pending or expected litigation, or other real or potential financial reversals, which might materially affect the viability or stability of the organization, or state that no such condition is known to exist.

The State may elect to use a third party to conduct credit checks as part of the corporate overview evaluation.

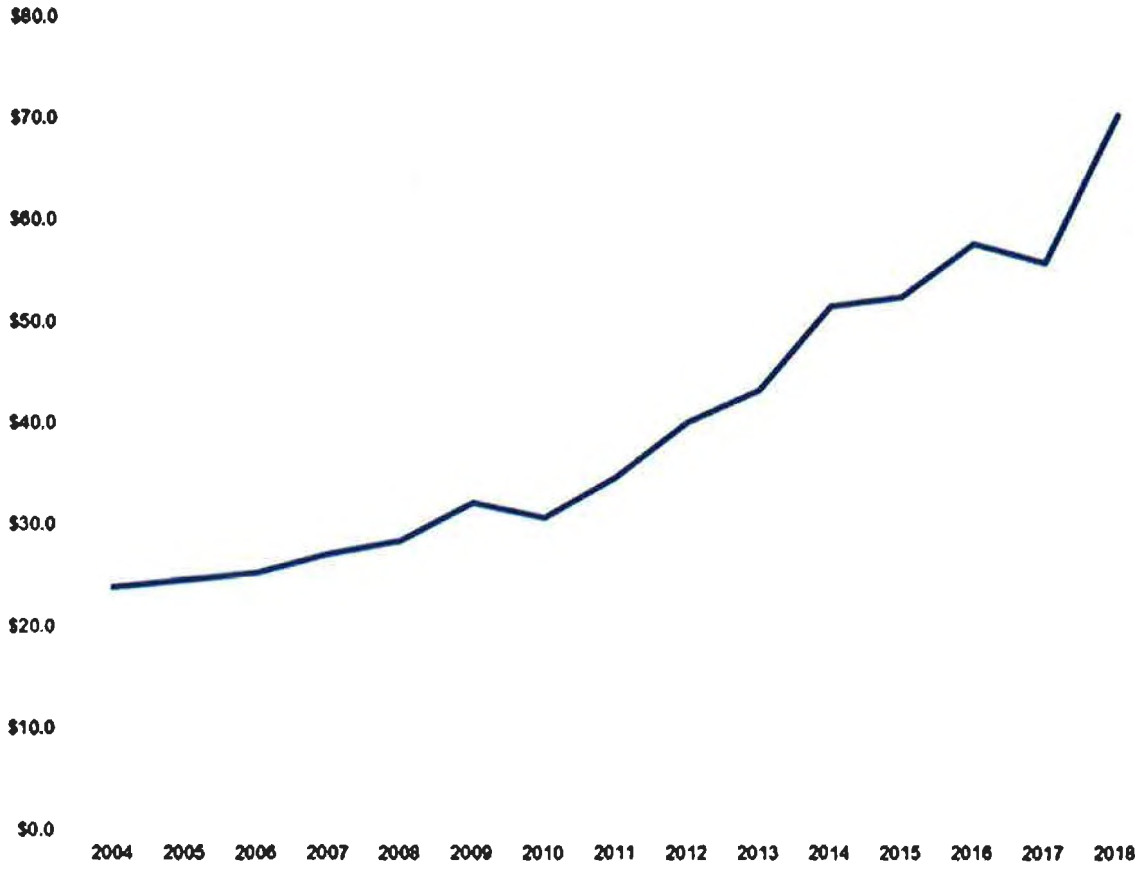
Financial Information

The State can have confidence that BerryDunn is a financially sound firm with the strength and integrity to successfully support the projects detailed in the State's RFP. As a privately held certified public accounting and consulting firm, BerryDunn is not required to prepare audited or unaudited financial statements. However, the financial information and figures provided in this section exemplify the strong financial condition of our firm. BerryDunn has sustained steady growth during our 45-year history.

Should the State require additional information regarding BerryDunn's financial stability, we would be pleased to provide it at your request. Additionally, for more information on BerryDunn's financial stability, you may contact William Schad, Vice President, Commercial Lending at TD Bank in Portland, Maine, at 207-761-8612 or by email at william.schad@tdbanknorth.com.

Figure 1, on the following page, illustrates BerryDunn's revenue for the previous 15 fiscal years.

Figure 1: BerryDunn Yearly Revenue (in Millions) Previous 15 Fiscal Years
BerryDunn has the financial strength and integrity to successfully support the State.



In Figure 2, below, we have provided BerryDunn's condensed financial information for the previous three fiscal years.

Figure 2: BerryDunn Condensed Financial Information
BerryDunn is a fiscally sound company.

	<u>FY16</u>	<u>FY17</u>	<u>FY18</u>
Current Assets	\$ 16,018,242	\$ 14,063,140	\$ 20,882,366
Fixed Assets, Net	2,232,806	2,255,209	2,100,197
	<u>\$ 18,251,048</u>	<u>\$ 16,318,349</u>	<u>\$ 22,982,563</u>
Current Liabilities	4,397,332	5,675,684	6,224,009
Amounts due Principals & Principals' Equity	13,853,716	10,642,665	16,758,554
	<u>\$ 18,251,048</u>	<u>\$ 16,318,349</u>	<u>\$ 22,982,563</u>
Operating Revenue	57,664,659	55,801,216	70,465,868
Operating Expenses	(46,425,993)	(47,730,767)	(57,975,676)
Depreciation & Amortization	(591,088)	(680,860)	(717,418)
Interest Expense	6,040	(10,694)	(104,375)
Net Income	<u>\$ 10,653,618</u>	<u>\$ 7,378,895</u>	<u>\$ 11,668,399</u>

To further demonstrate our financial stability, in Figure 3 on the following page, we have provided a letter from BerryDunn's primary financial institution demonstrating our good standing.

Figure 3: BerryDunn Letter of Good Standing
BerryDunn has a long-term record of financial stability.



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

March 5, 2019

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

To Whom It May Concern:

Berry, Dunn, McNeil & Parker, Inc. has a Working Capital Line of Credit with TD Bank with a current availability in the low seven (7) figure range.

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 four (24) 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,

A handwritten signature in black ink, appearing to read 'C. March'.

Colin P. March
Senior Relationship Manager

Overview of BerryDunn



BerryDunn is an independent national IT consulting, management consulting, and certified public accounting firm formed in 1974. The firm has experienced sustained growth throughout our 45-year history. Today, BerryDunn employs over 400 professionals with headquarters in Portland, Maine, and office locations in Arizona, Connecticut, New Hampshire, and West Virginia.



BerryDunn's Government Consulting Group is focused on serving state and local government agencies, and we have successfully worked with government clients in all 50 states for more than 30 years.

Figure 4 below, highlights areas of specialization and expertise for BerryDunn's Government Consulting Group.

Figure 4: BerryDunn Areas of Specialization and Expertise

BerryDunn brings the depth of expertise and experience needed to support the State's success.



BerryDunn has helped state HHS clients—just like DHHS—solve some of their biggest challenges, including modernizing, enhancing, and transforming HHS programs and systems. For example, we have worked with state HHS clients such as:

- Arizona Health Care Cost Containment System
- Colorado Department of Human Services (DHS)
- Hawaii DHS
- Maine DHHS
- Missouri DSS
- New Hampshire DHHS
- New Jersey Division of Medical Assistance and Health Services
- New Mexico Human Services Department
- Ohio Department of Medicaid

- West Virginia Department of Health and Human Resources (DHHR), BMS

Our subcontractor partner firms for this project, JS3 and Pogis, combined bring more than 20 years of experience in working with state HHS agencies. For example, JS3 consultants have provided the following services to DHHS:

- MMIS replacement planning, including alternatives analysis and RFP drafting
- Data Management and Analytics (DMA) system procurement and implementation
- E&E solution procurement and implementation
- Business, process, and system integration
- Provider screening and enrollment implementation
- CMS64 remediation process improvement
- Project and portfolio management processes
- MECL and MEET certification
- International Classification of Diseases (ICD)-10 implementation
- Statewide integrated managed care implementation
- Contractor/vendor management and audit
- Fair Labor Standards Act overtime and travel time compliance
- Advance Planning Document (APD) drafting
- Operational process improvement
- Regulatory, State Plan, and waiver reviews
- MITA 3.0 State Self-Assessment (SS-A)
- Medicaid Strategic Planning
- Legislative request support, finance support, and high-risk project support

Pogis has worked with BerryDunn on past projects with state HHS agencies and brings relevant experience such as:

- West Virginia BMS MITA 2.0 SS-A 2009, MITA 3.0 SS-A (2012 to 2014, 2016 Annual Update, 2017 Annual Update)
- West Virginia MMIS Re-procurement Project DDI and Certification (2012 to 2015)
- New Mexico DHS Medicaid and Child Support Enforcement Systems PMO Project (2014 to 2015)
- Arizona Health Care Cost Containment System (AHCCCS) MITA 3.0 SS-A (2009)
- State of Indiana MITA SS-A (2008)

Through BerryDunn's more than 20 years of combined experience in working with HHS agencies in providing the services illustrated in Figure 4 above, combined with the State and DHHS specific knowledge that JS3 offers, as well as the HHS consulting experience of Pogis and our independent subcontractors, we bring the expertise and experience needed to help ensure DHHS achieves its goals across all of the projects detailed in the State's RFP. Beyond our experience, we will also support your success because of **our independence from hardware, software, and IT system vendors, which enables our project team to provide the State with objective, unbiased recommendations that are in your best interest.**

Litigation

BerryDunn does not have any judgments, pending or expected litigation, or other real or potential financial reversals to disclose, which might materially affect the viability or stability of our firm.

1.3 – Change of Ownership

1.3.1 - If any change in ownership or control of the company is anticipated during the twelve (12) months following the proposal due date, the bidder should describe the circumstances of such change and indicate when the change will likely occur. Any change of ownership to an awarded vendor(s) will require notification to the State.

No change in ownership or control of the company is anticipated during the 12 months following the proposal due date.

1.4 – Office Location

1.4.1 - The bidder's office location responsible for performance pursuant to an award of a contract with the State of Nebraska should be identified.

BerryDunn has successfully worked with clients in all 50 states. We pride ourselves on being readily available to our clients when needed—as our previous clients and references (provided in Section 1.8 of our response) will attest to—and we believe in performing work off-site when appropriate to maximize cost savings for our clients and minimize our disruption to their regular operations.

Our Portland, Maine, headquarters will be the primary office location responsible for the performance pursuant to an award of a contract with the State. BerryDunn will also draw upon project team members from our West Virginia office, resources from our subcontractor partner JS3 in South Dakota, Pogis in New Mexico, and independent contractors from throughout the country. Based on the nature of the activity and interaction needed with DHHS staff, project team members may work off-site at our team members' office locations across the United States.

1.5 – Relationships with the State

1.5.1 - The bidder should describe any dealings with the State over the previous five (5) years. If the organization, its predecessor, or any Party named in the bidder's proposal response has contracted with the State, the bidder should identify the contract number(s) and/or any other information available to identify such contract(s). If no such contracts exist, so declare.

BerryDunn has successfully worked with clients in all 50 states, Canada, and the United Kingdom. Below, we have first detailed BerryDunn's past work in supporting State entities over the previous five years and then detailed JS3's extensive work in the State.

Nebraska Department of Motor Vehicles (DMV), Contract # 69061 O4, 11/2015 to 04/2017

BerryDunn assisted the Nebraska DMV with planning for a significant technology modernization. We conducted a needs analysis that encompassed the following deliverable and phases:

- Current environment process modeling and identification of process challenges
- Interviews with peer states to determine lessons learned from modernization
- Facilitation of system stakeholder session to capture needs and requirements
- Market research, including issuance on a request for information (RFI) and tabulation of responses and presentations
- Recommendations for modernization and legislative changes
- Development of functional and technical requirements
- Assistance with development of an RFP for the modernized solution and integration services

The result was a comprehensive modernization needs analysis and recommendations that led to the issuance of an RFP in April 2017. The DMV and the Office of the Chief Information Officer benefitted from an independent perspective, data gathering tools, facilitation experience, report writing, and subject matter expertise in the motor vehicle industry.

Covendis State of Nebraska IT Staff Augmentation Contract, Supplier Agreement, 01/2017 to 01/2018

BerryDunn was a supplier in the State's IT staff augmentation program managed by Covendis. We did not provide services through this contract, however.

DHHS Project Support, Contract #s 52714 O4; 58361 O4; 68917 O4; 80039 O4. Contract dates - 06/2012 to 12/2013; 01/2014 to 12/2015; 01/2016 to 12/2017; and 01/2018 to 12/2018 (subsequently extended through 12/2019)

JS3 assisted DHHS with planning, project management, and analytical support for a wide variety of projects over the course of the various contract extensions. Below is a sample of the over 50 different projects and initiatives the JS3 team successfully developed or managed:

- MMIS replacement planning, including alternatives analysis and RFP drafting
- DMA system procurement and implementation
- E&E solution procurement and implementation
- Business, process, and system integration
- Provider screening and enrollment implementation
- CMS64 remediation process improvement

- Project and portfolio management processes
- MECL and MEET certification
- ICD-10 implementation
- Statewide integrated managed care implementation
- Contractor/vendor management and audit
- Fair Labor Standards Act overtime and travel time compliance
- APD drafting
- Operational process improvement
- Regulatory, State Plan, and waiver reviews
- MITA 3.0 SS-A
- Medicaid strategic planning
- Legislative request support, finance support, and high-risk project support

JS3 often served in an augmentation role for the State and provided many services on an ad hoc basis due to staff shortages or mandated activities required for compliance with federal or State regulations. As a result, JS3 has forged a strong working relationship not only with DHHS leadership, but with all staff working on the various initiatives.

DHHS – Operations, Contract# 68917 04, 03/2017 to 12/2017

JS3 and DHHS Operations (Finance) executed a short-term agreement to provide staff augmentation resources to support DHHS Finance reporting, reconciliation, and analysis initiatives primarily related to Medicaid federal reporting requirements. The effort involved mitigating staff shortages to assist in completing necessary work while also developing standard processes for incoming new staff.

Please see Appendix E where we have provided a letter of reference for JS3 from Mr. Calder Lynch, former Director of Medicaid and Long-Term Care (MLTC), DHHS.

The State and any projects supported by our project team will benefit from our ability to combine a national perspective with the lessons learned, relationships developed, and local knowledge acquired from not only our project work in the State, but also from our subcontractor JS3's extensive experience supporting DHHS since 2012.

1.6 – Bidder’s Employee Relations with the State

1.6.1 - If any Party named in the bidder's proposal response is or was an employee of the State within the past twelve (12) months, identify the individual(s) by name, State agency with whom employed, job title or position held with the State, and separation date. If no such relationship exists or has existed, so declare. If any employee of any agency of the State of Nebraska is employed by the bidder or is a subcontractor to the bidder, as of the due date for proposal submission, identify all such persons by name, position held with the bidder, and position held with the State (including job title and agency). Describe the responsibilities of such persons within the proposing organization. If, after review of this information by the State, it is determined that a conflict of interest exists or may exist, the bidder may be disqualified from further consideration in this proposal. If no such relationship exists, so declare.

BerryDunn and our subcontractor partners for this engagement have not employed or subcontracted with any former employee of the State within the past 12 months.

1.7 – Contract Performance

1.7.1 - If the bidder or any proposed subcontractor has had a contract terminated for default during the past ten (10) years, all such instances must be described as required below. Termination for default is defined as a notice to stop performance delivery due to the bidder's non-performance or poor performance, and the issue was either not litigated due to inaction on the part of the bidder or litigated and such litigation determined the bidder to be in default.

It is mandatory that the bidder submit full details of all termination for default experienced during the past ten (10) years, including the other Party's name, address, and telephone number. The response to this section must present the bidder's position on the matter. The State will evaluate the facts and will score the bidder's proposal accordingly. If no such termination for default has been experienced by the bidder in the past ten (10) years, so declare.

If at any time during the past ten (10) years, the bidder has had a contract terminated for convenience, non-performance, non-allocation of funds, or any other reason, describe fully all circumstances surrounding such termination, including the name and address of the other contracting Party.

BerryDunn has had one contract terminated for default, convenience, or for any other reason during the past 10 years as detailed below. Our subcontractor partners have not had any contract terminated for default, convenience, or for any other reason during the past 10 years.

The City of Goodyear, Arizona, engaged BerryDunn in August 2013 to provide enterprise resource planning (ERP) system consulting services to assess the City's software needs and assist in the selection of a replacement system. Upon the City's selection of an ERP solution, the City extended its contract with BerryDunn to include full-time project management for the ERP system implementation project. In August 2015, following extensive efforts on the part of the City to resolve issues with a separate third-party system integrator, the City put the ERP system implementation project on hold. As a result, in September 2015, the City exercised its ability to cancel BerryDunn's contract for convenience. The cancellation of our contract was the result of the indefinite postponement of the City's implementation project and was in no way related to BerryDunn's performance.

Per the terms of our agreement with the City, a prospective client may not contact the City directly. However, if the State requires additional information on this project, please contact BerryDunn's attorney in Arizona:

Dickinson Wright Attorneys
Attn: Michael Plati
1850 N. Central Ave.
Suite 1400
Phoenix, AZ 85004
602-285-5000

1.8 – Summary of Bidder’s Corporate Experience

1.8.1 - The bidder should provide a summary matrix listing the bidder's previous projects similar to this RFP in size, scope, and complexity. The State will use no more than three (3) narrative project descriptions submitted by the bidder during its evaluation of the proposal. The bidder should address the following:

- i. Provide narrative descriptions to highlight the similarities between the bidder's experience and this RFP. These descriptions should include:
 - a) The time period of the project;
 - b) The scheduled and actual completion dates;
 - c) The Contractor's responsibilities;
 - d) For reference purposes, a customer name (including the name of a contact person, a current telephone number, a facsimile number, and e-mail address); and,
 - e) Each project description should identify whether the work was performed as the prime Contractor or as a subcontractor. If a bidder performed as the prime Contractor, the description should provide the originally scheduled completion date and budget, as well as the actual (or currently planned) completion date and actual (or currently planned) budget.
- ii. Contractor and subcontractor(s) experience should be listed separately. Narrative descriptions submitted for subcontractors should be specifically identified as subcontractor projects.
- iii. If the work was performed as a subcontractor, the narrative description should identify the same information as requested for the Contractors above. In addition, subcontractors should identify what share of contract costs, project responsibilities, and time period were performed as a subcontractor.

BerryDunn has served clients across the country on projects similar in scope, scale, and complexity to the work being requested by DHHS. On the following pages, in Tables 1 – 3, we have provided information for three projects that were successfully completed or are currently underway to demonstrate our recent experience providing similar services.

Table 1: BerryDunn PMO Experience on MMIS Implementation
BerryDunn brings experience in MMIS procurement, implementation, and certification.

West Virginia BMS	
Project Management of MMIS Procurement; DDI; and Certification	
Project Dates	April 2008 – October 2016
Planned and Actual Completion Date	Planned: October 2016 Actual: October 2016
Planned and Actual Budget	Planned: \$7,444,225 Actual: \$7,444,225
Project Description	The BMS hired BerryDunn in 2008 to provide project management for the planning, procurement, DDI, and CMS certification of West Virginia's MMIS. In 2012, after completing a competitive procurement process, BMS selected Molina as the MMIS/Fiscal Agent vendor, with a January 2013 implementation start and a planned three-year implementation timeframe.
BerryDunn's Responsibilities	<p>BerryDunn provided project management through the DDI, including facilitation, execution, oversight of requirements validation sessions, design sessions, System Integration Testing (SIT), User Acceptance Testing (UAT), Operational Readiness Testing, and CMS Certification gate reviews. BerryDunn also provided risk and issue management, as well as monitoring and reporting for all levels of the West Virginia DHHR organization, including the CMS central and regional offices.</p> <p>BerryDunn's team:</p> <ul style="list-style-type: none"> • Facilitated meetings and correspondence with West Virginia, CMS, and vendors on overall project status, certification preparation, and technical assistance • Developed and reviewed deliverables for submission to CMS • Prepared for, coordinated, and facilitated gate reviews with CMS, West Virginia, and the MMIS vendor • Monitored project scope to ensure that the vendor delivered all functionality, documentation, and services defined within the contract for the procurement. • Monitored the vendor project schedule to help ensure that it accurately reflected completed tasks, contained sufficient predecessors to result in schedule pushes when critical path tasks were delayed, and accurately accounted for limited state resources available to the project. BerryDunn also developed detailed subproject plans that supported the completion of specific project milestones. • Monitored actual project cost against the projected cost defined in the IAPD for the project. BerryDunn also validated that all vendor-submitted payment milestones were in fact complete and ready for payment. No vendor change requests with a monetary value were needed for the implementation. • Conducted quality deliverable reviews on a portfolio of over 630 deliverables supported by thousands of individual artifacts. These reviews validated content against the vendor proposal, the RFP, industry best practices, and

West Virginia BMS

Project Management of MMIS Procurement; DDI; and Certification


	<p>previously approved deliverables. Specific focus areas included requirements validation, design documentation, test cases and results, and project management plans.</p> <ul style="list-style-type: none">• Drafted numerous communications on behalf of the State that contained critical project information and helped clarify expectations for the direction of the project.• Conducted proactive risk management on the project. We identified project risks and issues, collaborated with the MMIS vendor to conduct root-cause analysis, validated corrective action plans, and escalated risks that had the potential to impact the project critical path.• Assisted West Virginia with procurement management at the outset of the MMIS replacement process. Our consultants conducted initial visioning, requirements gathering, and RFP development, then supported the State during proposal scoring.• Maintained consistent engagement with stakeholders across the Medicaid enterprise. BerryDunn engaged the right stakeholders at the right time to help ensure that critical project decisions occurred within the time allotted by the project schedule.
Project Outcomes	<p>With BerryDunn serving as the project management vendor, the MMIS went live on time and on budget in January 2016, without a single change order. Additionally, BerryDunn successfully supported West Virginia Medicaid through three CMS certification gate reviews. West Virginia received CMS certification of the MMIS in October 2016.</p>
Client Contact Information	<p>Ms. Cynthia Beane, Commissioner West Virginia DHHR 350 Capital Street Charleston, WV 25301 304-356-4907 (office phone) cynthia.e.beane@wv.gov</p> 
Prime or Subcontractor?	<p>BerryDunn served as the prime contractor for this engagement.</p>

Table 2: BerryDunn PMO Support in Missouri
BerryDunn currently provides PMO support for Missouri's modular transformation.


Missouri Department of Social Services (DSS), MO HealthNet Division Project Management Office (PMO) for Business Intelligence Solution-Enterprise Data Warehouse (BIS-EDW) and Program Integrity Solutions	
Project Dates	November 2017 – present
Planned and Actual Completion Date	Planned: December 2019, with the extension up to December 2021 (projected date) Actual: To be determined (project underway)
Planned and Actual Budget	Planned: \$5,717,738 Actual: To be determined (project underway)
Project Description	The Missouri DSS has initiated an MMIS Re-procurement and Replacement Program, which includes the purchase and implementation of a BIS-EDW and Program Integrity Solution. These new solutions will provide a comprehensive, scalable, and secure healthcare information solution to help meet the administrative and program-decision support, reporting, and analytics needs of the Missouri Medicaid Enterprise (MME) for the next decade. On implementation, the Enterprise Data Warehouse will serve as a single source of truth for MO HealthNet Division and other state agencies. The Program Integrity Solution will also improve the detection, identification, and review of suspected fraud, waste, and abuse in the Medicaid program.
BerryDunn's Responsibilities	<p>BerryDunn is currently serving as the Project Management Services Contractor to support the MME PMO by providing project management services for the management and implementation of the BIS-EDW and Program Integrity Solutions modules, and serve as a resource to the Executive Steering Committee responsible for this project.</p> <p>Our team is providing project management services for each project module, from the planning stage through system implementation and certification, in accordance with the Medicaid Enterprise Certification Toolkit (MECT) and the guidance CMS has provided for PMO services. Our project scope includes:</p> <ul style="list-style-type: none"> • Defining, building, and managing a PMO to assist the State Medicaid Agency (SMA) in the modular implementation of the BIS-EDW and Program Integrity solution. • Providing comprehensive project management services including continuous monitoring of project execution, measuring deviations, status reporting, reviewing deliverables, risk management, change management and development of materials required for stage gate reviews. • Serving as the central point for coordinating the certification milestone review (R1, R2, and R3) schedule for the two modules assigned to BerryDunn. • Ensuring that all CMS-required project artifacts for each stage gate review have been developed and delivered to CMS ahead of the actual review. • Addressing CMS recommendation decisions after each milestone review, scheduling tasks in the project management plan and prioritizing any

**Missouri Department of Social Services (DSS), MO HealthNet Division
Project Management Office (PMO) for Business Intelligence Solution-Enterprise Data
Warehouse (BIS-EDW) and Program Integrity Solutions**

	<p>corrective actions CMS expects to be reflected before the next milestone review.</p> <ul style="list-style-type: none"> Facilitating regular status reporting to federal partners to keep them informed of project achievements between stage gate reviews. Managing CMS reviews from a relationship-based perspective, to which we leverage our existing relationships with CMS and our track record of success managing stakeholders.
Project Outcomes	<p>The goal for MME is to successfully implement the identified modules with the state of the art solution to meet the overall goal of Medicaid Information Technology Architecture (MITA) to provide Missouri with a modular system that is scalable, modular, and reusable. Since BerryDunn began this project, we have promoted Missouri's project goals:</p> <ul style="list-style-type: none"> Establishing a PMO that works collaboratively with Missouri and the solution vendor Documenting PMO processes, identifying key stakeholders, and establishing governance and communication Managing the DDI of fraud waste and abuse and Enterprise Data Warehouse system Managing requirements, schedule, change, risks, and issues using the process established Supporting Missouri in R1 artifacts documentation and templates for R2 and R3 review on CMS Certification MECT 2.3
Client Contact Information	<p>Ms. Tisha McGowan, PMP®, CphT Information Systems MO HealthNet Division 615 Howerton Ct. Jefferson City, MO 65109 573-522-4294 Tisha.A.McGowan@dss.mo.gov</p> 
Prime or Subcontractor?	<p>BerryDunn is the prime contractor for this engagement.</p>

Table 3: BerryDunn’s IV&V Experience in a Modular Environment
BerryDunn has been providing IV&V services to support Ohio’s modular transformation.

Ohio Department of Medicaid (ODM) MMIS IV&V Services	
Project Dates	December 2016 – present
Planned and Actual Completion Date	Planned: June 2021 Actual: To be determined (project underway)
Planned and Actual Budget	Planned: \$6,639,000 Actual: To be determined (project underway)
Project Description	The ODM has undertaken a far-reaching project to replace its MMIS. The OMES will be comprised of new technologies to cover all the functions of the MITA 3.0 Framework, along with other components with which the MMIS integrates, including Decision Support, PBM, and E&E systems.
BerryDunn’s Responsibilities	<p>BerryDunn currently provides IV&V services for ODM on its modular OMES project. Our contract includes IV&V and CMS certification services through the procurement, DDI, and initial operation of multiple modules. BerryDunn is supporting ODM through the replacement of its legacy MMIS system with a modernized, modular MES that includes EVV; PBM; Provider Network Management; Finance Business, including Claims, Encounters, and Financial Management; and Systems Integration. Our IV&V services include:</p> <ul style="list-style-type: none"> • Providing oversight to ODM to help ensure compliance with CMS guidelines • Providing insight and sharing experience on the RFP development and procurement processes based on marketplace experience • Analyzing the Microsoft Project-based project schedule, including assessing resource allocation and task dependencies, as well as monitoring scope, schedule, quality, resource management, and risk and issue management • Identifying and providing recommendations to mitigate potential risks • Identifying and providing recommendations to resolve issues • Performing CMS certification reviews and support based on current MECT guidelines • Ensuring program and project activities align with MECL phases for the planning, DDI, and operations OMES modules • Reviewing CMS certification-required artifacts, including concepts of operations, data and technical management strategies, privacy impact assessment (PIA), security plan, earned value and velocity management, database design, and system design • Coordinating and facilitating discussions between ODM and Medicaid agencies in other states to exchange information on EVV, CMS certification, and health plan management

Ohio Department of Medicaid (ODM) MMIS IV&V Services	
	<ul style="list-style-type: none"> • Providing feedback to ODM on the System Integrator's use of JIRA as a Kanban productivity and risk management tool and Jama software for requirements traceability • Identifying opportunities for reusability, including developing reusable components and plans for other modules • Supporting the communication and potential collaboration between Ohio and other states to leverage reusability
Project Outcomes	Our Ohio-based team guided ODM through its first certification effort, which focused on PBM certification through the R1, R2, and R3 Milestone Reviews. In addition, we have the distinction of supporting Ohio as the first state to undergo R1, R2, and R3 certification activities for an EVV system. During this effort, we worked in partnership with CMS to clarify the application of MECT guidelines to EVV functionality, determining a customized MEC checklist for Ohio's EVV, and completing Certification Milestone Reviews across all life cycle phases of the MECL, and participate in an outcomes-based certification pilot.
Client Contact Information	<p>Mr. Matthew Barlow, OMES Program Strategist Ohio Department of Medicaid 50 West Town Street, Suite 400 Columbus, OH 43215 614-752-0449 matthew.barlow@medicaid.ohio.gov</p> 
Prime or Subcontractor?	BerryDunn is the prime contractor for this engagement.

In addition to the three projects detailed above in Tables 1 – 3, Table 4 on the following page includes a partial list of additional relevant projects performed by BerryDunn. Due to the extensive number of HHS projects that BerryDunn's Government Consulting Group has been engaged in over the last 20 years, we have only provided a sample of projects within this table. However, we would be pleased to provide additional information should DHHS desire it.

Table 4: Additional Examples of the BerryDunn Relevant Experience
BerryDunn has experience in each area detailed in the State's RFP.

Client	Project	Project Dates
Hawaii DHS, MQD	Business process redesign project to improve the efficiency and effectiveness of the delivery of services provided by the Kauhale On-Line Eligibility Assistance (KOLEA) system	2017 to present
Massachusetts Executive Office of Health and Human Services (EOHHS)	Project Management for the Development of Massachusetts' State Medicaid Health Information Technology Planning (SMHP) and Health IT Implementation Advance Planning Document (HIT I-APD)	2010 to 2011
Missouri DSS	MMIS Security Risk Assessment	2013 to 2014
Missouri Family Support Division (FSD)	Eligibility Determination and Enrollment System Security Risk Assessment	2014
Missouri FSD	IV&V for the Missouri Eligibility Determination and Enrollment System (MEDES) Implementation	2013 to present
New Hampshire DHHS	MMIS Assessment and Development of Re-procurement Options	2018
New Jersey DHS, Division of Medical Assistance and Health Services	Implementation and Certification Process Support for the Replacement-MMIS (R-MMIS) Project	2017 to 2018
New Mexico Human Services Division	HHS 2020 Project Management and Procurement Support of RFPs for Modular MES, including developing a system integrator (SI) RFP	2016 to present
North Carolina Office of the State Auditor	Independent Evaluation of the State IT Services Enterprise PMO (EPMO)	2007
Ohio Department of Medicaid	IV&V for the OMES – procurement, implementation, and MECT certification	2016 to present
Vermont Agency of Human Services	Project Management for the MMIS Specialized Programs Project	2015 to present
Vermont Green Mountain Care Board	Project Management for the Vermont All-Payer Claims Database Project Implementation of a Data Governance Council	2014 to 2015
West Virginia BMS	Creation of a MITA 3.0 Data Management Strategy for the West Virginia Medicaid Enterprise	2015 to present
West Virginia BMS	Project Management and Workgroup Facilitation for Medicaid Eligibility Group and Policy Analysis	2012 to 2014

Client	Project	Project Dates
West Virginia BMS	Project Management for the Data Warehouse/Decision Support System (DW/DSS) Re-Procurement and Implementation	2012 to 2015
West Virginia BMS	Project Management for the ICD-10 Implementation Project	2013 to 2015
West Virginia BMS	Project Management for Medicaid Payments for Primary Care Services	2012 to 2013
West Virginia BMS	Project Management for MITA SS-A, MMIS Planning, and RFP and Advanced Planning Document (APD) Development and Procurement	2008 to 2012
West Virginia BMS	Project Management for the Utilization Management Re-Procurement	2015 to 2016
West Virginia BMS	Project Management Support for the MITA 3.0 Organizational Redesign	2012
West Virginia BMS	Project Support for E&E System Modernization	2013 to 2014
West Virginia Children's Health Insurance Program (WVCHIP)	Project Management Support for the WVCHIP Transition Project, including project management and support services for the DW/DSS Children's Health Insurance Program (CHIP) data project	2014 to present
West Virginia Offices of the Insurance Commissioner	Project Management for Health Insurance Exchange (HIX) IT Planning	2011 to 2013
West Virginia Office of Management Information Services (OMIS)	Project Management for the Takeover, Procurement, and DDI of the State's Integrated Eligibility System (IES)	2015 to present

BerryDunn and our project team bring demonstrated success in providing the scope of services requested by the State. Through our work detailed above in Tables 1 – 4, we illustrate how we have helped state HHS agencies across the country modernize and transform their Medicaid enterprises on projects that are the same or similar to those being undertaken by the State. For additional information on the depth of expertise that our project team offers to support the success of DHHS, please see their resumes included in Section 1.9 of our response below.

1.9 – Summary of Bidder’s Proposed Personnel/Management Approach

1.9.1 - The bidder should present a detailed description of its proposed approach to the management of the project.

The bidder should identify the specific professionals who will work on the State’s project if their company is awarded the contract resulting from this RFP. The names and titles of the team proposed for assignment to the State project should be identified in full, with a description of the team leadership, interface and support functions, and reporting relationships. The primary work assigned to each person should also be identified.

The bidder should provide resumes for all personnel proposed by the bidder to work on the project. The State will consider the resumes as a key indicator of the bidder’s understanding of the skill mixes required to carry out the requirements of the RFP in addition to assessing the experience of specific individuals.

Resumes should not be longer than three (3) pages. Resumes should include, at a minimum, academic background and degrees, professional certifications, understanding of the process, and at least three (3) references (name, address, and telephone number) who can attest to the competence and skill level of the individual. Any changes in proposed personnel shall only be implemented after written approval from the State.

Approach to Management of the Project

The State, DHHS, and any project that the BerryDunn project team supports will benefit from our proven ability to provide qualified, experienced, and stable project teams that promote project success. Utilizing BerryDunn’s more than 400 professionals, we will develop staffing plans and schedules that meet the needs of DHHS and your project and can be scaled as needed throughout a project’s life cycle. We understand the importance of—and more importantly, have more than 20 years of experience in—managing the ramp-up of project teams to be in alignment with client and project needs. You can be confident in our ability to manage and assign the right resources based on your project needs. Our internal resource manager monitors staff allocations across all of our projects, tracks staff availability, and provides information to our management team to help identify qualified project resources. In addition, our management team members communicate regularly about staff workloads and commitments along with subcontractor allocations, to help with effectively managing team members.

To help ensure our team members are prepared and equipped to work on any DHHS project we lead, we have developed processes for employees to start up a new project or join a project mid-stream. This includes training on BerryDunn methodologies, tools, deliverable development, and quality review processes. All of our team members are trained in these processes and methodologies—both during their initial employment orientation and throughout the year based on the needs of their position.



“The BerryDunn project team was always incredibly responsive and eager to help/assist as needed. I appreciated that they paired a consistently positive attitude with realistic expectations and forecasts for the project. I never felt that I was being misled or only being told what I wanted to hear, which has sadly been the case with other vendors.”

Ms. Ashley Berliner,
Director of Healthcare Policy
and Planning, Agency of
Human Services, Vermont

When we assemble a project team or bring new team members onto a project with DHHS—whether in a key or supporting role—our project manager will orient the team member to the project, including established project standards, project methodologies and tools, the approved project plan, and expectations for the role the individual will be performing. In addition, all team members will have access to any project repositories housed at DHHS (if acceptable by the State) and/or on our custom SharePoint collaboration site, BerryDunn KnowledgeLink.

Our Contracts Department oversees the contracting process to help ensure subcontractors fulfill all insurance and compliance requirements (including State-specific contractual requirements) so that our team is able to “hit the ground running” when a project with DHHS begins.

BerryDunn offers a thorough orientation process, which covers firm-wide and consulting-specific training and information, to prepare new hires with the information needed to work effectively, including a full week of orientation at our home office in Portland, Maine. All of our subcontractors are issued a BerryDunn email address and are required to follow BerryDunn’s standards (e.g., related to security and use of technology).

BerryDunn’s project principal, engagement manager, and project managers will monitor the performance of our subcontractors throughout the course of each engagement to help ensure that the subcontractor’s performance meets BerryDunn’s and DHHS’ expectations. We are accustomed to managing teams of BerryDunn employees and subcontractors on large, enterprise-wide HHS agency projects and have established processes for integrating subcontractors into our project team so that our team structure will be “seamless” to DHHS. If issues arise with our subcontractor’s performance, BerryDunn’s project manager will address the issue and work with the subcontractor to develop a plan of action for resolving the issue.

We take pride in our track record of designing stable teams that collaborate effectively throughout the project with all project teams, including our clients and their vendors. As we have proven on similar projects for state HHS agencies from Maine to Hawaii, our project teams have low turnover to help ensure that the BerryDunn team DHHS begins working with at project inception will be the same team at project closeout. Throughout our leadership and support of DHHS projects, we will work with DHHS to align our project team staffing levels to the needs of DHHS.

Should the need to replace key personnel arise during a project, we will notify DHHS of this need in writing. Replacement of personnel, if approved by the State, will be with personnel of equal or greater ability and qualifications. All requests for substitutions will provide an explanation of the circumstances necessitating the proposed substitutions, a resume of the proposed substitute, and any other information requested by DHHS to make a determination as to the appropriateness of the proposed substitution.

We will provide stable, consistent project teams that develop positive, collaborative relationships with project stakeholders, and we will serve as an effective liaison across any project we lead for DHHS to help ensure your project objectives are achieved.

BerryDunn's Project Team

DHHS is undertaking significant transformational projects and initiatives that will help modernize its systems and processes, and most importantly, enhance its approach to supporting some of the most vulnerable people in the State. Our approach to designing our Project Management Professional® (PMP®)-led project team detailed below was focused on providing the experience and expertise requested in the State's RFP with the flexibility needed to meet the evolving needs of DHHS and your projects. To support the success of the initiatives outlined in the State's RFP and support your mission of "Helping people live better lives," we have created a team of:

- **Senior professionals** who combined, have over a hundred years of experience in the public HHS and healthcare sectors and bring a track record of success in supporting not only DHHS, but HHS agencies in states across the country such as Arizona, Colorado, Hawaii, Indiana, Iowa, Maryland, Massachusetts, Mississippi, Missouri, Nevada, Ohio, Oregon, Texas, Vermont, and West Virginia. Our project team will leverage the knowledge gained from JS3's experience in supporting DHHS and also bring a national perspective, lessons learned, and proven success in working on MMIS, eligibility and enrollment, certification, system planning and implementation, organizational change management, IV&V, and strategic planning projects that support a state's enterprise vision. **Four of our proposed team members bring direct experience supporting DHHS.**
- **Subject matter experts (SMEs)** with deep expertise in applying relevant industry and government practices, policies, and standards that will be critical to this project—MITA, federal oversight processes including the CMS MECL and Medicaid Eligibility and Enrollment Lifecycle (MEELC), and the Food and Nutrition Services (FNS) Toolkit.
- **Experienced team members** who have years of practice honing core capabilities essential for successful project execution: project management; information-gathering and analysis; facilitation; vendor management; change management; and strategic and implementation planning.

Later in this section, in Figure 5, we have illustrated the overall organizational structure of our staffing approach- including the reporting relationships. Each project led by BerryDunn will include a core team that includes an experienced project manager that meets the requirements detailed in the State's RFP, and be supported by:

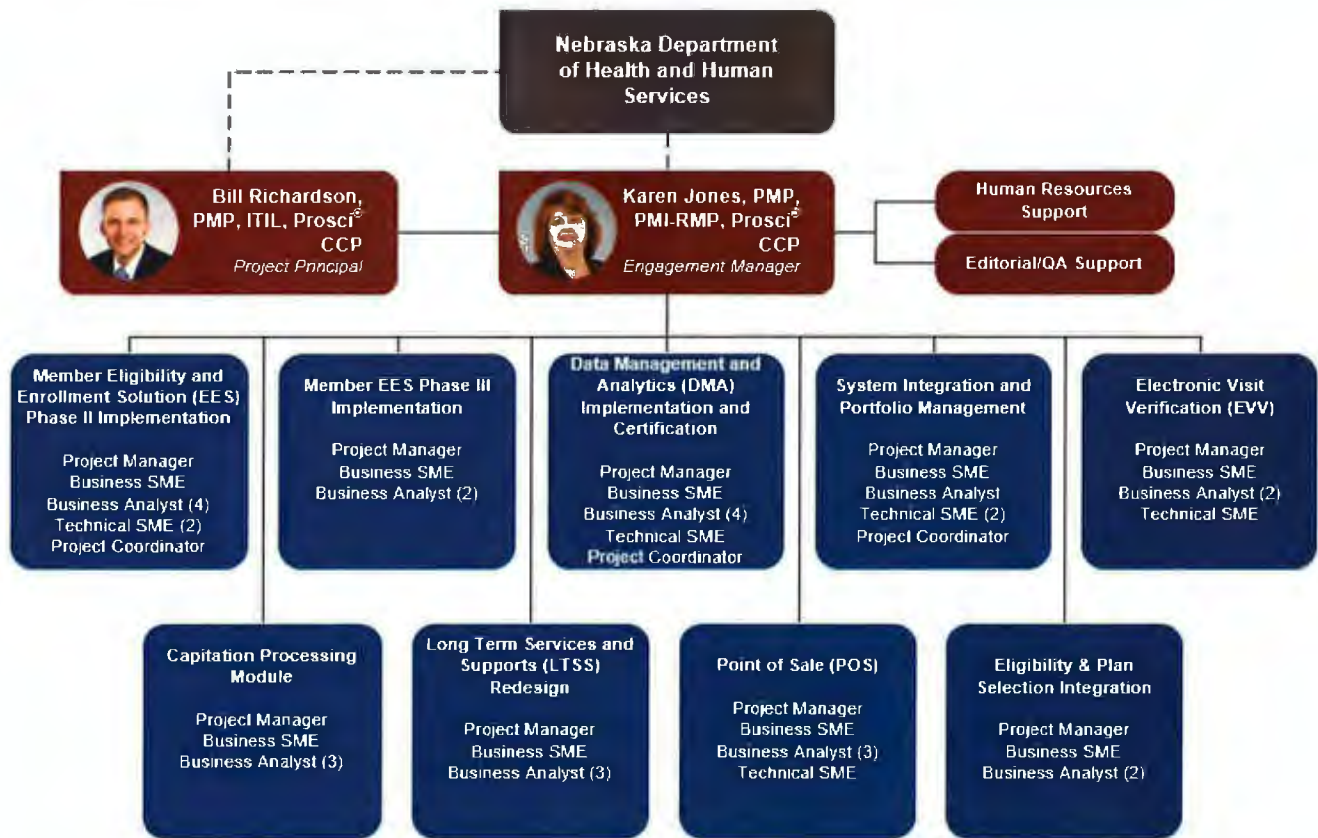
- Business and technical SMEs with deep expertise in areas critical to the respective project they are supporting such as eligibility policy, CMS compliance, capitation processing, EVV, quality and performance reporting, etc.
- Business Analysts
- Project Coordinator(s)
- Human Resources professionals to help manage BerryDunn project staffing needs across the DHHS portfolio of projects

- Editing/Quality Assurance (QA) team to help ensure BerryDunn provides the highest quality deliverables to DHHS

As with all BerryDunn projects, an engagement management team including a firm principal, Bill Richardson-PMP®, and engagement manager, Karen Jones-PMP®, will perform oversight of all DHHS projects being supported by BerryDunn to commit our firm and team to this engagement and reinforce the highest quality of our services. Karen will be the BerryDunn designated lead and be the primary contact with the DHHS contract manager. Karen has the background and expertise to oversee the successful delivery of the requirements of the contract because of her 30 years of project management experience and 30 years of experience in working with HHS clients (including DHHS), and she will also collaborate with Bill as needed throughout the engagement in BerryDunn's support of DHHS. Karen can meet weekly with the DHHS contract manager, either in person or by phone, to discuss project changes, and BerryDunn performance.

Our objective is to provide the State with the appropriate level of resources and expertise for each project. We will work with you to prioritize projects, and establish start dates for the projects detailed in the State's RFP. In Figure 5 below, we have not named every resource for each project because our engagement management team will collaborate with DHHS on each project and develop staffing plans and approaches that meet the needs of DHHS and the specific projects. Bill and Karen will develop project teams utilizing the resources identified in Table 5 on the pages that follow, as well as additional, qualified resources available from both BerryDunn and our subcontractor partners, and work to ensure that we staff projects within 30 days of being notified that an upcoming consulting project has been assigned to BerryDunn.

Figure 5: BerryDunn Project Team Organization
BerryDunn will provide a team structure and resources to successfully support each project.



**Please note that the number after a role (e.g., 2) indicates the number of those resources that will be allocated to the project.*

Staff Roles and Responsibilities

To start a long-term, trusting relationship with DHHS, we feel it is important to name known resources that will be there to work with you (see Table 5 on the next page), rather than provide placeholder resumes or include resumes of people who may not be available at the start of a DHHS project. This perspective and approach is based on our over 20 years of working with HHS clients such as the Massachusetts EOHHS, New Hampshire DHHS, Missouri DSS, West Virginia BMS, and others to provide resources and staffing plans that support project success. In this instance, and given the importance of DHHS' upcoming projects, we believe it is important for DHHS to have confidence that you are selecting a firm that can be viewed as a trusted advisor and will provide complete transparency throughout each project—including during the staffing process.

BerryDunn will provide DHHS with a pool of highly skilled, professional project managers whose experience spans multiple knowledge areas and years—including experience in supporting DHHS. We believe that we will best serve you by working in tandem to understand your project priorities. This approach will allow us to pair the most appropriate project manager to the individual DHHS project. In Table 5 below, we have named our engagement management team, project managers, business SMEs, technical SMEs, project coordinators, and business analysts who will be dedicated to the project upon project start. Working with you, we will assign these individuals to the projects that are your highest priority, knowing that our named resource pool have the knowledge and ability to lead several of these initiatives. We anticipate assigning a project manager to a single initiative based on your priorities. The project manager will be supported by business and technical SMEs who will be allocated at the level necessary to support the DHHS project schedule and objectives. In addition, we understand and will plan to leverage additional resources based on the needs of both your current and future initiatives.

Table 5 below provides a brief description of the roles and responsibilities of our proposed project team members.

Table 5: BerryDunn Project Roles and Responsibilities
BerryDunn's project team members will help DHHS achieve its project objectives.

Name/Project Role	Responsibilities
William A. Richardson, ITIL (F), PMP®, Prosci® CCP <i>Project Principal</i>	<ul style="list-style-type: none"> • Maintain overall responsibility for the quality of BerryDunn's services and deliverables • Confirm DHHS' satisfaction with our team and services, and request feedback on opportunities for improvement • Help ensure the full commitment of our firm to this engagement • Provide subject matter expertise and support for our team • Participate in meetings and presentations with DHHS leadership and the project management team, as appropriate • Review and approve invoices for services before submission to DHHS
Karen Jones, PMI®-RMP, PMP®, Prosci® CCP <i>Engagement Manager</i>	<ul style="list-style-type: none"> • Provide engagement management and oversight of our team • Serve as primary point of contact for DHHS • Meet weekly with the DHHS contract manager, either in person or by phone, to discuss project changes and BerryDunn performance • Manage sub-contractor relationships • Manage risks and issues at the engagement level • Help ensure effective communication and coordination of team members • Provide organizational change management, project management, process improvement, and other subject matter expertise • Support our project team • Help ensure project teams perform according to BerryDunn guidelines and quality standards

Name/Project Role	Responsibilities
	<ul style="list-style-type: none"> • Participate in meetings and presentations with DHHS leadership and the project management team, as appropriate • Review and approve project status reports before submission to DHHS • Participate in project status meetings with DHHS
<ul style="list-style-type: none"> • Peter Alfrey, LSSGB, PMP®, Prosci® CCP • Jason Hargrove, MBA, PMP® • Shailesh Patel MS, PMP®, ITIL, SFC • Diane Twehous • Shara Sheehan, BA <p><i>Project Managers</i></p>	<ul style="list-style-type: none"> • Partner with our engagement manager and other team members to execute the project work plan • Maintain the project's business requirements and help ensure traceability throughout the project • Provide oversight for information gathering meetings and presentations, and lead business process mapping sessions • Plan and allocate resources; perform daily project and staff oversight • Oversee and coordinate development of deliverables • Conduct QA reviews of deliverables • Help ensure effective communication and coordination of team members • Proactively identify project risks and issues and propose recommended courses of action • Conduct background research and analysis • Help ensure adherence to industry standards and best practices • Participate in development of the project status reports and conduct debriefing meetings • Provide subject matter expertise
<p>Ashley Zaldana, BA <i>Project Coordinator</i></p>	<ul style="list-style-type: none"> • Schedule meetings and interviews with stakeholders; prepare communication and meeting materials • Capture meeting notes and actions • Assist with deliverable development, production, and revision • Establish and maintain the BerryDunn KnowledgeLink (SharePoint) site, including contact list and calendar • Assist with development of project deliverables
<ul style="list-style-type: none"> • Lisa Ashburn, BA, CSM, CBBF • Catherine Corey, BS, CPC • Michelle Kennedy, BA • Naomi Snodgrass, MBA <p><i>Senior Business Analysts/Business Analysts (Referred to as Business Analysts in our proposal response)</i></p>	<ul style="list-style-type: none"> • Partner with our project managers and other team members to execute the project work plan • Facilitate business requirements gathering sessions • Participate in other information-gathering activities as needed • Contribute to development of project deliverables • Support market research and fact-finding activities • Contribute to the development of functional and non-functional requirements • Conduct interviews • Assist with deliverable development and production • Manage project documentation

Name/Project Role	Responsibilities
<ul style="list-style-type: none"> • Julie Allen, MPA, CPA, PMP® • Dot Ball, MA • Michael Garcia, BA • Misha Mosher, LLM • Kim VanDerscoff-Eisen, BA, LSSGB • Ethan Wiley, MPPM, PMP®, Prosci® CCP, LSSGB <p><i>Business SMEs</i></p>	<ul style="list-style-type: none"> • Provide support and subject matter expertise • Serve as project advisors and resources to BerryDunn and DHHS, drawing on their respective areas of expertise and historical perspective, including, but not limited to: <ul style="list-style-type: none"> ○ MMIS enterprise replacement, planning, and implementation ○ E&E solution planning and implementation ○ DHSS integration activities ○ Contract/vendor management • Provide expertise and deep understanding of Medicaid program, MMIS, state eligibility and enrollment solution (EES), MITA, federal oversight processes including the CMS MECL, and MEELC and FNS Toolkit, System Integration in the HHS domain, and Managed Care • Support the project team for highly specialized services and based on the needs of the project • Participate in specialized meetings • Contribute to development of deliverables • Conduct background research and analysis • Contribute to develop of functional and non-functional requirements • Provide support and subject matter expertise
<ul style="list-style-type: none"> • Divya Arulsamy, MBA, PMP®, CSM, ITIL(F) • Jim Strassenburgh, BA <p><i>Technical SMEs</i></p>	<ul style="list-style-type: none"> • Provide systems design, systems architecture, and/or information security subject matter expertise • Contribute to develop of functional and non-functional requirements • Support the project team for highly specialized IT system expertise and based on the needs of the project • Support targeted interviews and meetings with DHHS leaders and staff, and other State IT stakeholders related to technology matters • Participate in other information-gathering activities as needed • Contribute to development of project deliverables • Conduct background research and analysis • Provide support and subject matter expertise
<p>Human Resources Support</p>	<ul style="list-style-type: none"> • Provide recruiting support as needed • Support staff project onboarding needs
<p>Editorial/QA Support</p>	<ul style="list-style-type: none"> • Review all deliverables, including working to ensure that deliverables to DHHS are 100% free from grammatical, formatting, or technical errors

BerryDunn and our project team are not just interested in helping DHHS achieve your project objectives within the specified project timeline; we care about how we get the job done. The people we work with—both within our internal team and DHHS' team—matter to us, as expressed in several of our firm's core values, such as “team first,” “respect for others,” and “ethical behavior and fair dealing in all we do.” We will invest time and energy in building trust and credibility with your staff, and we believe this is reflected in the fact that our clients regularly invite us back to help address additional project and business needs. BerryDunn consultants also hold each other and our partners accountable to high standards for performance, and have a reputation for delivering high-quality work—something our clients, external stakeholders who are involved in our work, and our subcontractors repeatedly tell us. **Particularly given the significance of your projects in promoting the mission of DHHS and the success of your modernization efforts, it is important for DHHS to know you are working with people you can rely upon, will enjoy working with, and who bring the necessary experience and expertise to help DHHS achieve your project objectives.**

Resumes

On the following pages, we have provided resumes highlighting the qualifications and experience of project team members named in Table 5 above. Each resume also contains three references that can speak to the experience and expertise that the team member offers DHHS. Due to page constraints, we have limited the resumes to three pages for each individual, and resumes are not reflective of the entirety of their experience. As your review these resumes, please keep in mind:

- ✓ Four of our proposed team members bring direct experience supporting and collaborating with DHHS, for example:
 - **Karen Jones – Engagement Manager**, worked with MLTC from 2011 to 2013, where she worked with the State to complete the State's MITA SS-A, including training, MITA session facilitation, and business process modeling. She also served as Project Lead for the MMIS Replacement Alternatives Analysis and provided support for Nebraska's Affordable Care Act (ACA) Project.
 - **Shailesh Patel – Project Manager**, since early 2018, has provided project management and IV&V support to the State's EES project.
 - **Shara Sheehan – Project Manager**, since early 2018, has provided project management support for MLTC's Data Management and Analytics (DMA) initiative.
 - **Diane Twehous – Project Manager**, currently serves on the State certification team for DMA initiative.
- ✓ Eight of our proposed team members are PMP® certified
- ✓ Four of our proposed team members are Prosci® CCP certified. BerryDunn's Organizational Change Management (OCM) methodology aligns with Prosci's® change management principals. Formed in 1994, Prosci® is an independent research

organization in the field of change management. Prosci's® methodology and tools are research-based, building upon lessons learned from studies with organizations from around the world. A central focus of the Prosci® change management approach is the belief that, in order for change to work in an organization, individuals need to understand the changes occurring and be willing to change.

- ✓ Our project team has supported state HHS agencies in more than 25 states on projects of the same and similar scope to those outlined in the State's RFP.
- ✓ Our designated lead—Karen Jones, Engagement Manager, who has 30 years of project management experience and 30 years of Medicaid experience—exceeds the State's requirement of "minimum 10 years project management or related experience in State Medicaid or Health Care systems."
- ✓ All of our proposed project managers exceed the State's requirement of "minimum 5 years' experience in State Medicaid or Health Care system."

Engagement Management Team



Bill Richardson, ITIL (F), PMP®, Prosci® CCP Project Principal

Bill is a principal in BerryDunn's Government Consulting Group with over 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.

Key Qualifications

- Active modular MMIS experience in multiple states
- Direct experience with the MECT and CMS certification process
- Certified Project Management Professional®
- Prosci® Certified Change Practitioner
- More than 10 years project management or related experience in state Medicaid or health care systems

Relevant Experience

BerryDunn (04/2011 to present)

Missouri Department of Social Services

- *Missouri Medicaid Enterprise (MME) PMO Engagement (11/2017 to present).*
Bill leverages his knowledge of the modular MMIS landscape to support the MME PMO as they begin their implementation of their first MMIS modules. This includes helping Missouri address topics from strategies for modular certification and requirements traceability to program management best practices to leverage for a multi-vendor enterprise.
- *Missouri Eligibility Determination and Enrollment System (MEDES) IV&V Services (07/2013 to present).*
Bill brings his experience in eligibility and large systems projects to this modified agile 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.

Hawaii Department of Human Services Med-QUEST Division (MQD) – Organizational and Business Process Redesign (07/2017 to present).

Bill is currently serving in the role of Program Director for the eligibility business process redesign effort for the customer-facing sections of Hawaii's MQD. His work includes overseeing the work performed by BerryDunn's team, reviewing and approving all deliverables, being involved in key meetings with the MQD and State leadership, and ensuring the full commitment of BerryDunn to the engagement. Phase two of the project was recently completed, which culminated in a findings and recommendations report that included recommendations for organizational transformation of their eligibility offices and call centers.

Ohio Department of Medicaid (ODM) – Ohio Medicaid Enterprise System (OMES) IV&V Services (12/2016 to present).

ODM is implementing its vision for a modular MMIS in the OMES project and BerryDunn is providing

IV&V support. As engagement manager, Bill is helping ODM ensure a modular approach and implementation that will work for Ohioans and support ODM's modular certification process.

New Mexico Human Services Division – Health and Human Services (HHS) 2020 Project Support (08/2016 to present).

BerryDunn provides support to the HHS 2020 project – New Mexico's modular MMIS replacement project. As the engagement manager, Bill brings his MMIS experience in support of project management and system architecture to BerryDunn's team.

West Virginia Children's Health Insurance Program (WVCHIP) – Assessment of ACA Compliance and Transition Project Management Support (10/2013 to 08/2015).

Bill served as engagement manager overseeing the BerryDunn team evaluating needs associated with the WVCHIP to help bring them into compliance with ACA requirements. This project included transitioning WVCHIP from their previous Third Party Administrator (TPA) to an MMIS.

West Virginia Bureau for Medical Services (BMS)

- *ICD-10 Transition Planning and Implementation (03/2013 to 06/2015).*
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 continued to act as a project SME.
- *Data Warehouse / Decision Support System (DW/DSS) Project Management (02/2012 to 12/2014).*
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, Analysis, and Implementation Support (04/2011 to 12/2013).*
Bill served as the project manager for the PPACA Planning Project, which gave shape to the ambiguous requirements of the ACA and 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.

Some of the other projects that Bill has worked with BMS on include serving as project manager for some of West Virginia's Health IT initiatives, assisting the Bureau with their PMO initiative, leading the development of an IV&V services RFP, and facilitating RAC vendor procurement evaluations.

West Virginia Department of Health and Human Resources (DHHR) – Eligibility and Enrollment Project Support Services (04/2013 to 04/2014).

Bill provided oversight on the E&E project, which included analyzing the ACA impacts on Medicaid eligibility policy and facilitating the decision making process and subsequent policy updates and SPAs. This project also included providing project management support for the Bureau as they implemented system upgrades and changes to comply with the new regulations and policy.

ACS, A Xerox Company – Government Healthcare Solutions (06/2001 to 04/2011)

ACS Health Enterprise Program

As a systems delivery manager, 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.

State of North Dakota's Medicaid Management Information System Project

As a project manager and team lead, 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.

State of North Carolina LEADS Project

As team lead, Bill was responsible for documenting requirements and a detailed system design for a multi-payer healthcare claims back-end processing system, including application of policy edits and audits. He authored business and technical designs to document system functionality in accordance with the State's goals; developed and maintained the project plan to manage project risks and management expectations; managed the process for systematically documenting existing claim audits, extracting, transforming, and loading (ETL) the audits into ACS format; and led the design of table-driven duplicate claim checking.

State of Mississippi's Envision Project

As a consultant, 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.

Education and Memberships

BS, Business, University of Minnesota, Carlson School of Management (Major: Management Information Systems, Minor: Political Science)

ITIL – Foundation Certified in IT Service Management

Certified Project Management Professional®, Project Management Institute®

Prosci® Certified Change Practitioner

Publications and Presentations

How to Create a Work Breakdown Structure (WBS), Presentation for Minnesota Government IT Symposium, 12/10/2014

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Karen Jones, PMI®-RMP, PMP®, Prosci® CCP Engagement Manager

Karen is an experienced project manager and change management specialist who has dedicated over 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, and has worked with health and human services agencies in 20 states. She has experience in all aspects of MMIS, as well as extensive project management experience with Medicaid initiatives.

Key Qualifications

- Over 30 years of project management experience
- Over 30 years of Medicaid industry experience – including supporting Nebraska
- More than 10 years project management or related experience in state Medicaid or health care systems
- Certified Project Management Professional®
- Prosci® Certified Change Practitioner

Relevant Experience

BerryDunn (06/2013 to present)

Ohio Department of Medicaid (ODM) – Ohio Medicaid Enterprise System (OMES) IV&V Services (12/2016 to present).

ODM is implementing its vision for a modular MMIS in the OMES project and BerryDunn is providing IV&V support. Karen serves as the project manager, leading BerryDunn's team in supporting ODM through the project.

Missouri Department of Social Services – Missouri Eligibility Determination and Enrollment System (MEDES) IV&V Services (07/2013 to 11/2016).

Karen served as the project manager for BerryDunn's IV&V of the MEDES. She led a team that assesses project health, identifies potential risks and issues, and offers recommendations for mitigation.

K Jones & Associates (06/1991 to 05/2013)

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. The activities included interviewing department staff to determine As Is process, producing corresponding business process models, working with HP to understand replacement MMIS, and recommending process improvements and organization modifications.

Massachusetts Executive Office of Health and Human Services

Karen served as the Massachusetts NewMMIS Functional Manager for HP (formerly EDS), 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, and oversaw a team of instructional design developers and trainers developing eLearning application training and online user documentation.

North Carolina Division of Medical Assistance

Karen provided business process development services as part of Computer Sciences Corporation's team for DHHS' mailroom and claims resolution operations in support of the implementation of the State's MMIS.

Mississippi Division of Medicaid

Karen led the planning of the Joint Application Requirements effort for the RFP development for Mississippi's replacement MMIS. She facilitated the sessions, oversaw the requirements tracking, and participated in the RFP development.

Florida Agency for Health Care Administration

Karen led the Joint Application Requirements effort for facilitated requirements definition work sessions and assisted in the development of Florida's MMIS RFP and proposal evaluation criteria. Responsibilities included project planning, facilitation, and requirements tracking. She participated to preparing the final RFP.

Other MMIS Related Projects

Karen assisted several MMIS vendors in preparing MMIS RFP responses for MMIS, data warehouse, and decision support systems. Her participation included requirements analysis, joint application design facilitation, requirements tracking, change management, solutions development, project schedule development, and response development. She has developed training modules and procedure manual and conducted training.

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.

FourThought Group (01/1998 to 11/2003)

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.

Delaware Department of Social Services

Karen managed requirements definition, system design, documentation, and system testing tasks during the implementation of the EDS interchange system. In addition, she developed and conducted training for EDS business analysts on the art of system testing.

Utah Department of Health Care Financing

Karen managed FourThought's contract with Maximus to implement Utah's Medicaid Managed Care System. In this role, she oversaw requirements analysis, system design, and documentation.

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; documented problems identified during testing; worked with EDS to resolve the issues; and coordinated the UAT results documentation to be used in the CMS certification process.

EDS (07/1979 to 06/1991)

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 implemented system changes and enhancements and performed system readiness testing for Connecticut's MMIS; managed a team of business analysts to perform system readiness testing for Georgia's and Arkansas' MMIS; and implemented system changes and enhancements for Florida's Department of Health and Rehabilitative Services. During her career with EDS, she participated in the several proposal efforts responding to RFPs for MMIS solutions.

Education and Memberships

Certified Risk Management Professional, Project Management Institute®

Certified Project Management Professional®, Project Management Institute®

Prosci® Certified Change Practitioner

Publications and Presentations

Procurements in Today's Marketplace: Procurement and Evaluation Strategies for Creative Solutions that Encourage Competition, Presentation for MESC 2014, 8/20/2014

References

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Project Management Team



Peter Alfrey, LSSGB, PMP®, Prosci® CCP Project Manager

Peter is a manager in BerryDunn's Government Consulting Group with over 17 years of experience in client services, account management, and operations. Areas of expertise include client service, project management, process improvement, business development, communications, and public relations. Areas of industry experience include MMIS replacement, healthcare, professional services, and technology. He is a creative, intelligent team leader with strong consulting, technical, analytical, problem-solving, communication, and interpersonal skills.

Key Qualifications

- MMIS procurement, replacement, DDI, implementation, and certification experience
- Over five years' experience in state Medicaid consulting
- Over five years' experience in providing project management support on HHS projects
- Certified Project Management Professional®
- Prosci® Certified Change Practitioner

Relevant Experience

BerryDunn (03/2014 to present)

West Virginia Bureau for Medical Services (BMS).

- *Substance Use Disorder (SUD) Waiver Initiative Phase 2 Project (03/2018 to present).*
Peter is the project manager for phase 2 of the SUD waiver initiative, providing oversight to the project team. He is responsible for the day-to-day activities, monitoring progress against the agreed-upon project summary and schedule.
- *Asset Verification System (AVS) Project Management Services and Procurement Assistance (04/2017 to 01/2018).*
Peter served as project manager for the AVS project, responsible for overseeing the team and day-to-day activities.
- *Project Management of MMIS Procurement, DDI, and Certification (10/2014 to 10/2016).*
Peter served as a business analyst, providing project management and UAT support, as well as deliverable review. He also served as the MCO and DW/DSS lead.

New Jersey Division of Medical Assistance and Health Services – MMIS Implementation and Certification Leverage and Reuse Project (01/2017 to 08/2017).

Peter supported testing efforts for New Jersey MMIS implementation in areas such as SIT test case and results review, SIT test case analysis, UAT support and UAT defect management.

Vermont Green Mountain Care Board (GMCB) – Vermont Health Care Uniform Reporting and Evaluation System (VHCURES) Independent Review, Procurement Assistance, and Project Management (05/2014 to 09/2014).

Peter supported the review and refinement of the existing business case, oversight of business requirements development, and identification of optimal collaboration points between the selected implementation vendors, among other project management tasks. In addition, he led a portion of this project to build a data governance program for VHCURES.

Maryland Health Benefit Exchange – IV&V for Maryland’s HBE Implementation (03/2014 to 04/2014).

As a business analyst, Peter worked with the State’s Project Management Office and their strategic partners to coordinate projects, and monitors risks and issues across key assessment areas. He also worked to gather information and facilitate key project update meetings.

Martin’s Point Health Care (12/2008 to 02/2014)

As the operations manager, Peter provided performance monitoring, process improvement, project management, data management, and operational efficiency and effectiveness for Martin’s Point’s Medical Management group. He managed cross-functional teams to implement complex projects; managed vendor relationships and contract negotiations; and served as client contact for external care management vendors.

Health Dialog (07/2006 to 11/2008)

As implementation project manager, Peter oversaw operational planning, execution, and reporting of multi-faceted projects for new and existing clients (health plans, large employers, and government care management programs), including BlueCross BlueShield (various regions), Capital Health Plan, and CMS. He also managed cross-functional implementation teams, maintained communications with clients, set expectations regarding scope, and managed implementation schedules while managing multiple, concurrent implementations. He also served as Project Management Office lead for company’s smoking cessation nicotine replacement solution and initiative overseeing product development work and collaboration with third-party vendor.

Ernst & Young LLC (2002 to 2005)

As the communications and pursuit strategist, Peter managed internal activity and coordination for strategic new business pursuits that offered tax and audit services to Ernst & Young’s existing internal audit clients, and managed Creative Services team on production of all press, client and internal materials.

Cisco Systems, Inc. (2000 to 2001)

Peter served as the public relations manager for the Customer Contact Business Unit (CCBU)/Internet Communications Software Group (ICSG), during which he managed CCBU on press and analyst activities, including product launches, customer and partner announcements and other CCBU-related programs; managed public relations agency in execution of press and analyst activity, creation of written materials, industry event coordination, and all CCBU public relations initiatives; and created product and business unit messaging and positioning, drove CCBU public relations strategy, and worked with Cisco marketing teams, CCBU/ICSG executives and corporate public relations on all public relations initiatives.

Text 100 Corporation (1998 to 2000)

While working as an account manager, Peter was responsible for ensuring the execution of approved public relations strategic plans and initiatives, as well as core public relations activities. He counseled clients on messaging and positioning, drove account strategy and tactics, including all press and analyst activity, creation of all client materials, industry event coordination, and all client global public relations initiatives, and co-developed (with Vice President-General Manager and Account Director support) all annual and quarterly strategic plans and initiatives.

Davé And Bairey Communications (1997)

While working as an account executive/account manager, Peter was responsible for executing and completing approved public relations plan activities and initiatives for client base of Netmosphere Inc., Intergraph Computer Systems, eCommerce and Warp Drive Networks. He built relationships with top-tier

media and analysts through client product launches, customer and partner announcements and other client initiatives.

Copithorne And Bellows Public Relations (1995 to 1997)

Peter worked as an account coordinator, where he was responsible for day-to-day account administration, provision of information for the collation of reports for client base of Hewlett-Packard Company (corporate desktop and notebook PCs) and EIZO Nanao Technologies. He provided administrative support for entire account team, as well as administrative support needed by the client for all public relations programs.

Education and Memberships

MA, History, Providence College

BA, Journalism and Communication, Spanish Minor, University of Oregon

Certified Project Management Professional®, Project Management Institute®

Prosci® Certified Change Practitioner

Certificate of Completion, Program on Negotiation at Harvard Law School

Martin's Point Management System/ Managing for Daily Improvement LEAN Certification

Lean Six Sigma Green Belt

Publications and Presentations

Innovation in a Digital Era: Using Data to Pivot to 'the New,' Presentation for MESC 2016, Co-presented with Drew Boston (Accenture), Michael Kovach (Accenture), and Zach Rioux (BerryDunn), 8/17/2016

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Jason Hargrove, MBA, PMP® **Project Manager**

Jason is an experienced leader and implementation manager, delivering IT software solutions and services in healthcare and engineering for over 18 years. Jason brings a diverse range of skills and experience including business development, finance, budgeting, contract management, team development, recruiting, resource management, and project management. He leads by example, fostering communication at all levels of the organization and is familiar with complex and difficult situations.

- Over 10 years' experience in supporting state HHS projects – including EVV, FFS claims processing, and point of sale (POS)
- Over 10 years' experience in providing project management support on HHS projects
- Certified Project Management Professional®

Relevant Experience

BerryDunn (02/2018 to present)

West Virginia Bureau for Medical Services (BMS) – *Electronic Visit Verification (EVV) Solution Implementation Project (03/2018 to present)*

Jason leads BerryDunn's team assisting BMS with the implementation of their EVV solution.

Northern New England Diagnostics (02/2017 to 08/2017)

As chief of operations, Jason developed client implementation process/strategy, created detailed plans for new client on-boarding and key issues, and oversaw all operational staff, internal systems, and business processes. Jason was also responsible for performing staff and operational assessments regarding quality and production, developing staff training and mentoring plans for development and quality improvement, and ensuring services met quality and cost effectiveness standards. Jason created and maintained profit and loss (P&L) financials and associated data models to assist with client valuation and forecasting.

Change Healthcare (formerly Goold Health Systems / Emdeon) (11/2005 to 02/2017)

Senior Director of Pharmacy Administration Services

In this role, Jason continued to build relationships and further integration into the organization's centralized operations and processes. He worked closely with GM/VP on business and operational initiatives and was responsible for the oversight of 17 management and administrative positions (over 160 staff members).

Vice President of Administration

Jason developed companywide initiatives to increase operational and deployment efficiencies and served as the account manager, project manager, implementation manager, or other lead roles in key projects as needed. He participated in contract negotiations, lease negotiations, and the establishment of remote offices as required. Jason also reviewed project plans and resources for companywide projects and ensured sufficient staffing levels and resources. In addition, Jason managed the business development function and staff, pursued strategic opportunities in collaboration with the CEO and business development team, and assisted with and oversaw the development of cost estimates, timelines, scope, project plans, and proposal responses.

Director of Administrative Services

Jason planned, organized, assigned, directed, and evaluated the activities of the department. He also assisted the CEO in contract adherence, contract negotiations, lease negotiations, and hiring processes. He worked with the business development director in the development of cost estimates, timelines, scope, project plans, and proposal responses. Additional responsibilities included overseeing facility leases, maintenance, construction, and expansion as needed.

Strategic Project Manager

In this role, Jason was responsible for the direction, coordination, and completion of assigned strategic projects. He also assisted with business development and RFP responses, developed and implemented project management tools and tracking methods, and managed administrative office and project staff members.

While at Change Healthcare, some of Jason's major projects included:

Ohio Medicaid PBM and Rebate Services (04/2016 to 02/2017)

Jason served in several capacities on the Ohio project including business development, project leadership and tactical project management. He served as part of the proposal team to develop the project management approach, cost proposal and payment milestones. Working with senior leadership, Jason oversaw much of the project activities including the establishment of a remote office, developing project and operational teams and coordinating on-site staff. During the project, the named Implementation Manager left the organization and Jason stepped into the named implementation role to help successfully deliver the systems. As part of his role, Jason oversaw project deliverables, requirement management, collaboration between multiple internal and external teams, meeting facilitation and client relations.

Illinois Medicaid PBM and Rebate Services (03/2014 to 03/2016)

As the lead Implementation Manager, Jason oversaw all aspects of the project including proposal preparation, local facility planning, project team meetings, requirement management, joint application design sessions, meeting facilitation, coordination of multiple internal and external stakeholders including regular client meetings. He maintained the open action item logs, risk management, project plan updates and monitored progress daily.

Iowa Medicaid Enterprise PBM (04/2012 to 10/2013)

Jason led the reprocurement effort to plan and deploy updated software for this existing client. This included interacting at all levels internally and with the client to establish expectations, capture requirements in alignment to their CMS strategy, and develop key project deliverables. In addition, Jason coordinated the efforts of SME's in the development of artifacts, client reviews, meeting facilitation and regular updates with client and corporate management.

Utah CMS certification support (2012)

Following the successful deployment of software and services, Jason worked with the client to develop strategies for CMS certification, creation of CMS artifacts and guidance on approach. As this was software as a service, Jason provided support to the client through the CMS process and the client worked directly with CMS. The systems were successfully certified without any citing or revisions.

Utah Medicaid POS/DRMS (POS and Rebate) (03/2011 to 10/2011)

Jason served as the Implementation Project Manager for this multi-part project. In this role, Jason led a team of technical and business staff members to deliver a complex set of software and services. This included pricing and submission of cost proposals, client and payment strategy, project oversight and management, meeting facilitation, risk and issue management, report management and client

engagement. This project also included more intensive training of state staff and product education, change request management and issue resolution.

Wyoming Medicaid Pharmacy Fiscal Agent and PBM Services (06/2008 to 05/2009)

As the Project Manager, Jason worked closely with internal business leads and the client to refine the proposed project plan and implementation strategy. He led requirement validation sessions with business leads, client stakeholders and the incumbent vendor. Typical project activities included meeting facilitation, requirement, risk and action item management. Jason also created a CMS certification and strategy document and subsequently worked with CMS, the client and business SMEs to successfully certify the system.

Maine Medicaid Mailroom and BPO (HCFA, UB, ADA) and Medical Prior Authorization

Jason served as internal project executive to manage the conversion of an existing sole-source contract to a sub-contract and establish a new department within the company. In this role, Jason participated in negotiations with several potential prime vendor partners to develop pricing and a successful bid strategy. After source selection, he worked with a new partner to define operational processes, quality standards and technical integration. New office space and hiring was completed successfully. Jason served as the implementation lead and the business unit manager for the new and existing services as part of this project, including staff management, quality oversight, and vendor/client relations.

Ingersoll-Rand (03/1998 to 11/2005)

As a mechanical engineer, Jason served as a team leader for Laboratory Operations & Reliability. In this role, he managed operations and reliability efforts through direct reports and matrixed team. He created project plans and provided daily management and guidance of both lab and engineering personnel to ensure timely completion of assigned tasks. Projects included directing company-wide reliability efforts to deal with issues relating to new product development, and working with engineering and Underwriter's Laboratory (UL) to successfully list IRs 70kW product.

Education and Memberships

MBA, Business Administration, Grantham University

BS, Marine Engineering Operations, Maine Maritime Academy

Certified Project Management Professional®, Project Management Institute®

References

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Shailesh Patel, MS, PMP®, ITIL, SAFe Program Consultant (SPC) Project Manager

Shailesh has over 30 years of experience in managing programs and projects in domains such as Health IT, Medicaid, Medicare, Health Information Exchanges (HIE), and enterprise-wide IT systems. Shailesh leads and supports Lean-Agile organizational transformations using Scaled Agile Framework (SAFe). Shailesh has formed Agile Program/PMOs, established governance procedures, led organizational change initiatives, and established performance measures to track organizational and team performance. He is adept with the following software products, tools, and languages: Jira, Confluence, ERwin IDEF1x data modeling, IDEF0 business process modeling, Unified Modeling Language (UML), Sparx Enterprise Architect, Rational Rose, GitHub, Requisite Pro, DOORS, Visual Basic, JavaScript, Java, SQL, and RoboHELP.

Key Qualifications

- Over 18 years of project experience in HHS – including supporting DHHS
- Certified Project Management Professional®
- Thought leader in Agile methodology and organizational transformation
- Unique blend of health IT, project management, and technology architecture experience from strategy to hands on project work

Relevant Experience

Envenio Consulting (03/2017 to present)

Nebraska Department of Health and Human Services – Eligibility and Enrollment / Long-Term Care (LTC), Medicaid and Long-Term Care Integration Services (JS3 Consulting) (06/2018 to present). Shailesh provides the following services: creating program / project management plans for Agile/DevOps projects; establishing Application Life Cycle Management (ALM) system using Atlassian Jira and Confluence to provide environment for state staff to manage deliverables and comments, requirements traceability, CMS certification, and project monitoring; developing Technical Management Strategy and Data Management Strategy deliverables; developing strategies and solutions for metrics and measures reporting and dashboards for Medicaid provider enrollment, claims processing, contact center; developing MITA Maturity Models using Sparx Enterprise Architect which included Business Architecture, Information Architecture, Technical Architecture, and Standards and Conditions.

In this role, he also developed project management processes for the Enterprise Portfolio Group and eventually the Enterprise Project Management Office (EPMO). Using the Gartner EPMO guideline and charter, Shailesh developed a draft charter to advance the state of project management practice across the enterprise.

Nebraska Department of Health and Human Services – Eligibility and Enrollment / Long-Term Care (LTC), IV&V Project (JS3 Consulting), (03/2018 to 11/2018).

Shailesh served as the IV&V lead for the Enterprise Eligibility Systems Phase III LTC Case Management project. He provided IV&V services in the interim as DHHS procured services from a new vendor. He reviewed deliverables and conducted audits of the project's management processes as the state developed the RFP and planning deliverables to prepare for CMS MEET Project Initiation Milestone Review – Milestone 1. Deliverables reviewed included: Project Management Plan, Project Schedule, Communications Management Plan, Concept of Operations, Goals and Objectives, Project Partnership

Understanding, Privacy Impact Assessment, and System Security Plan. Shailesh also assessed the RFP requirements and the project team's response to CMS MEET checklist criteria. He also developed a draft IV&V progress report for Project Initiation Milestone Review and transitioned the efforts to the new IV&V vendor.

Various Commercial Clients – Strategy and IT Consulting, (03/2017 to 02/2018).

Shailesh leveraged a strong knowledge of CMS programs, systems, and data to support new business and existing project performance for commercial clients. Services provided included: DevOps, Agile Transformation, Help Desk Operations, Health IT, Medicare business and systems architecture, Medicaid business and systems architecture, developing implementation strategy for Scaled Agile Framework (SAFe) organizational training; establishing near-real time reporting data structures and systems to monitor Service Level Agreement commitments and project metrics; developing solutions for enterprise independent data layer using a data lake approach to support structured, semi-structured, and unstructured data while providing a schema on read tactic to allow streaming, transactional, and batch imports (e.g. Hortonworks, Kafka); and developing staffing plans for large programs.

Client Network Services, Inc. (CNSI) (1/2004 to 02/2017)

Shailesh established CNSI's PMO to create project management discipline, templates, processes, and standards for CNSI's enterprise solutions division. He conducted project management training and established CNSI's boot camp process for new programs. He led the development of the management processes for organizational change management and training for Medicaid systems implementations. Clients included Federal Aviation Administration, Department of Labor, CMS, and the states of Maine, Washington, and Utah.

- Provided thought leadership at Medicaid conferences, Medicaid innovations, and HIMSS NCA
- Developed corporate balance score cards and SWOT analysis of key markets and core capabilities
- Led the development of corporate goals and metrics using Franklin Covey's 4 Disciplines of Execution (4DX) in support of organizational change/transformation at the corporate level
- Developed plans required by Office of National Coordinator for HIT (ONC) for State-Level HIE Assessment
- Developed data integration strategies for Medicaid, Medicare, and other healthcare data sets.
- Analyzed Medicaid Information Technology Architecture (MITA) standards for mapping to the CNSI solutions

CMS – Project manager – Electronic Medical Documentation Interoperability Contractor (04/2016 to 02/2017)

Shailesh led a team of business analysts and health IT subject matter experts in developing and promoting interoperability between healthcare provider-to-provider systems—specifically for home health and durable medical equipment (DME) orders. Specific accomplishments include:

- Developed implementation guides supporting IHE Patient Care Coordination domain
- Developed UML use cases to support orders, medical document requests, and signature requests
- Applied HL7 standards and implementation guides, including Consolidated-Clinical Document Architecture (C-CDA) Clinical Documentation for Providers Set 1 (CDP1) and Fast Healthcare Information Resource (FHIR) Structured Data Capture
- Analyzed data elements related to oxygen DME orders and mapped to hospital EHRs

CMS – Project Lead, Data Integration, Transformed Medicaid Statistical Information System Pilot (08/2011 to 08/2012)

Shailesh led the T-MSIS pilot project for the state of Washington. This pilot, using agile processes, focused on expanding the Medicaid and CHIP data provided by states from approximately 400 data elements to 1,000 data elements. He reviewed the T-MSIS data dictionary, specifications, and standards, and provided CMS with recommendations for improving reporting data quality and consistency across states. He presented, with CMS, the findings from the pilot project at the MESC in August 2012.

Southeast Michigan Health Information Exchange – HIE, Project Manager (07/2010 to 08/2011)

Shailesh led the implementation of the Southeast Michigan Health Information Exchange Social Security Administration e-Disability Project. The project objective was to support the reduction of Social Security Disability processing duration through the submission of electronic medical records and documentation through the Nationwide Health Information Network (NwHIN).

State of Washington ProviderOne Implementation – MMIS, Project Director (01/2005 to 12/2007)

Shailesh was responsible for all aspects of program delivery and cost/schedule performance for this \$178M program to replace the existing Medicaid systems with a modern solution. Specific accomplishments include:

- Represented CNSI at public hearings for the State of Washington's Information Services Board
- Provided leadership to a team consisting of over 140 staff and 12 subcontractors
- Established Project Management Office organization and PMBOK®-based project governance processes

As-One (9/1999 to 12/2003)

Shailesh co-founded As-One, Inc., a company focused on PMO and project management expertise and the production of the As-One project collaboration system.

Education and Memberships

Johns Hopkins University, Data Science Specialization Track, 2015

M.S., Engineering Management, Catholic University, 1991

B.S., Electrical Engineering, Virginia Tech, 1987

Publications and Presentations

Provided thought leadership with presentations and panel discussions such as Medicaid Enterprise Systems Conference (August 2012), Medicaid Innovations (2013), and HIMSS National Capital Area sessions (2014 – 2017).

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Shara Sheehan, BA

Project Manager

Shara is a business professional with over 18 years of healthcare experience; focusing heavily upon Medicaid and Medicare claims processing, program and process improvement, and systems implementation. She is a program director, program and project manager, medical policy and business analyst with proven abilities leading multiple initiatives and implementations on time and within budget. Shara also brings experience managing cross-functional and remote teams and success in building positive, collaborative relationships across all organizational levels, departments, and third-party vendors.

Key Qualifications

- Over 18 years of project experience in HHS – including supporting DHHS
- SME-level understanding of claims and encounters processing
- More than five years of program/project management experience with HHS agencies

Relevant Experience

JS3 Consulting (2/2018 to present)

Nebraska Department of Health & Human Services – Data Management and Analytics (DMA), Project Manager (02/2018 to present).

Shara is the Medicaid Long-Term Care (MLTC) project manager for the DMA initiative. She actively collaborates with technology managers and the vendor for collective maintenance of the master project schedule and resource calendars. Her responsibilities include coordination of the review and approval of deliverable expectation documents and deliverables, participation in discovery, requirements gathering, and design-specific meeting, in addition to standard project manager duties such as risk and issue identification and remediation, status reporting and assisting State product owners when needed. During the absence of an OCM and training lead, she served as the interim resource for this role, closely interfacing with the vendor training lead and internal leadership. She currently serves as the CMS Certification lead partnering with the vendor and IV&V teams to improve the internal certification process and ensure evidence is collected appropriately and meets expectations. She contributed to the User Acceptance Testing (UAT) planning and execution process and participates in weekly defect review meetings.

FluidEdge Consulting (4/2016 to 02/2018)

Kern Health Systems & Santa Clara Family Health Plan – Enterprise Data Warehouse, Project Manager (10/2017 to 02/2018).

Shara was the project manager for a joint effort between Kern & Santa Clara health plans; focused on the design and development of an Enterprise Data Warehouse. In collaboration with clients and internal management, she developed and maintained the project schedule, charter, and RAID log. She was further responsible for communicating project status through reports and weekly touchpoints with project stakeholders. Her responsibilities also included participation in requirements gathering sessions and deliverable reviews.

Secure Transportation Services – Claims Assessment, Claims SME (07/2017 to 09/2017).

Shara conducted an on-site assessment of medical transportation claims (ambulance, mileage, airline, lodging and meals), encounters, and financial processes, and drafted Visio diagrams reflecting current-state of each. Results of the detailed gap analysis and recommendations were presented to the client; resulting in the client request for an expanded scope of work. She collaborated with the technology lead and clearinghouse contact to review encounter errors and identify root causes. She made recommendations for immediate changes to the client's existing paper claims process, and assisted with the implementation thereof, including definition of required data points, a return-to-provider process and language, and corresponding provider notification, improving the paper claims process and compliance.

Scott & White Health Plan – Encounters Assessment and Case Management RFP, Claims & Encounters SME (02/2017 to 06/2017).

Shara consulted with the vice president of Government Programs and the Medicaid director to understand and assist in resolution of encounters issues. She attended an on-site claims and encounters workshop with the Third Party Administrator (TPA) responsible for the health plan's Medicaid population; focused on a review of current and proposed future-state system architecture for claims and encounters handling and detailed discussion of existing issues; worked in tandem with the health plan and TPA resources to resolve outstanding encounter issues; and performed outreach to the State's encounter team.

Integra Partners – Payer Recovery and Analytics, Claims SME (08/2016 to 01/2017).

As a claims SME, Shara collaborated with executive leadership and resources to conduct an extensive opportunities assessment. She identified areas with potential to reduce and stabilize the claims inventory, positively impacting Accounts Receivable.

FirstCare – Encounters Assessment, Claims/Encounters SME (04/2016 to 07/2016).

As a claims and encounters SME, Shara worked with the compliance officer, Government Programs director and teams to resolve encounter generation and submission issues. The effort included a review of relevant internal processes and analysis of encounter submission errors to determine root-cause. Further, she conducted an extensive gap analysis of claims-to-encounter mapping specs vs. Texas Medicaid and Healthcare Partnership Encounters Companion Guide requirements. The results and recommendations were presented to leadership.

Health Care Services Corporation (HCSC) (1/2015 to 07/2015)

Shara served as the program manager for HCSC, where she was accountable for providing direction to nine project managers across two initiatives, including the implementation of a new Medicare healthcare program and modification of components within existing Medicaid plans. She coordinated program staffing and worked with leadership to address related concerns. She was responsible for facilitating weekly advisory meetings with directors and business/IT leads, and for providing cost/benefit analysis and budgeting for programs exceeding \$4M.

TransTech IT (12/2012 to 01/2015)

Health Care Services Corporation (HCSC) – Stars & HEDIS Project, Program Manager (07/2014 to 01/2015).

Shara served as a program manager with HCSC and managed activities focused on the improvement of Star ratings and HEDIS results, including an inbound call campaign and acceptance of lab data in an HL7 format. She participated in identifying and implementing an ANSI X12 837P & 837I encounters solution for Medicare Advantage capitated groups. She also facilitated the identification and screening of potential

third-party vendors to perform medical chart retrieval and review, and coordinated approval of Master Service Agreements and Statements of Work. Once the vendor was on-boarded, she was responsible for the oversight of the activities related to the collection of 2013 data for Risk Adjustment Processing System (RAPS) submission; providing weekly reports to executive leadership.

Health Care Services Corporation (HCSC) – New Mexico Centennial Care, Project Manager (03/2013 to 07/2014).

Shara served as senior project manager on the Centennial Care project, collaborating with Medicaid and Medicare groups and external vendors to implement a Dual Special Needs Plan for Blue Cross Blue Shield of New Mexico. She also oversaw activities for the quality work-stream of the Centennial Care implementation.

ACS – A Xerox Company (08/2010 to 08/2012)

Texas Medicaid Healthcare Partnership (TMHP) – Medical Transportation Program, Program Director (10/2011 to 8/2012).

As the program director, Shara guided operations for the Texas Medical Transportation Program, including conversion to an automated provider enrollment and claims processing solution then subsequent transition to a Medical Transportation Organization model requiring encounters submission only.

Texas Medicaid Healthcare Partnership (TMHP) – HIPAA 5010 Implementation, Project Manager (09/2010 to 01/2012).

Shara managed a team to coordinate HIPAA EDI Version 5010 trading partner outreach, EDIFECs HIPAA compliance validation and end-to-end testing with clearinghouses, third-party billers, direct submitters and software vendors.

Electronic Data Systems (EDS) (03/2000 to 08/2008)

Texas Medicaid and Healthcare Partnership (TMHP) – HIPAA Implementation, Business Analyst (03/2003 to 10/2004).

Shara was as liaison between technical developers, internal business groups, and Texas Health & Human Services resources. She drafted presentations and facilitated pre-implementation walkthroughs of the Long-Term Care (LTC) and Appeals software (TDHConnect) to Texas Medicaid representatives, achieving approval to implement.

Education and Memberships

BA, International Studies & Business Administration, Texas A&M University

International Studies, Institute of American Universities

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Diane Twehous **Project Manager**

Diane is a hands-on professional with over 35 years of experience working with Medicaid programs and Medicaid Management Information Systems in various lead and executive management roles. She possesses a wide range of in-depth industry knowledge and expertise in contract management, business operations and system implementations. Her emphases are claims processing, contract compliance, call center management, RFP development, enrollment broker services, MMIS (MECT 2.3) and E&E (MEELC 1.1) certification. She possesses excellent written and verbal communication skills and understands the unique dynamics of state Medicaid programs.

Key Qualifications

- Subject matter expert in MMIS Medicaid Enterprise Certification Lifecycle (MECL) and Medicaid Eligibility and Enrollment Lifecycle (MEELC)
- Over 25 years of experience in Medicaid claims processing and payment systems
- Five years of experience working with Nebraska Medicaid and Long-Term Care on the MMIS Replacement Project

Relevant Experience

JS3 Consulting (09/2014 to present)

State of Nebraska Medicaid and Long-Term Care

Diane currently serves on the State certification team for the Data Management and Analytics (DMA) project. She is responsible for the coordination of certification criteria evidence and required artifacts in coordination with State, vendor, and IV&V staff. During her tenure at MLTC, she served as the certification lead for the DMA project, leading the State through a successful CMS R1 review. She previously served as certification lead for all MMIS replacement projects, State communications lead for the DMA project, operations lead for the implementation of Department of Labor Overtime and Travel Project, State project lead for the implementation of Heritage Health Enrollment Broker services, MMIS requirements lead, and participated in the development of the DMA RFP.

Wipro Infocrossing (07/2006 to 12/2013)

State of Missouri Medicaid Program

Diane served as the vice president / general manager for Missouri Medicaid Operations where she was responsible for all aspects of the Missouri Medicaid fiscal agent contract. Highlights of the contract included claims processing (100M claims annually), pharmacy point of sale, drug rebate, complex provider and recipient call centers (over 300,000 calls annually), pharmacy prior authorization call center, managed care enrollment broker, TPL cost avoidance, technical call center, 17 major MMIS enhancements, system maintenance and daily processing, staffing (230 local business and technical employees with eight direct reports), facilities management (31,000-square foot operations facility and 7,000- square foot disaster recovery site) and business continuity (local and off-site data center). The Missouri program served over 900,000 members and made annual claims payments of over of \$6 billion to 40,000 providers. Claims were processed 99.5% electronically with an average processing time of one day. Diane was responsible for client relationship, annual budgets, account P&L, new business development, contract negotiations, and HIPAA privacy and security.

Infocrossing Healthcare Services (11/2003 to 06/2006)

State of Missouri Medicaid Program

Diane worked as the account manager for the Missouri Medicaid fiscal agent contract where she was responsible for the daily operations and systems maintenance of the Missouri Medicaid fiscal agent contract. During that time, Diane successfully managed the completion of all requirements of the existing contract and positioned the organization for the successful re-procurement of a new contract in 2007. She was responsible for a staff of 180 employees and developed opportunities for strategic account growth. She was successful in developing cost savings initiatives for the State of Missouri client and Infocrossing and maintained an excellent client relationship with consistently high customer satisfaction.

Verizon Information Technologies (04/1991 to 10/2003)

State of Missouri Medicaid Program

As claims manager, Diane directed 51 employees in document control, data entry, resolution, and medical policy, processing more than 4.5 million Medicaid paper claims annually while meeting all contractual requirements. She was instrumental in recommending solutions to the State that expedited and enhanced claims processing. Her responsibilities included helping to ensure the timely and accurate processing of all claims in accordance with State and CMS guidelines while monitoring the performance of the MMIS to help ensure processing issues were identified and resolved efficiently. During her time as claims manager, Diane directed the conversion of microfilming processes to an imaging application for paper claims, which resulted in improved access to documents and resulted in faster claims resolution. She also managed the conversion of more than one million State provider enrollment documents into images which automated the document retrieval process, providing better access for State staff.

GTE Data Services (08/1987 to 03/1991)

State of Missouri Medicaid Program (06/1989 to 03/1991)

As research administrator, Diane assisted the claims manager in the day-to-day operations of the Claims Department and served as interim claims manager in the absence of the claims manager. She served as liaison to State personnel in coordinating processing and handling procedures, contributed as a team member to the development, testing, and implementation of the new claims processing subsystem and coordinated the online replacement of the resolutions manual.

Health Services Business Development (08/1988 to 05/1989)

Diane served as claims manager for GTE Data Services and worked with the Health Services Business Development Group on Medicaid business development. During that time, she participated in proposal development for Medicaid and other healthcare procurement efforts, reviewed documentation, analyzed requirements, determined RFP goals and objectives, and developed solutions for RFP responses. She also worked with MMIS systems staff during the installation and testing of a certified online MMIS, developed test data, and served as application liaison to system personnel during exam entry and processing cycles.

State of Missouri Medicaid Program (02/1988 to 07/1988)

Diane worked as the implementation claims manager for GTE's first Medicaid fiscal agent contract. She was a significant contributor in the successful transfer and implementation of the Missouri MMIS including staffing; development and implementation of workflow and claims handling procedures; design of claim forms and supporting documents; takeover of mail receipts from the local post office; coordination of sorting, screening, microfilming, and control procedures for incoming mail; and testing of data entry edits. Additionally, Diane assisted with implementation of structured data testing, directed the development of internal quality standards and follow-up procedures, created control mechanisms to monitor claims

inventory, data entry, and suspended claims, and developed formal procedures that enabled State personnel to adjudicate suspended claims requiring special handling outside normal processing procedures.

Health Services Business Development (08/1987 to 01/1988)

Diane worked as claims manager for the Health Services Business Development Group and worked on the successful procurement of the Missouri Medicaid contract.

General American Consultec (06/1982 to 07/1987)

State of Missouri Medicaid Program

Diane served as the supervisor for the claims resolution unit and was responsible for the timely adjudication of all suspended claims.

Education and Memberships

Corporate Executive Leadership and Training Courses

7 Habits of Highly Successful People

Graduate Leadership, Jefferson City

Data Processing: Certificate in Introduction to IBM PC

Pharmacy Technician Certificate

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Project Coordinator



Ashley Zaldana, BA **Project Coordinator**

Ashley is a consultant in BerryDunn's Medicaid consulting practice, bringing experience with project oversight, scheduling, business analysis, and complex project coordination to her client work. She has four years of experience working in Information Technology, with working knowledge of several common software platforms, including SharePoint, SalesForce, and Adobe. During her time at BerryDunn, Ashley has gained experience with project management skills and has been involved in a variety of roles within her projects to meet HHS client needs.

Key Qualifications

- Over two years of project experience in Medicaid
- Knowledge of provider enrollment as a SME and business analyst
- Experience managing small projects

Relevant Experience

BerryDunn (07/2017 to present)

West Virginia Bureau for Medical Services (BMS)

- *Provider Enrollment (PEA) Project Year 1 and 2, Project Management and Support Services (07/2017 to present).*

Ashley serves as a project coordinator for the PEA project, responsible for overseeing all meeting management duties. She tracks and logs action items, takes detailed meeting minutes, creates project timelines, manages the local document repository, updates criteria sheets, and facilitates client meetings. She provided business analyst support for the majority of PEA Year 2 and gained experience with deliverable development and review along with other project management services.

- *Substance Use Disorder (SUD) Waiver Initiative Phase 2 and 3 Project, Project Management and Support Services (04/2018 to present).*

As the lead project coordinator, Ashley is responsible for overseeing meeting management and other duties. She tracks action items and decisions, monitors both West Virginia and national news coverage for SUD-related issues, maintains an FAQ document for provider workshops, and provides data analytic support for SUD reports.

Lee University (08/2013 to 06/2017)

Ashley was an administrative student assistance and student UX analyst, responsible for overseeing meeting management and note taking. She assisted in managing departmental budgets, the procurement and reimbursement process, events, and interviews. In addition, she assisted with the development of the university website, email marketing tasks, and graphic design work for web and print.

RCN Technologies (05/2016 to 08/2016)

As a social media intern, Ashley executed RCN's social media strategy across key channels such as Facebook, Twitter, and LinkedIn to establish visibility for their brand. She created graphics such as

infographics, banners, posters, and web content, and assisted in the development of white pages for client review.

Education and Memberships

BA, Communications, Emphasis in Advertising, Lee University

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Business Analysts



Lisa Ashburn, BA, CSM, CBBF **Business Analyst**

Lisa is a results-oriented, energetic professional who is committed to setting up project teams for success and providing solutions that support client objectives. She can offer support from the discovery phase to end-user testing. She has made significant contributions in all phases of program and project management. Her skills include IT business analysis, systems analysis, scrum master services, project planning, business process modeling, requirements gathering, software evaluation, user acceptance testing, and requirements traceability for startups, nonprofits, and corporations. She has led multiple requirement gathering efforts in both the public and private sector, concentrating primarily in healthcare and health insurance (including Medicare Advantage plans). She possesses a working knowledge of health insurance business processes and practices, and specializes in IT requirements gathering.

Key Qualifications

- 20+ years in software development
- 15 years of experience in IT business analysis and business process engineering
- 6 years of project experience in health insurance and healthcare
- Certified Scrum Master (CSM)
- Certified in Blockchain Business Foundations (CBBF)

Relevant Experience

Large Health Insurer (name blocked by NDA) (06/2019 to present)

Large Health Insurer – *Operational Readiness Effort, Certification Analyst (06/2019 to present).*

Lisa serves as a certification analyst on the Operational Readiness effort. She leads operational teams as they define, prioritize, and execute scenarios to certify the company's readiness for project go-live. She is responsible for tracking progress, identifying potential risks and issues, and offering recommendations for mitigation.

International Logistics Company (name blocked by NDA) (12/2016 to 04/2018)

International Logistics Company – *HR System Implementation, Sr. Business Systems Analyst (12/2016 to 04/2018).*

Lisa joined a team of business analysts supporting an enterprise-wide project to implement a cloud-based HR system. Specifically, Lisa led the requirements gathering effort on how to extract, transform, and load HR data into a regional data warehouse. She also elicited requirements for an in-house user provisioning system. She revised scope documents and created slide decks to explain the desired outcome to technical teams. She wrote user stories and test cases, and triaged issues during project go-live. Her roles included business analysis, systems analysis, and backup scrum master.

Health Insurance Co-op (name blocked by NDA) (05/2015 to 06/2016)

Health Insurance Co-op – *Multiple Projects, Management Consultant (05/2015 to 06/2016).*

Lisa provided issue resolution to a health insurance startup. She wrote scope documents for client projects and created slide decks to present different technology options. She created architectural maps of client systems and elicited business requirements for technology solutions. She served as an in-house scrum master and helped the client prioritize new features and defects for resolution.

Portland General Electric (05/2014 to 11/2014)

Portland General Electric – *Paperless Billing Project, Sr. Business Analyst (05/2015 to 06/2016).*

Lisa gathered software requirements for a local utility company rolling out paperless billing to its customers. She served as a development team resource, providing requirements clarifications to developers, testers and managers as needed. Lisa also served as backup scrum master for the project.

Port of Portland (09/2013 to 02/2014)

Port of Portland – *Learning Management System Rollout, Sr. Business Analyst (09/2013 to 02/2014).*

Lisa built and tested course prototypes in the Port's new Learning Management System (LMS) software. She learned Cornerstone LMS functionality in order to train others. She coordinated with the project team, IT resources, the vendor, and stakeholders to solve problems, and she created repeatable processes for software rollout.

PeaceHealth (06/2013 to 08/2013)

PeaceHealth – *Process Mapping Project, Business Process Analyst (06/2013 to 08/2013).*

Lisa led working sessions with subject matter experts to create 90 business process maps for a regional hospital chain. The goal was to ensure that best practices were observed and regulations were met during onboarding and system provisioning for anyone working at PeaceHealth. Lisa identified delayed handoffs between teams and suggested improvements to streamline processes.

Cambia Health Solutions (12/2008 to 02/2013)

Cambia Health Solutions – *Multiple Projects, Business Systems Analyst/Scrum Master (12/2008 to 02/2013).*

Lisa gathered software requirements for a large health insurer in the Pacific Northwest. She served as a business systems analyst and scrum master for an Agile team focused on membership and billing. In this role, she led work sessions with subject matter experts, business analysts, developers and third-party vendors to document and refine mapping documents, user stories/story cards and business information requirements in an iterative fashion. Lisa researched business issues to acquire knowledge about healthcare-related business processes and new healthcare products. She also researched technical issues, such as handoffs between systems and data mapping. Her team resolved long-standing challenges and delivered value-added products to internal customers, employer groups, and health insurance members.

Nike Corporation (03/2008 to 12/2008)

Nike Corporation – *Project Blocked by NDA, Business Systems Analyst (03/2008 to 12/2008)*

Lisa partnered with usability analysts and the information architect in fast-paced Agile environment to deliver use cases, user interface specifications and system process flows. She reported daily on progress using scrum methodology and led handoff meetings to communicate requirements to development teams. Lisa researched business issues to acquire knowledge and intelligence about footwear development, distribution, and delivery for this client.

Wyndham Worldwide (11/2005 to 02/2008)

Wyndham Worldwide – *Multiple Projects, Business Analyst (11/2005 to 02/2008)*

Lisa served as business analyst for an international hospitality company in the Vacation Ownership Group. While there, she wrote project vision documents to define high-level features and scope for multiple audiences. She created use cases, business process flows, activity diagrams, and supplementary specifications to explain detailed requirements. Lisa led requirement workshops and review sessions. She also researched business issues and traced requirements into design documents

for multiple high-level projects (including company-wide data marts, resort management software, and web platforms). In this role, she partnered extensively with multinational teams on both U.S. coasts and in Asia-Pacific office.

Lisa co-led nationwide, front-office software implementations for this timeshare resort client (Wyndham Worldwide). She directed data requirements gathering and issue analysis/resolution; coordinated IT resources and resort personnel; developed software documentation deliverables (e.g., user requirements analysis, integrated system design documents, troubleshooting guides); and managed all aspects of go-live and follow-up support.

Key Results: Lisa leveraged expert skills in negotiating compromise and building consensus to keep projects moving forward and satisfy the needs of diverse groups with divergent agendas. She focused business units and process owners on common benefits to achieve compromise while still fully addressing their individual needs/concerns.

Education and Memberships

BA, French and English, University of North Carolina at Chapel Hill

Certified Scrum Master (CSM)

Certified in Blockchain Business Foundations (CBBF)

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Catherine Corey, BS, CPC

Business Analyst

Catherine is an experienced project manager with 15 years of experience with Medicare and Medicaid. Her experience includes building, managing, and optimizing a network of providers within a defined geography in pursuit of broad strategic network management and growth goals. Her background includes work with MMIS projects, performing gap and SWOT analyses, conducting JAD sessions and facilitating project meetings. She is versed in writing functional requirements specifications documents, business requirements, design specifications, systems requirements specifications, use cases, and is experienced with project management best practices.

Key Qualifications

- Over 15 years of experience in Provider Network Management
- Experienced in MMIS and MITA projects
- Certified Professional Coder

Relevant Experience

BerryDunn (05/2016 to present)

West Virginia Bureau for Medical Services (BMS)

- *Electronic Visit Verification (EVV) Solution Implementation Project (10/2018 to present).*
Catherine is a senior consultant on BerryDunn's team assisting BMS with the implementation of their EVV solution.
- *Provider Enrollment (PEA) Project (07/2017 to 01/2018).*
Catherine served as the interim project manager, facilitating and participating in weekly WV Provider meetings (internal and external) as it relates to Medicaid Provider Re-enrollment and certification. Catherine provided oversight for the project team, supported bi-directional knowledge sharing between WV and partner states, and acted as liaison for internal teams and state stakeholders while overseeing project deliverable production.

Arizona Department of Economic Security/Division of Developmental Disabilities (ADES/DDD) – Feasibility Study for IT System Upgrade/Replacement (02/2018 to 9/2018).

Catherine served as a senior consultant on the BerryDunn team providing expertise on a comprehensive feasibility study, including strategy, communication plan, project planning, cost-benefit analysis, time, scope, impact and risks and a formal change management plan to upgrade or replace the ADES DDD FOCUS IT system.

West Virginia Children's Health Insurance Program (WVCHIP) – MMIS Stabilization Phase Performance Monitoring Project (05/2017 to 01/2018).

As a SME on this project, Catherine conducted a review of the WVCHIP Benefit Matrix and provided a Gap Analysis Report of changes needed to the Matrix. She worked on contract configurations in WV MMIS system compared to the Gap Analysis Report.

New Mexico Human Services Division – Health and Human Services (HHS) 2020 Project Support (08/2016 to 05/2017).

Catherine served as the provider management and quality assurance lead for BerryDunn's team on the New Mexico Medicaid MMIS Replacement project. She coordinated RFP meetings and distributed a questionnaire and survey to all bureaus, divisions, and partners to solicit input for module components

and acquire requirements; gathered information from other states, from CMS and other agencies, and from existing contractors and vendors, including IV&V for the system integrator, data services and quality assurance modules; and shared info with the MAC, provider associations, Indian Health Services (IHS) and the MCOs. Catherine was part of the project team that achieved approval from CMS of New Mexico's Framework model, IAPDUs, MITA Self-Assessment, and New Mexico's IV&V RFP contract. This project also involved collaborating on the MITA state self-assessment in order for New Mexico to define their MITA goal.

BlueTack Consulting (01/2016 to 04/2016)

As a provider management and quality assurance consultant for the New Mexico MMIS Replacement project, Catherine helped to define requirements and outcomes for provider enrollment, quality assurance, third party liability, RAC, FADS and program integrity. In addition, she coordinated definitional and reporting activities among Enterprise stakeholders as required, and provided knowledge transfer to MAD and Enterprise staff on use of program integrity analytics, including fraud detection, third party recovery information to ensure compliance with all state and federal requirements, including MMIS Certification and Level 4 standards.

CNSI, Inc. (03/2013 to 10/2015)

In her position as MITA provider and enrollment business lead, Catherine was responsible for the design and implementation of the Medicaid provider eligibility subsystem and the electronic Medicaid incentive payment program (EHR) within the MMIS for the State of Utah. She worked closely with the State of Utah business analysts to ensure that the design was within the scope of the proposal and the requirements and met the needs of the client. She also served as the lead for CMS certification for Utah's MMIS.

Humana (05/2006 to 03/2013)

Catherine served as the provider network operations manager for the State of Idaho. Her responsibilities included managing Idaho operations for senior Medicare products by coordinating with network, sales, and compliance to engage providers and health systems around results related to quality, clinical performance, utilization management, Medicare risk adjustment, and various incentive programs. In addition, she assisted with the configuration, maintenance, and support of managed care application software applications and related information systems pertaining to managed care applications dictionaries, benefit plans, the resolution of claim processing and provider setup issues and the documentation of policies and procedures. As part of the Medicare Advantage expansion, Catherine led a team of provider relations specialists in an effort to bring Humana to the State of Hawaii. There she presented products to hospitals, ancillary providers, physicians, and their staff via in service and seminars based on the in-service percentage goals given by leadership each year by territory. As an integral part of her role at Humana, Catherine managed large practice and ancillary providers in Utah, Idaho, Montana, and Hawaii. She negotiated contracted rates and language and also created a commercial PPO, Medicare HMO, and PPO network that encompassed the five counties in Hawaii.

CIGNA Medicare (03/2004 to 04/2006)

As a provider relations consultant, Catherine's responsibilities included conducting, organizing, and producing region-wide seminars and workshops for the DME supplier community and beneficiaries in 17 states; and conducting meetings with senior advocacy groups and participate in senior health fairs and expositions. During this time, she was elected as member of Region D DMERC Advisory Committee.

Catherine also served as an EDI marketing consultant for CIGNA, responsible for researching, writing, and editing Medicaid EDI and HIPAA materials, manuals, newsletters, publications, and/or web site content. She initiated a marketing campaign for electronic funds transfer which ultimately increased

enrollment by 39% and gathered and interpreted EDI Marketing data/percentages to be used in formulating marketing decisions and strategies.

Education and Memberships

BS, Business Administration/Marketing, Arizona State University

Secondary Education Certificate, Ottawa University

Certified Professional Coder

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Michelle Kennedy, BA **Business Analyst**

Michelle brings 20 years of consulting experience in strategic and business planning, organizational change management, program evaluation, business process improvement, performance measurement, leadership development, and executive coaching. She has provided consulting services and project leadership for projects with state and local health and human services agencies in Oregon, Washington, Illinois, Texas, Nevada, and California.

Key Qualifications

- Over 20 years of experience in providing strategic and business consulting services to HHS agencies
- Extensive experience supporting the success of organizational change management – including for MMIS replacement

Relevant Experience

BerryDunn (01/2019 to present)

Hawaii Department of Human Services Med-QUEST Division (MQD) – Organizational and Business Process Redesign (01/2019 to present).

Michelle supports BerryDunn's team working on a business process redesign effort for the customer-facing sections of Hawaii's Med-QUEST Division. Phase two of the project just completed, which culminated in a findings and recommendations report that included recommendations for organizational transformation of their eligibility offices and call centers.

Kennedy Consulting LLC (02/2002 to 12/2018).

Oregon Department of Human Services (DHS)

- *Organizational Change Readiness Assessment and Tactical Planning for the Vocational Rehabilitation (VR) Division (3/2018 to 12/2018).*
Michelle conducted an assessment of VR's organizational culture, change readiness, and performance to identify frustrations, challenges, concerns and needs of staff regarding adopting and navigating the rapid programmatic, policy, and operational and system changes that have been taking place in VR over the past three to four years. This involved interviews with staff and managers across the state and in central administration, analysis of other assessment data, review of performance data and audit reports, synthesis of the data, and development of findings and recommendations that were presented to the entire agency at an all-staff in-service meeting. She completed facilitating a tactical planning team to develop a plan for implementing the recommendations and making lasting improvements.
- *Systemwide Strategic Plan for Developmental Disabilities Services (8/2017 to 5/2017).*
Michelle facilitated a statewide process to develop a strategic plan for Oregon's system for serving people with intellectual and developmental disabilities. This project involved facilitating the input of an advisory group of more than 35 stakeholders, including advocates, people with I/DD and their families, service providers, county-level case management entities, brokerages, mental health agencies, senior leadership in ODDDS, and public employee labor unions. Michelle conducted analysis of more than 20 data sources as well as national research into best practices in delivery of I/DD services and measuring the performance of I/DD service delivery systems. She led the group to consensus on a shared vision for the system, strategic goals, short-term and

long-term actions, measures of success, and an accountability structure for plan implementation. Michelle also wrote the final draft of the plan.

- *Organizational Change Management Consulting (3/2011 to 11/2014).*
Michelle led the development and pilot of a statewide change leadership training program for managers in DHS. This included 1) rapidly assessing of the agency's culture and the training and development needs of managers as they embark on a large and systemic modernization and business process reengineering effort; 2) customizing her existing change management curriculum to meet the specific needs of DHS managers; 3) piloting the workshop in three locations around the state; 4) finalizing the curriculum based upon the pilot; and 5) training and assisting a cadre of in-house trainers to deliver the workshop statewide. She later assisted DHS in developing and conducting an organizational change readiness assessment in preparation for the modernization effort, a tactical plan for change management efforts, developing an inventory of the agencies change management tools and practices, and conducting a gap analysis to identify where additional change management capacity, competency, and tools were needed.

Washington Basic Health – Organizational Change Management, Leadership Development and Performance Improvement (09/2004 to 12/2015).

Basic Health is a program that contracts with health plans in Washington State to provide reduced-cost healthcare coverage to residents. Michelle managed a project to evaluate the performance of the program and address problems that arose following the agency's transition to a call center business model. This work included: an assessment and analysis of the causes of poor organizational performance and the organization's capacity for and readiness for change; recommendations and an action plan for improvement; training for staff and managers in key performance areas; management coaching for the administrator and management team over a 12-month period; and monitoring the organization's progress in implementing the tactical plan. The project resulted in significantly improved performance, including reduction of document backlog, improvement in the average speed to answer calls, and an increase in individual productivity.

Illinois Department of Human Services – Leadership Development and Change Management Consulting (02/2014 to 11/2014).

The Center for Budget Policy and Priorities, the Ford Foundation, and the Urban Institute launched several "work support strategies" projects in 13 state HHS agencies around the country in support of modernization of these programs. This project involved a leadership development and training assessment for the Illinois Division of Family and Community Services to determine how to develop the agency's leaders in support of DHS' modernization initiative.

Oregon Health Authority – Program Evaluation for Health Surveillance Data (04/2011 to 08/2011).

While serving as lead consultant in developing a plan to evaluate the agency's health surveillance data collection and reporting program, Michelle developed a plan to implement the recommendations that resulted from the evaluation.

Public Knowledge LLC (08/2006 to 09/2010).

Nevada Department of Health and Human Services – HIT-HIE Landscape Assessment (04/2010 to 09/2010).

Michelle conducted an environmental scan of statewide efforts to implement Health Information Technology (HIT) and Health Information Exchange (HIE) in Nevada. Her role was to design the qualitative data-gathering process for the scan, gather qualitative data, conduct analysis of the full data set, and assist in the development of findings, conclusions, and recommendations. The final report included a description of the current HIT and HIE landscape in Nevada, including involvement of key

stakeholders, workgroups, collaborative efforts, and healthcare providers; assessment of healthcare provider readiness for statewide HIT and HIE adoption; assessment of barriers to HIE and HIT adoption; description of existing HIE infrastructures being utilized by healthcare providers; geographic distribution of providers using HIE and HIT; strengths and weaknesses of existing HIE and HIT activities; and eligible providers that may need additional assistance and those that might be used as champions/advisors.

Texas Department of Family Protective Services – Statewide Intake Training Program Evaluation (03/2009 to 09/2009).

Michelle managed a comprehensive evaluation of the training program and all supportive curricula for the Statewide Intake Center for child and adult abuse reporting in Texas.

Washington Department of Social and Health Services – Organizational Change Management Support for MMIS Replacement (08/2006 to 11/2007).

Michelle led the communications, change management coaching, and training components of a complex and far-reaching organizational and provider readiness effort to support implementation of a new MMIS for the fourth largest Medicaid programs in the country. Her work on project included: assessment of organizational and provider readiness to implement the new system; readiness planning and implementation activities across the organization and the provider community; development of high-level work plans for change; development of readiness checklists and communication plans and materials for providers, stakeholders, leadership, and staff; and designing and conducting change management and leadership coaching workshops to help the most affected managers and staff to help them transition to a new way of doing business.

Oregon Insurance Pool Governing Board (07/1997 to 12/2008)

Michelle managed the design and implementation of a first-in-the-nation public-private sector health insurance subsidy program for low income Oregonians and their families called the Family Health Insurance Subsidy Program.

Education and Memberships

BA, Journalism/Mass Communication, Iowa State University

Certified in the Hogan Leadership Assessment System

Certified in Institute of Cultural Affairs (ICA) Facilitation and Strategic Planning methods

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Naomi Snodgrass, MBA

Business Analyst

Naomi is skilled in project planning, facilitation, and consensus building; organization and process assessment; analysis and prioritization of stakeholder input; research; and data-driven decision-making. As a project manager, she has led project teams in large planning, design, and implementation efforts of Medicaid Management Information Systems (MMIS). She has functional knowledge and familiarity with Medicaid claims processing, pharmacy benefit management systems, healthcare provider reimbursement, diseases and health management, Medicaid eligibility and enrollment, children's health programs, and child welfare.

Key Qualifications

- Government agency consulting experience with a focus on HHS systems and programs
- Project management and facilitation skills
- Extensive strategy, planning, procurement, and implementation expertise

Relevant Experience

BerryDunn (08/2018 to present)

Arizona Department of Economic Security/Division of Developmental Disabilities (ADES/DDD) – HIPAA and TCS Compliance Project (04/2019 to present).

Naomi is leading a project to develop an IT Roadmap for the Division to identify solutions for maintaining compliance with HIPAA Transactions and Code Sets standards and coding. This includes developing functional requirements for changed and new functionality, conducting an analysis of alternatives and facilitating agreement on an IT Roadmap for the future state.

West Virginia Department of Health and Human Resources (DHHR) – Child Welfare Family First Assessment (10/2018 to present).

Naomi is assisting with project management, support, and analysis services for the assessment and gap analysis focused on the State of West Virginia's compliance and alignment with the Family First Prevention Services Act.

Washington Health Benefits Exchange (WAHBE) – O&M System Integrator Re-Procurement Planning (09/2018 to 05/2019).

Naomi supported this project as a procurement specialist to help the BerryDunn team assess, define requirements, and develop an RFP, including innovative staffing, cost, and evaluation approaches for the re-procurement of an Agile model-based operations and maintenance system integrator.

Arizona Department of Economic Security/Division of Developmental Disabilities (ADES/DDD) – Feasibility Study for IT System Upgrade/Replacement (08/2018 to 12/2018).

Naomi was responsible for performing cost benefit analysis and developing recommendations about short- and long-term options for modernizing the IT solution for tracking long-term care for the DDD.

Public Knowledge, LLC (08/2000 to 08/2018)

Naomi worked as a management consultant director providing professional services to State Medicaid agencies in the areas of project planning and strategy, procurement and APD development, healthcare systems review and assessment, implementation and testing, certification, and policy development.

Relevant project experience includes:

- Managed multiple projects with responsibility for budget preparation and tracking, client satisfaction, quality assurance monitoring, staffing, and project team training and mentoring.
- Naomi led procurement and quality assurance and IV&V assistance to over 10 states in the development and implementation of MMIS, eligibility and other health and human services systems.

KPMG Consulting (07/1998 to 04/2000)

Naomi worked as health and human services practice manager for multiple projects with responsibility for budget preparation and tracking, client satisfaction, quality assurance monitoring, staffing, and project team training and mentoring. She defined and procured technology enhancements using web-based and e-business solutions for state government clients. Additionally, Naomi developed operations analysis, procurement, training, implementation planning, testing, and requirements definition documents for healthcare information systems development and implementation.

Washington State Health Care Authority (05/1995 to 06/1998)

As a training manager, Naomi managed the Basic Health Plan training unit, which supported over 100 operational employees' program training needs. She coordinated procedure and new policy implementation in operational units. She contributed to division-wide decision-making regarding strategic planning and operational policies and practices as member of Basic Health management team.

Swedish Medical Services (10/1994 to 04/1995)

As an application specialist and trainer, Naomi was responsible for implementation and operation of a centralized physician practice management system. She also managed training activities, including development and design of training materials and course, and overseeing training for clinic staff on system operation. She planned and coordinated acceptance test, conversion, and post-implementation support activities for multiple clinics.

KPMG Consulting (04/1989 to 10/1994)

As a health and human services consultant, Naomi provided functional and technical expertise to numerous private sector and governmental clients in the areas of medical claims processing, provider reimbursement, Medicaid, children's health, and other healthcare policy. She also conducted workflow and operation assessments and large-scale claims audits for claims processing systems in both fee-for-service and managed care environments.

Education and Memberships

MBA, University of Illinois at Urbana

BA, Psychology, University of Illinois at Urbana

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Business Subject Matter Experts (SMEs)



Julie A. Allen, MPA, CPA, PMP® Business SME

Julie is a collaborative, results-oriented, hands-on professional with over 25 years of experience. Recently, Julie has developed her knowledge in a modern Electronic Visit Verification (EVV) Data Warehouse Aggregator Solution. Her broad range of technical and leadership expertise is coupled with strong project management proficiencies and highly effective communication skills. She works with the client in developing solutions that fit business needs and meet federal and state laws. Julie contributes in all program and project management phases including requirements gathering, scope definition, planning, budgeting, resource allocation, monitoring, change and risk management, and subcontractor oversight. Julie possesses a knowledge of IT practices with a broad understanding of current healthcare initiatives.

Key Qualifications

- Over 20 years of project experience – including HHS agency EDW and EVV projects
- Certified Project Management Professional®
- Six-Sigma Green Belt

Relevant Experience

BerryDunn (06/2019 to present)

MO Department of Social Services – EVV Aggregator Solution, RFP development (06/2019 to present). Julie serves as a functional analyst, conducting requirements gathering, mapping as-is and to-be processes, and developing the RFP that meets the Centers for Medicare & Medicaid's (CMS') Medicaid Information Technology Architecture (MITA).

IRG (02/2017 to 07/2017)

MO Department of Labor and Industrial Relations – Workforce Development, Trainer (2017)

Julie served as a lead trainer who developed and delivered training throughout the State for a Workforce Development Solution.

State of Missouri (02/2004 to 04/2019)

MO Department of Natural Resources (07/2017 to 04/2019) – Salesforce Grants Cloud Solution, Project Manager/Coordinator

Julie served as the project manager/coordinator for the Grants Solution including stakeholder and vendor management, testing, end-user acceptance, issue tracking, and resolution.

MO Secretary of State (01/2013 to 01/2017)

Corporation Filing Solution and Election Night Reporting Solution, Project Manager/Coordinator

Julie successfully implemented projects that had failed in implementation. She managed application redesign and testing, infrastructure testing and streamlining, and performed contract, vendor, and stakeholder management.

Military Voting Portal Cloud Solution, Project Manager/Coordinator and Trainer

Julie managed stakeholder and contractual relationships, developed and oversaw project plans, managed issue and risk management and resolution, collaboratively developed business and technical requirements to implement one of the first in the nation military voting portals, and developed and conducted training.

MO Ethics Commission (11/2008 to 01/2013)

Campaign Finance and Financial Disclosure e-Filing Systems, Project Manager/Coordinator, Trainer, Business Analyst

Julie led the requirements development and analysis, stakeholder collaboration, and solution development through the entire Software Development Life Cycle (SDLC). She also developed and conducted training.

MO Department of Revenue (02/2004 to 11/2008)

Motor Vehicle Issuance System - Project Manager/Coordinator, Business Analyst

Julie successfully implemented a project that had failed in implementation. She managed application redesign and testing, extensive application and development testing, project plans, and project implementation. She conducted contract negotiations and developed the future RFP solution.

OA Solutions (2002 to 2004)

MO Secretary of State (02/2002 to 02/2004) – Corporate and UCC Filing Solution

Lead Business Analyst, Client Manager, Project Manager/Coordinator

Julie managed the successful configuration and implementation of a corporate filing solution. She managed the client relationship, led business analysis, conducted system testing and system configuration, and oversaw the project plan and tasks.

NM Secretary of State (01/2003 to 03/2003 – Corporate and UCC Filing Solution, Business Analyst

Julie conducted business analysis, held JAD sessions, and developed business requirements for a corporate filing solution.

JA Consulting (2001 to 2002)

MS Secretary of State (03/2001 to 01/2002) – Corporate and UCC Filing Solution, Business Analyst, Client Manager, Project Manager/Coordinator

Julie led the MS Secretary of State's office in defining their business requirements, conducting vendor and solution research, contract negotiations, and implementation of a Corporate Filing Solution.

MS Information Technology Services (10/2001 to 03/2002) – State Web Portal Solution, Business analyst

Julie collaboratively developed requirements for a State web portal solution and led the State in the implementation.

Mississippi Management Reporting Systems (08/1996 to 01/2000)

Enterprise-wide Data Warehouse Solution – Lead Business Analyst, Project Manager, Operations Manager

Julie partnered with stakeholders to develop functional and technical requirements and RFP solution for financial and human resources data warehouse. She served as the project manager and subsequently as the operations manager.

Education and Memberships

MPA, Masters of Public Administration, University of Missouri

BSBA, Accounting Major, University of Nebraska

Six-Sigma Green Belt

Certified Project Management Professional®, Project Management Institute®

Certified Public Accountant, Missouri Board of Accountancy

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Dorothy (Dot) A. Ball, MA

Business SME

Dot is a senior consultant with over 30 years of professional experience working in state and federal government, nonprofit and for-profit health services, healthcare policy, health information technology, clinical and direct service healthcare business, medical business management, professional education, and online education technologies. She is an experienced public policy expert and business operations and regulatory analyst with extensive subject matter expertise in areas such as MITA and Medicaid business process modelling. Dot has been a trusted subcontractor to BerryDunn since January 2009.

Key Qualifications

- Over 30 years of consulting experience with HHS agencies – including as a subcontractor to BerryDunn
- Extensive MITA experience

Relevant Experience

Pogis (2007 to present)

As principal consultant for this small veteran-owned analytics and subject matter consultancy, Dot provides services in the areas of health IT, healthcare delivery systems, and government-funded health and human services. She has worked in collaboration with BerryDunn on the following projects:

- Business analyst/SME supporting the certification team for the West Virginia DHHR Data Visioning and Warehouse RFP Development and Procurement Assistance Project (09/2018 to present)
- Business analyst/SME supporting the Deliverables Review team for the West Virginia Project Management Services on the West Virginia Medicaid Enterprise Integrated Eligibility Solution (IES) Project (09/2018 to present)
- MITA SME/analyst for West Virginia's MITA 3.0 SS-A and MITA Lifecycle and Maintenance Projects (08/2012 to present)
- Policy analyst and Affordable Care Act SME for West Virginia BMS, State of West Virginia Medicaid Enterprise Gap Analysis and Project Management Services (GAPMS) Project (11/2016 to 03/2018)
- Business analyst/SME supporting the Arizona Health Care Cost Containment System (AHCCCS) Testing Experience and Functional Tools in Community-Based Long Term Services and Supports (TEFT) Grant PHR Assessment project (7/2014 to 09/2014)
- Business analyst for the development of West Virginia's State Medicaid Health IT Plan and EHR Incentive Payment Program (02/2010 to 10/2010)
- Business analyst for the development of Massachusetts State Medicaid Health IT Plan and EHR Incentive Payment Program (10/2010 to 01/2011)
- Lead policy analyst for the West Virginia DHHR Affordable Care Act Compliance and Implementation Project (05/2010 to 12/2013)

- SME providing eLearning content development for the West Virginia ePrescribing training program for physicians (06/2009 to 12/2009)

In addition, she has served as lead policy analyst for Alabama's Medicaid Managed Care External Quality Review project; MITA SME for AHCCCS and State of New Mexico Human Services Department MITA 3.0 SS-A; State of New Mexico Human Services Department National Human Services Interoperability Architecture (NHSIA) assessment; policy manager as part of an IV&V team for Arizona's Health Insurance Exchange implementation; and policy analyst for business intelligence projects in various states, including Arizona, Arkansas, Florida, Illinois, New Hampshire, New Mexico, Utah, and Texas.

Dorothy A. Ball Consulting (1992 to present)

Dot is the proprietor and principal consultant for a small woman-owned specialized healthcare consultancy. Projects include:

- SME and eLearning content development consultant for the development of West Virginia BMS ePrescribing Training (WVeScript Project)/Health Information Exchange (HIE) training program for physicians.
- Policy analyst: Medicaid pharmacy policy and business practices analysis for business intelligence projects in various states including Arizona, Arkansas, Florida, Illinois, New Hampshire, New Mexico, Utah, and Texas for international business management consulting and Parexcel a subsidiary of Elsevier Science.
- Disease Management Analytics Services: state and federal disease management (DM) program and policy projects, working with international standards organizations and national consulting firms. Projects included the development of savings estimation tools for state programs, Medical Service Enhancement Programs, Medicaid DM programs in Florida, Arizona and Texas as well as innovative payment models, Disease Management standards, and measures and reference models.

FourThought Group, Inc. (2002 to 2009)

As a senior business consultant, Dot provided consulting services on projects such as:

- Business analyst for the AHCCCS MITA Analysis Project.
- Lead business analyst for AHCCCS Fee for Service Management Division MITA Assessment managed MITA business analysis team.
- Lead business analyst for AHCCCS and Department of Economic Security to initiate Phase I of the State of Arizona Technology Interface Project System.
- Lead business analyst for Indiana MITA analysis project.
- Pharmacy /Provider Relations SME for Mississippi DW/DSS DDI project.
- Senior policy analyst for South Dakota HIPAA Security Policy and Procedures compliance project.
- Business analyst responsible for performing an organizational assessment of the Mississippi Medicaid program within the CMS MITA framework. This was among the first MITA assessments performed in the country.
- Policy analyst providing support to the CMS MITA Initiative Team.
- Business analyst/SME for Washington State Medicaid MMIS procurement project.

New Mexico Health Policy Commission (2000 to 2002)

As a senior policy analyst, Dot was responsible for the management of state policy and planning projects addressing access to healthcare including:

- As policy project manager, performed task force activities and studies including Medicaid cost containment, prescription drug access, provider retention issues, workforce shortages, health professional regulation, rural and immigrant access
- Managed population survey and data analysis projects that resulted in significant legislative changes
- Conducted research and monitored key federal and state health policy issues including: access to care, State Health Initiative, health professional shortages, Medicare and Medicaid reform issues, managed care, disease management, provider credentialing system, prescription drug policy, drug policy reform, bio-terrorism, immigrant health, border health, and various public health and international health policy issues
- Analyzed and interpreted state, federal, and international laws and regulations
- Analyzed healthcare legislation and provided technical support to the state Legislature, Office of the Governor and New Mexico delegation to the U.S. Congress
- Conducted comparative health data analysis including demographic, ethnographic, and GIS analysis of U.S. census data and New Mexico health and population data

Education and Memberships

MA, Government, International Relations – Latin American Development, Public Policy Studies, and International Terrorism, New Mexico State University

BA, Government – Public Policy, Political Psychology, and International Relations, New Mexico State University

Six Sigma Green Belt

Agency for Healthcare Research and Quality's (AHRQ) Knowledge Transfer (KT)/Implementation program – State Healthcare Policy Program Certification

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Michael Garcia, BA **Business SME**

Michael is a health IT consultant with 22 years of public health systems implementation and strategic planning experience gained by collaborating with multiple states in deploying and maintaining statewide health IT systems. He has specific expertise in leading public/private integration projects, such as immunization registries, communicable disease reporting systems, syndromic surveillance tools, health information exchanges (HIEs), Meaningful Use strategies, and EHR solutions.

Key Qualifications

- Over 7 years of consulting experience with HHS agencies
- 22 years of public health systems implementation and strategic planning experience

Recent Relevant Experience

Garcia Consulting Services (2011 to present). Michael is an independent consultant, serving the following clients:

- **Mississippi Department of Health (MSDH).** Michael acts as the agency HIT liaison to multiple state agencies and non-government entities. As the agencies' Promoting Interoperability coordinator, he has developed policy and associated program/system-level processes to support MSDH Promoting Interoperability obligations.
- **Mississippi State Health Information Exchange (MS-HIN).** As the interim executive director, Michael developed strategic/business development plans for statewide expansion; established and maintained relationships with key federal and state entities such as the Office of the National Coordinator, the Mississippi Hospital Association, MSDH, State Division of Medicaid (APD development), and other relevant entities within the state; and performed project management for multiple hospital on-boarding efforts and implementation of HIE services.
- **Mississippi State Public Health Institute.** Michael led efforts using BP Oil Spill settlement funds to deploy HIE services on the Gulf Coast. He worked closely with multiple organizations to develop an HIE notification implementation plan in support of a large Federally Qualified Health Center (FQHC) and multiple hospitals on the MS Gulf Coast.
- **Alaska eHealth Network (AeHN).** Michael developed a billing assessment/plan for the Alaska Department of Social Services (Public Health) and provided Meaningful Use consultation to the Alaska Department of the Social Services.

Scientific Technologies Corporation (1996 to 2011). As vice president, Michael performed in many different capacities, including but not limited to overseeing operations, business development, RFP responses, client/account management, system evolution/strategic planning, and public health feasibility studies. He established mutually productive relationships with over 12 different states/jurisdictions public health organizations using the company's product line and services.

United States Air Force (USAF) (1986 to 1996). Michael was an officer with the USAF. For the Air Force Operational Test and Evaluation Center (AFOTEC), he provided general technical support, and designed, implemented, and maintained the AFOTEC local area network. In addition, Michael supported Air Force Office of Special Investigations facilities in the European theatre, where he planned, implemented, and maintained local and wide area networks required to support operational activities.

Education

BA, Mathematics, Colorado University

Officer, United States Air Force

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Misha Mosher, LLM

Business SME

Misha is an experienced legal professional with proven project management, research, and analysis skills. She brings knowledge of the legal industry, trade publications, government regulations, procurement, intellectual property, technology licensing, privacy and security, and risk management.

Key Qualifications

- HHS system certification experience
- Data warehouse development and procurement experience
- Five years of experience in providing consulting support to state HHS agencies
- MMIS procurement experience

Relevant Experience

BerryDunn (11/2018 to present)

West Virginia Bureau for Medical Services (BMS) – Data Visioning and Warehouse Development and Procurement Assistance Project (11/2018 to present).

Misha supports the Data Visioning and Warehouse Development and Procurement Assistance Project, a project focused on supplying project management services to the State in an effort to assist with the integration of data sources, systems, and databases within BMS.

CSG Government Solutions (11/2016 to 10/2018)

Ohio Department of Medicaid (ODM)

As certification lead, Misha assisted ODM on process, strategies, and required artifacts in order to achieve federal certification through CMS for enhanced federal matching funds for the State's operations. She also provided legal consultation and analysis to the General Counsel's Office at ODM to help ensure they remain in compliance with procurements and contractual obligations. Other responsibilities included providing contract negotiations and development subject matter expertise, conducting alignment analysis to ensure requirements align with the Medicaid Enterprise Certification Toolkit Checklist criteria, and managing the process leading to certification for each release.

Iowa Medicaid Enterprise

Misha served as a procurement and contract analyst, assisting the State in procuring a new MMIS. In this role, she conducted research and drafted analytical strategy documents in support of MMIS and Integrated Eligibility/ Enterprise Data Warehouse strategy.

Vermont Agency of Human Services

As part of the Integrated Eligibility IV&V project, Misha investigated the final federal rule for enhanced funding for Mechanized Claims Processing and assisted in develop a client strategy for incorporating changes.

Vermont Agency of Human Services (01/2014 to 12/2016)

Misha served first as a procurement manager for the Department of Vermont Health Access (DVHA) and later as the vendor manager and IT procurement director. She supported the Health and Human Service Enterprise procurement objectives for IT services, products, and capabilities by advising and facilitating project teams during the vendor selection process.

ipCapital Group, LLC (04/2013 to 05/2015)

As an independent technical analyst, Misha crafted detailed technical documentation for invention disclosure projects, including IP disclosure documentation. This included reading and analyzing a variety of background documents, including patents, publications, manuals, white papers, and research documents.

Kent Law Practice, PLLC (09/2013 to 05/2014)

As a law clerk, Misha researched and drafted motions in preparation for litigation, as well as technology and trademark licensing agreements. She responded to United States Patent and Trademark Office actions on behalf of clients, filed detailed documentation for trademark and copyright registration, attended client depositions and hearings, and supported clients in commercial, trademark, patent, antitrust, and copyright litigation in conjunction with transactional work.

Handal & Morofsky, LLC (01/2012 to 10/2012)

Misha assisted partners with a myriad of litigation and transactional work primarily relating to privacy agreements, terms of use in digital media rights, e-commerce, privacy, free speech, and domain name dispute resolution. She researched and drafted legal documents and contracts related to IP licensing, communication law, and commercial litigation; drafted motions and co-facilitated client depositions and hearings; and supported clients in commercial, trademark, patent, antitrust, and copyright litigation in conjunction with transactional work.

Greenberg Traurig, LLP (11/2010 to 12/2011)

As a junior associate, Misha assisted solicitors in several departments while focusing on commercial and civil litigation: intellectual property, mergers and acquisitions, and human rights. She conducted initial legal research and writing on pro bono human rights brief for which the European Court of Human Rights reviewed and granted relief for their client.

Education and Memberships

Master of Law (LLM), Intellectual Property Law, Benjamin N. Cardozo School of Law

Bachelors of Law, Common Law, Queen Mary University of London School of Law

BS, Legal Studies, New York University/John Jay College of Criminal Justice

US Freedom Corps Scholarship Program, Political Science, Georgetown University

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Kim VanDerscoff-Eisen, BA, LSSGB

Business SME

Kim is an innovative professional with over 15 years of public sector experience in program, project, and procurement. She served in various leadership capacities in health and human services programs, healthcare reform, and health IT initiatives. Kim is skilled in engaging with state agencies and stakeholders on business strategy and technology. She has directed large, complex multi-million dollar transformative projects and procurements across organizations. Kim brings extensive experience in project planning, implementation, and business process reengineering for integrated Medicaid enterprise systems.

Key Qualifications

- Over 20 years of project experience in HHS
- Certified Lean Six Sigma Green Belt (LSSGB)
- Certified Lean Leader

Relevant Experience

Independent Consultant (06/2019 to present)

Colorado Governor's Office of Information Technology (09/2018 to 06/2019)

Kim served as the Salesforce program manager, where she managed the Salesforce platform for the State of Colorado directing governance, software development, user support, training, and marketing. She directed the program's strategic vision to strengthen business and financial operations. In her role, Kim provided direction to C-level executives, key partners, consultants, and customers on opportunities to advance the \$12M Salesforce ecosystem and interoperability initiatives. She led change management activities to support the technical roadmap and guide successful system implementations across 80+ applications. Kim was responsible for enterprise level support of vendor and fiscal management activities. She applied lean and agile techniques to create efficiencies in Software Development Life Cycle processes, practices, and performance. Salesforce is the platform for Colorado's Medicaid eligibility and enrollment system, Medicaid Customer Contact Center, Medicaid Healthy Communities program, and various other human services program that integrate with the Medicaid systems.

Colorado Department of Health Care Policy and Financing (06/2016 to 09/2018)

Kim has held various leadership positions throughout her career with Colorado's State Medicaid agency from 2004 – 2018. As procurement director, Kim transformed the Procurement Office to improve delivery of time, efficiency of services, and customer relationships. She advised executive leadership on portfolio management, acquisition methods, and marketplace opportunities/risks. Kim directed a team responsible for procurement activities from pre-award (planning) to post-award (contract execution) for 300+ contracts. She advanced business workflows, operational performance, and staff productivity through process improvements. Kim promoted partnerships and introduced innovative concepts, including modular procurement. She designed tools and implemented technology solutions to manage compliance.

Kim led the research and strategic planning to develop a Community of Practice model to improve the procurement life cycle. She directed the design of a cloud-based solution to track contractual agreements based on the end-to-end business processes including requirements gathering and design sessions.

She served on the procurement workgroup for the Medicaid Technology Alliance (MTA) with national representation across federal and state healthcare stakeholders. She also collaborated with the workgroup on a playbook for modular procurements aimed at transforming the framework for Medicaid Enterprise Systems.

Colorado Department of Health Care Policy and Financing (11/2014 to 02/2017)

As PMO manager, Kim led portfolio management, project management, and fiscal management activities for health information technology and related systems to advance Colorado's Medicaid Enterprise Systems operations (E&E, MMIS, HIT/HIE). She was the senior authority for implementation of the E&E IT systems. She was responsible for the advance planning documents, related projects, and the annual budget of 65+ million, including cost allocation across other state programs. She supervised a project management team responsible for transformational digital solutions from project initiation to go-live. Kim directed strategic planning initiatives to optimize financial and operational performance. In this role, Kim handled escalations and negotiations with external partners and technical professionals. She led business change management and compliance activities that spanned multiple teams and state organizations. She also designed and implemented processes, procedures, and controls to monitor cross-agency projects. She provided technical assistance and education to executive leadership on program and infrastructure changes. She was a consulted member of the IT Governance Steering Committee led by C-level executives from four organizations.

Kim managed complex E&E system projects including implementation of a shared eligibility system with Colorado's State-based Marketplace, authority to connect to the federal data services hub (FDSH), cost allocation methodology for shared E&E systems, and E&E system reprocurement.

Colorado Department of Health Care Policy and Financing, (07/2013 to 11/2014)

As project manager, Kim planned, initiated, and managed projects to transform business operations for a cloud-based contact center solution in preparation for the Affordable Care Act. She analyzed and interpreted complex state and federal regulations to successfully execute system requirements. She led business requirements and developed use cases for solution design. Kim directed cross-agency projects successfully with attention to scope, schedule, budget, and quality. She strategized with executive leadership teams on funding strategies, organizational goals, and digital innovations (web, voice, mobile). Throughout the project, Kim tracked, monitored, and managed risks. She performed asset and vendor management and effectively communicated and collaborated with internal/external parties and project team members. Additionally, she facilitated training to support change management and drive successful adoption of new systems.

The project occurred in two phases. During phase 1, initial design and implementation of the CRM and IVR solutions occurred over a compressed three-month timeframe. Additional projects to enhance and store voice-recorded customer attestations followed in phase 2.

Colorado Department of Health Care Policy and Financing (07/2011 to 06/2013)

As monitoring and quality manager, Kim designed, developed, and implemented policies, operations, and process improvement strategies for Medicaid eligibility and enrollment. She provided recommendations on operational and system changes to improve the customer and user experience. Kim collaborated with executive and state-wide leaders on initiatives to increase enrollment and access to healthcare in Colorado. She also planned, coordinated, directed, and monitored complex projects required to address federal and state law compliance with enrollment. In her role, Kim engaged in business requirements sessions, testing, and post-mortem project reviews. She performed data analysis to monitor program

performance, and coordinated end-user and customer issues with technical professionals. Kim managed the program budget, contracts, and grants while supervising 15 direct reports and three programs.

Kim directed the Colorado Eligibility Process Improvement Collaborative (CEPIC) statewide project to increase Medicaid eligibility-processing times. This was a coordinated effort with Colorado's Human Services for successful outcomes across the public assistance programs. Kim also coordinated statewide training initiatives to prepare eligibility sites on the system and operational changes occurring in Colorado that were associated with the Affordable Care Act.

Colorado Department of Health Care Policy and Financing, (07/2011 to 06/2013) – School Health Services Program

As school health services program manager, Kim managed the program, projects and financial operations for the School Health Services program. She resolved complex program design, implementation, and operational obstacles. She guided functional design and led the implementation of a web-based cost allocation tool and random moment sampling software for school based Medicaid providers. Kim also performed vendor management activities for 70+ contracts and directed financial planning, budgeting, and forecasting in accordance with the cost allocation plan. She provided strategic leadership and vision to deliver access to quality health and clinical services and researched and drafted regulations, policies, procedures, and communications. Kim prepared and executed department performance goals to maximize federal financial participation.

Kim led the Medicaid Administrative Claiming cost allocation plan project and obtained federal approval. She implemented protocol development, end-user training, and quality assurance.

Education and Memberships

BA, University of South Florida

Certified Lean Six Sigma Green Belt (LSSGB) in Healthcare, Institute of Industrial Engineers

Certified Lean Leader, BMGI

Publications and Presentations

Medicaid Program Design, Presentation for State Healthcare IT Connect Summit conference in 2018 Co-presented with Carrie Paykoc (Governor's Office, State of Colorado), Arun Natarjan (ONC/HHS), April 5, 2018

References

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