



Lori A. Weaver  
Interim Commissioner

Henry D. Lipman  
Director

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
*DIVISION OF MEDICAID SERVICES*

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May 16, 2023

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Medicaid Services, to enter into a **Sole Source** amendment to an existing contract with NTT DATA State Health Consulting, LLC (VC#272035), Plano, TX to continue quality assurance services in compliance with the requirements of the Centers for Medicare & Medicaid Services (CMS), by increasing the price limitation by \$3,421,440 from \$61,703,281 to \$65,124,721 with no change to the contract completion date of June 30, 2026, effective July 1, 2023 upon Governor and Council approval. 80% Federal Funds. 20% General Funds.

The original contract was approved by Governor and Council December 1, 2004 (Late Item #E), and amended with Governor and Council approval on December 12, 2006 (Item #119A), December 11, 2007 (Item #60), December 18, 2008 (Item #57), June 23, 2010 (Item #95), April 18, 2012 (Item #57), January 16, 2013 (Item #17), August 14, 2013 (Item #32), March 26, 2014 (Item #25A), July 16, 2014 (Item #3), December 23, 2014 (Item #7), December 2, 2015 (Item #12), December 21, 2016 (Item #10), June 21, 2017 (Item #6A), November 14, 2018 (Item #8), and June 19, 2019 (Item #12), and most recently amended on June 30, 2021, (Item #8).

Funds are anticipated to be available in the following accounts for State Fiscal Years 2024 through 2026, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

**See attached Fiscal Details.**

**EXPLANATION**

This request is **Sole Source** because MOP 150 requires all amendments to agreements previously approved as sole source to be identified as sole source. The Contractor provides Quality Assurance services as required by the Centers for Medicare and Medicaid Services for Medicaid Management Information System (MMIS) projects. The New Hampshire Medicaid Program is dependent upon the state staffing resources coupled with a strong partnership with the independent quality assurance partner, the Contractor, providing consistent resources that both have the understanding of the federal regulations and requirements for the system but also has seventeen years of experience supporting the State of New Hampshire's Medicaid systems. It would be cost prohibitive to train and acquire the combined 53 years of expertise the Contractor has supporting the quality assurance and project management strategies for the State's MMIS. This contract will ensure the continued successful processing of Medicaid claims as well as compliance with federal and state legislation regarding the Medicaid program. Additionally, this contract is required by the Center for Medicare and Medicaid Services to support a third party quality assurance review of changes and ongoing operations of the MMIS in order to obtain

Federal Financial Participation. The Contractor has developed a detailed knowledge of both of these systems that are critical to the Department.

The purpose of this request is to increase contract funding for quality assurance and project supports related to Dental Management Organization, Electronic Visit Verification, and MMIS re-procurement efforts.

The Department will monitor services by ensuring:

Extension of quality assurance oversight over MMIS changes including:

- Monitoring project planning, project status, and risks;
- Participating in requirements analysis, design, deliverable review, and implementation readiness; and
- Executing system and regression testing to verify and validate that the changes work as required and produce timely, accurate, and reliable results.

Should the Governor and Council not authorize this request, the Department would experience a gap in quality assurance service coverage. The Centers for Medicare and Medicaid Services requires independent quality assurance over system implementation projects approved at an enhanced federal match rate, a determination to not approve this request may result in the loss of federal funding.

Area served: Statewide

Source of Federal Funds: 80% Federal Funds. 20% General Funds

Assistance Listing Number 93.778, FAIN 2305NH5ADM

In the event that the Federal Funds become no longer available, additional General Funds will not be requested to support this program.

Respectfully submitted,



*LW*  
Lori A. Weaver  
Interim Commissioner

**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
FISCAL DETAILS SHEET**

NTT Data State Health Consulting, LLC

**05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT,  
HHS: COMMISSIONER'S OFFICE, OFFICE OF INFORMATION SERVICES**

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2005	102-500731	Contracts for Progr. Svs	95440006	\$426,819	\$0	\$426,819
2006	102-500731	Contracts for Progr. Svs	95440006	\$818,733	\$0	\$818,733
2008	102-500731	Contracts for Progr. Svs	95440006	\$759,163	\$0	\$759,163
2009	102-500731	Contracts for Progr. Svs	95440006	\$605,802	\$0	\$605,802
2010	102-500731	Contracts for Progr. Svs	95440006	\$470,260	\$0	\$470,260
2011	102-500731	Contracts for Progr. Svs	95440006	\$638,313	\$0	\$638,313
2012	102-500731	Contracts for Progr. Svs	95440006	\$1,727,698	\$0	\$1,727,698
2013	102-500731	Contracts for Progr. Svs	95440006	\$3,483,219	\$0	\$3,483,219
2014	102-500731	Contracts for Progr. Svs	95440006	\$3,068,080	\$0	\$3,068,080
2015	102-500731	Contracts for Progr. Svs	95440006	\$3,731,117	\$0	\$3,731,117
2016	102-500731	Contracts for Progr. Svs	95440006	\$3,794,528	\$0	\$3,794,528
2017	102-500731	Contracts for Progr. Svs	95440006	\$3,639,320	\$0	\$3,639,320
2018	102-500731	Contracts for Progr. Svs	95440006	\$4,072,226	\$0	\$4,072,226
2019	102-500731	Contracts for Progr. Svs	95440006	\$4,194,394	\$0	\$4,194,394
		<b>Subtotal</b>		<b>\$31,956,939</b>	<b>\$0</b>	<b>\$31,956,939</b>

**05-95-45-450030-2924 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT,  
HHS: TRANSITIONAL ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERINZATION**

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2014	034-500099	Capital Projects	45139030	\$374,720	\$0	\$374,720
2015	034-500099	Capital Projects	45139030	\$358,080	\$0	\$358,080
2016	034-500099	Capital Projects	45139030	\$253,600	\$0	\$253,600
2017	034-500099	Capital Projects	45139030	\$163,582	\$0	\$163,582
		<b>Subtotal</b>		<b>\$1,149,982</b>	<b>\$0</b>	<b>\$1,149,982</b>

**05-95-47-470010-8009 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT,  
HHS: OFC MEDICAID SERVICES, DIVISION OF MEDICAID SERVICES, MEDICAID MGMT INFO SYSTEM**

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2020	102-500731	Contracts for Progr. Svs	47007000	\$4,314,420	\$0	\$4,314,420
2021	102-500731	Contracts for Progr. Svs	47007000	\$4,314,420	\$0	\$4,314,420
2022	102-500731	Contracts for Progr. Svs	47007000	\$4,757,760	\$0	\$4,757,760
2023	102-500731	Contracts for Progr. Svs	47007000	\$3,699,840	\$0	\$3,699,840
2024	102-500731	Contracts for Progr. Svs	47007000	\$3,738,240	\$0	\$3,738,240
2025	102-500731	Contracts for Progr. Svs	47007000	\$3,776,640	\$0	\$3,776,640
2026	102-500731	Contracts for Progr. Svs	47007000	\$3,815,040	\$0	\$3,815,040
		<b>Subtotal</b>		<b>\$28,416,360</b>	<b>\$0</b>	<b>\$28,416,360</b>

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**FISCAL DETAILS SHEET**

**05-95-47-470010-2358 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: OFC MEDICAID SERVICES, DIVISION OF MEDICAID SERVICES, GRANITE ADVANTAGE HEALTH PROGRAM TRUST FUNDS**

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2020	102-500731	Contracts for Progr. Svs	47007006	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Progr. Svs	47007006	\$90,000	\$0	\$90,000
			<b>Subtotal</b>	<b>\$180,000</b>	<b>\$0</b>	<b>\$180,000</b>

**05-95-47-470030-9321 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: OFC MEDICAID SERVICES, DIVISION OF MEDICAID SERVICES, MMIS Lifecycle Management**

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2024	034-500099	Capital Projects	47007002	\$0	\$3,421,440	\$3,421,440
			<b>Subtotal</b>	<b>\$0</b>	<b>\$3,421,440</b>	<b>\$3,421,440</b>
			<b>Total</b>	<b>\$61,703,281</b>	<b>\$3,421,440</b>	<b>\$65,124,721</b>



**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF INFORMATION TECHNOLOGY**  
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**Denis Goulet**  
*Commissioner*

June 1, 2023

Lori Weaver, Commissioner  
Department of Health and Human Services  
State of New Hampshire  
95 Pleasant Street  
Concord, NH 03301

Dear Commissioner Weaver:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to enter into a contract amendment with NTT DATA State Health Consulting, as described below and referenced as DoIT No. 2005-002Q.

The purpose of this request is to continue quality assurance services in compliance with the requirements of the Centers for Medicare & Medicaid Services (CMS).

The Total Price Limitation will increase by \$3,421,440 for a New Total Price Limitation of \$65,124,721, effective upon Governor and Council approval through June 30, 2026.

A copy of this letter must accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Sincerely,

A handwritten signature in black ink that reads "Denis Goulet".

Denis Goulet

DG/jd  
DoIT #2005-002Q

cc: Mike Williams, IT Manager

**State of New Hampshire  
Department of Health and Human Services  
Amendment 17 to the NTT DATA State Health Consulting, LLC (Contract #2005-002)**

This 17th Amendment to the NTT DATA State Health Consulting, LLC (formerly Cognosante Consulting LLC, Cognosante, LLC, FOX Systems, LLC and FOX Systems, Inc.) Contract (hereinafter referred to as "Amendment 17") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and NTT DATA State Health Consulting, LLC, (hereinafter referred to as "NTT DATA" or "the Contractor").

Whereas FOX Systems, LLC, legally changed its legal name to Cognosante, LLC, effective August 4, 2011, Cognosante, LLC, assigned the Contract to Cognosante Consulting, LLC, effective April 1, 2016, and Cognosante Consulting, LLC, changed its legal name to NTT DATA State Health Consulting, LLC, all rights and obligations of the parties under the Contract referenced above are unaffected by the change in name, corporate structure or parent company.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on December 1, 2004 (Late Item #E) and as amended by Amendment 1 approved on December 12, 2006 (Item # 119A), Amendment 2 approved on December 11, 2007 (Item #60), Amendment 3 approved on December 18, 2008 (Item #57), Amendment 4 approved on June 23, 2010 (Item #95), Amendment 5 approved on April 18, 2012 (Item #57), Amendment 6 approved on January 16, 2013 (Item #17), Amendment 7 approved on August 14, 2013 (Item #32), Amendment 8 approved on March 26, 2014 (Item #25A), Amendment 9 approved on July 16, 2014 (Item #3), Amendment 10 approved on December 23, 2014 (Item #7), Amendment 11 approved on December 2, 2015, Amendment 12 approved on December 21, 2016 (Item #10), Amendment 13 approved on June 21, 2017 (Item #6A), Amendment 14 approved on November 21, 2018 (Item #8), Amendment 15 approved on June 19, 2019 (Item #12), and Amendment 16 approved on June 30, 2021 (Item #8) the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules, and terms and conditions of the Contract; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

1. Except as specifically amended and modified by the terms and conditions in this Amendment 17, the obligations of the parties shall remain in full force and effect in accordance with the terms and conditions set forth in the Contract and all Exhibits, and Amendments 1 through 16 as referenced above.
2. The General Provisions Form P-37 is hereby amended as follows:
  - 2.1. Block 1.8, Price Limitation, is increased by \$3,421,440 from \$61,703,281 to \$65,124,721.
  - 2.2. Block 3.1, Effective Date, is amended by the addition of the following sentence:  
Amendment 17 is effective on July 1, 2023, upon Governor and Executive Council approval.

Amendment 17 NH MMIS QA  
NTT DATA State Health Consulting, LLC.

Contractor Initials:   mu  

Date:   6/2/2023

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3. Modify the provisions of Exhibit A, Scope of Services, Section 4, Period Of Performance/Termination to read:

4.1 PERIOD OF PERFORMANCE

4.1.1 The Contract Period September 1, 2004 through June 30, 2026, includes the option for early termination of the Contract for convenience and reduction in NTT DATA staff, both of which are exercisable at the sole discretion of the Commissioner of the Department of Health and Human Services at any time after June 30, 2023 after giving the Contractor thirty (30) days written notice.

4.1.2 The Contract shall only take effect after full execution of the parties and Governor and Executive Council approval. This Amendment 17 is effective July 1, 2023 subject to Governor and Executive Council approval. It shall remain in effect through June 30, 2026, unless otherwise amended or terminated in accordance with the terms of the Contract.

4. Modify Exhibit A Scope of Services, Section 7, Project Management, Subsection 7.2, Paragraph (a) by replacing in its entirety with:

- a. The Contractor's key personnel shall be comprised of individuals identified in Table 7.2-1, Project Staff

**Table 7.2-1: Project Staff**

Name	Title
Ken Dybevik	Program Director/Client Executive
Tammy Damon	Project Manager
Thelma Malbroue	Senior Business Analyst
Tricia LaPlant	Senior Business Analyst
Margaret Patterson	Senior Testing Analyst
Sara Kondur	Senior Testing Analyst
Jacob Thomas	Senior Testing Analyst
Sharadwanth Sagar Pusala	Senior Business Analyst
Pradyumna Kalita	Senior Testing Analyst
Vickie Gavin	Senior Business Analyst
Jennifer Bender	Senior Business Analyst
Subeshka Rayamajhi	Senior Business Analyst
Pamala Enlow	Senior Business Analyst
Anurag Kondapaka	Senior Testing Analyst
Open	Senior Testing Analyst
Grant Christie	Technical Advisory Group (TAG)

5. Modify Exhibit A, Scope of Services, Section 12 Amendment 16 Table 12-1, QA Services Deliverables and Schedule, by replacing in its entirety in order to modify rows 3.20 and 3.21 with Amendment 17 Table 12-1:QA Services Deliverables and Schedule below:

**Amendment 17 Table 12-1: QA Services Deliverables and Schedule**

Number	Description	Date
<b>1. Project Monitoring – Produce and distribute deliverables including, but not limited to:</b>		
1.1	Overall Finalized QA Plan	Completed
1.1.1	Review Sessions and Meetings: <ul style="list-style-type: none"> <li>• Kickoff</li> <li>• Weekly Status Meetings</li> <li>• Other Meetings</li> </ul>	Five (5) business days after meeting. Weekly Status meeting
1.1.2	Publish session and meeting minutes and revised Project Plans	Five (5) business days after meeting
1.1.3	Produce monthly Project Status Reports	Tenth business day of the month.
1.1.4	Produce Monthly Project Risk Management Reports	Tenth business day of the month, beginning January 2, 2005
<b>3. DDI QA – Produce and distribute the deliverables</b>		
3.20	<p>Quality Assurance SIT and UAT – MMIS Enhancements and Medicaid Enterprise Systems</p> <p>Quality Assurance/Project Management tasks listed below will support communication and collaboration for Medicaid Enterprise System enhancements that include, but are not limited to MMIS, New HEIGHTS Integrated Eligibility, and Pharmacy Benefit Management.</p> <ul style="list-style-type: none"> <li>• Quality assurance review of project requirements or vendor requirement documents</li> <li>• Review of vendor SDLC contract requirements for Medicaid Enhancement Systems system enhancements to identify gaps</li> <li>• Quality assurance review and validation of vendor estimates for Medicaid Enterprise System enhancements</li> <li>• Quality assurance review of vendor project status reports</li> <li>• Quality assurance review of system documentation</li> <li>• Review of vendor SDLC deliverables/artifacts for Medicaid Enterprise System enhancements</li> <li>• Provider Subject matter expertise</li> <li>• Performance of SIT and UAT tasks</li> <li>• Preparation of project meeting minutes</li> <li>• Other tasks as agreed during the contract period</li> </ul> <p>MMIS Enhancements for SFY 2022-2026 include but are not limited to:</p>	Due dates to be mutually established based on MMIS enhancement project schedule

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Number	Description	Date
	<ul style="list-style-type: none"> <li>• Federal Reporting - Phase 2                             <ul style="list-style-type: none"> <li>○ #1 - 1116 Waiver: Delivery Systems Reform Incentive Payment (DSRIP) - Budget Neutrality</li> <li>○ #2 - 1115 Waiver: IMD SUDS Waiver</li> <li>○ #3 - 1115 Demo Waiver: Granite Advantage Waiver</li> <li>○ #4 - Reporting by accounting unit.</li> <li>○ #5 - SED/SME Program (Potentially a new 1115 waiver)</li> </ul> </li> <li>• Billing MCO Claims that the MCO Closed</li> <li>• TPL – Pharmacy Billing</li> <li>• SB684 - Mental Health Services in Schools</li> <li>• Patient Driven Payment Methodology (PDPM) &amp; Market Basket Inflation</li> <li>• SB14 - Families First Enhancement</li> <li>• HB 1600 Smoking Cessation</li> <li>• Electronic Visit Verification (EVV)</li> <li>• Critical Technical Stack Upgrade</li> <li>• TMSIS                             <ul style="list-style-type: none"> <li>○ Encounter Enhancements Phases 3-5</li> <li>○ Data Layout Changes</li> </ul> </li> <li>• BDS Service Auth Conversion and MMIS NewHEIGHTS interfaces Part 1-2</li> <li>• PDPM Phase 2</li> <li>• Inflation Factor</li> <li>• Other post DDI Medicaid Enterprise System Enhancements as directed by the State or approved in APD's.</li> </ul>	
3.21	Testing Support for Medicaid Enterprise System enhancements – See above list under 3.20	Additional testing and support during UAT Phase and during post implementation Medicaid Enterprise System enhancements phases as assigned by State
<b>6: IES IVV Produce and distribute the deliverables</b>		
6.1	Provide DHHS Project Management with monthly status reports clearly describing the state of the IV&V effort, and a monthly management report.	Completed
6.1.1	Risk Assessment and Identification: Review existing Risk Management Plan and Risk Report. Evaluate the identified risks and mitigation strategies, identify other risks and create a Risk Assessment Report to include any new recommendations for risk mitigation strategies.	Completed

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Number	Description	Date
6.1.2	IV&V Work Plan: Develop and maintain a work plan and schedule for all IV&V efforts.	Completed
6.1.3	Test Validation: Review and validate test results for mutually agreed-upon sub-projects within the DDI Contract to include at a minimum the FDSH Wave Testing with CMS.	Completed
6.1.4	CMS Gate Review Preparation and Response: Assist in the preparation for the various CMS Gate Reviews and participate in the Gate Review Meetings. This will consist of assistance with updating of the various artifacts already on file such as the Project Management Plan, Risk Management Plan, etc.	Completed
6.1.5	Quarterly Project Review: Schedule and participate in quarterly IV&V review meetings for the project. These are new meetings with the IV&V vendor and New HEIGHTS management; and provide the Quarterly IV&V Progress Report to CMS as required by the Medicaid Eligibility and Enrollment Toolkit (MEET)	Completed
6.1.6	Other Project Support: Due to the nature of the verification and validation services to be provided, other specific responsibilities and attendant deliverables may be required within the scope of these services and time availability of the 1 FTE to be provided.	Completed
6.2	Third Party IES Security Assessment Review and Report	Completed
6.3	Optional Testing	Removed
7	<b>Additional Maintenance Testing</b>	
7.1	Provide Medicaid Enterprise System maintenance testing services and related duties.	As mutually agreed as time permits within contract value

6. Exhibit B Methods and Conditions Precedent to Payment, B-1 Budget is amended to increase the Contract Price Limitation as specified in Form P-37, General Provisions, Block 1.8, Price Limitation.

7. The provisions relative to Exhibit B, Methods and Conditions Precedent to Payment, Funding of Contract, Paragraph C, as amended by Amendment 16 Section 8.1 are amended by replacing them with the following:

7.1. Amendment 17 Funding of Contract, Paragraph C: The total amount of all payments made to the Contractor for costs and expenses incurred in the performance of the Medicaid Management Information System Quality Assurance services during the period September 1, 2004 through June 30, 2026, shall not exceed the Contract Price Limitation as specified in Form P-37, General Provisions, Block 1.8, Price Limitation in accordance with the project budget identified in Amendment 17 Exhibit B-1, Budget, as set forth in Section 11 of this Amendment 17. Notwithstanding anything in this Contract to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments under this Contract exceed the Contract Price Limitation as specified in Form P-37, General Provisions, Block 1.8, Price Limitation The payment by the State of

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the Contract price shall be the only and the complete reimbursement to the Contractor for all fees and expenses, of whatever nature, incurred by the Contractor in performance hereof. In no event shall the State be liable for any payments hereunder in excess of appropriated or available funds. In the event of a reduction, termination, or modification of appropriated or available funds, the State shall have the right to withhold payment until such time funds become available, if ever. The State shall have the right to reduce, terminate or modify services under the Contract immediately upon giving the Contractor notice of such reduction, termination or modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in Block 1.6 of the General Provisions, Account Number, or any other account, in the event funds are reduced or unavailable.

Notwithstanding Paragraph 17 of Form P-37, General Provisions, an amendment limited to transferring funds between budgets and budget line items contained in Exhibit B Methods and Conditions Precedent to Payment, within the price limitation, can be made by written agreement of both parties and may be made without obtaining the approval of the Governor and Executive Council.

- 8. Modify Exhibit B, Methods & Conditions Precedent to Payment, Table B-1b: Budget by Phase to delete in its entirety with the Amendment 17 Table B-1b: *Budget by Phase* to read:

**Amendment 17 Table B-1b: *Budget by Phase***

Project Phase	Budget
Project Monitoring	\$8,080,671
Pre-DDI QA	\$407,036
DDI Phase through 3/31/13	\$5,029,930
DDI Phase Post Go-Live	\$46,000,084
DDI Contingency	\$327,840
Post DDI	\$2,036,991
DDI 5010 QA	\$239,776
IES IV&V	\$3,002,393
<b>TOTAL:</b>	<b>\$65,124,721</b>

- 9. Modify Amendment 16 Exhibit B-1: Budget by replacing it in its entirety with the following Amendment 17 Exhibit B-1: Budget:

**Amendment 17 Exhibit B-1: *Budget***

Phase Ref	Contract Task	Amend 16 Value	Amend 17 Value Change	Amend 17 Value
Project Monitoring				

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Phase Ref	Contract Task	Amend 16 Value	Amend 17 Value Change	Amend 17 Value
1.1	Overall Finalized QA Plan	\$19,705	\$0	\$19,705
1.1.1	Review sessions and meetings, Kickoff, Weekly Status Meetings, Other Meetings	\$4,817,619	\$0	\$4,817,619
1.1.2	Publish session and meeting minutes and revised Project Plans	\$1,399,502	\$0	\$1,399,502
1.1.3	Produce Monthly Project Status Reports	\$600,517	\$0	\$600,517
1.1.4	Produce Monthly Project Risk Management Reports	\$680,410	\$0	\$680,410
1.2	Publish QA Work Plan and Schedule	\$223,099	\$0	\$223,099
1.3	Integrate QA Work Plan and Implementation Project Work Plan	\$142,089	\$0	\$142,089
1.4	Create Project Communication Plan	\$28,000	\$0	\$28,000
1.5	Create a Documentation plan for the Project	\$19,705	\$0	\$19,705
1.6	Create Paperwork and Electronic Media Control Procedures	\$14,705	\$0	\$14,705
1.7	DDI Deliverable Review and Approval Process	\$34,705	\$0	\$34,705

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Phase Ref	Contract Task	Amend 16 Value	Amend 17 Value Change	Amend 17 Value
1.8	Establish process for review and approval of software development results	\$26,205	\$0	\$26,205
1.9	Create Expenditure Control Plan	\$14,705	\$0	\$14,705
1.10	Create cost benefit methodology Plan	\$0	\$0	\$0
1.11	Implement Control Guidelines Plan	\$14,705	\$0	\$14,705
1.13	Establish a Project Scope Management and Change Control Plan	\$45,000	\$0	\$45,000
<b>Subtotal</b>		<b>\$8,080,671</b>	<b>\$0</b>	<b>\$8,080,671</b>
<b>Pre-DDI QA</b>				
<b>Subtotal</b>		<b>\$407,036</b>	<b>\$0</b>	<b>\$407,036</b>
<b>DDI QA</b>				
3.1	Report on Implementation Vendor Deliverables (see Exhibit B-1a)	\$1,324,789	\$0	\$1,324,789
3.2	Requirements Traceability Matrix Report	\$88,921	\$0	\$88,921
3.3	JAD session Report	\$72,222	\$0	\$72,222
3.4	Technical Review Report	\$92,052	\$0	\$92,052
3.5	QA Test Plan	\$68,839	\$0	\$68,839
3.6	Integration and System Testing Report	\$1,333,978	\$0	\$1,333,978

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Phase Ref.	Contract Task	Amend 16 Value	Amend 17 Value Change	Amend 17 Value
3.7	User Acceptance Test Cases and Scripts	\$387,521	\$0	\$387,521
3.8	User Acceptance Testing	\$545,981	\$0	\$545,981
3.9	Issues Tracking Report	\$0	\$0	\$0
3.10	User Acceptance Testing Report	\$109,289	\$0	\$109,289
3.13	Provider Readiness Report	\$46,458	\$0	\$46,458
3.14	Operational Readiness Report	\$40,678	\$0	\$40,678
3.15	Implementation Readiness Report	\$44,894	\$0	\$44,894
3.17	Implementation Close Out Report	\$85,830	\$0	\$85,830
3.18	Certification Traceability Matrix	\$102,816	\$0	\$102,816
3.19	Contingent Testing Support	\$314,496	\$0	\$314,496
3.20	QA/PM and SIT and UAT - MMIS and Other Medicaid System Enhancements	\$26,444,081	\$3,421,440	\$29,865,521
3.21	Testing Support for MMIS and other Medicaid Enterprise system enhancements	\$16,505,729	\$0	\$16,505,729
<b>Subtotal</b>		<b>\$ 47,608,574</b>	<b>\$3,421,440</b>	<b>\$51,030,014</b>

NTT DATA State Health Consulting, LLC  
 Amendment 17  
 Page 10 of 11

Phase Ref	Contract Task	Amend 16 Value	Amend 17 Value Change	Amend 17 Value
<b>DDI QA - Contingency Option</b>				
<b>Subtotal</b>	Amendment 6 Monthly Fixed Price Value (Supplements Tasks 1.x, 3.20, 3.21, 4.2, 4.6, 5.x)	<b>\$327,840</b>	<b>\$0</b>	<b>\$327,840</b>
<b>Post-DDI QA</b>				
<b>Subtotal</b>		<b>\$2,036,991</b>	<b>\$0</b>	<b>\$2,036,991</b>
<b>Amend 5 - 5010 QA</b>				
<b>Subtotal</b>		<b>\$239,776</b>	<b>\$0</b>	<b>\$239,776</b>
<b>IES IV&amp;V</b>				
6.1	Produce Monthly Project Status Reports	\$2,942,553	\$0	\$2,942,553
6.2	IES Security Plan Review	\$59,840	\$0	\$59,840
6.3	IES Tester(Optional)	\$0	\$0	\$0
<b>Subtotal</b>		<b>\$3,002,393</b>	<b>\$0</b>	<b>\$3,002,393</b>
<b>Additional Maintenance Testing</b>				
7.1	Provide Medicaid Enterprise System maintenance testing services and related duties.	\$0	\$0	\$0
<b>Subtotal</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Project Total</b>		<b>\$61,703,281</b>	<b>\$3,421,440</b>	<b>\$65,124,721</b>

Phase Reference 7.1: Mutually agreed upon cost determined between the Contractor and the State within contract value.

10. Modify Amendment 16 Exhibit B Table B-4 *Future IT Services* by replacing it in its entirety with Amendment 17 Exhibit B Table B-4 *Future IT Services* as follows:

Amendment 17 NH MMIS QA  
 NTT DATA State Health Consulting, LLC.

Contractor Initials:   
 Date: 6/2/2023

All terms and conditions of the Contract and prior amendments not modified by this Amendment #17 remain in full force and effect. This Amendment shall be effective July 1, 2023, upon Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below.

State of New Hampshire  
Department of Health and Human Services

DocuSigned by:  
Henry D. Lipman 6/2/2023  
Henry D. Lipman Date  
Medicaid Director

NTT DATA State Health Consulting, LLC,

DocuSigned by:  
Christopher J. Merdon 6/2/2023  
Christopher J. Merdon Date  
President

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

By: Robyn Guarino Attorney  
Date: 6/5/2023

I hereby certify that the foregoing contract was approved by the Governor and Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

By: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_

# State of New Hampshire

## Department of State

### CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that NTT DATA STATE HEALTH CONSULTING, LLC is a Delaware Limited Liability Company registered to transact business in New Hampshire on March 03, 2016. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 739971

Certificate Number: 0006240105



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 1st day of June A.D. 2023.

A handwritten signature in black ink, appearing to read "D. Scanlan", is written over a faint circular stamp.

David M. Scanlan  
Secretary of State

## CERTIFICATE OF AUTHORITY

I, John M. Dick, do hereby certify that:

1. I am a duly elected Executive Vice President, General Counsel, and Secretary of NTT DATA State Health Consulting, LLC ("Company") and NTT DATA Americas, Inc. ("NTT DATA").
2. Pursuant to official action taken by the Board of Directors of NTT DATA on effective April 1, 2023, the following individuals:

Robert David Pryor  
John Graham  
Christopher Merdon  
William David Croxville

Dean Williams  
John Mathes Dick

Chief Executive Officer  
Group President, Commercial  
Group President, Public Sector  
Executive Vice President and Chief  
Financial Officer  
Executive Vice President, Global Delivery  
Executive Vice President, General  
Counsel and Secretary

are duly authorized on behalf of Company to enter into contracts or agreements with the State of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. hereby certify that said official actions taken by the Company and NTT DATA have not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30) days** from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

DocuSigned by:

*John M. Dick*

Name: John M. Dick

June 1, 2023

Date

Title: Executive Vice President, General Counsel  
and Secretary



**Additional Coverages**

**7/1/2023– 7/1/2024**

<b>INSURER</b>	<b>Line Of Business</b>	<b>POLICY NO.</b>	<b>LIMIT</b>
National Union Fire Ins Co Pitts. PA	Crime	01-073-55-13	\$10M
Endurance American Specialty Insurance Co.	Prof. E&O/Cyber	NRO30020463601	\$10M
Beazley Insurance Company, Inc.	1st Excess Prof. E&O/Cyber	W32B77220201	\$10M xs \$10M

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **BLANKET ADDITIONAL INSURED – AUTOMATIC STATUS IF REQUIRED BY WRITTEN CONTRACT (CONTRACTORS)**

This endorsement modifies insurance provided under the following:  
**COMMERCIAL GENERAL LIABILITY COVERAGE PART**

The following is added to **SECTION II – WHO IS AN INSURED:**

**(a) The Additional Insured – Owners, Les-**

- a. You agree in a written contract or agreement to include as an additional insured on this Coverage Part; and
- b. Has not been added as an additional insured for the same project by attachment of an endorsement under this Coverage Part which includes such person or organization in the endorsement's schedule;

is an insured, but:

- a. Only with respect to liability for "bodily injury" or "property damage" that occurs, or for "personal injury" caused by an offense that is committed, subsequent to the signing of that contract or agreement and while that part of the contract or agreement is in effect; and
- b. Only as described in Paragraph (1), (2) or (3) below, whichever applies:

**(1) If the written contract or agreement specifically requires you to provide additional insured coverage to that person or organization by the use of:**

**(a) The Additional Insured – Owners, Lessees or Contractors – (Form B) endorsement CG 20 10 11 85; or**

**(b) Either or both of the following: the Additional Insured – Owners, Lessees or Contractors – Scheduled Person Or Organization endorsement CG 20 10 10 01, or the Additional Insured – Owners, Lessees or Contractors – Completed Operations endorsement CG 20 37 10 01;**

the person or organization is an additional insured only if the injury or damage arises out of "your work" to which the written contract or agreement applies;

**(2) If the written contract or agreement specifically requires you to provide additional insured coverage to that person or organization by the use of:**

sees or Contractors – Scheduled Person

07 04 or CG 20 10 04 13, the Additional Insured – Owners, Lessees or Contractors – Completed Operations endorsement CG 20 37 07 04 or CG 20 37 04 13, or both of such endorsements with either of those edition dates; or

**(b) Either or both of the following: the Additional Insured – Owners, Lessees or Contractors – Scheduled Person Or Organization endorsement CG 20 10, or the Additional Insured – Owners, Lessees or Contractors – Completed Operations endorsement CG 20 37, without an edition date of such endorsement specified;**

the person or organization is an additional insured only if the injury or damage is caused, in whole or in part, by acts or omissions of you or your subcontractor in the performance of "your work" to which the written contract or agreement applies; or

**(3) If neither Paragraph (1) nor (2) above applies:**

**(a) The person or organization is an additional insured only if, and to the extent that, the injury or damage is caused by acts or omissions of you or your subcontractor in the performance of "your work" to which the written contract or agreement applies; and**

**(b) Such person or organization does not qualify as an additional insured with respect to the independent acts or omissions of such person or organization.**

The insurance provided to such additional insured is subject to the following provisions:

- a. If the Limits of Insurance of this Coverage Part shown in the Declarations exceed the minimum limits required by the written contract or agreement, the insurance provided to the additional insured will be limited to such minimum required limits. For the purposes of determining whether

## COMMERCIAL GENERAL LIABILITY

this limitation applies, the minimum limits required by the written contract or agreement will be considered to include the minimum limits of any Umbrella or Excess liability coverage required for their offense or additional insured by that written contract or agreement. This provision will not increase the limits of insurance described in Section III – Limits Of Insurance. (c) The nature and location of any injury or

b. The insurance provided to such additional insured does not apply to:

(1) Any "bodily injury", "property damage" or "personal injury" arising out of the providing, or failure to provide, any professional architectural, engineering or surveying services, including:

(a) The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders or change orders, or the preparing, approving, or failing to prepare or approve, drawings and specifications; and

(b) Supervisory, inspection, architectural or the "suit", and engineering activities.

(2) Any "bodily injury" or "property damage" caused by "your work" and included in the "products-completed operations hazard" unless the written contract or agreement specifically requires you to provide such coverage for that additional insured during the policy period.

c. The additional insured must comply with the following duties:

(1) Give us written notice as soon as practicable of an "occurrence" or an offense which may

result in a claim. To the extent possible, such notice should include:

(a) How, when and where the "occurrence" took place;

(b) The names and addresses of any injured persons and witnesses; and

damage arising out of the "occurrence" or offense.

(2) If a claim is made or "suit" is brought against the additional insured:

(a) Immediately record the specifics of the claim or "suit" and the date received; and

(b) Notify us as soon as practicable and see to it that we receive written notice of the claim or "suit" as soon as practicable.

(3) Immediately send us copies of all legal papers received in connection with the claim or "suit", cooperate with us in the investigation or settlement of the claim or defense against otherwise comply with all policy conditions.

(4) Tender the defense and indemnity of any claim or "suit" to any provider of other insurance which would cover such additional insured for a loss we cover. However, this condition does not affect whether the insurance provided to such additional insured is primary to other insurance available to such additional insured which covers that person or organization as a named insured as described in Paragraph 4., Other Insurance, of Section IV – Commercial General Liability Conditions.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **BLANKET ADDITIONAL INSURED PRIMARY AND NON-CONTRIBUTORY WITH OTHER INSURANCE**

This endorsement modifies insurance provided under the following:  
**BUSINESS AUTO COVERAGE FORM**

### **PROVISIONS**

1. The following is added to Paragraph A.1.c., **Who Is An Insured**, of **SECTION II COVERED**

#### **CONDITIONS:**

#### **AUTOS LIABILITY COVERAGE:**

This includes any person or organization who you are required under a written contract or agreement between you and that person or organization, that is signed by you before the "bodily injury" or "property damage" occurs and that is in effect during the policy period, to name as an additional insured for Covered Autos Liability Coverage, but only for damages to which this insurance applies and only to the extent of that person's or organization's liability for the conduct of another "insured".

2. The following is added to Paragraph B .5., **Other Insurance** of **SECTION IV BUSINESS AUTO**

Regardless of the provisions of paragraph a. and paragraph d. of this part 5. **Other Insurance**, this insurance is primary to and non-contributory with applicable other insurance under which an additional insured person or organization is the first named insured when the written contract or agreement between you and that person or organization, that is signed by you before the "bodily injury" or "property damage" occurs and that is in effect during the policy period, requires this insurance to be primary and non-contributory.

POLICY NUMBER: CUP-1J668829-23-13

ISSUE DATE: 7/1/2023

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## SCHEDULE OF UNDERLYING INSURANCE

This endorsement modifies insurance provided under the following:  
EXCESS FOLLOW-FORM AND UMBRELLA LIABILITY INSURANCE

### Commercial General Liability

Carrier: THE PHOENIX INSURANCE COMPANY

Policy Number: HN-660-6N030306-PHX -- 23

Policy Period  
From: 7/1/2023  
To: 7/1/2024

### Limits Of Liability

General Aggregate \$2,000,000

Products-Completed Operations Aggregate \$2,000,000

Personal and Advertising Injury \$1,000,000

Each Occurrence \$1,000,000

### Automobile Liability

Carrier: The Charter Oak Fire Insurance Company

Policy Number: HOCAP-1J668701-COF-23

Policy Period  
From: 7/1/2023  
To: 7/1/2024

### Limits Of Liability

Bodily Injury And Property Damage Combined Single Limit \$1,000,000

Bodily Injury Each Person

Bodily Injury Each Accident

Property Damage Each Accident

### Employers Liability

Carrier: Standard Fire Insurance Company

Policy Number: UB-5N963631-23-I3-K (AOS)

Policy Period  
From: 7/1/2023  
To: 7/1/2024

### Limits Of Liability

Bodily Injury By Accident

Each Accident \$1,000,000

Bodily Injury By Disease

Policy Limit \$1,000,000  
Each Employee \$1,000,000

PRODUCER: LOCKTON COMPANIES LLC OFFICE: DALLAS

POLICY NUMBER: CUP-1J668829-23-13

ISSUE DATE: 7/1/2023

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## SCHEDULE OF UNDERLYING INSURANCE - CONTINUED

This endorsement modifies insurance provided under the following:

EXCESS FOLLOW-FORM AND UMBRELLA LIABILITY INSURANCE

Type Of Coverage: EMPLOYEE BENEFITS LIABILITY

**Limits Of Liability**

\$2,000,000 AGGREGATE LIMIT

\$1,000,000 EACH EMPLOYEE LIMIT

Carrier: THE PHOENIX INSURANCE COMPANY

Policy

Number:

HN-660-6N030306-PHX -- 23

Policy Period

From: 7/1/2023

To: 7/1/2024

**Limits Of Liability**

\$2,000,000 GEN. AGG.

\$2,000,000 PROD/COMP OPS AGG

\$1,000,000 EACH OCCURRENCE

\$1,000,000 PERS/ADV INJURY

Type Of Coverage: FOREIGN CGL

Policy

Number:

WP 62 320 4170

Policy Period

From 7/1/2023

To: 7/1/2024

**Limits Of Liability**

\$1,000,000 EACH ACCIDENT

Type Of Coverage: FOREIGN AUTO LIABILITY

Policy

Number:

WP 62 320 4170

Policy Period

From: 07/01/2023

To: 07/01/2024

POLICY NUMBER: CUP-1J668829-23-I3

ISSUE DATE: 7/1/2023

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## SCHEDULE OF UNDERLYING INSURANCE - CONTINUED

This endorsement modifies insurance provided under the following:

EXCESS FOLLOW-FORM AND UMBRELLA LIABILITY INSURANCE

Carrier: CNA

**Type Of Coverage:** FOREIGN EMPLOYERS  
LIABILITY **Limits Of Liability**

\$1,000,000 PER ACCIDENT  
\$1,000,000 POLICY LIMIT FOR DISEASE  
\$1,000,000 PER EMPLOYEE (DISEASE)

Policy  
Number:  
WP 62 320 4170

Policy Period  
From: 07/01/2023  
To: 07/01/2024

**Limits Of Liability**  
\$1,000,000 EACH EMPLOYEE LIMIT  
\$1,000,000 AGGREGATE LIMIT

**Type Of Coverage:** FOREIGN EMPLOYEE BENEFITS LIAB

Policy  
Number:  
WP 62 320 4170

Policy Period  
From 07/01/2023  
To: 07/01/2024

**Limits Of Liability**  
\$1,000,000 PER ACCIDENT  
\$1,000,000 POLICY LIMIT FOR DISEASE  
\$1,000,000 PER EMPLOYEE (DISEASE)

**Type Of Coverage:** EMPLOYERS LIABILITY

Policy Number: UB-5N963182-23-I3-R (Retro)  
Carrier: The Travelers Indemnity Company of America

Policy Period:  
From: 07/01/2023  
To: 07/01/2024

PRODUCER: LOCKTON COMPANIES LLC

OFFICE: Dallas

COMMERCIAL GENERAL LIABILITY  
POLICY  
NUMBER:HN-660-6N030306-PHX -- 23

**M. BLANKET WAIVER OF SUBROGATION**

The following is added to Paragraph 8., **Transfer Of Rights Of Recovery Against Others To Us**, of **SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS**:

If the insured has agreed in a contract or agreement to waive that insured's right of recovery against any person or organization, we waive our right of recovery against such person or organization, but only for payments we make because of:

- a. "Bodily injury" or "property damage" that occurs;  
or
- b. "Personal and advertising injury" caused by an offense that is committed;

subsequent to the execution of the contract or agreement.

COMMERCIAL AUTO

Policy No. HOCAP-1J668701-COF-23

You agree to maintain all required or compulsory insurance in any such country up to the minimum limits required by local law. Your failure to comply with compulsory insurance requirements will not invalidate the coverage afforded by this policy, but we will only be liable to the same extent we would have been liable had you complied with the compulsory insurance requirements.

- (d) It is understood that we are not an admitted or authorized insurer outside the United States of America, its territories and possessions, Puerto Rico and Canada. We assume no responsibility for the furnishing of certificates of insurance, or for compliance in any way with the laws of other countries relating to insurance.

**G. WAIVER OF DEDUCTIBLE — GLASS**

The following is added to Paragraph D., **Deductible**, of **SECTION III — PHYSICAL DAMAGE COVERAGE**:

No deductible for a covered "auto" will apply to glass damage if the glass is repaired rather than replaced.

**H. HIRED AUTO PHYSICAL DAMAGE — LOSS OF USE — INCREASED LIMIT**

The following replaces the last sentence of Paragraph A.4.b., **Loss Of Use Expenses**, of **SECTION III — PHYSICAL DAMAGE COVERAGE**:

However, the most we will pay for any expenses for loss of use is \$65 per day, to a maximum of \$750 for any one "accident".

**I. PHYSICAL DAMAGE — TRANSPORTATION EXPENSES — INCREASED LIMIT**

The following replaces the first sentence in Paragraph A.4.a., **Transportation Expenses**, of **SECTION III — PHYSICAL DAMAGE COVERAGE**:

We will pay up to \$50 per day to a maximum of \$1,500 for temporary transportation expense incurred by you because of the total theft of a covered "auto" of the private passenger type.

**J. PERSONAL PROPERTY**

The following is added to Paragraph A.4., **Coverage Extensions**, of **SECTION III — PHYSICAL DAMAGE COVERAGE**:

**Personal Property**

We will pay up to \$400 for "loss" to wearing apparel and other personal property which is:

- (1) Owned by an "insured"; and

- (2) In or on your covered "auto".

This coverage applies only in the event of a total theft of your covered "auto".

No deductibles apply to this Personal Property coverage.

**K. AIRBAGS**

The following is added to Paragraph B.3., **Exclusions**, of **SECTION III — PHYSICAL DAMAGE COVERAGE**:

Exclusion 3.a. does not apply to "loss" to one or more airbags in a covered "auto" you own that inflate due to a cause other than a cause of "loss" set forth in Paragraphs A.1.b. and A.1.c., but only:

- a. If that "auto" is a covered "auto" for Comprehensive Coverage under this policy;
- b. The airbags are not covered under any warranty; and
- c. The airbags were not intentionally inflated.

We will pay up to a maximum of \$1,000 for any one "loss".

**L. NOTICE AND KNOWLEDGE OF ACCIDENT OR LOSS**

The following is added to Paragraph A.2.a., of **SECTION IV — BUSINESS AUTO CONDITIONS**:

Your duty to give us or our authorized representative prompt notice of the "accident" or "loss" applies only when the "accident" or "loss" is known to:

- (a) You (if you are an individual);
- (b) A partner (if you are a partnership);
- (c) A member (if you are a limited liability company);
- (d) An executive officer, director or insurance manager (if you are a corporation or other organization); or
- (e) Any "employee" authorized by you to give notice of the "accident" or "loss".

**M. BLANKET WAIVER OF SUBROGATION**

The following replaces Paragraph A.5., **Transfer Of Rights Of Recovery Against Others To Us**, of **SECTION IV — BUSINESS AUTO CONDITIONS**:

**5. Transfer Of Rights Of Recovery Against Others To Us**

We waive any right of recovery we may have against any person or organization to the extent required of you by a written contract signed and executed prior to any "accident" or "loss", provided that the "accident" or "loss"

COMMERCIAL AUTO

such contract. The waiver applies only to the person or organization designated in such contract.

**N. UNINTENTIONAL ERRORS OR OMISSIONS**

The following is added to Paragraph B.2., **Concealment, Misrepresentation, Or Fraud**, of **SECTION IV — BUSINESS AUTO CONDITIONS**:

The unintentional omission of, or unintentional error in, any information given by you shall not prejudice your rights under this insurance. However this provision does not affect our right to collect additional premium or exercise our right of cancellation or non-renewal.

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Lori A. Shibanette  
Commissioner

Henry D. Lipman  
Director

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF MEDICAID SERVICES

129 PLEASANT STREET, CONCORD, NH 03301  
603-271-9422 1-800-852-3345 Ext. 9422  
Fax: 603-271-8431 TDD Access: 1-800-735-2964  
www.dhhs.nh.gov

June 8, 2021

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Medicaid Services, to enter into a **Sole Source** amendment to an existing contract with NTT DATA State Health Consulting (VC#272035), Plano, Texas, to continue quality assurance services in compliance with the requirements of the Centers for Medicare & Medicaid Services (CMS), by increasing the price limitation by \$19,787,520 from \$41,915,761 to \$61,703,281 and by extending the completion date from June 30, 2021 to June 30, 2026, effective upon Governor and Council approval. 78% Federal Funds. 22% General Funds.

The original contract was approved by Governor and Council on December 1, 2004 (Late Item #E), and amended with Governor and Council approval on December 12, 2006 (Item #119A), December 11, 2007 (Item #60), December 18, 2008 (Item #57), June 23, 2010 (Item #95), April 18, 2012 (Item #57), January 16, 2013 (Item #17), August 14, 2013 (Item #32), March 26, 2014 (Item #25A), July 16, 2014 (Item #3), December 23, 2014 (Item #7), December 2, 2015 (Item #12), December 21, 2016 (Item #10), June 21, 2017 (Item # 6A), November 14, 2018 (Item #8), and June 19, 2019 (Item #12).

Funds are anticipated to be available in the following accounts for State Fiscal Years 2022 through 2026, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

**See attached fiscal details.**

**EXPLANATION**

The request is **Sole Source** because the Department is seeking to extend the contract beyond the completion date and there are no renewal options available. The Contractor provides Quality Assurance services as required by the Centers for Medicare and Medicaid Services for Medicaid Management Information System (MMIS) projects. The New Hampshire Medicaid Program is dependent upon the state staffing resources coupled with a strong partnership with the independent quality assurance partner, the Contractor, providing consistent resources that both have the understanding of the federal regulations and requirements for the system but also has seventeen years of experience supporting the State of New Hampshire's Medicaid systems. It would be cost prohibitive to train and acquire the combined 53 years of expertise the Contractor has supporting the quality assurance and project management strategies for the State's MMIS. This contract will ensure the continued successful processing of Medicaid claims as well as

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
Page 2 of 2

compliance with federal and state legislation regarding the Medicaid program. Additionally, this contract is required by the Center for Medicare and Medicaid Services to support a third party quality assurance review of changes and ongoing operations of the MMIS in order to obtain Federal Financial Participation (FFP). The Contractor has developed a detailed knowledge of both of these systems that are critical to the Department.

The purpose of this request is extend the current contract as the Contractor has been providing ongoing Quality Assurance Services over the MMIS since the onset of the original MMIS procurement project, initiated in State Fiscal Year 2004. Several of the projects on which the Contractor is working continue through State Fiscal Year 2026, with deliverables for the MMIS.

The Department will monitor contracted services by ensuring:

1. Extension of quality assurance and project management tasks supporting the New HEIGHTS eligibility system enhancements.
2. Extension of quality assurance oversight over MMIS changes including:
  - Monitoring project planning, project status, and risks;
  - Participating in requirements analysis, design, deliverable review, and implementation readiness; and
  - Executing system and regression testing to verify and validate that the changes work as required and produce timely, accurate, and reliable results.

Should the Governor and Council not authorize this request the Department would experience a gap in quality assurance service coverage. The Centers for Medicare and Medicaid Services requires quality assurance and independent verification and validation oversight over system implementation projects approved at an enhanced federal match rate, a determination to not approve this request may result in the loss of federal funding.

Area served: Statewide

Source of Funds: 78% Federal Funds. 22% General Funds

CFDA #93.778, FAIN 2105NH5ADM

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Lori A. Shibinette  
Commissioner

05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES

State Fiscal Year	Class / Account	Class Title	Job Number	Current Amount	Increase (Decrease)	Revised Amount
2005	102-500731	Contractors for Program Services	95440006	\$426,819	\$0	\$426,819
2006	102-500731	Contractors for Program Services	95440006	\$818,733	\$0	\$818,733
2007	102-500731	Contractors for Program Services	95440006	\$527,267	\$0	\$527,267
2008	102-500731	Contractors for Program Services	95440006	\$759,163	\$0	\$759,163
2009	102-500731	Contractors for Program Services	95440006	\$605,802	\$0	\$605,802
2010	102-500731	Contractors for Program Services	95440006	\$470,260	\$0	\$470,260
2011	102-500731	Contractors for Program Services	95440006	\$638,313	\$0	\$638,313
2012	102-500731	Contractors for Program Services	95440006	\$1,727,698	\$0	\$1,727,698
2013	102-500731	Contractors for Program Services	95440006	\$3,483,219	\$0	\$3,483,219
2014	102-500731	Contractors for Program Services	95440006	\$3,068,080	\$0	\$3,068,080
2015	102-500731	Contractors for Program Services	95440006	\$3,731,117	\$0	\$3,731,117
2016	102-500731	Contractors for Program Services	95440006	\$3,794,528	\$0	\$3,794,528
2017	102-500731	Contractors for Program Services	95440006	\$3,639,320	\$0	\$3,639,320
2018	102-500731	Contractors for Program Services	95440006	\$4,072,226	\$0	\$4,072,226
2019	102-500731	Contractors for Program Services	95440006	\$4,194,394	\$0	\$4,194,394
			Subtotal	\$31,956,939	\$0	\$31,956,939

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05-95-45-450030-2924 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: TRANSITIONAL ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION

State Fiscal Year	Class / Account	Class Title	Job Number	Current Amount	Increase (Decrease)	Revised Amount
2014	102-500731	Contractors for Program Services	45139030	\$374,720	\$0	\$374,720
2015	102-500731	Contractors for Program Services	45139030	\$358,080	\$0	\$358,080
2016	102-500731	Contractors for Program Services	45139030	\$253,600	\$0	\$253,600
2017	102-500731	Contractors for Program Services	45139030	\$183,582	\$0	\$183,582
			Subtotal	\$1,149,982	\$0	\$1,149,982

05-95-47-470010-8009 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF HHS: MEDICAID & BUS POLICY OFC, OFF. OF MEDICAID & BUS POLICY, MEDICAID MANAGEMENT INFORMATION SYSTEM

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increase (Decreased) Amount	Revised Budget
2020	102-500731	Contracts for Program Services	47007000	\$4,314,420	\$0	\$4,314,420
2021	102-500731	Contracts for Program Services	47007000	\$4,314,420	\$0	\$4,314,420
2022	102-500731	Contracts for Program Services	47007000	\$0	\$4,757,760	\$4,757,760
2023	102-500731	Contracts for Program Services	47007000	\$0	\$3,699,840	\$3,699,840
2024	102-500731	Contracts for Program Services	47007000	\$0	\$3,738,240	\$3,738,240
2025	102-500731	Contracts for Program Services	47007000	\$0	\$3,776,640	\$3,776,640
2026	102-500731	Contracts for Program Services	47007000	\$0	\$3,815,040	\$3,815,040
			Subtotal	\$8,628,840	\$19,787,520	\$28,416,360

05-95-47-470010-2358 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF HHS: MEDICAID & BUS POLICY OFC, OFF. OF MEDICAID & BUS POLICY, GRANITE ADVANTAGE HEALTH PROGRAM TRUST FUNDS

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increase (Decreased) Amount	Revised Budget
2020	102-500731	Contracts for Program Services	47007006	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Program Services	47007006	\$90,000	\$0	\$90,000
			Subtotal	\$180,000	\$0	\$180,000

\$41,915,761    \$19,787,520    \$61,703,281



**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF INFORMATION TECHNOLOGY**

27 Hazen Dr., Concord, NH 03301  
Fax: 603-271-1516 TDD Access: 1-800-735-2964  
[www.nh.gov/doi](http://www.nh.gov/doi)

**Denis Goulet**  
*Commissioner*

June 15, 2021

Lori A. Shibinette, Commissioner  
Department of Health and Human Services  
State of New Hampshire  
129 Pleasant Street  
Concord, NH 03301

Dear Commissioner Shibinette:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to amend a contract with NTT DATA State Health Consulting (VC#272035), Plano, Texas, as described below and referenced as DoIT No. 2005-002P (Amendment 16).

The purpose of this amendment is to extend the current contract for 5 years to continue to provide quality assurance services in compliance with the requirements of the Centers for Medicare & Medicaid Services (CMS) for Medicare and Medicaid Services for Medicaid Management Information System (MMIS) projects.

The funding amount for this amendment is \$19,787,520, increasing the current contract from \$41,915,761 to \$61,703,281 and by extending the completion date to June 30, 2026 from the original completion date of June 30, 2021. This amendment shall become effective upon the Governor and Executive Council approval through June 30, 2026.

A copy of this letter should accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Sincerely,

A handwritten signature in black ink, appearing to read "Denis Goulet".

Denis Goulet

DG/kaf  
DoIT #2005-002  
RID: N/A  
cc: Michael Williams, IT Manager, DoIT

**State of New Hampshire**  
**Department of Health and Human Services**  
**Amendment 16 to the NTT DATA State Health Consulting, LLC (Contract #2005-002)**

This 16th Amendment to the NTT DATA State Health Consulting, LLC (formerly Cognosante Consulting LLC, Cognosante, LLC, FOX Systems, LLC and FOX Systems, Inc.) Contract (hereinafter referred to as "Amendment 16") dated this 15 day of June 2021, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and NTT DATA State Health Consulting, LLC, (hereinafter referred to as "NTT DATA" or "the Contractor"), a limited liability company with a place of business at 7950 Legacy Drive, Suite 900, Plano, Texas, 75024.

Whereas FOX Systems, LLC, legally changed its legal name to Cognosante, LLC, effective August 4, 2011, Cognosante, LLC, assigned the Contract to Cognosante Consulting, LLC, effective April 1, 2016, and Cognosante Consulting, LLC, changed its legal name to NTT DATA State Health Consulting, LLC, all rights and obligations of the parties under the Contract referenced above are unaffected by the change in name, corporate structure or parent company.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on December 1, 2004 (Late Item #E) and as amended by Amendment 1 approved on December 12, 2006 (Item #119A), Amendment 2 approved on December 11, 2007 (Item #60), Amendment 3 approved on December 18, 2008 (Item #57), Amendment 4 approved on June 23, 2010 (Item #95), Amendment 5 approved on April 18, 2012 (Item #57), Amendment 6 approved on January 16, 2013 (Item #17), Amendment 7 approved on August 14, 2013 (Item #32), Amendment 8 approved on March 26, 2014 (Item #25A), Amendment 9 approved on July 16, 2014 (Item #3), Amendment 10 approved on December 23, 2014 (Item #7), Amendment 11 approved on December 2, 2015, Amendment 12 approved on December 21, 2016 (Item #10), Amendment 13 approved on June 21, 2017 (Item #6A), Amendment 14 approved on November 14, 2018 (Item #8), and Amendment 15 approved on June 19, 2019 (Item #12) the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules, and terms and conditions of the Contract; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

1. Except as specifically amended and modified by the terms and conditions in this Amendment 16, the obligations of the parties shall remain in full force and effect in accordance with the terms and conditions set forth in the Contract and all Exhibits, and Amendments 1 through 15, as referenced above.
2. The General Provisions Form P-37 is hereby amended as follows:
  - 2.1. Block 1.7, Completion Date, is amended to read: June 30, 2026
  - 2.2. Block 1.8, Price Limitation, is increased by \$19,787,520 from \$41,915,761 to \$61,703,281.
  - 2.3. Block 3.1, Effective Date, is amended by the addition of the following sentence:

Amendment 16 is effective on July 1, 2021, subject to Governor and Executive Council approval 

NTT DATA State Health Consulting, LLC  
Amendment 16  
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3. Modify the provisions of Exhibit A, Scope of Services, Section 4, PERIOD OF PERFORMANCE/TERMINATION to read:

4.1 PERIOD OF PERFORMANCE

4.1.1 The Contract Period September 1, 2004 through June 30, 2026, includes the option for early termination of the Contract for convenience and reduction in NTT DATA staff, both of which are exercisable at the sole discretion of the Commissioner of the Department of Health and Human Services at any time after June 30, 2021 after giving the Contractor thirty (30) days written notice.

4.1.2 The Contract shall only take effect after full execution of the parties and Governor and Executive Council approval. This Amendment 16 is effective on July 1, 2021 subject to Governor and Executive Council approval. It shall remain in effect through June 30, 2026, unless otherwise amended or terminated in accordance with the terms of the Contract

4. Modify Exhibit A Scope of Services, Section 7, Project Management, Subsection 7.2, Paragraph (a) by replacing in its entirety with:

- a The Contractor's key personnel shall be comprised of individuals identified in Table 7.2-1, Project Staff

**Table 7.2-1: Project Staff**

Name	Title
Ken Dybevik	Program Director/Client Executive
Tammy Damon	Project Manager
Thelma Malbroue	Senior Business Analyst
Tricia LaPlant	Senior Business Analyst
Margaret Patterson	Senior Testing Analyst
Sara Kondur	Senior Testing Analyst
Jacob Thomas	Senior Testing Analyst
Dinesh Manandhar	Senior Business Analyst
Pradyumna Kalita	Senior Testing Analyst
Vickie Gavin	Senior Business Analyst
Karen McCarthy	Senior Business Analyst
Jim Joyce	Technical Advisory Group (TAG)

5. Modify Exhibit A, Scope of Services, Section 12 Amendment 15 Table 12-1, QA Services Deliverables and Schedule, by replacing in its entirety in order to modify rows 3.20 and 3.21 with Amendment 16 Table 12-1:QA Services Deliverables and Schedule below:

**Amendment 16 Table 12-1: QA Services Deliverables and Schedule**

Project Monitoring - Produce and distribute deliverables including, but not limited to:		
1.1	Overall Finalized QA Plan	Completed
1.1.1	Review Sessions and Meetings: <ul style="list-style-type: none"> <li>Kickoff</li> <li>Weekly Status Meetings</li> <li>Other Meetings</li> </ul>	Five (5) business days after meeting. Weekly Status meeting
1.1.2	Publish session and meeting minutes and revised Project Plans	Five (5) business days after meeting

Amendment 16 NH MMIS QA  
NTT DATA State Health Consulting, LLC.

Contractor Initials: \_\_\_\_\_

Date: 6/15/2021

NTT DATA State Health Consulting, LLC  
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1.1.3	Produce monthly Project Status Reports	Tenth business day of the month.
1.1.4	Produce Monthly Project Risk Management Reports	Tenth business day of the month, beginning January 2, 2005
<b>3. DDI QA - Produce and distribute the deliverables</b>		
3.20	<p>Quality Assurance SIT and UAT – MMIS Enhancements and Medicaid Enterprise Systems</p> <p>Quality Assurance/Project Management tasks listed below will support communication and collaboration for Medicaid Enterprise System enhancements that include, but are not limited to MMIS, New HEIGHTS Integrated Eligibility, Pharmacy Benefit Management.</p> <ul style="list-style-type: none"> <li>• Quality assurance review of project requirements or vendor requirement documents</li> <li>• Review of vendor SDLC contract requirements for Medicaid Enhancement Systems system enhancements to identify gaps</li> <li>• Quality assurance review and validation of vendor estimates for Medicaid Enterprise System enhancements</li> <li>• Quality assurance review of vendor project status reports</li> <li>• Quality assurance review of system documentation</li> <li>• Review of vendor SDLC deliverables/artifacts for Medicaid Enterprise System enhancements</li> <li>• Provider Subject matter expertise</li> <li>• Performance of SIT and UAT tasks</li> <li>• Preparation of project meeting minutes</li> <li>• Other tasks as agreed during the contract period</li> </ul> <p>MMIS Enhancements for SFY 2022-2026 include but are not limited to:</p> <ul style="list-style-type: none"> <li>• Federal Reporting - Phase 2                             <ul style="list-style-type: none"> <li>○ #1 - 1116 Waiver: Delivery Systems Reform Incentive Payment (DSRIP) - Budget Neutrality</li> <li>○ #2 - 1115 Waiver: IMD SUDS Waiver</li> <li>○ #3 - 1115 Demo Waiver: Granite Advantage Waiver</li> <li>○ #4 - Reporting by accounting unit.</li> <li>○ #5 - SED/SME Program (Potentially a new 1115 waiver)</li> </ul> </li> <li>• Billing MCO Claims that the MCO Closed</li> <li>• TPL – Pharmacy Billing</li> <li>• SB684 - Mental Health Services in Schools</li> <li>• Patient Driven Payment Methodology (PDPM) &amp; Market Basket Inflation</li> <li>• SB14 - Families First Enhancement</li> <li>• Dental Encounters</li> <li>• MOMM Grant</li> <li>• HB 1600 Smoking Cessation</li> <li>• Electronic Visit Verification (EVV)</li> <li>• Critical Technical Stack Upgrade</li> <li>• Other post DDI Medicaid Enterprise System Enhancements as directed by the State or approved in APD's.</li> </ul>	Due dates to be mutually established based on MMIS enhancement project schedule
3.21	Testing Support for Medicaid Enterprise System enhancements – See above list under 3.20	Additional testing and support during UAT Phase and during post implementation Medicaid Enterprise System enhancements phases as assigned by State

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NTT DATA State Health Consulting, LLC  
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6. IES IV&V: Produce and distribute the deliverables		
6.1	Provide DHHS Project Management with monthly status reports clearly describing the state of the IV&V effort, and a monthly management report.	Completed
6.1.1	Risk Assessment and Identification: Review existing Risk Management Plan and Risk Report. Evaluate the identified risks and mitigation strategies, identify other risks and create a Risk Assessment Report to include any new recommendations for risk mitigation strategies.	Completed
6.1.2	IV&V Work Plan: Develop and maintain a work plan and schedule for all IV&V efforts.	Completed
6.1.3	Test Validation: Review and validate test results for mutually agreed-upon sub-projects within the DDI Contract to include at a minimum the FDSH Wave Testing with CMS.	Completed
6.1.4	CMS Gate Review Preparation and Response: Assist in the preparation for the various CMS Gate Reviews and participate in the Gate Review Meetings. This will consist of assistance with updating of the various artifacts already on file such as the Project Management Plan, Risk Management Plan, etc.	Completed
6.1.5	Quarterly Project Review: Schedule and participate in quarterly IV&V review meetings for the project. These are new meetings with the IV&V vendor and New HEIGHTS management; and provide the Quarterly IV&V Progress Report to CMS as required by the Medicaid Eligibility and Enrollment Toolkit (MEET)	Completed
6.1.6	Other Project Support: Due to the nature of the verification and validation services to be provided, other specific responsibilities and attendant deliverables may be required within the scope of these services and time availability of the 1 FTE to be provided.	Completed
6.2	Third Party IES Security Assessment Review and Report	Completed
6.3	Optional Testing	Removed
7	Additional Maintenance Testing	
7.1	Provide Medicaid Enterprise System maintenance testing services and related duties.	As mutually agreed as time permits within contract value

6. Exhibit B Methods and Conditions Precedent to Payment, B-1 Budget is amended to increase the Contract Price Limitation as specified in Form P-37, General Provisions, Block 1.8, Price Limitation.
7. The provisions relative to Exhibit B, Methods and Conditions Precedent to Payment, Funding of Contract, Paragraph C, as amended by Amendment 15 Section 8.1 are amended by replacing them with the following:
  - 7.1. Amendment 16 Funding of Contract, Paragraph C: The total amount of all payments made to the Contractor for costs and expenses incurred in the performance of the Medicaid Management Information System Quality Assurance services during the period September 1, 2004 through June 30, 2026, shall not exceed the Contract Price Limitation as specified in Form P-37, General Provisions, Block 1.8, Price Limitation in accordance with the project budget identified in Amendment 16 Exhibit B-1, Budget, as set forth in Section 11 of this Amendment 16. Notwithstanding anything in this Contract to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments under this Contract exceed the Contract Price Limitation as specified in Form P-37, General Provisions, Block 1.8, Price Limitation. The payment by the State of the Contract price shall be the only and the complete reimbursement to the Contractor for all fees and expenses, of whatever nature, incurred by the Contractor in performance hereof. In no event shall the State be liable for any payments hereunder in excess of appropriated or available funds. In the event of a reduction, termination, or modification of appropriated or available funds, the State shall have the right to withhold payment until such time funds become available, if ever. The State shall have the right to reduce, terminate or modify services under the Contract immediately upon giving the Contractor notice of such reduction, termination, or

NTT DATA State Health Consulting, LLC  
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modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in Block 1.6 of the General Provisions, Account Number, or any other account, in the event funds are reduced or unavailable.

Notwithstanding Paragraph 17 of Form P-37, General Provisions, an amendment limited to transferring funds between budgets and budget line items contained in Exhibit B Methods and Conditions Precedent to Payment, within the price limitation, can be made by written agreement of both parties and may be made without obtaining the approval of the Governor and Executive Council.

- 8. Modify Exhibit B, Methods & Conditions Precedent to Payment, Table B-1b: Budget by Phase to delete in its entirety with the Amendment 16 Table B-1b: *Budget by Phase* to read:

**Amendment 16 Table B-1b: Budget by Phase**

Project Phase	Budget
Project Monitoring	\$8,080,671
Pre-DDI QA	\$407,036
DDI Phase through 3/31/13	\$5,029,930
DDI Phase Post Go-Live	\$42,578,644
DDI Contingency	\$327,840
Post DDI	\$2,036,991
DDI 5010 QA	\$239,776
IES IV&V	\$3,002,393
<b>TOTAL:</b>	<b>\$61,703,281</b>

- 9. Modify Exhibit B, Methods & Conditions Precedent to Payment, Amendment 15 Table B-1c: *QA Services Staffing Levels* is replaced in its entirety with Amendment 16 Table B-1c: *QA Services Staffing Levels*. The Department may change the level of staffing support for QA Services 3.20, and 3.21, after giving thirty (30) days written notice to the Contractor.

**Amendment 16 Table B-1c: QA Services Staffing Levels**

Task	Staffing	SFY 2020	SFY 2021	SFY 2022	SFY 2023	SFY 2024	SFY 2025	SFY 2026
		Monthly Budget						
3.20 QA, SIT and UAT - MMIS and Enhancements	7	n/a	n/a	\$215,040	n/a	n/a	n/a	n/a
	6	n/a	n/a	\$184,320	n/a	n/a	n/a	n/a
	5	\$164,504	\$169,680	\$153,600	\$155,200	\$156,800	\$158,400	\$160,000
	4	\$131,603	\$135,744	\$122,880	\$124,160	\$125,440	\$126,720	\$128,000
	3	\$98,703	\$101,808	\$92,160	\$93,120	\$94,080	\$95,040	\$96,000
	2	\$65,802	\$67,872	\$61,440	\$62,080	\$62,720	\$63,360	\$64,000
	1	\$32,901	\$33,936	\$30,720	\$31,040	\$31,360	\$31,680	\$32,000
	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

NTT DATA State Health Consulting, LLC  
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3.21 Additional Testing Support	5	n/a	n/a	\$149,600	n/a	n/a	n/a	n/a
	4	\$128,578	\$132,384	\$119,680	\$120,960	\$122,240	\$123,520	\$124,800
	3	\$96,434	\$99,288	\$89,760	\$90,720	\$91,680	\$92,640	\$93,600
	2	\$64,289	\$66,192	\$59,840	\$60,480	\$61,120	\$61,760	\$62,400
	1	\$32,145	\$33,096	\$29,920	\$30,240	\$30,560	\$30,880	\$31,200
	0							

10. Modify Amendment 15 Exhibit B-1: Budget by replacing it in its entirety with the following Amendment 16 Exhibit B-1: Budget:

**Amendment 16 Exhibit B-1: Budget**

Phase Ref	Contract Task	Amend 15 Value	Amend 16 Value Change	Amend 16 Value
<b>Project Monitoring</b>				
1.1	Overall Finalized QA Plan	\$19,705	\$0	\$19,705
1.1.1	Review sessions and meetings, Kickoff, Weekly Status Meetings, Other Meetings	\$3,620,574	\$1,197,045	\$4,817,619
1.1.2	Publish session and meeting minutes and revised Project Plans	\$1,051,811	\$347,691	\$1,399,502
1.1.3	Produce Monthly Project Status Reports	\$412,707	\$187,810	\$600,517
1.1.4	Produce Monthly Project Risk Management Reports	\$464,155	\$216,255	\$680,410
1.2	Publish QA Work Plan and Schedule	\$223,099	\$0	\$223,099
1.3	Integrate QA Work Plan and Implementation Project Work Plan	\$142,089	\$0	\$142,089
1.4	Create Project Communication Plan	\$28,000	\$0	\$28,000
1.5	Create a Documentation plan for the Project	\$19,705	\$0	\$19,705
1.6	Create Paperwork and Electronic Media Control Procedures	\$14,705	\$0	\$14,705
1.7	DDI Deliverable Review and Approval Process	\$34,705	\$0	\$34,705
1.8	Establish process for review and approval of software development results	\$26,205	\$0	\$26,205

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NTT DATA State Health Consulting, LLC  
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Phase Ref	Contract Task	Amend 15 Value	Amend 16 Value Change	Amend 16 Value
1.9	Create Expenditure Control Plan	\$14,705	\$0	\$14,705
1.10	Create cost benefit methodology Plan	\$0	\$0	\$0
1.11	Implement Control Guidelines Plan	\$14,705	\$0	\$14,705
1.13	Establish a Project Scope Management and Change Control Plan	\$45,000	\$0	\$45,000
<b>Subtotal</b>		<b>\$6,131,870</b>	<b>\$1,948,801</b>	<b>\$8,080,671</b>
<b>Pre-DDI QA</b>				
<b>Subtotal</b>		<b>\$407,036</b>	<b>\$0</b>	<b>\$407,036</b>
<b>DDI QA</b>				
3.1	Report on Implementation Vendor Deliverables (see Exhibit B-1a)	\$1,324,789	\$0	\$1,324,789
3.2	Requirements Traceability Matrix Report	\$88,921	\$0	\$88,921
3.3	JAD session Report	\$72,222	\$0	\$72,222
3.4	Technical Review Report	\$92,052	\$0	\$92,052
3.5	QA Test Plan	\$68,839	\$0	\$68,839
3.6	Integration and System Testing Report	\$1,333,978	\$0	\$1,333,978
3.7	User Acceptance Test Cases and Scripts	\$387,521	\$0	\$387,521
3.8	User Acceptance Testing	\$545,981	\$0	\$545,981
3.9	Issues Tracking Report	\$0	\$0	\$0
3.10	User Acceptance Testing Report	\$109,289	\$0	\$109,289
3.13	Provider Readiness Report	\$46,458	\$0	\$46,458
3.14	Operational Readiness Report	\$40,678	\$0	\$40,678
3.15	Implementation Readiness Report	\$44,894	\$0	\$44,894
3.17	Implementation Close Out Report	\$85,830	\$0	\$85,830
3.18	Certification Traceability Matrix	\$102,816	\$0	\$102,816
3.19	Contingent Testing Support	\$314,496	\$0	\$314,496
3.20	QA/PM and SIT and UAT - MMIS and Other Medical System Enhancements	\$16,298,801	\$10,145,280	\$26,444,081

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Amendment 16 NH MMIS QA  
NTT DATA State Health Consulting, LLC.

Contractor Initials: \_\_\_\_\_  
Date: 6/15/2021

NTT DATA State Health Consulting, LLC  
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Phase Ref	Contract Task	Amend 15 Value	Amend 16 Value Change	Amend 16 Value
3.21	Testing Support for MMIS and other Medicaid Enterprise system enhancements	\$8,812,289	\$7,693,440	\$16,505,729
<b>Subtotal</b>		<b>\$29,769,854</b>	<b>\$17,838,720</b>	<b>\$ 47,608,574</b>
<b>DDI QA - Contingency Option</b>				
<b>Subtotal</b>	Amendment 6 Monthly Fixed Price Value (Supplements Tasks 1.x, 3.20, 3.21, 4.2, 4.6, 5.x)	<b>\$327,840</b>	<b>\$0</b>	<b>\$327,840</b>
<b>Post-DDI QA</b>				
<b>Subtotal</b>		<b>\$2,036,991</b>	<b>\$0</b>	<b>\$2,036,991</b>
<b>Amend 5 - 5010 QA</b>				
<b>Subtotal</b>		<b>\$239,776</b>	<b>\$0</b>	<b>\$239,776</b>
<b>IES IV&amp;V</b>				
6.1	Produce Monthly Project Status Reports	\$2,942,553	\$0	\$2,942,553
6.2	IES Security Plan Review	\$59,840	\$0	\$59,840
6.3	IES Tester(Optional)	\$0	\$0	\$0
<b>Subtotal</b>		<b>\$3,002,393</b>	<b>\$0</b>	<b>\$3,002,393</b>
<b>Additional Maintenance Testing</b>				
7.1	Provide Medicaid Enterprise System maintenance testing services and related duties.	\$0	\$0	\$0
<b>Subtotal</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Project Total</b>		<b>\$41,915,761</b>	<b>\$19,787,520</b>	<b>\$ 61,703,281</b>

Phase Reference 7.1: Mutually agreed upon cost determined between the Contractor and the State within contract value.

- 11. Modify Amendment 15 Exhibit B Table B-4 *Future IT Services* by replacing it in its entirety with Amendment 16 Exhibit B Table B-4 *Future IT Services* as follows:

**Amendment 16 Exhibit B Table B-4 Future IT Services**

Service Position Title	SFY 2021	SFY 2022	SFY 2023	SFY 2024	SFY 2025	SFY 2026

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Client Executive	\$246	\$234	\$236	\$238	\$240	\$242
Project Manager	\$209	\$199	\$201	\$203	\$205	\$207
Medicaid Policy Expert	\$196	\$186	\$188	\$190	\$192	\$194
Quality Assurance Lead	\$198	\$188	\$190	\$192	\$194	\$196
JAD Facilitator	\$211	\$200	\$202	\$204	\$206	\$208
Business Analyst	\$202	\$192	\$194	\$196	\$198	\$200
Test Analyst	\$192	\$182	\$184	\$186	\$188	\$190
Code Analyst	\$158	\$150	\$152	\$154	\$156	\$158
Senior Business Analyst	\$202	\$192	\$194	\$196	\$198	\$200
Senior Testing Analyst	\$197	\$187	\$189	\$191	\$193	\$195
Certification Specialist	\$208	\$198	\$200	\$202	\$204	\$206
TAG Member	\$231	\$219	\$221	\$223	\$225	\$227

NTT DATA State Health Consulting, LLC  
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All terms and conditions of the Contract and prior amendments not modified by this Amendment #16 remain in full force and effect. This Amendment shall be effective July 1, 2021, subject to Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below.

State of New Hampshire  
Department of Health and Human Services  
DocuSigned by:  
Henry D. Lipman 6/16/2021  
CPS0440417004E4... Date  
Henry Lipman  
Medicaid Director

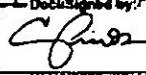
NTT DATA State Health Consulting, LLC,  
DocuSigned by:  
Jim Joyce 6/15/2021  
02330020EPZ1400... Date  
Jim Joyce  
Senior Vice President and General Manager  
NTT DATA State Health Consulting, LLC

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NTT DATA State Health Consulting, LLC  
Amendment 16  
Page 11 of 11

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

By:   
USCA12021023204AE...

Date: 6/16/2021

I hereby certify that the foregoing contract was approved by the Governor and Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_



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**STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF MEDICAID SERVICES**

Jeffrey A. Meyers  
Commissioner

Henry D. Lipman  
Director

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-9422 1-800-852-3345 Ext. 9422  
Fax: 603-271-84312 TDD Access: 1-800-735-2964  
www.dhhs.nh.gov

May 28, 2019

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Medicaid Services, to enter into a **sole source**, amendment (Amendment 15) to an existing contract (Purchase Order #1065275) with NTT DATA State Health Consulting, (Vendor #272035), formerly Cognosante Consulting, LLC, at 31587 Elwood Street, Phoenix, Arizona, 85034, for continuation of quality assurance services in compliance with the requirements of the Centers for Medicare and Medicaid Services (CMS), by increasing the price limitation by \$8,808,840 from \$33,106,921 to a new amount not to exceed \$41,915,761. This amendment will be effective on July 1, 2019, upon approval of the Governor and Executive Council, through June 30, 2021. 75% Federal Funds and 25% General Funds.

The original agreement was approved by Governor and Executive Council on December 1, 2004 (Late Item #E) and subsequently amended on December 12, 2006 (Item#119A), on December 11, 2007 (Item#60), on December 18, 2008 (Item #57), on June 23, 2010 (Item#95), on April 18, 2012 (Item#57), on January 16, 2013 (Item#17), on August 14, 2013 (Item#32), on March 26, 2014 (Item#25-A), on July 16, 2014 (Item#3), on December 23, 2014 (Item#7), on December 2, 2015 (Item#12), on December 21, 2016 (Item#10) and on June 21, 2017 (Item#6A) and on November 14, 2018 (Item#8).

Funds are anticipated to be available in SFY 2020 and SFY 2021 with the ability to adjust encumbrances between State Fiscal Years without further approval of the Governor and Executive Council through the Budget Office, if needed and justified.

**05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES**

<u>State Fiscal</u>			<u>Current</u>	<u>Increase/</u>	<u>Revised</u>
<u>Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Revised</u>
2005	102/500731	Contracts for Program Services	\$426,819	\$0	\$426,819
2006	102/500731	Contracts for Program Services	\$818,733	\$0	\$818,733
2007	102/500731	Contracts for Program Services	\$527,267	\$0	\$527,267
2008	102/500731	Contracts for Program Services	\$759,163	\$0	\$759,163
2009	102/500731	Contracts for Program Services	\$605,802	\$0	\$605,802

His Excellency, Governor Christopher T. Sununu  
And the Honorable Council

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<u>State Fiscal</u>			<u>Current</u>	<u>Increase/</u>	<u>Revised</u>
<u>Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Revised</u>
2010	102/500731	Contracts for Program Services	\$470,260	\$0	\$470,260
2011	102/500731	Contracts for Program Services	\$638,313	\$0	\$638,313
2012	102/500731	Contracts for Program Services	\$1,727,698	\$0	\$1,727,698
2013	102/500731	Contracts for Program Services	\$3,483,219	\$0	\$3,483,219
2014	102/500731	Contracts for Program Services	\$3,068,080	\$0	\$3,068,080
2015	102/500731	Contracts for Program Services	\$3,731,117	\$0	\$3,731,117
2016	102/500731	Contracts for Program Services	\$3,794,528	\$0	\$3,794,528
2017	102/500731	Contracts for Program Services	\$3,639,320	\$0	\$3,639,320
2018	102/500731	Contracts for Program Services	\$4,072,226	\$0	\$4,072,226
2019	102/500731	Contracts for Program Services	\$4,194,394	\$0	\$4,194,394
Sub-Total			\$31,956,939	\$0	\$31,956,939

**05-95-45-450030-2924 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: TRANSITIONAL ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION**

<u>State Fiscal</u>			<u>Current</u>	<u>Increase/</u>	<u>Revised</u>
<u>Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Revised</u>
2014	34/500099	Major IT Systems	\$374,720	\$0	\$374,720
2015	34/500099	Major IT Systems	\$358,080	\$0	\$358,080
2016	34/500099	Major IT Systems	\$253,600	\$0	\$253,600
2017	34/500099	Major IT Systems	\$163,582	\$0	\$163,582
Sub-Total			\$1,149,982	\$0	\$1,149,982

**05-95-47-470010-8009 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, DIVISION OF MEDICAID SERVICES, MEDICAID MANAGEMENT SYSTEM**

<u>State Fiscal</u>			<u>Current</u>	<u>Increase/</u>	<u>Revised</u>
<u>Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Revised</u>
2020	102/500731	Contracts for Program Services	\$0	\$4,314,420	\$4,314,420
2021	102/500731	Contracts for Program Services	\$0	\$4,314,420	\$4,314,420
Sub-Total			\$0	\$8,628,840	\$8,628,840

**05-95-47-470010-2358 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, OFFICE OF MEDICAID SERVICES, OFFICE OF MEDICAID SERVICES, NEW HAMPSHIRE GRANITE ADVANTAGE HEALTH CARE TRUST FUND**

<u>State Fiscal</u>			<u>Current</u>	<u>Increase/</u>	<u>Revised</u>
<u>Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Revised</u>
2020	102/500731	Contracts for Program Services	\$0	\$90,000	\$90,000
2021	102/500731	Contracts for Program Services	\$0	\$90,000	\$90,000
Sub-Total			\$0	\$180,000	\$180,000

<b>Total</b>			<b>\$33,106,921</b>	<b>\$8,808,840</b>	<b>\$41,915,761</b>
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His Excellency, Governor Christopher T. Sununu  
And the Honorable Council

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### **EXPLANATION**

This request is sole source due to the importance of extending services required to meet federal and state project timelines. Cognosante Consulting, LLC provides Quality Assurance services required by the Centers for Medicare and Medicaid Services for Medicaid Management Information System projects. Contract services are extended beyond the current expiration date of June 30, 2019 to June 30, 2021. The contract extension ensures the continuation of Quality Assurance Services for multiple projects. X

The Department has acquired approval from the federal Centers for Medicare and Medicaid Services (CMS) for funding at 75% federal financial participation (FFP) for the cost of major system changes to its eligibility determination system New HEIGHTS and to its Medicaid System MMIS. CMS requires that States acquire third party oversight through a quality assurance or independent validation and verification contractor to ensure that system projects progress according to plan, that the requirements and designs for system changes are well defined and documented, that project deliverables and system changes are verified and tested, and are delivered according to schedule, are accurate, and perform with reliability. CMS has approved funding for Quality Assurance at 75% FFP.

The quality assurance services included in this Amendment 15 are a continuation of the services procured under the original contract that was competitively bid. As required by CMS, Cognosante Consulting, LLC has been providing ongoing Quality Assurance Services over the MMIS since the onset of the original MMIS reprocurement project, initiated in State Fiscal Year 2004. Several of the projects on which the Contractor is working continue through State Fiscal Year 2021, with deliverables for both the New HEIGHTS Integrated Eligibility System and the MMIS.

The NH Medicaid Program and the automated systems that support it must be highly adaptable to keep pace with persistently evolving needs. System solutions are required to be implemented as rapidly as possible to deliver services sooner, to effectively manage costs, and to provide data for program analyses. The number of people served directly or indirectly under this Amendment includes over 180,000 NH Medicaid participants statewide receiving coverage under the Medicaid Care Management Program and Granite Advantage Programs. It also includes 90+ nursing home providers for whom nursing facility rates are calculated on the MMIS, and up to 30,000 other NH Medicaid providers who utilize the NH MMIS for member eligibility look-ups, access to correspondence and reports, and who rely on the MMIS for payment for services rendered to the Medicaid population.

With very little turnover in contractor staffing, Cognosante has developed an intricate knowledge of the NH MMIS and New HEIGHTS. Cognosante's experience with these DHHS systems enables quality assurance oversight over these changes to be initiated expeditiously and effectively, without the learning curve and ramp up time that would be required of a new vendor.

Cognosante is readily able to incorporate testing of new changes into regression and system integration testing, and will assist with early identification of issues and defects that need to be resolved to ensure a quality implementation. This work is performed for system enhancements that are funded by the CMS at an enhanced match rate and that require independent quality assurance oversight to comply with federal requirements.

This Amendment 15 will extend the Contractor's services for twenty-four (24) months through June 30, 2021 and in compliance with federal requirements will provide the following:

His Excellency, Governor Christopher T. Sununu  
And the Honorable Council  
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1. Extension of independent validation and verification supporting the New HEIGHTS eligibility system enhancements.
2. Extension of quality assurance oversight over MMIS system changes including:
  - a. Monitoring project planning, project status, and risks;
  - b. Participating in requirements analysis, design, deliverable review, and implementation readiness; and
  - c. Executing system and regression testing to verify and validate that the changes work as required and produce timely, accurate, and reliable results.

As the Department's MMIS reprocurement strategy becomes more clearly defined and requests for proposals are issued to acquire system solutions to address identified needs, the Department intends to competitively procure the services of an Independent verification and validation contractor, and to initiate a new procurement for Quality Assurance contractor services to provide federally required independent oversight, extensive system testing, and readiness preparation for system enhancements associated with the MMIS reprocurement.

Should the Governor and Executive Council determine to not approve this request, the Department of Health and Human Services would experience a gap in quality assurance service coverage. Implementation of critical system changes to the MMIS and New HEIGHTS Integrated Eligibility System would be at risk. Because the Centers for Medicare and Medicaid Services requires quality assurance and independent verification and validation oversight over system implementation projects approved at an enhanced federal match rate, a determination to not approve this request may result in the loss of federal funding.

Source of Funds: 75% Federal Funds, 25% General Funds. Catalog of Federal Domestic Assistance (CFDA): Number 93.778, U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services, Medicaid, Title XIX. Federal Award Identification Number (FAIN): 1905NH5ADM.

Area served: Statewide.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Jeffrey A. Meyers  
Commissioner



**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF INFORMATION TECHNOLOGY**

27 Hazen Dr., Concord, NH 03301  
Fax: 603-271-1516 TDD Access: 1-800-735-2964  
www.nh.gov/doi

**Denis Goulet**  
*Commissioner*

May 29, 2019

**Jeffrey A. Myers**  
Commissioner  
Department of Health and Human Services  
State of New Hampshire  
129 Pleasant Street  
Concord, NH 03301-3857

Dear Commissioner Meyers:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to amend a contract with Cognosante Consulting, LLC, of Falls Church, VA, 22042, as described below and referenced as DoIT No. 2005-0020 (Amendment 15).

The purpose of this sole source amendment is to extend the contract for continuation of quality assurance services for the New HEIGHTS and MMIS systems to maintain compliance with federal requirements as defined by the Centers for Medicare and Medicaid Services (CMS). This amendment will extend the contractors service for twenty four (24) months through June 30, 2021.

The funding amount for this amendment is \$8,808,840 increasing the current contract from \$33,106,921 to an amount not to exceed \$41,915,761; and shall become effective July 1, 2019 or upon the date of Governor and Executive Council approval, whichever is later, through June 30, 2021.

A copy of this letter should accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Sincerely,

Denis Goulet

DG/ik/ck  
2005-0020

cc: Bruce Smith, IT Manager

**State of New Hampshire**  
**Department of Health and Human Services**  
**Amendment 15 to the Cognosante Consulting, LLC (Contract #2005-002)**

This 15th Amendment to the Cognosante Consulting, LLC (formerly Cognosante, LLC, FOX Systems, LLC and FOX Systems, Inc.) Contract (hereinafter referred to as "Amendment 15") dated this 29 day of May 2019, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and NTT DATA State Health Consulting, LLC, (hereinafter referred to as "Cognosante" or "the Contractor"), a limited liability company with a place of business at 3157 Elwood Street, Phoenix, Arizona, 85034.

Whereas FOX Systems, LLC, legally changed its legal name to Cognosante, LLC, effective August 4, 2011, Cognosante, LLC, assigned the Contract to Cognosante Consulting, LLC, effective April 1, 2016, and Cognosante Consulting, LLC, changed its legal name to NTT DATA State Health Consulting, LLC, all rights and obligations of the parties under the Contract referenced above are unaffected by the change in name, corporate structure or parent company.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on December 1, 2004 (Late Item #E) and as amended by Amendment 1 approved on December 12, 2006 (Item # 119A), Amendment 2 approved on December 11, 2007 (Item #60), Amendment 3 approved on December 18, 2008 (Item #57), Amendment 4 approved on June 23, 2010 (Item #95), Amendment 5 approved on April 18, 2012 (Item #57), Amendment 6 approved on January 16, 2013 (Item #17), Amendment 7 approved on August 14, 2013 (Item #32), Amendment 8 approved on March 26, 2014 (Item #25A), Amendment 9 approved on July 16, 2014 (Item #3), Amendment 10 approved on December 23, 2014 (Item #7), Amendment 11 approved on December 2, 2015, Amendment 12 approved on December 21, 2016 (Item #10), Amendment 13 approved on June 21, 2017 (Item #6A), and Amendment 14 approved on November 21, 2018 (Item #8), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules, and terms and conditions of the Contract; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

1. Except as specifically amended and modified by the terms and conditions in this Amendment 15, the obligations of the parties shall remain in full force and effect in accordance with the terms and conditions set forth in the Contract and all Exhibits, and its Amendments, Amendment 1, Amendment 2, Amendment 3, Amendment 4, Amendment 5, Amendment 6, Amendment 7, Amendment 8, Amendment 9, Amendment 10, Amendment 11, Amendment 12, Amendment 13, and Amendment 14, as referenced above.
2. The General Provisions Form P-37 is hereby amended as follows:
  - 2.1. Block 1.3, Contractor Name, is amended to read: NTT Data State Health Consulting, LLC.
  - 2.2. Block 1.4, Contractor Address, is amended to read: 7950 Legacy Drive, Suite 900, Plano, Texas, 75024.
  - 2.3. Block 1.7, Completion Date, is amended to read: June 30, 2021.

Amendment15\_NH MMIS

Contractor Initials: 

Date: 5/29/2019

Cognosante Consulting, LLC  
 Amendment 15  
 Page 2 of 10

2.4. Block 1.8, Price Limitation, is increased by \$8,808,840, from \$33,106,921 to \$41,915,761.

2.5. Block 3.1, Effective Date, is amended by the addition of the following sentence:

Amendment 15 is effective on July 1, 2019, or the date of Governor and Executive Council approval, whichever is earlier.

3. The provisions of Exhibit A, Scope of Services, Section 4 (as amended by Amendment 14) are amended as follows: The Contract Period September 1, 2004 through June 30, 2021, includes the option for early termination of the Contract for convenience and reduction in Cognosante staff, both of which are exercisable at the sole discretion of the Commissioner of the Department of Health and Human Services at any time after June 30, 2019 after giving the Contractor thirty (30) days written notice.
4. The provisions of Exhibit A: Scope of Services, Section 4.1 Period of Performance, are amended as of the Effective Date as follows: The Contract shall only take effect after full execution of the parties and Governor and Executive Council approval. This Amendment 15 is effective on July 1, 2019 or the date of Governor and Executive Council approval, whichever is earlier. It shall remain in effect through June 30, 2021, unless otherwise amended or terminated in accordance with the terms of the Contract.
5. Exhibit B Methods and Conditions Precedent to Payment, B-1 Budget is amended to increase the Contract price by an amount not to exceed \$8,808,840 to a total Contract price not to exceed \$41,915,761.
6. Exhibit A Scope of Services, Amendment 14 Table 7.2.1: Project Staff, is deleted and replaced with the following Amendment 15 Table 7.2.1: Project Staff:

**Amendment 15 Table 7.2-1: Project Staff**

Name	Title
Ken Dybevik	Program Director/Client Executive
Tammy Damon	Project Manager
Thelma Malbroue	Senior Business Analyst
Tricia LaPlant	Senior Business Analyst
Margaret Patterson	Senior Testing Analyst
Sara Kondur	Senior Testing Analyst
Jacob Thomas	Senior Testing Analyst
Dinesh Manandhar	Senior Business Analyst
Pradyumna Kalita	Senior Testing Analyst
Vickie Gavin	Senior Business Analyst
Lisa Poullet	Senior Business Analyst
Loyd Kintz	Senior Business Analyst- IES IVV
Jim Joyce	Technical Advisory Group (TAG)

7. The provisions relative to Exhibit A, Scope of Services, Section 12 Amendment 14 Table 12-1, QA Services Deliverables and Schedule, are amended by modifying row 3.20 as stipulated in Amendment 15 Table 12-1:QA Services Deliverables and Schedule below:

Cognosante Consulting, LLC  
 Amendment 15  
 Page 3 of 10

**Amendment 15 Table 12-1: QA Services Deliverables and Schedule**

Number	Description	Date
<b>1. Project Monitoring – Produce and distribute deliverables including, but not limited to:</b>		
1.1	Overall Finalized QA Plan	Completed
1.1.1	Review Sessions and Meetings: <ul style="list-style-type: none"> <li>• Kickoff</li> <li>• Weekly Status Meetings</li> <li>• Other Meetings</li> </ul>	Five (5) business days after meeting. Weekly Status meeting
1.1.2	Publish session and meeting minutes and revised Project Plans	Five (5) business days after meeting
1.1.3	Produce monthly Project Status Reports	Fifth business day of the month.
1.1.4	Produce Monthly Project Risk Management Reports	Fifth business day of the month, beginning January 2, 2005
<b>3: DDI, QA – Produce and distribute the deliverables:</b>		
3.20	<p>Quality Assurance SIT and UAT – MMIS Enhancements Quality Assurance/Project Management tasks will support communication and collaboration for MMIS enhancement and may include the following as mutually agreed during the Contract:</p> <ul style="list-style-type: none"> <li>• Quality assurance review of project requirements or vendor requirement documents</li> <li>• Review of MMIS vendor SDLC contract requirements for system enhancements to identify gaps</li> <li>• Quality assurance review and validation of MMIS vendor estimates for MMIS system enhancements</li> <li>• Quality assurance review of vendor project status reports</li> <li>• Quality assurance review of system documentation</li> <li>• Review of MMIS vendor SDLC deliverables/artifacts for system enhancements</li> <li>• Provider Subject matter expertise</li> <li>• Performance of SIT and UAT tasks</li> <li>• Preparation of project meeting minutes</li> </ul> <p>MMIS Enhancements include but are not limited to:</p> <ul style="list-style-type: none"> <li>• New Medicare Card ID</li> <li>• Ordering, Referring and Prescribing (ORP) Provider Enrollment and Claims Editing</li> <li>• Managed Care Modifications</li> <li>• Managed Care Reprourement</li> <li>• Granite Advantage and Community Engagement</li> <li>• Waiver Service Authorization</li> <li>• Acuity Rate Setting Change of Ownership and Partial Year Cost Reporting</li> <li>• UPIC Data Exchange and Third-Party Liability Coverage</li> <li>• T-MSIS – Additional Data and Data Quality Issue Resolution</li> <li>• Qualified Health Plan (QHP) Encounter Data / Encounter Claims Analysis</li> <li>• Security Policy Page</li> <li>• Throll Access Manager (TAM) Upgrade to Security Access Manager (SAM)</li> <li>• Cognos Upgrade</li> <li>• Transformed Medicaid Statistical Information System</li> <li>• Provider Revalidation (PR)</li> <li>• Acuity Rate Setting/Resource Utilization Groups IV Enhancement</li> <li>• Acuity Rate Setting-Budget Adjustment Factor</li> <li>• Encounter and Fee for Service Claims Data Interface;</li> <li>• Granite Advantage Program: Newly Eligible/Not Newly Eligible Member;</li> </ul>	Due dates to be mutually established based on MMIS enhancement project schedule

Amendment 15 NH MMIS QA  
 Cognosante Consulting LLC.

Contractor Initials: JPI

Date: 5-29-2019

Cognosante Consulting, LLC  
 Amendment 15  
 Page 4 of 10

Number	Description	Date
	<ul style="list-style-type: none"> <li>Electronic Document Management System Technology Upgrade</li> <li>Project Support</li> <li>Other post ODI MMIS Enhancements as directed by the State or approved in APD's.</li> </ul>	
3.21	Testing Support for MMIS Enhancements – See above list under 3.20	Additional testing support during MMIS UAT Phase and during post implementation Enhancements Phase as assigned by State
<b>6. IES IVV Produce and distribute the deliverables</b>		
6.1	Provide DHHS Project Management with monthly status reports clearly describing the state of the IV&V effort, and a monthly management report.	Monthly – starting within 1 month of IV&V work starting
6.1.1	Risk Assessment and Identification: Review existing Risk Management Plan and Risk Report. Evaluate the identified risks and mitigation strategies, identify other risks and create a Risk Assessment Report to include any new recommendations for risk mitigation strategies.	Monthly - include in Monthly Project Status report
6.1.2	IV&V Work Plan: Develop and maintain a work plan and schedule for all IV&V efforts.	Within 1 month after the start-up phase of the IV&V services and updated as necessary
6.1.3	Test Validation: Review and validate test results for mutually agreed-upon sub-projects within the ODI Contract to include at a minimum the FDSH Wave Testing with CMS.	As agreed after start-up of the IV&V service
6.1.4	CMS Gate Review Preparation and Response: Assist in the preparation for the various CMS Gate Reviews and participate in the Gate Review Meetings. This will consist of assistance with updating of the various artifacts already on file such as the Project Management Plan; Risk Management Plan, etc.	Periodic as needed
6.1.5	Quarterly Project Review: Schedule and participate in quarterly IV&V review meetings for the project. These are new meetings with the IV&V vendor and New HEIGHTS management; and provide the Quarterly IV&V Progress Report to CMS as required by the Medicaid Eligibility and Enrollment Toolkit (MEET)	Quarterly as requested
6.1.6	Other Project Support: Due to the nature of the verification and validation services to be provided, other specific responsibilities and attendant deliverables may be required within the scope of these services and time availability of the 1 FTE to be provided.	As mutually agreed as time permits
6.2	Third Party IES Security Assessment Review and Report	Completed
6.3	Optional Testing	Removed
7	MMIS Maintenance Testing	
7.1	Provide Medicaid Management Information System maintenance testing services and related duties.	As mutually agreed as time permits within contract value

8. The provisions relative to Exhibit B, Methods and Conditions Precedent to Payment, Funding of Contract, Paragraph C, as amended by Amendment 14 Section 8.1 are amended by replacing them with the following:

8.1. Amendment 15 Funding of Contract, Paragraph C: The total amount of all payments made to the Contractor for costs and expenses incurred in the performance of the Medicaid Management Information System Quality Assurance services during the period September 1, 2004 through June 30, 2021, shall not exceed \$41,915,761 in accordance with the project budget identified in Amendment 15 Exhibit B-1, Budget, as set forth in Section 11 of this Amendment 15. Notwithstanding anything in this Contract to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments under this Contract exceed \$41,915,761. The payment by the State of the Contract price shall be the only and the complete reimbursement to the Contractor for all fees and expenses, of whatever nature, incurred by the Contractor in performance hereof. In no event shall the State be liable for any payments hereunder in excess of

Amendment 15 NH MMIS QA  
 Cognosante Consulting LLC.

Contractor Initials: JPS

Date: 5-29-2019

Cognosante Consulting, LLC  
Amendment 15  
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appropriated or available funds. In the event of a reduction, termination or modification of appropriated or available funds, the State shall have the right to withhold payment until such time funds become available, if ever. The State shall have the right to reduce, terminate or modify services under the Contract immediately upon giving the Contractor notice of such reduction, termination or modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in Block 1.6 of the General Provisions, Account Number, or any other account, in the event funds are reduced or unavailable.

Notwithstanding Paragraph 17 of Form P-37, General Provisions, an amendment limited to transferring funds between budgets and budget line items contained in Exhibit B Methods and Conditions Precedent to Payment, within the price limitation, can be made by written agreement of both parties and may be made without obtaining the approval of the Governor and Executive Council.

- 9. The provisions relative to Amendment 14 Exhibit B, Budget by Phase Table B-1b are amended by replacing them with the following Amendment 15 Table B-1b: *Budget by Phase*:

**Amendment 15 Table B-1b: *Budget by Phase***

Project Phase	Budget
Project Monitoring	\$6,131,871
Pre-DDI QA	\$407,036
DDI Phase through 3/31/13	\$5,029,930
DDI Phase Post Go-Live	\$24,739,924
DDI Contingency	\$327,840
Post DDI	\$2,036,991
DDI 5010 QA	\$239,776
IES IV&V	\$3,002,393
<b>TOTAL:</b>	<b>\$41,915,761</b>

- 10. The provisions relative to Amendment 14 Table B-1c: *QA Services Staffing Levels* are amended by replacing them with the following Amendment 15 Table B-1c: *QA Services Staffing Levels*. The Department may change the level of staffing support for QA Services 3.20, and 3.21, after giving thirty (30) days written notice to the Contractor.

Cognosante Consulting, LLC  
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**Amendment 15 Table B-1c: QA Services Staffing Levels**

Task	Staffing	Monthly Budget						
		SFY 2016	SFY 2017 7/1- 12/31	SFY 2017 1/1-6/30	SFY 2018	SFY 2019	SFY 2020	SFY 2021
3.20 Quality Assurance/PM and SIT and UAT - MMIS and Enhancements (Sr. Business Analysts)	6	\$175,392	\$180,654	n/a	n/a	n/a	n/a	n/a
	5	\$146,160	\$150,545	\$150,545	\$155,061	\$159,713	\$164,504	\$169,680
	4	\$116,928	\$120,436	\$120,436	\$124,049	\$127,770	\$131,603	\$135,744
	3	\$87,696	\$90,327	\$90,327	\$93,037	\$95,828	\$98,703	\$101,808
	2	\$58,464	\$60,218	\$60,218	\$62,024	\$63,885	\$65,802	\$67,872
	1	\$29,232	\$30,109	\$30,109	\$31,012	\$31,943	\$32,901	\$33,936
	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
3.21 Testing Optional Support	4	n/a	n/a	\$117,667	\$121,197	\$124,83	\$128,578	\$132,384
	3	\$87,696	\$90,327	\$88,250	\$90,898	\$93,625	\$96,434	\$99,288
	2	\$58,464	\$60,218	\$58,834	\$60,599	\$62,417	\$64,289	\$66,192
	1	\$29,232	\$30,109	\$29,417	\$30,299	\$31,208	\$32,145	\$33,096
	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

11. The provisions relative to Amendment 14 Exhibit B-1: *Budget* are amended by replacing them with the following Amendment 15 Exhibit B-1: *Budget*:

**Amendment 15 Exhibit B-1: Budget**

Phase Ref	Contract Task	Amend 14 Value	Amend 15 Value Change	Amend 15 Value
<b>Project Monitoring</b>				
1.1	Overall Finalized QA Plan	\$19,705	\$0	\$19,705
1.1.1	Review sessions and meetings, Kickoff, Weekly Status Meetings, Other Meetings	\$3,110,394	\$510,180	\$3,620,574
1.1.2	Publish session and meeting minutes and revised Project Plans	\$903,623	\$148,188	\$1,051,811
1.1.3	Produce Monthly Project Status Reports	\$332,655	\$80,052	\$412,707
1.1.4	Produce Monthly Project Risk Management Reports	\$337,531	\$126,624	\$464,155
1.2	Publish QA Work Plan and Schedule	\$223,099	\$0	\$223,099
1.3	Integrate QA Work Plan and Implementation Project Work Plan	\$142,089	\$0	\$142,089
1.4	Create Project Communication Plan	\$28,000	\$0	\$28,000
1.5	Create a Documentation plan for the Project	\$19,705	\$0	\$19,705
1.6	Create Paper Work and Electronic Media Control Procedures	\$14,705	\$0	\$14,705

Amendment 15 NH MMIS QA  
 Cognosante Consulting LLC.

Contractor Initials: *JPT*  
 Date: *5-29-2019*

Cognosante Consulting, LLC  
 Amendment 15  
 Page 7 of 10

Phase Ref	Contract Task	Amend 14 Value	Amend 15 Value Change	Amend 15 Value
1.7	DDI Deliverable Review and Approval Process	\$34,705	\$0	\$34,705
1.8	Establish process for review and approval of software development results	\$26,205	\$0	\$26,205
1.9	Create Expenditure Control Plan	\$14,705	\$0	\$14,705
1.1	Create cost benefit methodology Plan	\$0	\$0	\$0
1.11	Implement Control Guidelines Plan	\$14,705	\$0	\$14,705
1.13	Establish a Project Scope Management and Change Control Plan	\$45,000	\$0	\$45,000
Subtotal		\$5,266,827	\$865,044	\$6,131,870
Pre-DDI QA				
Subtotal		\$407,036	\$0	\$407,036
DDI QA				
3.1	Report on Implementation Vendor Deliverables (see Exhibit B-1a)	\$1,324,789	\$0	\$1,324,789
3.2	Requirements Traceability Matrix Report	\$88,921	\$0	\$88,921
3.3	IAD session Report	\$72,222	\$0	\$72,222
3.4	Technical Review Report	\$92,052	\$0	\$92,052
3.5	QA Test Plan	\$68,839	\$0	\$68,839
3.6	Integration and System Testing Report	\$1,333,978	\$0	\$1,333,978
3.7	User Acceptance Test Cases and Scripts	\$387,521	\$0	\$387,521
3.8	User Acceptance Testing	\$545,981	\$0	\$545,981
3.9	Issues Tracking Report	\$0	\$0	\$0
3.1	User Acceptance Testing Report	\$109,289	\$0	\$109,289
3.13	Provider Readiness Report	\$46,458	\$0	\$46,458
3.14	Operational Readiness Report	\$40,678	\$0	\$40,678
3.15	Implementation Readiness Report	\$44,894	\$0	\$44,894
3.17	Implementation Close Out Report	\$85,830	\$0	\$85,830
3.18	Certification Traceability Matrix	\$102,816	\$0	\$102,816
3.19	Contingent Testing Support	\$314,496	\$0	\$314,496
3.2	QA/PM and SIT and UAT - MMIS and Enhancements	\$12,288,593	\$4,010,208	\$16,298,801
3.21	Additional Testing Support	\$5,680,745	\$3,131,544	\$8,812,289
Subtotal		\$22,628,102	\$7,141,751	\$29,769,854
DDI QA - Contingency Option				

Cognosante Consulting, LLC  
 Amendment 15  
 Page 8 of 10

Phase Ref	Contract Task	Amend 14 Value	Amend 15 Value Change	Amend 15 Value
Subtotal	Amendment 6 Monthly Fixed Price Value (Supplements Tasks 1.x, 3.20, 3.21, 4.2, 4.6, 5.x)	\$327,840	\$0	\$327,840
Post-DDI QA				
Subtotal		\$2,036,991	\$0	\$2,036,991
Amend 5 - 5010 QA				
Subtotal		\$239,776	\$0	\$239,776
IES IV&V				
6.1	Produce Monthly Project Status Reports	\$2,140,509	\$802,044	\$2,942,553
6.2	IES Security Plan Review	\$59,840	\$0	\$59,840
6.3	IES Tester(Optional)	\$0	\$0	\$0
Subtotal		\$2,200,349	\$802,044	\$3,002,393
MMIS Maint Test				
7.1	Medicaid Management Information System maintenance testing.	\$0	\$0	\$0
Subtotal		\$0	\$0	\$0
Project Total		\$33,106,921	\$8,808,839	\$41,915,760

Phase Reference 7.1: Mutually agreed upon cost determined between the Contractor and the State within contract value.

12. The provisions relative to Amendment 14 Exhibit B Table B-4 *Future IT Services* are amended by replacing them with Amendment 15 Exhibit B Table B-4 *Future IT Services* as follows:

**Amendment 15 Exhibit B Table B-4 *Future IT Services***

Service Position Title	SFY 2018	SFY 2019	SFY 2020	SFY 2021
Client Executive	\$225	\$232	\$239	\$246
Project Manager	\$191	\$197	\$203	\$209
Medicaid Policy Expert	\$179	\$185	\$190	\$196
Quality Assurance Lead	\$181	\$187	\$192	\$198
JAD Facilitator	\$193	\$199	\$205	\$211
Business Analyst	\$185	\$190	\$196	\$202
Test Analyst	\$176	\$181	\$187	\$192
Code Analyst	\$144	\$149	\$153	\$158
Senior Business Analyst	\$185	\$190	\$196	\$202
Senior Testing Analyst	\$180	\$186	\$191	\$197
Certification Specialist	\$190	\$196	\$201	\$208
TAG Member	\$211	\$217	\$224	\$231

Amendment 15 NH MMIS QA  
 Cognosante Consulting LLC.

Contractor Initials: JPJ

Date: 5-29-2019

Cognosante Consulting, LLC  
Amendment 15  
Page 9 of 10

IN WITNESS WHEREOF, the parties have set their hands as of the date written below.

State of New Hampshire  
Department of Health and Human Services

*Jeffrey A. Meyers*      5/31/19  
Jeffrey A. Meyers      Date  
Commissioner

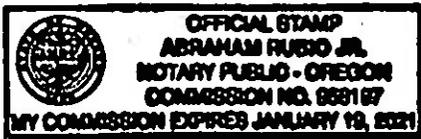
NTT DATA State Health Consulting, LLC, formerly known as  
Cognosante Consulting, LLC

*Jim Joyce*      5-29-2019  
Jim Joyce      Date  
Senior Vice President

STATE OF Oregon  
COUNTY OF Multnomah

On this, the    day of May 2019, before me, Abraham Rubio Jr the undersigned officer,  
personally appeared Jim Joyce who acknowledged himself/herself to be the  
Senior Vice President of NTT DATA State Health  
Consulting, LLC, formerly Cognosante Consulting, LLC and that he/she, as such Senior Vice President being  
authorized to do so, executed the foregoing instrument for the purposes therein contained, by signing the name of  
the corporation by himself/herself as Senior Vice President

IN WITNESS WHEREOF, I hereunto set my hand and official seal.



*Abraham Rubio Jr*  
Notary Public/Justice of the Peace  
My commission expires: January 19, 2021

Cognosante Consulting, LLC  
Amendment 15  
Page 10 of 10

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

By: 

Date: 6/4/2019

I hereby certify that the foregoing contract was approved by the Governor and Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

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STATE OF NEW HAMPSHIRE  
 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 BUREAU OF INFORMATION SERVICES

Jeffrey A. Meyers  
 Commissioner

David E. Officers  
 Director

129 PLEASANT STREET, CONCORD, NH 03301-3857  
 603-271-9404 1-800-852-3345 Ext. 9404  
 Fax: 603-271-4912 TOD Access: 1-800-735-2964  
 www.dhhs.nh.gov

September 24, 2018

His Excellency, Governor Christopher T. Sununu  
 and the Honorable Council  
 State House  
 Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Bureau of Information Services, to enter into a retroactive, sole source, amendment (Amendment 14) to an existing contract (Purchase Order #1049339) with Cognosante Consulting, LLC (Vendor #272035) at 3100 Fairview Park Drive, Suite 800, Falls Church, VA 22042, for continuation of quality assurance services in compliance with the requirements of the Centers for Medicare and Medicaid Services (CMS), by increasing the price limitation by \$3,145,795 from \$29,961,126 to a new amount not to exceed \$33,106,921, and extending the end date from September 30, 2018 to June 30, 2019. This amendment will be retroactive to October 1, 2018, effective upon approval of the Governor and Executive Council, through June 30, 2019. 75% Federal Funds and 25% General Funds.

The original agreement was approved by Governor and Executive Council on December 1, 2004 (Late Item #E) and subsequently amended on December 12, 2006 (Item#119A), on December 11, 2007 (Item#60), on December 18, 2008 (Item #57), on June 23, 2010 (Item#95), on April 18, 2012 (Item#57), on January 16, 2013 (Item#17), on August 14, 2013 (Item#32), on March 26, 2014 (Item#25-A), on July 16, 2014 (Item#3), on December 23, 2014 (Item#7), on December 2, 2015 (Item#12), on December 21, 2016 (Item#10) and on June 21, 2017 (Item#6A).

Funds are available in the following accounts in SFY 2019 with the ability to adjust encumbrances between State Fiscal Years without further approval of the Governor and Executive Council through the Budget Office, if needed and justified.

05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES

<u>State Fiscal</u>			<u>Current</u>	<u>Increase/</u>	<u>Revised</u>
<u>Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Budget</u>
2005	102/500731	Contracts for Program Services	\$426,819	\$0	\$426,819
2006	102/500731	Contracts for Program Services	\$818,733	\$0	\$818,733

His Excellency, Governor Christopher T. Sununu  
 And the Honorable Council  
 September 10, 2018  
 Page 2

<u>State Fiscal</u>			<u>Current</u>	<u>Increase/</u>	<u>Revised</u>
<u>Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Budget</u>
2007	102/500731	Contracts for Program Services	\$527,267	\$0	\$527,267
2008	102/500731	Contracts for Program Services	\$759,163	\$0	\$759,163
2009	102/500731	Contracts for Program Services	\$605,802	\$0	\$605,802
2010	102/500731	Contracts for Program Services	\$470,260	\$0	\$470,260
2011	102/500731	Contracts for Program Services	\$638,313	\$0	\$638,313
2012	102/500731	Contracts for Program Services	\$1,727,698	\$0	\$1,727,698
2013	102/500731	Contracts for Program Services	\$3,483,219	\$0	\$3,483,219
2014	102/500731	Contracts for Program Services	\$3,068,080	\$0	\$3,068,080
2015	102/500731	Contracts for Program Services	\$3,731,117	\$0	\$3,731,117
2016	102/500731	Contracts for Program Services	\$3,794,528	\$0	\$3,794,528
2017	102/500731	Contracts for Program Services	\$3,639,320	\$0	\$3,639,320
2018	102/500731	Contracts for Program Services	\$4,072,226	\$0	\$4,072,226
2019	102/500731	Contracts for Program Services	\$1,048,599	\$3,145,795	\$4,194,394
<b>Sub Total</b>			<b>\$28,811,144</b>	<b>\$3,145,795</b>	<b>\$31,956,939</b>

**05-95-45-450030-2924 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: TRANSITIONAL ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION**

<u>State Fiscal</u>			<u>Current</u>	<u>Increase/</u>	<u>Revised</u>
<u>Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Budget</u>
2014	34/500099	Major IT Systems	\$374,720	\$0	\$374,720
2015	34/500099	Major IT Systems	\$358,080	\$0	\$358,080
2016	34/500099	Major IT Systems	\$253,600	\$0	\$253,600
2017	34/500099	Major IT Systems	\$163,582	\$0	\$163,582
<b>Sub Total</b>			<b>\$1,149,982</b>	<b>\$0</b>	<b>\$1,149,982</b>
<b>Total</b>			<b>\$29,961,126</b>	<b>\$3,145,795</b>	<b>\$33,106,921</b>

**EXPLANATION**

This request is retroactive because funding for Amendment 14 was identified by the Department of Health and Human Services after the deadline for approval by the Governor and Council before the current Contract Completion Date of September 30, 2018. The request to transfer surplus general funds in another appropriation and to accept additional federal funds is pending Fiscal Committee approval. Retroactive approval to October 1, 2018 will allow for un-interrupted quality assurance oversight over the New HEIGHTS and Medicaid Management Information System (MMIS) as required by the Centers for Medicare and Medicaid Services.

This request is sole source due to the importance of extending the services acquired under this contract beyond the current expiration date of September 30, 2018 for an additional nine months through to June 30, 2019, to allow for the continuance of quality assurance work in progress.

His Excellency, Governor Christopher T. Sununu

And the Honorable Council

September 10, 2018

Page 3

The Department has acquired approval from the federal Centers for Medicare and Medicaid Services (CMS) for funding at 90% federal financial participation (ffp) for the cost of major system changes to its eligibility determination system New HEIGHTS and to its Medicaid System MMIS. CMS requires that States acquire third party oversight through a quality assurance or independent validation and verification contractor to ensure that system projects progress according to plan, that the requirements and designs for system changes are well defined and documented, that project deliverables and system changes are verified and tested, and are delivered according to schedule, are accurate, and perform with reliability. CMS has approved funding for Quality Assurance at 90% FFP.

The quality assurance services included in this Amendment 14 are a continuation of the services procured under the original contract that was competitively bid. As required by CMS, Cognosante Consulting, LLC has been providing ongoing Quality Assurance Services over the MMIS since the onset of the original MMIS procurement project, initiated in State Fiscal Year 2004. Several of the projects on which the Contractor is working continue through State Fiscal Year 2019, with deliverables for both the New HEIGHTS Integrated Eligibility System and the MMIS.

The NH Medicaid Program and the automated systems that support it must be highly adaptable to keep pace with persistently evolving needs. System solutions are required to be implemented as rapidly as possible to deliver services sooner, to effectively manage costs, and to provide data for program analyses.

With very little turnover in contractor staffing, Cognosante has developed an intricate knowledge of the NH MMIS and New HEIGHTS. Cognosante's experience with these DHHS systems enables quality assurance oversight over these changes to be initiated expeditiously and effectively, without the learning curve and ramp up time that would be required of a new vendor.

Cognosante is readily able to incorporate testing of new changes into regression and system integration testing, and will assist with early identification of issues and defects that need to be resolved to ensure a quality implementation. This work is performed for system enhancements that are funded by the CMS at an enhanced match rate and that require independent quality assurance oversight to comply with federal requirements.

This Amendment 14 will extend the contractor's services for nine (9) months through June 30, 2019 and in compliance with federal requirements will provide the following:

1. Extension of independent validation and verification supporting the New HEIGHTS eligibility system enhancements.
2. Extension of quality assurance oversight over MMIS system changes including:
  - a. Monitoring project planning, project status, and risks;
  - b. Participating in requirements analysis, design, deliverable review, and implementation readiness; and
  - c. Executing system and regression testing to verify and validate that the changes work as required and produce timely, accurate, and reliable results.

The Department has acquired the services of a consultant BerryDunn to help assess the existing MMIS and fiscal agent operations, to understand areas needing to be improved, what works well, what new system capabilities are needed to fully meet the needs of the Medicaid Program, and what technical advancements should be considered to enhance flexibility, processing efficiencies, data storage, and security. As the Department's MMIS procurement strategy becomes more clearly defined and requests for proposals are issued to acquire system solutions to address identified needs, the Department intends to competitively procure the services of an Independent verification and validation contractor, and to initiate a new procurement for Quality Assurance contractor services to

His Excellency, Governor Christopher T. Sununu  
And the Honorable Council  
September 10, 2018  
Page 4

provide federally required independent oversight, extensive system testing, and readiness preparation for system enhancements associated with the MMIS procurement.

Should the Governor and Executive Council determine to not approve this request, the Department of Health and Human Services would experience a gap in quality assurance service coverage. Implementation of critical system changes to the MMIS and New HEIGHTS Integrated Eligibility System would be at risk. Because the Centers for Medicare and Medicaid Services requires quality assurance and independent verification and validation oversight over system implementation projects approved at an enhanced federal match rate, a determination to not approve this request may result in the loss of federal funding.

Source of Funds: 75% Federal Funds, 25% General Funds.

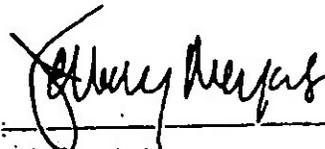
Area served: Statewide.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



David E. Wieters  
Director



Approved by:

Jeffrey A. Meyers  
Commissioner



**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF INFORMATION TECHNOLOGY**  
27 Hazen Dr., Concord, NH 03301  
Fax: 603-271-1516 TDD Access: 1-800-735-2964  
[www.nh.gov/doit](http://www.nh.gov/doit)

Denis Goulet  
Commissioner

October 11, 2018

Jeffrey A. Myers  
Commissioner  
Department of Health and Human Services  
State of New Hampshire  
129 Pleasant Street  
Concord, NH 03301-3857

Dear Commissioner Meyers:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to amend a contract with Cognosante Consulting, LLC., at 3100 Fairview Park Drive, Suite 800, Falls Church, VA, 22042, as described below and referenced as DoIT No. 2005-002N (Amendment 14).

The purpose of this sole source amendment N is to extend the Cognosante Consulting, LLC (Vendor #272035) contract for continuation of quality assurance staff to support the New HEIGHTS eligibility system enhancements to maintain compliance with federal requirements and to test the Medicaid Management Information System enhancements. These enhancements are funded by the Centers for Medicare and Medicaid Services at a 90 percent match rate, and therefore require independent quality assurance oversight to comply with federal requirements.

The funding amount for this amendment is \$3,145,795 increasing the current contract from \$29,961,126 to \$33,106,921. This amendment will be retroactive to October 1, 2018, effective upon Governor and Council approval through June 30, 2019.

A copy of this letter should accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Sincerely,

A handwritten signature in black ink, appearing to read "Denis Goulet", with a long horizontal flourish extending to the right.

Denis Goulet

DG/ik/ck  
2005-002N

cc: Bruce Smith, IT Manager

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new



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF INFORMATION SERVICES

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-8160 1-800-852-3346 Ext. 8160  
Fax: 271-4912 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

Jeffrey A. Meyers  
Commissioner

Donna M. O'Leary  
Chief Information  
Officer

May 30, 2017

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Office of Information Services, to enter into a sole source, amendment (Amendment 13) to an existing contract (Purchase Order #1049339) with Cognosante Consulting, LLC (Vendor #272035) at 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250 for continuation of quality assurance services in compliance with the requirements of the Centers for Medicare and Medicaid Services (CMS) by increasing the price limitation by \$5,120,825 from \$24,840,301 to a new amount not to exceed \$29,961,126. This amendment will be effective upon the approval of the Governor and Executive Council through September 30, 2018. The source of funds is 90% Federal Funds and 10% General Funds.

The agreement was originally approved by Governor and Executive Council on December 1, 2004 (Late Item #E) and subsequently amended on December 12, 2006 (Item#119A), on December 11, 2007 (Item#60), on December 18, 2008 (Item#57), on June 23, 2010 (Item#95), on April 18, 2012 (Item#57), on January 16, 2013 (Item#17), on August 14, 2013 (Item#32), on March 26, 2014 (Item#25-A), on July 16, 2014 (Item#3), on December 23, 2014 (Item#7), on December 2, 2015 (Item#12), and on December 21, 2016 (Item#10).

Funds are available in the following accounts in SFY 2017 and are anticipated to be available in SFY 2018 and SFY 2019 upon the availability and continued appropriation of funds in the future operating budget with the ability to adjust encumbrances between State Fiscal Years without further approval of the Governor and Executive Council through the Budget Office, if needed and justified.

**05-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES**

State			Current	Increase/	Revised
Fiscal Year	Class/Object	Class Title	Budget	(Decrease)	Budget
2005	102/500731	Contracts for Program Services	\$426,819	\$0	\$426,819
2006	102/500731	Contracts for Program Services	\$818,733	\$0	\$818,733

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
Page 2

State Fiscal Year	Class/Object	Class Title	Current Budget	Increase/ (Decrease)	Revised Budget
2007	102/500731	Contracts for Program Services	\$527,267	\$0	\$527,267
2008	102/500731	Contracts for Program Services	\$759,163	\$0	\$759,163
2009	102/500731	Contracts for Program Services	\$605,802	\$0	\$605,802
2010	102/500731	Contracts for Program Services	\$470,260	\$0	\$470,260
2011	102/500731	Contracts for Program Services	\$638,313	\$0	\$638,313
2012	102/500731	Contracts for Program Services	\$1,727,698	\$0	\$1,727,698
2013	102/500731	Contracts for Program Services	\$3,483,219	\$0	\$3,483,219
2014	102/500731	Contracts for Program Services	\$3,068,080	\$0	\$3,068,080
2015	102/500731	Contracts for Program Services	\$3,731,117	\$0	\$3,731,117
2016	102/500731	Contracts for Program Services	\$3,794,528	\$0	\$3,794,528
2017	102/500731	Contracts for Program Services	\$3,639,320	\$0	\$3,639,320
2018	102/500731	Contracts for Program Services	\$0	\$4,072,226	\$4,072,226
2019	102/500731	Contracts for Program Services	\$0	\$1,048,599	\$1,048,599
<b>Sub Total</b>			<b>\$23,690,319</b>	<b>\$5,120,825</b>	<b>\$28,811,144</b>

**05-95-45-450030-2924 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: TRANSITIONAL ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION**

State Fiscal Year	Class/Object	Class Title	Current Budget	Increase/ (Decrease)	Revised Budget
2014	34/500099	Major IT Systems	\$374,720	\$0	\$374,720
2015	34/500099	Major IT Systems	\$358,080	\$0	\$358,080
2016	34/500099	Major IT Systems	\$253,600	\$0	\$253,600
2017	34/500099	Major IT Systems	\$163,582	\$0	\$163,582
<b>Sub Total</b>			<b>\$1,149,982</b>	<b>\$0</b>	<b>\$1,149,982</b>
<b>Total</b>			<b>\$24,840,301</b>	<b>\$5,120,825</b>	<b>\$29,961,126</b>

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
Page 3

### EXPLANATION

This request is sole source due to the importance of continuing the services obtained under this contract, which is scheduled to expire on September 30, 2018. Several of the projects on which the Contractor has been working continue through State Fiscal Years 2018 and 2019, with deliverables for both the New HEIGHTS Integrated Eligibility System and the Medicaid Management Information System. Given the rapid pace of program and system changes over the past year and understanding the new CMS Independent Verification and Validation (IV&V) requirements that were published in August 2016, there has not been time to initiate a competitive procurement which was our intention after Amendment 12. However, the quality assurance services included in this amendment are a continuation of the services procured under the original contract that was competitively bid. Cognosante Consulting, LLC has been providing ongoing Quality Assurance Services for the Medicaid Management Information System starting in State Fiscal Year 2004 as required by the Centers for Medicare and Medicaid Services (CMS). CMS has allowed time for states to align existing contracts

and projects to the new IV&V guidelines and this final amendment will allow for adequate time to prepare and execute a request for proposals and new contract for IV&V and Quality Assurance services to take effect on October 1, 2018.

This Amendment 13 will extend the contractor's services for fifteen (15) months through September 30, 2018 and will provide the following services:

- Extension of quality assurance staff supporting the New HEIGHTS eligibility system enhancements in compliance with federal requirements.
- Extension of quality assurance staff to test Medicaid Management Information System enhancements that are funded by the Centers for Medicare and Medicaid Services at a 90 percent match rate, and therefore require independent quality assurance oversight to comply with federal requirements.

The contractor has developed a detailed knowledge of both of these systems that are critical to the Department. With this understanding, it is able to execute its oversight, testing, and quality assurance role effectively and efficiently, thereby facilitating the Department's ability to implement quality system solutions as expeditiously as possible.

Should the Governor and Executive Council determine to not approve this Request, the Department of Health and Human Services would experience a gap in quality assurance services and increased risk to critical enhancements to the Medicaid Management Information System and New HEIGHTS Integrated Eligibility System. Because the Centers for Medicare and Medicaid Services requires a quality assurance vendor, a determination to not approve this Request may result in the loss of federal funding.

Source of Funds: 90% federal funds, 10% general funds.

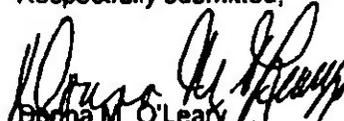
Area served: Statewide.

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council

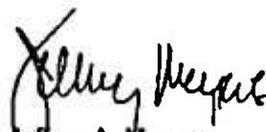
Page 4

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,

  
Donna M. O'Leary  
Chief Information Officer

Approved by:

  
Jeffrey A. Meyers  
Commissioner

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STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF INFORMATION SERVICES

129 PLEASANT STREET, CONCORD, NH 03301-3867  
603-271-8180 1-800-862-3345 Ext. 8160  
Fax: 271-4912 TDD Access: 1-800-735-2964 www.dhha.nh.gov

Jeffrey A. Meyers  
Commissioner

Doona M. O'Leary  
Chief Information  
Officer

12/21/16 #10

November 18, 2016

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Office of Information Services, to enter into a sole source, amendment (Amendment 12) to an existing contract (Purchase Order #1049339) with Cognosante Consulting, LLC (Vendor #272035) at 8200 Greensboro Drive, Suite 1200, McLean, Virginia, 22102 for continuation of quality assurance services in compliance with the requirements of the Centers for Medicare and Medicaid Services (CMS) by increasing the price limitation by \$1,694,582 from \$23,145,719 to a new amount not to exceed \$24,840,301. This amendment will be effective upon the approval of the Governor and Executive Council through June 30, 2017. The source of funds for the increase is 90% Federal Funds and 10% General Funds.

The Governor and Executive Council approved the original contract on December 1, 2004 (Late Item #E), Amendment 1 on December 12, 2006 (Item#119A), Amendment 2 on December 11, 2007 (Item#60), Amendment 3 on December 18, 2008 (Item#57), Amendment 4 on June 23, 2010 (Item#95), Amendment 5 on April 18, 2012 (Item#57), Amendment 6 on January 16, 2013 (Item#17), Amendment 7 on August 14, 2013 (Item#32), Amendment 8 on March 26, 2014 (Item#25-A), Amendment 9 on July 16, 2014 (Item#3), Amendment 10 on December 23, 2014 (Item#7) and Amendment 11 on December 2, 2015 (Item#12).

Funds are available in the following accounts in SFY 2017:

05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES

State Fiscal Year	Class/Object	Class Title	Current Budget	Increase/ (Decrease)	Revised Budget
2005	102/500731	Contracts for Program Services	\$426,819	\$0	\$426,819
2006	102/500731	Contracts for Program Services	\$818,733	\$0	\$818,733
2007	102/500731	Contracts for Program Services	\$527,267	\$0	\$527,267
2008	102/500731	Contracts for Program Services	\$759,163	\$0	\$759,163
2009	102/500731	Contracts for Program Services	\$605,802	\$0	\$605,802
2010	102/500731	Contracts for Program Services	\$470,260	\$0	\$470,260

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
November 18, 2016  
Page 2

State			Current	Increase/	Revised
<u>Fiscal Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Budget</u>
2011	102/500731	Contracts for Program Services	\$638,313	\$0	\$638,313
2012	102/500731	Contracts for Program Services	\$1,727,698	\$0	\$1,727,698
2013	102/500731	Contracts for Program Services	\$3,483,219	\$0	\$3,483,219
2014	102/500731	Contracts for Program Services	\$3,068,080	\$0	\$3,068,080
2015	102/500731	Contracts for Program Services	\$3,731,117	\$0	\$3,731,117
2016	102/500731	Contracts for Program Services	\$3,794,528	\$0	\$3,794,528
2017	102/500731	Contracts for Program Services	\$2,108,320	\$1,531,000	\$3,639,320
<b>Sub Total</b>			<b>\$22,159,319</b>	<b>\$1,531,000</b>	<b>\$23,690,319</b>

**05-95-45-450030-2924 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: TRANSITIONAL ASSISTANCE, DIVISION OF FAMILY ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION**

State			Current	Increase/	Revised
<u>Fiscal Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Budget</u>
2014	34/500099	Major IT Systems	\$374,720	\$0	\$374,720
2015	34/500099	Major IT Systems	\$358,080	\$0	\$358,080
2016	34/500099	Major IT Systems	\$253,600		\$253,600
2017	34/500099	Major IT Systems	\$0	\$163,582	\$163,582
<b>Sub Total</b>			<b>\$986,400</b>	<b>\$163,582</b>	<b>\$1,149,982</b>

**Total** **\$23,145,719** **\$1,694,582** **\$24,840,301**

**EXPLANATION**

This amendment is identified as sole source given the importance of continuing the Quality Assurance Services provided by the present contractor, Cognosante Consulting, LLC, without interruption. The contract originally was bid in May 2004 and Cognosante was selected. Amendment 12 extends the end date for the services, which were competitively bid under the original contract, to June 30, 2017. Cognosante Consulting, LLC and its predecessors have provided Quality Assurance Services as required by CMS for the Medicaid Management Information System since the original contract was approved in 2004. Several of the projects on which the contractor has been working are in process and are anticipated to continue through this contract period. These projects affect both the New HEIGHTS Integrated Eligibility System and the Medicaid Management Information System. The contractor has developed detailed knowledge of both of these systems that are critical to the Department. With this knowledge, the contractor is able to execute its oversight, testing, and quality assurance role effectively and efficiently, thereby facilitating the Department's ability to implement quality system solutions as expeditiously as possible.

Amendment 12 will extend the contractor's services for an additional six (6) months through June 30, 2017, and will encompass the following services:

- Extension of quality assurance staff supporting the New HEIGHTS eligibility system enhancements in compliance with federal requirements.

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council

November 18, 2016

Page 3

- Extension of quality assurance staff to test Medicaid Management Information System enhancements that are funded by the Centers for Medicare and Medicaid Services at a 90 percent match rate, and therefore require independent quality assurance oversight to comply with federal requirements.

This will be the last sole source extension of the contract. A Request for Proposals (RFP) will be issued for work required after July 1, 2017.

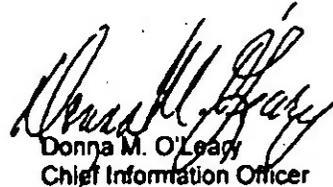
Should the Governor and Executive Council determine to not approve this Request, the Department of Health and Human Services would experience a gap in quality assurance services and increased risk to critical enhancements to the Medicaid Management Information System. Because the Centers for Medicare and Medicaid Services requires a quality assurance vendor, a determination to not approve this Request may result in the loss of federal funding.

Source of Funds: 90% federal funds, 10% general funds.

Area served: Statewide.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Donna M. O'Leary  
Chief Information Officer

Approved by



Jeffrey A. Meyers  
Commissioner

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**STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF INFORMATION SERVICES**

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Fax: 603-271-4912 TDD Access: 1-800-735-2366 www.dhhs.nh.gov

Nicholas A. Toumpas  
Commissioner

Steven J. Kelleher  
Acting Chief Information  
Officer/Director

November 18, 2015

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
State House  
Concord, N.H. 03301

Sole Source

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Office of Information Services, to enter into a sole source amendment (Amendment 11) to an existing contract (Purchase Order #1018352) with Cognosante, LLC (Vendor #223062) at 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250, for continuation of quality assurance services in compliance with the requirements of the Centers for Medicare and Medicaid Services (CMS) by increasing the price limitation by \$3,957,408 from \$19,188,311 to a new amount not to exceed \$23,145,719. This amendment will be effective upon the approval of the Governor and Executive Council through December 31, 2016.

The Governor and Executive Council approved the original contract on December 1, 2004 (Late Item #E), Amendment 1 on December 12, 2006 (Item #119A), Amendment 2 on December 11, 2007 (Item #60), Amendment 3 on December 18, 2008 (Item#57), Amendment 4 on June 23, 2010 (Item#95), Amendment 5 on April 18, 2012 (Item#57), Amendment 6 on January 16, 2013 (Item#17), Amendment 7 on August 14, 2013 (Item#32), Amendment 8 on March 26, 2014 (Item#25-A), Amendment 9 on July 16, 2014 (Item#3), and Amendment 10 on December 23, 2014 (Item#7).

Funds are available in SFY 2016 and SFY 2017, with authority to adjust amounts between State Fiscal Years, if needed and justified.

**05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES**

<u>State Fiscal Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Current Modified Budget</u>	<u>Increase/ (Decrease)</u>	<u>Revised Budget</u>
2005	102/500731	Contracts for Program Services	\$426,820	\$0	\$426,820
2006	102/500731	Contracts for Program Services	\$818,733	\$0	\$818,733
2007	102/500731	Contracts for Program Services	\$527,267	\$0	\$527,267
2008	102/500731	Contracts for Program Services	\$759,163	\$0	\$759,163

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
November 18, 2015  
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<u>State Fiscal Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Current Modified Budget</u>	<u>Increase/ (Decrease)</u>	<u>Revised Budget</u>
2009	102/500731	Contracts for Program Services	\$605,802	\$0	\$605,802
2010	102/500731	Contracts for Program Services	\$470,260	\$0	\$470,260
2011	102/500731	Contracts for Program Services	\$638,313	\$0	\$638,313
2012	102/500731	Contracts for Program Services	\$1,727,698	\$0	\$1,727,698
2013	102/500731	Contracts for Program Services	\$3,536,979	(\$53,760)	\$3,483,219
2014	102/500731	Contracts for Program Services	\$3,179,166	(\$111,086)	\$3,068,080
2015	102/500731	Contracts for Program Services	\$3,566,270	\$164,847	\$3,731,117
2016	102/500731	Contracts for Program Services	\$1,945,440	\$1,849,088	\$3,794,528
2017	102/500731	Contracts for Program Services	\$0	\$2,108,320	\$2,108,320
<b>Sub Total</b>			<b>\$18,201,911</b>	<b>\$3,957,408</b>	<b>\$22,159,319</b>

**05-95-45-450030-2924 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: TRANSITIONAL ASSISTANCE, DIVISION OF FAMILY ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION**

<u>State Fiscal Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Current Modified Budget</u>	<u>Increase/ (Decrease)</u>	<u>Revised Budget</u>
2014	34/500099	Major IT Systems	\$499,520	(\$124,800)	\$374,720
2015	34/500099	Major IT Systems	\$486,880	(\$128,800)	\$358,080
2016	34/500099	Major IT Systems	\$0	\$253,600	\$253,600
<b>Sub-Total</b>			<b>\$986,400</b>	<b>\$0</b>	<b>\$986,400</b>
<b>Total</b>			<b>\$19,188,311</b>	<b>\$3,957,408</b>	<b>\$23,145,719</b>

**EXPLANATION**

This amendment is identified as sole source due to importance of continuing the services obtained under this contract, which is scheduled to expire on December 31, 2015. Several of the projects on which the Contractor has been working continue through Calendar Year 2016, with deliverables for both the New HEIGHTS Integrated Eligibility System and the Medicaid Management Information System (MMIS). Given the rapid pace of program and system changes over the past year, there has been no time to initiate a competitive procurement. However, the quality assurance services included in this amendment are a continuation of the services procured under the original contract that was competitively bid. Cognosante, LLC has been providing ongoing Quality Assurance Services for the Medicaid Management Information System starting in State Fiscal Year 2005 as required by the Centers for Medicare and Medicaid Services (CMS).

This Amendment 11 will extend the contract by one year, through December 31, 2016, and will provide for the following services:

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council

November 18, 2015

Page 3

- Extension of quality assurance staff supporting the New HEIGHTS eligibility system enhancements in compliance with federal requirements.
- Extension of quality assurance staff to test Medicaid Management Information System enhancements that are being funded by CMS at a 90 percent match rate and therefore require independent quality assurance oversight to comply with federal requirements.

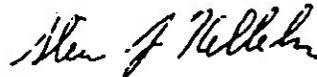
Should the Governor and Executive Council determine to not approve this Request, the Department of Health and Human Services would experience a gap in quality assurance services and increased risk to critical enhancements to the Medicaid Management Information System. Because CMS requires a quality assurance vendor, a determination to not approve this Request may result in the loss of federal funding.

Source of Funds: Design, Development and Implementation phase: 90% federal funds,  
10% general funds.

Geographic area to be served: Statewide.

In the event that the Federal funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Steven J. Kelleher  
Acting Chief Information Officer/Director

Approved by:   
Nicholas A. Tourmpas  
Commissioner

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DEC 11 '14 11:13 DAS

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STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF INFORMATION SERVICES

Nicholas A. Toumpas  
Commissioner

William L. Baggerger  
Chief Information  
Officer/Director

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-8160 1-800-852-3345 Ext. 8160  
Fax: 271-4912 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

12/30/14  
#7

December 2, 2014

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
State House  
Concord, N.H. 03301

Sole Source

REQUESTED ACTION

Authorize the Department of Health and Human Services, Office of Information Services, to enter into a sole source amendment (Amendment 10) to an existing contract (Purchase Order # 1018352) with Cognosante, LLC (Vendor #223062) 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250, for continuation of quality assurance services in compliance with the Centers for Medicare and Medicaid Services by increasing the price limitation by \$3,213,420 from \$15,974,891 to \$19,188,311 effective upon the approval of the Governor and Executive Council through December 31, 2015. 10% General, 90% Federal.

The Governor and Executive Council approved the original contract on December 1, 2004 (Late Item #E), Amendment 1 on December 12, 2006 (Item #119A), Amendment 2 on December 11, 2007 (Item #60, Amendment 3 on December 18, 2008 (Item#57, Amendment 4 on June 23, 2010 (Item#95), Amendment 5 on April 18, 2012 (Item#57), Amendment 6 on January 16, 2013 (Item#17), Amendment 7 on August 14, 2013 (Item#32), Amendment 8 on March 26, 2014 (Item#25-A) and Amendment 9 on July 16, 2014 (Item#3).

Funds are available in SFY 2015 and are anticipated to be available in SFY 2016 upon the availability and continued appropriation of funding in future operating budgets with authority to adjust amounts between State Fiscal Years, if needed and justified.

05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES

State Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase/ (Decrease)	Revised Budget
2005	102/500731	Contracts for Program Services	\$426,820	\$0	\$426,820
2006	102/500731	Contracts for Program Services	\$818,733	\$0	\$818,733
2007	102/500731	Contracts for Program Services	\$527,267	\$0	\$527,267
2008	102/500731	Contracts for Program Services	\$759,163	\$0	\$759,163

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
December 2, 2014  
Page 2

State Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase/ (Decrease)	Revised Budget
2009	102/500731	Contracts for Program Services	\$605,802	\$0	\$605,802
2010	102/500731	Contracts for Program Services	\$470,260	\$0	\$470,260
2011	102/500731	Contracts for Program Services	\$638,313	\$0	\$638,313
2012	102/500731	Contracts for Program Services	\$1,727,698	\$0	\$1,727,698
2013	102/500731	Contracts for Program Services	\$3,536,979	\$0	\$3,536,979
2014	102/500731	Contracts for Program Services	\$3,179,166	\$0	\$3,179,166
2015	102/500731	Contracts for Program Services	\$2,298,290	\$1,267,980	\$3,566,270
2016	102/500731	Contracts for Program Services	\$0	\$1,945,440	\$1,945,440
Sub-Total			\$14,988,491	\$3,213,420	\$18,201,911

05-95-45-450010-2924 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: TRANSITIONAL ASSISTANCE, DIVISION OF FAMILY ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION

State Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase/ (Decrease)	Revised Budget
2014	34/500099	Major IT Systems	\$499,520	\$0	\$499,520
2015	34/500099	Major IT Systems	\$486,880	\$0	\$486,880
Sub-Total			\$986,400	\$0	\$986,400

Total \$15,974,891 \$3,213,420 \$19,188,311

#### EXPLANATION

This sole source amendment provides for the continuation of quality assurance services procured under the original contract. The original contract was competitively bid. Cognosante, LLC has been providing ongoing Quality Assurance Services to the Medicaid Management Information System as required by the Centers for Medicare and Medicaid Services since 2005.

This amendment will provide for the following services in support of the Medicaid Management Information System:

- Extension of quality assurance staff supporting the effort to certify the Medicaid Management Information System in accordance with Centers for Medicare and Medicaid Services (CMS) requirements, which is a prerequisite to obtaining enhanced federal funding for maintenance and operation of the system
- Extension of quality assurance staff supporting the New HEIGHTS eligibility system interfaces necessary to determine Medicaid eligibility in compliance with federal requirements
- Extension of quality assurance staff to test Medicaid Management Information System enhancements that are required to meet State and federal mandates with 2015 deadlines.

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
December 2, 2014  
Page 3

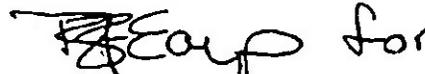
Should the Governor and Executive Council determine to not approve this Request, the Department of Health and Human Services would experience a gap in quality assurance services and increase risk to the Medicaid Management Information System Re-Procurement Project. Because the Centers for Medicare and Medicaid Services require a quality assurance vendor, a determination to not approve this Request would result in loss of federal funding.

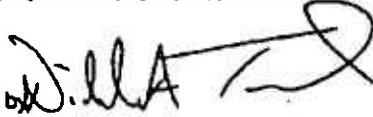
Source of Funds: Design, Development and Implementation phase: 90% federal funds,  
10% general funds.

Geographic area to be served: Statewide.

In the event that the Federal funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,

  
William L. Baggeroer  
Chief Information Officer/Director

Approved by   
Nicholas A. Tompas  
Commissioner



STATE OF NEW HAMPSHIRE  
 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 OFFICE OF INFORMATION SERVICES

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Nicholas A. Toumpas  
 Commissioner

William L. Baggetroer  
 Chief Information  
 Officer/Director

June 12, 2014 **G&C Approved**

Her Excellency, Governor Margaret Wood Hassan  
 and the Honorable Council  
 State House  
 Concord, New Hampshire 03301

Date 7-16-14  
 Item # 3

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Office of Information Services, to enter into a sole source, amendment (Amendment 9) to an existing contract (Purchase Order #1018352) with Cognosante LLC (Vendor#223062) at 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250 for continuation of quality assurance services in compliance with the Centers for Medicare and Medicaid Services by increasing the price limitation by \$170,352 from \$15,804,539 to a new amount not to exceed \$15,974,891. The amendment will be effective upon the approval of the Governor and Executive Council through June 30, 2015.

The Governor and Executive Council approved the original contract on December 1, 2004 (Late Item #E), Amendment 1 on December 12, 2006 (Item #119A), Amendment 2 on December 11, 2007 (Item #60), Amendment 3 on December 18, 2008 (Item #57), Amendment 4 on June 23, 2010 (Item #95), Amendment 5 on April 18, 2012 (Item #57), Amendment 6 on January 16, 2013 (Item #17), Amendment 7 on August 14, 2013 (Item #32) and Amendment 8 on March 26, 2014 (Item#25-A).

Funds are available in State Fiscal Years 2014 and 2015 with authority to adjust amounts between State Fiscal Years if needed and justified.

**05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES**

<u>Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Current Budget</u>	<u>Increase/ (Decrease)</u>	<u>Revised Budget</u>
2005	102/500731	Contracts for Program Services	\$426,820	\$0	\$426,820
2006	102/500731	Contracts for Program Services	\$818,733	\$0	\$818,733
2007	102/500731	Contracts for Program Services	\$527,267	\$0	\$527,267
2008	102/500731	Contracts for Program Services	\$759,163	\$0	\$759,163
2009	102/500731	Contracts for Program Services	\$605,802	\$0	\$605,802

Her Excellency, Governor M. J. Met Wood Hassan  
 and the Honorable Council  
 June 12, 2014  
 Page 2

*Continued*

State			Current	Increase/	Revised
<u>Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Budget</u>
2010	102/500731	Contracts for Program Services	\$470,260	\$0	\$470,260
2011	102/500731	Contracts for Program Services	\$638,313	\$0	\$638,313
2012	102/500731	Contracts for Program Services	\$1,727,698	\$0	\$1,727,698
2013	102/500731	Contracts for Program Services	\$3,536,979	\$0	\$3,536,979
2014	102/500731	Contracts for Program Services	\$3,008,814	\$0	\$3,179,166
2015	102/500731	Contracts for Program Services	\$2,298,290	\$170,352	\$2,298,290
<b>Sub-Total</b>			<b>\$14,818,139</b>	<b>\$170,352</b>	<b>\$14,988,491</b>

**05-95-45-450010-2924 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: TRANSITIONAL ASSISTANCE, DIVISION OF FAMILY ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION**

State			Current	Increase/	Revised
<u>Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Budget</u>	<u>(Decrease)</u>	<u>Budget</u>
2014	34/5000099	Major IT Systems	\$499,520	\$0	\$499,520
2015	34/5000099	Major IT Systems	\$486,880	\$0	\$486,880
<b>Sub-Total</b>			<b>\$986,400</b>	<b>\$0</b>	<b>\$986,400</b>
<b>Grand Total</b>			<b>\$15,804,539</b>	<b>\$170,352</b>	<b>\$15,974,891</b>

**EXPLANATION**

This amendment is identified as sole source. The quality assurance services included in this amendment are a continuation of the services procured under the original contract that was competitively bid. Cognosante, LLC has been involved in the Medicaid Management Information System Reprocurement Project from its onset. The vendor continues to provide oversight of the Project in compliance with the Centers for Medicare and Medicaid Services' Quality Assurance requirements. Cognosante, LLC has developed an integral understanding of New Hampshire's Medicaid Management Information System and is in a unique position to continue their support of this effort. In addition, Cognosante, LLC is the most practical alternative for ensuring un-interrupted, informed support to the Medicaid Management Information System Reprocurement Project. See the Bid Summary that is attached.

Cognosante, LLC's quality assurance services in Amendment 9 are required for the Medicaid Management Information System Reprocurement Project to implement the New Hampshire Health Protection Program. The Centers for Medicaid and Medicaid Services requires these services as a condition of the enhanced 90% federal funding.

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council

June 12, 2014

Page 3

The purpose of the Amendment 9 is to provide one additional full-time resource for a period of 6 months in support of the implementation of the New Hampshire Protection Program functionality within New Hampshire's Medicaid Management Information System.

A scanned copy of this item, including the G&C letters and accompanying documentation from the original agreement and subsequent amendments will be available online once posted to the meeting agenda for the Governor and Executive Council.

Should the Governor and Executive Council determine not to approve this Request, the New Hampshire Health Protection Program could be delayed.

Ninety percent (90%) federal funding for the Design, Development and Implementation effort in this Amendment 9 is pending approval by the Centers for Medicare and Medicaid Services. Approval is expected.

Source of Funds: Design, Development and Implementation effort is: 90% federal funds and 10% General Funds.

Area served: Statewide.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



William L. Baggerger  
Chief Information  
Officer/Director

Approved by:



Nicholas A. Toumpas  
Commissioner



**STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF INFORMATION SERVICES**

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Nicholas A. Toumpas  
Commissioner

William L. Baggerroer  
Chief Information  
Officer/Director

March 14, 2014

**G&C Approved**

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
State House  
Concord, N.H. 03301

Date 3/20/14  
Item # 3517

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Office of Information Services, to enter into a sole source amendment (Amendment 8) to an existing contract (Purchase Order # 1018352) with Cognosante, LLC (Vendor #223062) (formerly FOX Systems, LLC) at 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250, for continuation of quality assurance services in compliance with the Centers for Medicare and Medicaid Services by increasing the price limitation by \$2,547,664 from \$13,256,875 to a new amount not to exceed \$15,804,539. The Governor and the Honorable Council approved the original contract on December 7, 2005 (Late Item #C), Amendment 1 on December 11, 2007 (Item #59), Amendment 2 on June 17, 2009 (Item #92), Amendment 3 on June 23, 2010 (Item#97), Amendment 4 on June 23, 2010 (Item #94), Amendment 5 on April 18, 2012 (Item#57), Amendment 6 on January 16, 2013 (Item#17) and Amendment 7 on August 14, 2013 (Item#32).

Funds are available in SFY 2014 through SFY 2015 as follows with the authority to adjust amounts within price limitation and amend the related terms of the contract without further approval from the Governor and Executive Council.

**05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES**

<u>State Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Current Budget</u>	<u>Increase (Decrease)</u>	<u>Modified Budget</u>
2005	102/500731	Contracts for Program Services	\$426,820	\$0	\$426,820
2006	102/500731	Contracts for Program Services	\$818,733	\$0	\$818,733
2007	102/500731	Contracts for Program Services	\$527,267	\$0	\$527,267
2008	102/500731	Contracts for Program Services	\$759,163	\$0	\$759,163
2009	102/500731	Contracts for Program Services	\$605,802	\$0	\$605,802
2010	102/500731	Contracts for Program Services	\$470,260	\$0	\$470,260
2011	102/500731	Contracts for Program Services	\$638,313	\$0	\$638,313
2012	102/500731	Contracts for Program Services	\$1,727,698	\$0	\$1,727,698
2013	102/500731	Contracts for Program Services	\$3,536,979	\$0	\$3,536,979
2014	102/500731	Contracts for Program Services	\$2,426,094	\$0	\$2,426,094
2015	102/500731	Contracts for Program Services	<u>\$333,346</u>	<u>\$1,964,944</u>	<u>\$2,298,290</u>
	Sub-Total		\$12,270,475	\$1,964,944	\$14,235,419

Her Excellency, Governor Mark E. Wood Hassan  
 and the Honorable Council  
 March 14, 2014  
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**05-95-45-450010-2924 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: TRANSITIONAL ASSISTANCE, DIVISION OF FAMILY ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION**

<u>State Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Current Budget</u>	<u>Increase (Decrease)</u>	<u>Modified Budget</u>
2014	34/500099	Major IT Systems	\$499,520	\$0	\$499,520
2015	34/500099	Major IT Systems	<del>\$486,880</del>	\$0	<del>\$486,880</del>
	Sub-Total		\$986,400	\$0	\$986,400

**05-95-47-470010-7948 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, OFFICE OF MEDICAID & BUSINESS POLICY, OFFICE OF MEDICAID & BUSINESS POLICY**

<u>State Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Current Budget</u>	<u>Increase (Decrease)</u>	<u>Modified Budget</u>
2014	102/500731	Contracts for Program Services	\$0	\$582,720	\$582,720
	Sub-Total		\$0	\$582,720	\$582,720
	<b>Grand Total</b>		<b>\$13,256,875</b>	<b>\$2,547,664</b>	<b>\$15,804,539</b>

**EXPLANATION**

This amendment is identified as sole source. The quality assurance services included in this amendment are a continuation of the services procured under the original contract that was competitively bid. Cognosante, LLC has been involved in the Medicaid Management Information System Reprocurement Project from its onset. The vendor continues to provide oversight of the Project in compliance with Centers for Medicare and Medicaid Services Quality Assurance Requirements. Cognosante, LLC has developed an integral understanding of the New Hampshire Medicaid Management Information System and is in a unique position to continue their support of this effort and are the most practical alternative for ensuring un-interrupted, informed support to the Medicaid Management Information System Reprocurement Project. See the Bid Summary that is attached.

Cognosante, LLC's services in Amendment 8 are required for the Medicaid Management Information System Reprocurement Project to implement three (3) enhancements to the Medicaid Management Information System as required by the Centers for Medicaid and Medicare Services:

1. T-MSIS (Medicaid Statistical System)
2. Health Insurance Portability and Accountability Act Operating Rules
3. ICD-10( used for reporting of medical diagnoses and inpatient procedures).

This Amendment 8 will extend the following contract services:

- Contract Item 3.20, System Integration and Testing and User Acceptance Testing: Medicaid Management Information Systems and related Enhancements including T-MSIS (Medicaid Statistical System), Health Insurance Portability and Accountability Act Operating Rules and ICD-10( used for reporting of medical diagnoses and inpatient procedures)

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
March 14, 2014  
Page 3

- Contract Item 3.2, Testing and Optional Support: additional quality assurance resources to the existing scope of services
- Contract Item 4.6: Medicaid Management Information System Certification Support
- Project Management Services for the Medicaid Management Information System

Should the Governor and Executive Council determine to not approve this Request, the Department of Health and Human Services would experience a gap in quality assurance services and increase risk to the Medicaid Management Information System Reprourement Project, that would jeopardize the integrity of the Medicaid Management Information System. Because the Centers for Medicare and Medicaid Services require a quality assurance vendor, a determination to not approve this Request could result in loss of federal funding. In addition, failure to implement the Centers for Medicare and Medicaid Service required enhancements would result in a significant loss of federal revenue due to non-certification of the Medicaid Management Information System.

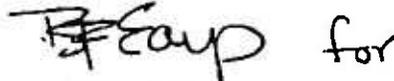
Funding for this Amendment is anticipated from the Centers for Medicare and Medicaid Services pending submission of federally required Implementation Advanced Planning Documents by the Department of Health and Human Services.

Source of Funds: Design, Development and Implementation phase: 90% federal funds,  
10% general funds.

Geographic area to be served: Statewide.

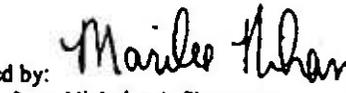
In the event that the Federal funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,

 for

William L. Baggeroer  
Chief Information Officer/Director

Approved by:

  
Nicholas A. Toumpas  
Commissioner



STATE OF NEW HAMPSHIRE  
 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 OFFICE OF INFORMATION SERVICES

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Nicholas A. Tompao  
 Commissioner

William L. Bergeron  
 Chief Information  
 Officer/Director

July 12, 2013

8/14/13  
 # 32

Her Excellency, Governor Margaret Wood Hassan  
 and the Honorable Council  
 State House  
 Concord, N.H. 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Office of Information Services, to enter into a sole source amendment (Amendment 7) to an existing contract (Purchase Order # 1018352) with Cognosante, LLC (Vendor #223062) (formerly FOX Systems, LLC) at 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250, for continuation of quality assurance services and expansion of the scope of services in compliance with the Centers for Medicare and Medicaid Services by increasing the price limitation by \$986,400 from \$12,270,475 to a new amount not to exceed \$13,256,875 and by extending the completion date from December 31, 2014, to June 30, 2015, effective July 24, 2013, or upon Governor and Council approval, whichever is later. The Governor and Executive Council approved the original contract on December 7, 2005 (Late Item #C), Amendment 1 on December 11, 2007 (Item #59), Amendment 2 on June 17, 2009 (Item #92), Amendment 3 on June 23, 2010 (Item #97), Amendment 4 on June 23, 2010 (Item #94), Amendment 5 on April 18, 2012 (Item #57) and Amendment 6 on January 16, 2013 (Item #17).

Funds are available in SFY 2014 through SFY 2015 as follows with the authority to adjust amounts within price limitation and amend the related terms of the contract without further approval from the Governor and Executive Council.

05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES

<u>State Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Current Modified Budget</u>	<u>Increase/ (Decrease)</u>	<u>Revised Modified Budget</u>
2005	102/500731	Contracts for Program Services	\$426,820	\$0	\$426,820
2006	102/500731	Contracts for Program Services	\$818,733	\$0	\$818,733
2007	102/500731	Contracts for Program Services	\$527,267	\$0	\$527,267
2008	102/500731	Contracts for Program Services	\$759,163	\$0	\$759,163
2009	102/500731	Contracts for Program Services	\$605,802	\$0	\$605,802
2010	102/500731	Contracts for Program Services	\$470,260	\$0	\$470,260
2011	102/500731	Contracts for Program Services	\$638,313	\$0	\$638,313
2012	102/500731	Contracts for Program Services	\$1,727,698	\$0	\$1,727,698
2013	102/500731	Contracts for Program Services	\$3,536,979	\$0	\$3,536,979
2014	102/500731	Contracts for Program Services	\$2,426,094	\$0	\$2,426,094
2015	102/500731	Contracts for Program Services	\$333,346	\$0	\$333,346
	Sub-Total		\$12,270,475	\$0	\$12,270,475

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
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Page 2

**05-95-45-450010-TBD HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, IT/IS: TRANSITIONAL ASSISTANCE, DIVISION OF FAMILY ASSISTANCE, NEW HEIGHTS INCREMENTAL MODERNIZATION**

<u>State Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Current Modified Budget</u>	<u>Increase/ (Decrease)</u>	<u>Revised Modified Budget</u>
2014	34/500099	Major IT Systems	\$0	\$499,520	\$499,520
2015	34/500099	Major IT Systems	\$0	\$486,880	\$486,880
Sub Total			\$0	\$986,400	\$986,400
Total			\$12,270,475	\$986,400	\$13,256,875

**EXPLANATION**

This amendment is identified as sole source. The quality assurance services included in this amendment are an expansion of the services procured under the original contract that was competitively bid. Cognosante, LLC has been providing ongoing Quality Assurance Services to the Medicaid Management Information System starting in State Fiscal Year 2005 as required by the Centers for Medicare and Medicaid Services. The purpose of this Amendment is to expand the scope of services provided by Cognosante, LLC to include providing Quality Assurance Services to the New Heights Incremental Modernization project. A quality assurance vendor is required by the Centers for Medicare and Medicaid Services for States to receive 90% reimbursement for modernization of Medicaid Eligibility systems - in our case New HEIGHTS. The Department had intended to competitively procure this service as had been outlined to the Centers for Medicare and Medicaid Services in the Advance Planning Document Update approved August 10, 2012. However the timeline to complete this procurement had an anticipated start date of January 2014. The Centers for Medicare and Medicaid Services informed New Hampshire on April 24, 2013 of the mandate that New Hampshire would have to have this service in place no later than July of 2013 to be able to interface with the Federal Data Hub. Amending our existing Medicaid Management Information System Reprourement quality assurance contract with Cognosante is our only viable option. Cognosante is very familiar with New Hampshire Medicaid systems having worked with us for several years (vendor is qualified), their billing rates were already set and approved by the State of New Hampshire (fair cost), and an agreement to expand their quality assurance work to Medicaid eligibility is doable by the Centers for Medicare and Medicaid Services imposed deadline of July 2013 (timeliness).

The goal of the New Heights Incremental Modernization project is to further streamline the Department of Health and Human Services' operations and to enhance client services. Enhancements to New Heights system are expected to yield significant efficiencies to contain operating costs and improve productivity. The savings are based on improved worker productivity of an average 6% or 120 hours annually per DCA case worker. These efficiencies will contribute towards the Department of Health and Human Services' ability to maintain increased caseloads, including partial mitigation of the administrative expense which will be incurred if New Hampshire expands Medicaid under the Patient Protection and Affordable Care Act.

In addition to the quantitative benefits described above, these enhancements are critical to support the Department of Health and Human Services' strategic vision for improved service delivery, client-centric orientation with operational efficiencies. For example, a text reminder for appointments offers improved client service and improves the Division of Client Services case management efficiency by reducing the "no show" percentage and costs associated with lost productivity and rescheduling. In the long term, the Department of Health and Human Services will be in a stronger position to support ongoing evolution using a contemporary case management system which enhances customer service, contains administrative expense and provides infrastructure to manage benefits and policy.

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
July 12, 2013  
Page 3

Should the Governor and Executive Council determine to not approve this Request, the Department of Health and Human Services would experience a gap in quality assurance services and increase risk to the New Heights Incremental Modernization project, that would jeopardize the integrity of the New Heights System. Because the Centers for Medicare and Medicaid Services require a quality assurance vendor, a determination to not approve this Request would result in loss of federal funding.

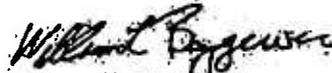
Funding for the New Heights Incremental Modernization project is provided through the Patient Protection and Affordable Care Act: Public Law 111-148. The Centers for Medicare and Medicaid Services has approved funding of \$500,000 for Quality Assurance Services and the remaining federal approval is anticipated based on additional Advanced Planning Documents scheduled for submission by the Department of Health and Human Services.

Source of Funds: Design, Development and Implementation phase: 90% federal funds,  
10% general funds.

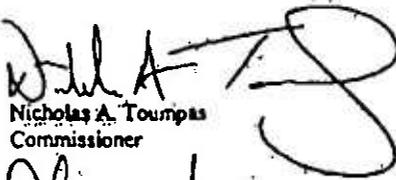
Geographic area to be served: Statewide.

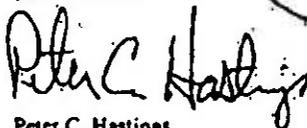
In the event that the Federal funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,

  
William L. Baggner  
Chief Information Officer/Director

Approved by:

  
Nicholas A. Toumpas  
Commissioner

  
Peter C. Hastings  
Commissioner  
Department of Information Technology

Her Excellency, Governor Margaret Wood Hassan  
 and the Honorable Council  
 December 14, 2012  
 Page 2

<u>State Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Current Modified Budget</u>	<u>Increase/ (Decrease)</u>	<u>Revised Modified Budget</u>
SFY 2008	102/500731	Contracts for Program Services	\$759,163.00	\$0.00	\$759,163.00
SFY 2009	102/500731	Contracts for Program Services	\$605,802.00	\$0.00	\$605,802.00
SFY 2010	102/500731	Contracts for Program Services	\$470,260.00	\$0.00	\$470,260.00
SFY 2011	102/500731	Contracts for Program Services	\$638,313.00	\$0.00	\$638,313.00
SFY 2012	102/500731	Contracts for Program Services	\$1,897,119.00	\$0.00	\$1,897,119.00
SFY 2013	102/500731	Contracts for Program Services	\$3,210,487.00	(\$3,210,487.00)	\$0.00
SFY 2014	102/500731	Contracts for Program Services	\$252,713.00	\$2,003,960.00	\$2,256,673.00
SFY 2015	102/500731	Contracts for Program Services	\$0.00	\$333,346.00	\$333,346.00
Sub Total			\$9,606,677.00	(\$873,181.00)	\$8,733,496.00

**05-95-956010-6147 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVC, HHS: COMMISSIONER, OFF MEDICAID & BUSINESS POLICY, PROVIDER PAYMENTS**

<u>State Fiscal Year</u>	<u>Class Object</u>	<u>Class Title</u>	<u>Current Modified Budget</u>	<u>Increase/ (Decrease)</u>	<u>Revised Modified Budget</u>
SFY 2013	101/500729	Medical Payments to Provider	\$0.00	\$3,536,979.00	\$3,536,979.00
Sub Total			\$0.00	\$3,536,979.00	\$3,536,979.00
Total			\$9,606,677.00	\$2,663,798.00	\$12,270,475.00

**EXPLANATION**

This amendment is identified as sole source. The quality assurance services included in this amendment are a continuation of the services procured under the original contract that was competitively bid. Cognosante, LLC has been involved in this major systems initiative from its onset. The vendor has provided oversight of the detailed system design and the current testing phase. They have developed an integral understanding of the New Hampshire Medicaid Management Information System and are in a unique position to continue in their support of this effort and are the most practical alternative for ensuring uninterrupted, informed support to the Medicaid Management Information System; including the expanded scope of services included in this amendment. See The Bid Summary is attached.

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
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The purpose of this request is to continue the provision of quality assurance services provided by Cognosante, LLC through December 31, 2014, in support of the Department's implementation of a new Medicaid Management Information System and to expand the scope of services to include additional resources for user acceptance testing, dedicated support for preparation and review of the post-implementation federal certification requirements and for project monitoring and reporting.

The Medicaid Management Information System, including its Medicaid claims adjudication and payment functions, is a critical system for the Department of Health and Human Services. The Medicaid Management Information System processes over \$900 million in payments to over 5,000 actively billing and enrolled New Hampshire Medicaid providers annually. These services are provided to eligible recipients under the New Hampshire Medicaid program. The New Hampshire Medicaid Management Information System is the Department's primary system for administering and managing costs for the New Hampshire Medicaid program.

It is vitally important that the new Medicaid Management Information System is able to perform all of its required functions, and to perform them with integrity. The new Medicaid Management Information System must be secure, stable, accurate, and efficient. It must be able to store eligibility data for the current annual New Hampshire Medicaid population of approximately 130,000, enrolled provider data for approximately 19,000 providers, and 7 years of claims payment history. It must be able to receive over 6 million paper and electronic claims from providers, process those claims against the available data, execute applicable edits, and determine the appropriate payment. The System must be able to generate reliable reports, avoid costs where other insurance for a member exists, and identify potentially fraudulent provider billing practices for further investigation.

The new New Hampshire Medicaid Management Information System will replace the existing 18-year-old legacy Medicaid Management Information System. On April 18, 2012 (Item #57) the Governor and Executive Council approved Amendment #5 to extend the agreement for up to 18 months, through December 31, 2013. That Amendment also revised the project schedule for design, development and implementation of System and expanded the scope of services.

This amendment (Amendment 6):

- re-aligns the schedule of quality assurance services with a revised project schedule for design, development and implementation of the New Hampshire Medicaid Management Information System, including the extension of the contract completion date for up to 12 months, from December 31, 2013, to deployment on April 1, 2013, and through December 31, 2014, for post-deployment certification and the testing of both federal and state mandated enhancements;
- provides the Department, at its sole discretion, the option to terminate the contract as early as December 31, 2013, by providing the contractor with 30 calendar days advance written notice. It also allows the State to reduce the level of Cognosante staffing for testing and certification activities after December 31, 2013, by providing 30 calendar days advanced notice;
- expands the scope of services to provide for additional user acceptance and end-to-end testing services through the duration of design and development, and implementation of the System during which all system processes will be executed multiple times in a coordinated manner to replicate daily, weekly, monthly, quarterly, and annual cycle processing; and

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
December 14, 2012  
Page 4

- expands the scope of services to provide for dedicated support for coordination of CMS Certification preparation activities including early collection of operations and system artifacts and readiness review. These activities must take place just prior to system go-live, during which time State project resources must focus on implementation and operations transition issues, and continue after implementation in preparation for actual CMS certification. These services will help support federal certification of the Medicaid Management Information System that will entitle the Department to an enhanced rate of Federal Financial Participation (FFP) for Medicaid Management Information System operations.

The significant progress realized to date on the New Hampshire Medicaid Management Information System Project is due in part to the consistent quality assurance support provided by Cognosante. This amendment will enable the Department to retain the expertise of those Cognosante's staff who have developed an in-depth understanding of the overall New Hampshire Medicaid Management Information System design, development and implementation effort. Along with the State project team, Cognosante staff will continue to monitor, verify, and validate implementation contractor deliverables and execute tests, to help ensure that the new system meets the requirements and processes claims payment with integrity.

Should the Governor and Executive Council determine to not approve this Request, the Department would experience a gap in quality assurance services and increased risk to the project, that would jeopardize the integrity of the new Medicaid Management Information System implementation. Because the Centers for Medicare and Medicaid Services requires a quality assurance vendor, a determination to not approve this Request would result in loss of federal funding for the new system.

Federal funding for this agreement is pending the Centers for Medicare and Medicaid Services approval of an upcoming amendment to the Department's Implementation Advanced Planning Document.

Source of Funds: 90% federal funds and 10% general funds.

Area served: Statewide.

In the event that the Federal funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



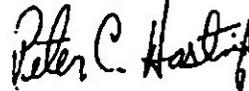
William L. Baggerger  
Chief Information Officer/  
Director

Her Excellency, Governor Margaret Wood Hassao  
and the Honorable Council  
December 14, 2012  
Page 5

Approved by:

  
Nicholas A. Toumpas  
Commissioner

Peter Hastings  
Acting Commissioner  
Department of Information Technology



4501



STATE OF NEW HAMPSHIRE  
 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 OFFICE OF INFORMATION SERVICES

Nicholas A. Tompase  
 Commissioner

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William L. Beggroer  
 Chief Information Officer

March 21, 2012

His Excellency, Governor John H. Lynch  
 and the Honorable Executive Council  
 State House  
 Concord, N.H. 03301

REQUESTED BY \_\_\_\_\_  
 DATE 4/18/12  
 PAGE 9  
 ITEM # 57

REQUESTED ACTION

Authorize the Department of Health and Human Services, Office of Information Services, to enter into a sole source, amendment (Amendment 5) to an existing contract (Purchase Order # 1018352) with Cognosante, LLC (Vendor #223062) (formerly FOX Systems, LLC) at 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250, to extend the completion date from June 30, 2012 to December 31, 2013, for continuation of quality assurance services related to the State's Medicaid Management Information System project and increase the price limitation by \$2,535,902 from \$7,070,774 to a new amount not to exceed \$9,606,676, effective July 1, 2012 or upon the approval of the Governor and Executive Council whichever is later. The Governor and Executive Council approved the original contract on December 7, 2005 (Late Item #C), Amendment 1 on December 11, 2007 (Item #59), Amendment 2 on June 17, 2009 (Item #92), Amendment 3 on June 23, 2010 (Item #97) and Amendment 4 on June 23, 2010 (Item #94).

Funds are available in SFY 2013 as follows and are anticipated to be available in SFY 2014 upon the availability and continued appropriation of funds in future operating budgets with authority to adjust amounts between State Fiscal Years if needed and justified.

05-95-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS-COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES

State Fiscal Year	Class Object	Class Title	Current Modified Budget	Increase/ (Decrease)	Revised Modified Budget
SFY 2005	102/500731	Contracts for Program Services	\$426,820.00	\$0.00	\$426,820.00
SFY 2006	102/500731	Contracts for Program Services	\$818,733.00	\$0.00	\$818,733.00
SFY 2007	102/500731	Contracts for Program Services	\$527,267.00	\$0.00	\$527,267.00
SFY 2008	102/500731	Contracts for Program Services	\$759,163.00	\$0.00	\$759,163.00
SFY 2009	102/500731	Contracts for Program Services	\$605,802.00	\$0.00	\$605,802.00
SFY 2010	102/500731	Contracts for Program Services	\$470,260.00	\$0.00	\$470,260.00
SFY 2011	102/500731	Contracts for Program Services	\$2,313,181.00	(\$1,674,868.00)	\$638,313.00
SFY 2012	102/500731	Contracts for Program Services	\$1,149,548.00	\$747,571.00	\$1,897,119.00
SFY 2013	102/500731	Contracts for Program Services	\$0.00	\$3,210,487.00	\$3,210,487.00
SFY 2014	102/500731	Contracts for Program Services	\$0.00	\$252,712.00	\$252,712.00
TOTAL			\$7,070,774.00	\$2,535,902.00	\$9,606,676.00

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
March 21, 2012  
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#### EXPLANATION

This amendment is a fixed priced, sole source amendment. Services included in this Amendment were originally competitively bid, but were not re-bid because they are a continuation of the services procured under the original contract and because Cognosante, given its involvement in this major systems initiative from its onset through detailed system design to the current testing phase, has developed an integral understanding of the NH Medicaid Management Information System solution and is the most practical alternative for ensuring uninterrupted, informed support through to the Medicaid Management Information System implementation. See Attachment A Bidders List at the end of this document.

The purpose of the above requested action is to continue the provision of quality assurance services provided by Cognosante, LLC through December 31, 2013 in support of the Department's implementation of a new Medicaid Management Information System and to expand the scope of services in the Contract to include additional resources for end-to-end and user acceptance testing, dedicated support for preparation and review of the post-implementation certification requirements, and incremental quality assurance testing and reporting specifically focused on the new "5010" electronic transaction functionality recently approved and added to the System design strategy.

The NH Medicaid Management Information System project is a major information systems initiative underway with the Department of Health and Human Services and the Department of Information Technology (DoIT), to replace the existing 18 year old legacy Medicaid Management Information System with a new system that meets or exceeds the requirements of the NH Medicaid Management Information System Request For Proposals #RFP-DHHS-2005-002.

On March 7, 2012 (Item #22A) the Governor and Executive Council approved expanding the scope and extending schedule for the design, development and implementation of the MMIS currently underway with ACS State Healthcare LLC (ACS) to enable the new system to support electronic transactions in a 5010 format compatible with federal requirements mandated under the Health Insurance Portability and Accountability Act and 45 CFR 162. Consequently, these modifications create the need to extend and expand Cognosante's quality assurance support for testing, system go-live, and post-implementation certification. The Medicaid Management Information System implementation is currently anticipated to go live on or before December 31, 2012.

Specifically, Amendment 5 re-aligns the schedule of quality assurance services with the revised project schedule for design, development and implementation of the Medicaid Management Information System. It extends the Contract completion date for up to 18 months, through December 31, 2013, with the option for early termination by the State as soon as the Medicaid Management Information System is implemented and the post-implementation federal certification phase is complete. The Amendment provides the Department, at its sole discretion, the option to terminate the contract as early as July 31, 2013, or the last day of any month thereafter, by providing the contractor with 30 calendar days advance written notice.

Additionally, the Amendment expands the scope of services to provide for:

- Additional user acceptance and end-to-end testing services through the duration of design and development, and implementation of the System during which all system processes will be executed multiple times in a coordinated manner to replicate daily, weekly, monthly, quarterly, and annual cycle processing;
- Dedicated support for coordination of CMS Certification preparation activities including early collection of operations and system artifacts and readiness review. These activities must take place just prior to and immediately following system go-live, during which time State project

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resources must focus on implementation and operations transition issues. These services will help support federal certification of the Medicaid Management Information System that will entitle the Department to an enhanced rate of Federal Financial Participation (FFP) for Medicaid Management Information System operations.

- Additional resources for testing and certification support to correspond with the new "5010" functional system requirements for electronic transaction processing added to the design of the Medicaid Management Information System. The breadth of the 5010 changes across the system necessitates that many system functions previously tested and validated during system integration testing must be retested in their entirety to ensure that 5010 related changes have not adversely impacted system processing capabilities or their integrity.

The Medicaid Management Information System, including its Medicaid claims adjudication and payment functions, is a mission critical system for the Department of Health and Human Services. The Medicaid Management Information System processes over \$900 million in payments to over 5,000 actively billing and enrolled New Hampshire Medicaid providers annually, for services provided to eligible recipients under the New Hampshire Medicaid program. It is the Department of Health and Human Services' primary system for administering and managing costs for the New Hampshire Medicaid program.

It is critically important that the new Medicaid Management Information System is able to perform all of its required functions, and to perform them with integrity. The new Medicaid Management Information System must be secure, stable, accurate, and efficient. It must be able to store eligibility data for the current annual New Hampshire Medicaid population of approximately 120,000, enrolled provider data for approximately 19,000 providers, and 7 years of claims payment history. It must be able to receive over 6 million paper and electronic claims from providers, process those claims against the available data, execute applicable edits, and determine the appropriate payment. The Medicaid Management Information System must be able to generate reliable reports, avoid costs where other insurance for a member exists, and to identify potentially fraudulent provider billing practices for further investigation.

The significant progress realized to date on the New Hampshire Medicaid Management Information System Project is due in part to the quality assurance support provided by Cognosante. This amendment will enable the Department to retain the expertise of those Cognosante staff who have developed an in-depth understanding of the overall NH Medicaid Management Information System DDI effort. Along with State project team staff, Cognosante staff will continue to monitor, verify, and validate implementation contractor deliverables and execute tests, to help ensure that the new MMIS meets the RFP requirements, and processes claims payment with integrity. Should the Governor and Executive Council determine to not approve this Request, the Department would experience a gap in quality assurance services and increased risk to the project which may jeopardize the integrity of the Medicaid Management Information System implementation.

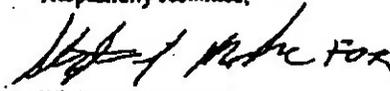
Source of Funds: Design, Development and Implementation phase: 90% federal funds,  
10% general funds.

Geographic area to be served: Statewide.

In the event that the Federal funds become no longer available, General Funds will not be requested to support this program.

His Excellency, Governor John H. Lynch  
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March 21, 2012  
Page 4

Respectfully submitted,



William L. Baggeroer  
Chief Information Officer

Approved by:



Nicholas A. Youmpas  
Commissioner



S. Williams Rogers  
Commissioner  
Department of Information Technology

9/11

To DAS 6-1-10



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF MEDICAID BUSINESS AND POLICY

129 PLEASANT STREET, CONCORD, NH 03301-2857  
603-271-5254 1-800-852-3345 Ext. 5254  
Fax: 603-271-8431 TDD Access: 1-800-735-2964

Nicholas A. Tompkins  
Commissioner

Kathleen A. Dean  
Director

May 18, 2010

APPROVED BY \_\_\_\_\_  
DATE 6/23/10  
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ITEM # 95

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
State House  
Concord, NH 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services (DHHS), Office of Medicaid Business and Policy (OMBP) to enter into a sole source contract amendment (Amendment 4) to an existing contract (P.O. # 1002153 with FOX Systems, LLC (FOX or Contractor), Vendor #172138, 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250 (formerly FOX Systems, Inc.) to extend the completion date from June 30, 2010 to June 30, 2012, for continuation of quality assurance services related to the State's Medicaid Management Information System project and to increase the price limitation by \$1,811,579 from \$5,259,195 to \$7,070,774 effective June 23, 2010 or the date of Governor and Executive Council approval, whichever is later. The Governor and Executive Council approved the original contract on December 1, 2004 (Late Item #E), Amendment 1 on December 12, 2006 (Item #119A), Amendment 2 on December 11, 2007 (Item #60) and Amendment 3 on December 18, 2008 (Item #57).

Funds are anticipated to be available in SFY 2011 and SFY 2012 as identified below with authority to adjust amounts between fiscal years if needed and justified.

05-95-95-956010-6134 HEALTH AND SOCIAL SERVICES, DEPARTMENT OF HEALTH AND HUMAN SERVICES HHS: COMMISSIONER, OFF OF MEDICAID & BUSINESS POLICY, MEDICAID CLAIMS MANAGEMENT SYSTEMS

State Fiscal Year	Class Object	Class Title	Current Modified Budget	Increase/ (Decrease)	Revised Modified Budget
SFY 2005	102/500731	Contracts for Program Services	\$426,820.00	\$0	\$426,820.00
SFY 2006	102/500731	Contracts for Program Services	\$818,733.00	\$0	\$818,733.00
SFY 2007	102/500731	Contracts for Program Services	\$527,267.00	\$0	\$527,267.00
SFY 2008	102/500731	Contracts for Program Services	\$759,163.00	\$0	\$759,163.00
SFY 2009	102/500731	Contracts for Program Services	\$1,273,088.00	(\$667,286.00)	\$605,802.00
SFY 2010	102/500731	Contracts for Program Services	\$1,454,124.00	(\$983,864.00)	\$470,260.00
SFY 2011	102/500731	Contracts for Program Services	\$0.00	\$2,313,181.00	\$2,313,181.00
SFY 2012	102/500731	Contracts for Program Services	\$0.00	\$1,149,548.00	\$1,149,548.00
TOTAL			\$5,259,195.00	\$1,811,579.00	\$7,070,774.00

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
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#### EXPLANATION

The purpose of the above requested action is to enable the continuation of quality assurance (QA) services provided by FOX Systems, LLC in support of the DHHS's Medicaid Management Information System (MMIS) implementation. The NH MMIS project is a major information systems initiative underway with the DHHS and the Department of Information Technology (DoIT), to replace the existing 16 year old legacy MMIS with a new system that meets or exceeds the requirements of the NH MMIS Request For Proposals (RFP).

Delays in the design, development and implementation (DDI) of the MMIS underway with ACS State Healthcare LLC (ACS), as previously acknowledged to the Governor and Executive Council, require extending FOX's QA support for testing, system go-live, and post-implementation certification. This Amendment 4 updates the deliverables timeframes to align with the current project schedule and adjusts deliverables to accommodate the system testing and implementation methodology adopted by the DDI vendor. The amendment will enable the DHHS to retain the expertise of those FOX Systems' staff who, to date, have developed an in-depth understanding of the overall NH MMIS DDI effort. Along with State project team staff, FOX QA staff will continue to monitor, verify, and validate implementation contractor deliverables and execute tests, to help ensure that the new MMIS meets the RFP requirements, and processes claims payment with integrity.

The Governor and Executive Council approved the original QA contract with FOX Systems, LLC on December 1, 2004 (Late Item #E), one year prior to finalizing the MMIS DDI contract. Pre-DDI services resulted in activities and deliverables that helped the State's MMIS project team and Medicaid program area staff organize historical information and prepare for the onset of the system development phase. Final execution and approval of the implementation contract with ACS was achieved a year after the QA contract was finalized. A no-cost amendment (Amendment 1) to the QA contract, necessary to accommodate the later than anticipated start-up of the system development phase of the contract, was approved by Governor and Executive Council on December 12, 2006 (Item # 119A) and extended the duration of the QA contract to December 31, 2007. Amendment 2, approved by Governor and Executive Council on December 11, 2007 (Item #60), extended the duration of the contract one additional year to December 31, 2008. Amendment 3 extended the contract period through June 30, 2010 (Item #57), with the option, at the State's sole discretion and with the approval of Governor and Executive Council, to extend the contract period through December 31, 2010. This Amendment 4 adds a minimum of 18 months and a maximum of two years to the contract period, from June 30, 2010 to June 30, 2012, a period of up to 18 months beyond the extension period approved in Amendment 3.

The MMIS implementation is currently anticipated to go live on or before October 1, 2011. Amendment 4 provides for QA service coverage to conclude work related to testing, implementation, and six months of post-implementation support. The post-implementation support is required to help support federal certification of the MMIS that will entitle the DHHS to an enhanced rate of Federal Financial Participation (FFP) for MMIS operations. In addition, this Amendment provides the DHHS with the option to terminate the contract early if possible, as soon as the MMIS is implemented and the post-implementation certification phase is complete. Specifically, the DHHS, at its sole option, may terminate the contract effective as early as December 31, 2011, or the last day of any month thereafter, by providing the contractor with 30 calendar days advance written notice.

This amendment is a fixed priced, sole source amendment. Services included in this Amendment were originally competitively bid, but were not re-bid because they are a continuation of the services procured under the original contract and because FOX, given its involvement in this major systems initiative from its onset through detailed system design to the current testing phase, has developed an integral understanding of the NH

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MMIS solution and is the most practical alternative for ensuring uninterrupted, informed support through to the MMIS implementation.

The key drivers behind this sole source request to amend and extend the FOX Systems, LLC contract for quality assurance Services for the MMIS Reprocurement Project, in addition to the services to be acquired, are:

- This amendment allows the State to retain the services of the contractor that, since 12/01/2004 has developed a strong knowledge base of NH Medicaid Business rules, as well as a detailed understanding of the State's MMIS requirements as documented in the NH MMIS RFP, and has been engaged effectively with State staff in the requirements validation and general system design phases of the NH MMIS Project over the past year.
- This extension builds on the effort of the contractor to date, and is the most efficient and cost-effective approach. The information that FOX has gained over the course of the project can be applied directly, without disruption of service, to future testing, implementation, and certification phases, without the lost time and effort that would be necessary to assist a new vendor with overcoming a significant learning curve.
- Each of the lifecycle phases of MMIS DDI effort builds on the last, placing significant value on resources who have had prior exposure and understanding of the new MMIS requirements to date, thereby enhancing efforts to maintain project progress and sustain productive momentum.
- This amendment correctly aligns the DDI services of the quality assurance vendor with the iterative development methodology of the implementation contractor's approach, as well as with the deliverables and project timeline of the MMIS implementation effort, and restructures the QA deliverables to provide for additional support during testing.
- This project is guided by the parameters defined in the State's MMIS Reprocurement Project's Implementation Advanced Planning Document (IAPD). Upon determination that the DDI Phase of the MMIS required additional time for completion, the DHHS and ACS executives and key program leaders met with Regional Directors from the federal Centers for Medicare and Medicaid Services (CMS) to review the project status and future strategy. CMS concurred with the DHHS on the direction of the project and verbally extended continued support. The DHHS is now preparing Amendment 7 to the IAPD, which will be formally reviewed by the federal Centers for Medicare and Medicaid Services (CMS). Amendment 7 to the IAPD will include modification of the FOX contract, with scope of services and pricing consistent with and as described in this amendment. A copy of the contract itself will be submitted to CMS for review along with IAPD Amendment 7. DHHS fully anticipates that the CMS will approve the DHHS's requested changes to the IAPD and the MMIS project, thereby approving 90% Federal Financial Participation (FFP) for the continuation of FOX's quality assurance contractor services to support the extended MMIS implementation timeline.

The implementation of the new MMIS is a complex and challenging endeavor that involves extensive data migration, expansion of internal and external data interfaces, a new web-based systems architecture, rules-based processing, and enhanced business operations to support real-time claims adjudication and claims

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payment capabilities. Given the expansiveness of the NH MMIS project's scope and the complex nature of the MMIS implementation, with its myriad of claims processing and payment functions, it is critical that the efforts of dedicated State staff from the DHHS and the Department of Information Technology (DoIT, formerly known as the "Office of Information Technology" or "OIT") are reinforced with the continued services of the quality assurance contractor.

#### BACKGROUND

The role of the quality assurance (QA) contractor was described in the State's Implementation Advanced Planning Document (IAPD) for the NH MMIS Project, which was approved by the Federal Centers for Medicare and Medicaid Services (CMS) in May 2004. A Request for Proposal (RFP) was issued in June 2004 and FOX Systems, Inc. was selected as the MMIS QA contractor through a competitive bid process. Email notification of the intent to publish a new RFP was sent to a comprehensive vendor list on May 13, 2004. Notification of the RFP publication was issued using standard DoIT procedures. The RFP was issued on May 14, 2004 and published on the Department of Administrative Services (DAS) website. Links to this website were also posted on the Department of Health and Human Services (DHHS) website and the DoIT website. A mandatory bidder's conference was held on May 21, 2004. Formal responses by the DHHS and DoIT to vendor questions were issued on June 2, 2004.

The DHHS received and evaluated three (3) proposals in response to the RFP. These proposals were evaluated based on the vendor's approach, qualifications, price, and technical/service/project management, to determine the best solution at the best value to the State. The evaluations also included vendor on-site team presentations by each of the three vendors. FOX Systems, Inc. was selected as the winning proposal following the evaluation process. FOX received the highest total score overall, and the evaluation team concluded that the FOX proposal best met the objectives set forth in the RFP. The Governor and Executive Council approved the original contract with FOX Systems on December 1, 2004.

Under the contract, FOX agreed to provide a variety of quality assurance services, including services to review and analyze NH Medicaid business rules in preparation for the onset of the development effort for the new NH MMIS. Between December 2004 and December 2005, prior to the start-up of the MMIS DDI effort, FOX Systems staff worked with DHHS and DoIT staff to complete the Business Rules analysis and other pre-development MMIS-related preparatory activities.

The State awarded a contract to ACS State Healthcare on December 7, 2005, to design, develop, and implement the new NH MMIS, and also to provide on-going maintenance and fiscal agent operations services. The MMIS project kick-off meeting was held in December 2005, with "Joint Application Design Requirement Validation Sessions" commencing in January 2006. Since that January, FOX Systems staff has participated along with State staff in all requirement validation and general system and detailed system design sessions, and have been engaged in the review and comment of all implementation contractor deliverables.

FOX, the quality assurance contractor, has partnered with the State to monitor that the functional requirements stipulated by the State, and approved by the Federal Centers for Medicare and Medicaid Services (CMS), are addressed adequately by the implementation contractor. FOX assists the State during the system design and development effort, to ensure that all aspects of the functional, technical, and operational components of the MMIS are verified and validated, and to monitor the project's progress according to plan.

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Continuity of the FOX quality assurance effort throughout the duration of this project is essential to helping the State ensure that its objectives for the implementation of the new MMIS are met at each phase of the project's activity. As the overall duration of the project has increased, FOX has remained committed to its success and has worked with the State to ensure the retention of the same key resources throughout the project lifecycle. Over the course of their daily participation on the MMIS implementation project, the FOX team has developed a more in-depth understanding of the functionality supported by the new NH MMIS, and will apply that understanding to future system testing and validation to ensure that the new MMIS functions and performs as expected.

The expansiveness and complexity of the NH MMIS implementation presents a significant number of challenges and risks that need to be managed and mitigated. To support critical changes in Medicaid regulations and policy, New Hampshire added new functions and required the integration of new technology into the solution. The development and construction effort took longer than planned, and the current effort to comprehensively test the full functionality will require additional time, as well. The DHHS is committed to implementing a solution that is fully tested to ensure delivery of the requisite functionality and performance standards that support operational requirements. Continuation of the quality assurance contractor services is essential to the State in ensuring that the MMIS meets the State's objectives.

This Amendment is necessary to align the FOX contract with the revised MMIS system implementation timeline and continue QA contractor services through to the projected system implementation date and the post-implementation certification of the new MMIS.

Source of Funds: 90% Federal Funds, 10% General Funds

Geographic area to be served: Statewide

ADM. SVS.  
12-2-2008



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF MEDICAID BUSINESS AND POLICY

120 PLEASANT STREET, CONCORD, NH 03301-3861  
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Nicholas A. Tompase  
Commissioner

Kathleen A. Dunn  
Director

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
State House  
Concord, N.H. 03301

November 25, 2008

APPROVED BY \_\_\_\_\_

DATE 12/18/08

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**REQUESTED ACTION**

ITEM # 57

Authorize the Department of Health and Human Services (DHHS), Office of Medicaid Business and Policy (OMBPP), to enter into a sole source contract amendment (Amendment 3) to an existing contract (Contract #971134) with FOX Systems, Inc. (FOX), (Vendor #122726), Scottsdale, AZ 85250, to increase the price limitation by \$787,725 from \$4,471,470 to \$5,259,195, for quality assurance services for the State's Medicaid Management Information System (MMIS), and to extend the completion date from December 31, 2008 to June 30, 2010, effective upon approval of the Governor and Council through June 30, 2010. The Governor and Executive Council approved the original contract on December 1, 2004 (Late Item #E), Amendment 1 on December 12, 2006 (Item # 119A), and Amendment 2 on December 11, 2007 (Item # 60).

Funds to support this agreement are available in the following accounts according to State Fiscal Year, and are anticipated to be available in SFY 2010 upon the availability and continued appropriation of funds in the future operating budgets. Funds are available with authority to adjust amounts, if needed and justified, between fiscal years:

SFY	Account Number	Account Title	Current Modified Budget	Increase / (Decrease) Amount	Revised Modified Budget
2005	010-095-5691-031-0285	Computer Equipment	\$426,820	0	\$426,820
2006	010-095-6126-097-0285	Medicaid Contracts	\$818,733	0	\$818,733
2007	010-095-6126-102-0731	Medicaid Contracts	\$527,267	0	\$527,267
2008	010-095-6126-102-0731	Medicaid Contracts	\$1,750,691	(\$991,528)	\$759,163
2009	010-095-6134-102-0731	Medicaid Contracts	\$947,959	\$325,129	\$1,273,088
2010	010-095-6134-102-0731	Medicaid Contracts	0	\$1,454,124	\$1,454,124
	<b>Total</b>		<b>\$4,471,470</b>	<b>\$ 787,725</b>	<b>\$5,259,195</b>

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
November 25, 2008  
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#### EXPLANATION

The purpose of the above requested action is to enable the continuation of Quality Assurance services provided by FOX Systems, Inc. in support of the implementation of the new NH Medicaid Management Information System (MMIS). The NH MMIS Project is a major information systems initiative underway with the Department and the Department of Information Technology (DIT), to replace the existing 14 year old legacy MMIS with a new system that meets or exceeds the requirements of the NH MMIS Request For Proposals (RFP).

This Amendment extends the duration of the current Quality Assurance (QA) contract, updates the deliverables timeframes to align with the current project schedule, adjusts deliverables to accommodate the system testing and implementation methodology adopted by the DDI vendor, and adds post-implementation services and support for completing requirements necessary to obtain federal certification of the new system. This Amendment will enable the Department to retain the expertise of those FOX Systems' staff who to-date have developed an in-depth understanding of the overall NH MMIS design, development, and implementation (DDI) effort. Along with State project team staff, FOX QA staff will continue to monitor, verify, and validate implementation contractor deliverables and execute tests, to help ensure that the new MMIS meets the RFP requirements, and processes claims payment with integrity.

The implementation of the new MMIS is a complex and challenging endeavor that involves extensive data migration, expansion of internal and external data interfaces, a new web-based systems architecture, rules-based processing, and enhanced business operations to support real-time claims adjudication and claims payment capabilities. Given the expansiveness of the NH MMIS project's scope and the complex nature of the MMIS implementation, with its myriad of claims processing and payment functions, it is critical that the efforts of dedicated State staff from the Department and DIT are reinforced with the services of the Quality Assurance contractor.

FOX, the Quality Assurance contractor, has partnered with the State to monitor that the functional requirements stipulated by the State, and approved by the Federal Centers for Medicare and Medicaid Services (CMS), are addressed adequately by the implementation contractor. FOX assists the State during the system design and development effort, to ensure that all aspects of the functional, technical, and operational components of the MMIS are verified and validated, and to monitor the project's progress according to plan.

The Governor and Executive Council approved the original Quality Assurance contract with FOX Systems, Inc. on December 1, 2004 (Late Item #E), one year prior to finalizing the MMIS DDI contract. Prior to the start up of the implementation contract, FOX provided "Pre-DDI" services to the State. Pre-DDI services resulted in activities and deliverables that helped the State's MMIS project team and Medicaid program area staff organize historical information and prepare for the onset of the system development phase.

With the execution of the MMIS implementation contract with ACS State Healthcare, LLC (ACS) in December 2005, the DDI phase of the Quality Assurance project effort began. Under Amendment 1 to the QA contract, Quality Assurance services outlined in the original contract for the DDI phase were restructured to meet project objectives in coordination with the system Design, Development, and Implementation activities of the implementation contractor. Amendment 2 realigned and extended the Quality Assurance (QA) project timelines, deliverable schedule, and subsequent payment schedule with the extended project timelines and deliverable schedule of the MMIS implementation project. This Amendment 3 serves to maintain the critical QA services through to project completion.

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Dates, deliverables, and payment schedules incorporated in the original QA contract were based on projected estimates for the implementation contractor's schedule of activity. Final execution and approval of the implementation contract with ACS was achieved a year after the QA contract was finalized. To accommodate the later than anticipated start-up of the system development phase of the contract, a no-cost amendment (Amendment 1) to the QA contract was requested and approved by Governor and Executive Council on December 12, 2006 (Item # 119A). Amendment 1 extended the duration of the QA contract to December 31, 2007 and Amendment 2, approved by Governor and Executive Council on December 11, 2007, extended the duration of the contract one additional year to December 31, 2008.

Section 5 of Amendment 1 included a provision to allow the State, at its sole discretion (with the approval of Governor and Council) to further extend the contract through June 30, 2009. By way of relevant background, due to administrative oversight, a reference to this added provision was omitted inadvertently from the Amendment 1 Governor and Council letter. A copy of Section 5 of Amendment 1 is attached. This omission was previously disclosed in the Governor and Council letter submitted on November 6, 2007 with Amendment 2 to this contract.

This requested Amendment 3 extends the QA contract period through June 30, 2010, with the option, at the State's sole discretion and with the approval of Governor and Council, to extend the contract period through December 31, 2010. The optional additional six months from June 30, 2010 to December 31, 2010 has been identified as a period that may be necessary to conclude work related to testing and implementation. The requested Amendment 3 extends the current period from December 31, 2008 to and past June 30, 2009.

This Amendment aligns the FOX contract with the revised MMIS system implementation timeline, and continuing QA contractor services through to the projected system implementation date. Additionally, under Amendment 3, post-implementation services are included, and the distribution of payment is adjusted to cover the costs for the additional deliverables and the schedule of delivery. Project deliverable holdback amounts will continue to be withheld based on the total deliverable cost as was originally agreed upon with the contractor. However, this Amendment allows for the costs associated with certain QA deliverables, including but not limited to holdback amounts, to be divided and distributed across completed components of those deliverables.

This contract amendment is a fixed priced, sole source amendment. Services included in this Amendment were not competitively re-bid since they are a continuation of the services intended under the original contract and because FOX, given its involvement in this major systems initiative from its onset through the detailed system design to-date, has developed an integral understanding of the NH MMIS solution and is the most practical alternative for ensuring uninterrupted, informed support through to the MMIS implementation.

The key drivers behind this sole source request to amend and extend the FOX Systems, Inc. contract for Quality Assurance Services for the MMIS Reprourement Project, in addition to the services to be acquired, are:

- This amendment allows the State to retain the services of the contractor that, since 12/01/2004 has developed a strong knowledge base of NH Medicaid Business rules, as well as a detailed understanding of the State's MMIS requirements as documented in the NH MMIS RFP, and has been engaged effectively with State staff in the requirements validation and general system design phases of the NH MMIS Project over the past year.

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- This extension builds on the effort of the contractor to date, and is the most efficient and cost-effective approach. The information that FOX has gained over the course of the past
- two years can be applied directly, without disruption of service, to future development phases, without the lost time and effort that would be necessary to assist a new vendor with overcoming a significant learning curve.
- Each of the lifecycle phases of MMIS design, development, and implementation effort builds on the last, placing significant value on resources who have had prior exposure and understanding of the new MMIS requirements to date, thereby enhancing efforts to maintain project progress and sustain productive momentum.
- This amendment correctly aligns the DDI services of the Quality Assurance vendor with the iterative development methodology of the implementation contractor's approach, as well as with the deliverables and project timeline of the MMIS implementation effort, and restructures the QA deliverables to provide for additional support during testing.
- This project is guided by the parameters defined in the State's MMIS Reprocurement Project's Implementation Advanced Planning Document (IAPD). The State has submitted Amendment 5 to the IAPD, which is under review by the federal Centers for Medicare and Medicaid Services (CMS). Amendment 5 to the IAPD includes modification of the FOX contracted services, consistent with and as described in this amendment. DHHS anticipates that the CMS will approve the State's requested changes to the IAPD and MMIS project, thereby approving 90% Federal Financial Participation (FFP) for the continuation of FOX System's Quality Assurance contractor services to support the extended MMIS implementation timeline.

#### BACKGROUND

The role of the Quality Assurance (QA) Contractor was described in the State's Implementation Advanced Planning Document for the NH MMIS Project, which was approved by the federal Centers for Medicare and Medicaid Services (CMS) in May 2004. A Request for Proposal (RFP) was issued in June 2004 and FOX Systems, Inc. was selected as the MMIS QA contractor through a competitive bid process. Email notification of the intent to publish a new RFP was sent to a comprehensive vendor list on May 13, 2004. Notification of the RFP publication was issued using standard DIT (formerly known as the "Office of Information Technology" or "OIT") procedures. The RFP was issued on May 14, 2004 and published on the Department of Administrative Services (DAS) website. Links to this website were also posted on the Department of Health and Human Services (DHHS) website and the DIT (formerly OIT) website. A mandatory bidder's conference was held on May 21, 2004. Formal responses by the Department and DIT (formerly OIT) to vendor questions were issued on June 2, 2004.

The Department received and evaluated three (3) proposals in response to the RFP. (Please see attached bidders list). These proposals were evaluated based on the vendor's approach, qualifications, price, and technical/service/project management, to determine the best solution at the best value to the State. The evaluations also included vendor on-site team presentations by each of the three vendors. FOX Systems, Inc. was selected as the winning proposal following the evaluation process. FOX received the highest total score overall,

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
November 25, 2008  
Page 5 of 6

and the evaluation team concluded that the FOX proposal best met the objectives set forth in the RFP. The Governor and Executive Council approved the original contract with FOX Systems on December 1, 2004.

Under the contract, FOX agreed to provide a variety of quality assurance services, including services to review and analyze NH Medicaid business rules in preparation for the onset of the development effort for the new NH MMIS. Between December 2004 and December 2005, prior to the start-up of the MMIS Design, Development and Implementation effort, FOX Systems staff worked with Department and DIT staff to complete the Business Rules analysis and other pre-development MMIS-related preparatory activities.

The State awarded a contract to ACS State Healthcare on December 7, 2005, to design, develop, and implement the new NH MMIS, and also to provide on-going maintenance and fiscal agent operations services. The MMIS Project kick-off meeting was held in December 2005, with Joint Application Design Requirement Validation Sessions commencing in January 2006. Since that January, FOX Systems staff has participated along with State staff in all requirement validation and general system and detailed system design sessions, and have been engaged in the review and comment of all implementation contractor deliverables.

Continuity of the FOX Quality Assurance effort throughout the duration of this project is essential to helping the State ensure that its objectives for the implementation of the new MMIS are met at each phase of the project's activity. As the overall duration of the project has increased, FOX has remained committed to its success and has worked with the State to ensure the retention of the same key resources throughout the project lifecycle.

Prior to the start-up of the MMIS implementation effort, State staff invested a significant amount of effort into providing the FOX team with a strong knowledge base of the NH Medicaid Program and MMIS-RFP requirements. Over the course of their daily participation on the MMIS implementation project, the FOX team has developed a more in-depth understanding of the functionality supported by the new NH MMIS, and will apply that understanding to future system testing and validation to ensure that the new MMIS functions and performs as expected.

The expansiveness and complexity of the NH MMIS implementation presents a significant number of challenges and risks that need to be managed and mitigated. Continuation of the Quality Assurance contractor services is essential to the State in ensuring that the MMIS meets the State's objectives.

Source of Funds: 90% Federal Funds, 10% General Funds

Geographic area to be served: Statewide

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His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
November 25, 2008  
Page 6

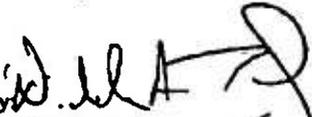
In the event that the Federal Funds are not approved for the costs of this Amendment,  
General Funds will not be requested to support this program.

Respectfully submitted,



Kathleen A. Dunn, MPH  
Medicaid Director

Approved by



Nicholas A. Toumpas  
Commissioner



Richard C. Bailey, Jr.  
Chief Information Officer

12/11/07



STATE OF NEW HAMPSHIRE  
 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 OFFICE OF MEDICAID BUSINESS AND POLICY

129 PLEASANT STREET, CONCORD, NH 03301-3857  
 603-271-8166 1-800-832-3345 Ext. 8168  
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Nicholas A. Tompao  
 Acting Commissioner

Ruthleen A. Dunn  
 Acting Director

November 6, 2007

APPROVED BY \_\_\_\_\_

DATE 12/11/07

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ITEM # 60

His Excellency, Governor John H. Lynch  
 and the Honorable Executive Council  
 State House  
 Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services (DHHS), Office of Medicaid Business and Policy (OMBP), to enter into a sole source contract amendment (Amendment 2) to an existing contract (Contract #971134) with FOX Systems, Inc. (FOX), (Vendor #122726), Scottsdale, AZ 85250, to increase the price limitation by \$1,493,475 from \$2,977,995 to \$4,471,470, for quality assurance services for the State's Medicaid Management Information System (MMIS), and to extend the completion date from December 31, 2007 to December 31, 2008, effective upon approval of the Governor and Council through December 31, 2008. The Governor and Executive Council approved the original contract on December 1, 2004 (Late Item #E) and Amendment 1 on December 12, 2006 (Item # 119A).

Funds to support this agreement are available in the following accounts according to State Fiscal Year, with authority to adjust amounts, if needed and justified, between fiscal years:

SFY	Account Number	Account Title	Current Modified Budget	Increase / (Decrease) Amount	Revised Modified Budget
2005	010-095-5691-031-0285	Computer Equipment	\$426,820	0	\$426,820
2006	010-095-6126-097-0285	Medicaid Contracts	\$818,733	0	\$818,733
2007	010-095-6126-097-0285	Medicaid Contracts	\$921,776	(\$394,509)	\$527,267
2008	010-095-6126-097-0285	Medicaid Contracts	\$810,666	\$940,025	\$1,750,691
2009	010-095-6126-097-0285	Medicaid Contracts	\$0	\$947,959	\$947,959
	<b>Total</b>		<b>\$2,977,995</b>	<b>\$1,493,475</b>	<b>\$4,471,470</b>

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
November 6, 2007  
Page 2

#### EXPLANATION

The purpose of the above requested action is to enable the continuation of Quality Assurance services provided by FOX Systems, Inc. in support of the implementation of the new NH Medicaid Management Information System (MMIS). The NH MMIS Project is a major information systems initiative underway with the Department and the Office of Information Technology (OIT), to replace the existing 13 year old legacy MMIS with a new system that meets or exceeds the requirements of the NH MMIS Request For Proposals (RFP).

This Amendment extends the duration of the current Quality Assurance (QA) contract, and adjusts the deliverables and schedule to align with the extended MMIS implementation date of January 1, 2009. This Amendment will enable the Department to retain the expertise of those FOX Systems' staff who have developed to date an in-depth understanding of the overall NH MMIS design, development, and implementation (DDI) effort. Along with State project team staff, FOX QA staff will continue to monitor, verify, and validate implementation contractor deliverables and execute tests, to help ensure that the new MMIS meets the RFP requirements, and processes claims payment with integrity.

The implementation of the new MMIS is a complex and challenging endeavor that involves extensive data migration, expansion of internal and external data interfaces, a new web-based systems architecture, rules-based processing, and enhanced business operations to support real-time claims adjudication and claims payment capabilities. Given the expansiveness of the NH MMIS project's scope and the complex nature of the MMIS implementation, with its myriad of claims processing and payment functions, it is critical that the efforts of dedicated State staff from the Department and OIT are reinforced with the services of the Quality Assurance contractor.

FOX, the Quality Assurance contractor, has partnered with the State to monitor that the functional requirements stipulated by the State, and approved by the Federal Centers for Medicare and Medicaid Services (CMS), are addressed adequately by the implementation contractor. FOX assists the State during the system design and development effort, to ensure that all aspects of the functional, technical, and operational components of the MMIS are verified and validated, and to monitor the project's progress according to plan.

The Governor and Executive Council approved the original Quality Assurance contract with FOX Systems, Inc. on December 1, 2004 (Late Item #E), one year prior to finalizing the MMIS DDI contract. Prior to the start up of the implementation contract, FOX provided "Pre-DDI" services to the State. Pre-DDI services resulted in activities and deliverables that helped the State's MMIS project team and Medicaid program area staff organize historical information and prepare for the onset of the system development phase.

With the execution of the MMIS implementation contract with ACS State Healthcare, LLC (ACS) in December 2005, the DDI phase of the Quality Assurance project effort began. Under Amendment 1 to the QA contract, Quality Assurance services outlined in the original contract for the DDI phase were restructured to meet project objectives in coordination with the system Design, Development, and Implementation activities of the implementation contractor.

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
November 6, 2007  
Page 3

This Amendment 2 realigns and extends the Quality Assurance project timelines, deliverable schedule, and subsequent payment schedule with the extended project timelines and deliverable schedule of the MMIS implementation project.

Dates, deliverables, and payment schedules incorporated in the original QA contract were based on projected estimates for the implementation contractor's schedule of activity. Final execution and approval of the implementation contract with ACS was achieved a year after the QA contract was finalized. To accommodate the later than anticipated start-up of the system development phase of the contract, a no-cost amendment (Amendment 1) to the QA contract was requested and approved by Governor and Executive Council on December 12, 2006 (Item # 119A). Amendment 1 extended the duration of the QA contract to December 31, 2007. Section 5 of Amendment 1 also included a provision to allow the State at its sole discretion to further extend the contract to June 30, 2009. Due to administrative oversight, a reference to this added provision was omitted inadvertently from the Amendment 1 Governor and Council letter. A copy of Section 5 of Amendment 1 is attached.

This requested Amendment 2 extends the QA contract period through December 31, 2008, thereby aligning this contract with the revised system implementation timeline, and continuing QA contractor services through to the projected system implementation date. Additionally, under Amendment 2, the number of QA deliverables is increased, the schedule for QA deliverable reviews is aligned with the development effort, and the distribution of payment is adjusted to cover the costs for the additional deliverables and the schedule of delivery. This Amendment allows for the costs associated with certain QA deliverables to be divided and distributed across completed components of those deliverables. Project deliverable holdback amounts will continue to be withheld based on the total deliverable cost as was originally agreed upon with the contractor.

This contract amendment is a fixed priced, sole source amendment. Services included in this Amendment were not competitively rebid since they are a continuation of the services intended under the original contract and because FOX, given its involvement in this major systems initiative from its onset through the detailed system design to-date, has developed an integral understanding of the NH MMIS solution and is the most practical alternative for ensuring uninterrupted, informed support through to the MMIS implementation.

The key drivers behind this sole source request to amend and extend the FOX Systems, Inc. contract for Quality Assurance Services for the MMIS Reprocurement Project, in addition to the services to be acquired, are:

- This amendment allows the State to retain the services of the contractor that, since 12/01/2004 has developed a strong knowledge base of NH Medicaid Business rules, as well as a detailed understanding of the State's MMIS requirements as documented in the NH MMIS RFP, and has been engaged effectively with State staff in the requirements validation and general system design phases of the NH MMIS Project over the past year.
- This extension builds on the effort of the contractor to date, and is the most efficient and cost-effective approach. The information that FOX has gained

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
November 6, 2007  
Page 4

over the course of the past two years can be applied directly, without disruption of service, to future development phases, without the lost time and effort that would be necessary to assist a new vendor with overcoming a significant learning curve.

- Each of the lifecycle phases of MMIS design, development, and implementation - effort builds on the last, placing significant value on resources who have had prior exposure and understanding of the new MMIS requirements to date, thereby enhancing efforts to maintain project progress and sustain productive momentum.
- The original quality assurance contract was approved prior to the approval of the contract for the MMIS implementation contractor. Quality assurance deliverables, deliverable due dates, and project timelines were estimated based on the projected MMIS implementation timeline. This amendment correctly aligns the DDI services of the Quality Assurance vendor with the iterative development methodology of the implementation contractor's approach, as well as with the deliverables and project timeline of the MMIS implementation effort.
- The Federal Centers for Medicare and Medicaid Services (CMS) has approved Amendment 4 to the State's MMIS Reprocurement Project's Implementation Advanced Planning Document (IAPD), thereby approving 90% Federal Financial Participation (FFP) for the continuation of FOX System's Quality Assurance contractor services to support the extended MMIS implementation timeline.

#### BACKGROUND

The role of the Quality Assurance (QA) Contractor was described in the State's Implementation Advanced Planning Document for the NH MMIS Project, which was approved by the federal Centers for Medicare and Medicaid Services (CMS) in May 2004. A Request for Proposal (RFP) was issued in June 2004 and FOX Systems, Inc. was selected as the MMIS QA contractor through a competitive bid process. Email notification of the intent to publish a new RFP was sent to a comprehensive vendor list on May 13, 2004. Notification of the RFP publication was issued using standard Office of Technology (OIT) procedures. The RFP was issued on May 14, 2004 and published on the Department of Administrative Services (DAS) website. Links to this website were also posted on the Department of Health and Human Services (DHHS) website and the OIT website. A mandatory bidder's conference was held on May 21, 2004. Formal responses by the Department and OIT to vendor questions were issued on June 2, 2004.

The Department received and evaluated three (3) proposals in response to the RFP. (Please see attached bidders list). These proposals were evaluated based on the vendor's approach, qualifications, price, and technical/service/project management, to determine the best solution at the best value to the State. The evaluations also included vendor on-site team presentations by each of the three vendors. FOX Systems, Inc. was selected as the winning

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
November 6, 2007  
Page 5

proposal following the evaluation process. FOX received the highest total score overall and that the FOX proposal best met the objectives set forth in the RFP. The Governor and Executive Council approved the original contract with FOX Systems on December 1, 2004.

Under the contract, FOX agreed to provide a variety of quality assurance services, including services to review and analyze NH Medicaid business rules in preparation for the onset of the development effort for the new NH MMIS. Between December 2004 and December 2005, prior to the start-up of the MMIS Design, Development and Implementation effort, FOX Systems staff worked with Department and OIT staff to complete the Business Rules analysis and other pre-development MMIS-related preparatory activities.

The State awarded a contract to ACS State Healthcare on December 7, 2005, to design, develop, and implement the new NH MMIS, and also to provide on-going maintenance and fiscal agent operations services. The MMIS Project kick-off meeting was held in December 2005, with Joint Application Design Requirement Validation Sessions commencing in January 2006. Since that January, FOX Systems staff has participated along with State staff in all requirement validation and general system and detailed system design sessions, and have been engaged in the review and comment of all implementation contractor deliverables.

Continuity of the FOX Quality Assurance effort throughout the duration of this project is essential to helping the State ensure that its objectives for the implementation of the new MMIS are met at each phase of the project's activity. As the overall duration of the project has increased, FOX has remained committed to its success and has worked with the State to ensure the retention of the same key resources throughout the project lifecycle.

Prior to the start-up of the MMIS implementation effort, State staff invested a significant amount of effort into providing the FOX team with a strong knowledge base of the NH Medicaid Program and MMIS-RFP requirements. Over the course of their daily participation on the MMIS implementation project, the FOX team has developed a more in-depth understanding of the functionality supported by the new NH MMIS, and will apply that understanding to future system testing and validation to ensure that the new MMIS functions and performs as expected.

The expansiveness and complexity of the NH MMIS implementation presents a significant number of challenges and risks that need to be managed and mitigated. Continuation of the Quality Assurance contractor services is essential to the State in ensuring that the MMIS meets the State's objectives.

Source of Funds: 90% Federal Funds, 10% General Funds

Geographic area to be served: Statewide

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

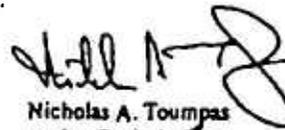
His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
November 6, 2007  
Page 6

Respectfully submitted,

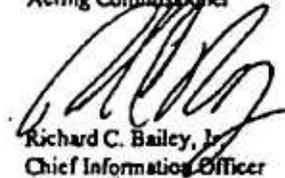


Kathleen A. Dunn  
Acting Medicaid Director

Approved by:



Nicholas A. Toumpas  
Acting Commissioner



Richard C. Bailey, Jr.  
Chief Information Officer



John A. Stephen  
Commissioner

Norman W. Cordell  
Director

STATE OF NEW HAMPSHIRE  
APPROVED BY \_\_\_\_\_  
DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE 12/12/06  
OFFICE OF MEDICAID BUSINESS AND POLICY

PAGE \_\_\_\_\_  
129 PLEASANT STREET, CONCORD, NH 03301-3337  
603-271-4344 1-800-852-3343 Ext. 4796  
Fax: 603-271-4365 TDD Access: 1-800-852-3344 #119A

November 30, 2006

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
State House  
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services (DHHS), Office of Medicaid Business and Policy (OMBP), to amend (Amendment 1) an existing Agreement (971134) with FOX Systems, Inc. ("FOX"), Scottsdale, AZ 85250, (Vendor #122726), to provide quality assurance services for the State's Medicaid Management Information System (MMIS) and the Medicaid Program. The Governor and Executive Council approved the original contract on December 1, 2004 (Late Item #E). This Amendment 1 extends the contract termination date from December 31, 2006 to December 31, 2007, effective January 1, 2007 or date of Governor and Council approval, whichever is later, with no increase to the total original purchase value of \$2,977,995.

The existing contract with FOX is due to expire on December 31, 2006. This Amendment 1 extends the term of the MMIS Quality Assurance service contract with FOX for a 12-month period from December 31, 2006 through December 31, 2007 and provides for a redistribution of contract deliverables and expenditures across fiscal years to align with changes in the MMIS implementation project schedule. This Amendment does not change the total value of the contract.

Funds to support this agreement are available in the following accounts according to State Fiscal Year, with authority to adjust amounts, if needed and justified, between fiscal years:

SPY	Appropriation	Description	Original Contract	Change to Contract	Amended Contract
2005	010-095-5691-031-0285	Computer Equipment	\$986,127	(\$559,307)	\$426,820
2006	010-095-6126-097-0285	Medicaid Contracts	\$817,437	\$1,296	\$818,733
2007	010-095-6126-097-0285	Medicaid Contracts	\$1,174,431	(\$252,655)	\$921,776
2008	010-095-6126-097-0285	Medicaid Contracts	-	\$810,666	\$810,666
Total Contract			\$2,977,995	0	\$2,977,995

His Excellency, Governor John H. Lynch  
And the Honorable Executive Council  
November 30, 2006  
Page 2

#### EXPLANATION

The purpose of the above requested action is to enable the continuation of Quality Assurance services of FOX Systems, Inc. in support of the major information systems initiative underway within the Department, in conjunction with the Office of Information Technology (OIT), to replace the existing Medicaid Management Information System and to implement a new MMIS. The amendment will extend the duration of the original contract and adjust the deliverables schedule to accommodate the later than anticipated start of the system development phase of the overall MMIS project. The extension will enable the Department to retain the expertise of those FOX Systems' staff who have developed to date an in-depth understanding of the NH MMIS design, development, and implementation effort, and who will continue to monitor, verify, and validate deliverables and execute tests, to help ensure that the new replacement MMIS meets the requirements of the NH Medicaid program and processes payment with integrity.

Given the expansiveness of the NH MMIS project's scope and the complex nature of the MMIS implementation with its myriad of claims processing and payment functions, it is critical that the efforts of dedicated staff from the Department and OIT are reinforced with the services designated to be provided by the Quality Assurance contractor under the original agreement. The deliverables provided by FOX support the need to manage costs associated with the implementation, stay on schedule with the aggressive project timeline, and help ensure that the integrity of the system and that project objectives are met.

The Quality Assurance services outlined in the original contract were structured to meet project objectives during two major phases of the MMIS implementation, in coordination with system Design, Development, and Implementation (DDI) project activities of the implementation vendor. The QA services include:

- Pre-DDI Services – Services provided in advance of the start of system development to assist with Project Management and Organization and to enhance the Department's readiness for providing business rules criteria to support development of the systems rules logic. At this juncture, all services in support of the Pre-DDI project phase have been satisfactorily delivered as defined in the original contract.
- DDI Quality Assurance Services – Services provided throughout the systems development process through to implementation to monitor, verify, and validate the deliverables produced by the implementation contractor, to conduct all aspects of system testing, and to verify and validate operational readiness. Deliverables required to support DDI project phase are in progress with ongoing activity extending into the first half of SFY08, aligning with the overall MMIS project schedule.

This amendment aligns the Quality Assurance project timelines, deliverable schedule, and subsequent payment schedule with the project timelines and deliverable schedule of the

His Excellency, Governor John H. Lynch  
And the Honorable Executive Council  
November 30, 2006  
Page 3

MMIS implementation project. The original Quality Assurance contract with FOX Systems, Inc. was approved and became effective on December 1, 2004, one year prior to finalizing the MMIS implementation contract. Dates, deliverables, and payment schedules incorporated in the original QA contract were based on estimates and projections for the implementation contractor schedule. The number of actual deliverables within this amendment has increased, given the iterative development methodology employed by the implementation contractor, the schedule for deliverable reviews has been modified to flow with the development effort, and the distribution of payment has been adjusted to cover the costs for the additional deliverables and the schedule of delivery.

The contract period is extended for one-year. The list of deliverables covered under the scope of services was expanded to reflect the actual delivery schedule of the implementation contractor deliverables. Although the total cost of the contract remains the same, dollars not expended to date due to the later start-up of the MMIS development effort have been redistributed to cover the actual deliverables for the period of this amendment. The payment schedule was adjusted to accommodate the overall deliverable schedule.

The implementation of the new MMIS is a complex and challenging endeavor that requires a detailed translation of business rules logic, extensive data migration, expansion of interfaces, new systems architecture, and expanded business operations support and claims adjudication and payment capabilities. FOX, the Quality Assurance contractor, has partnered with the State to monitor that the functional requirements stipulated by the State, and approved by the Federal Government, are addressed adequately by the implementation vendor during the system design and development, that all aspects of the functional, technical, and operational components of the MMIS are verified and validated, and to monitor the project's progress according to plan.

The key drivers behind this request to amend and extend the FOX Systems, Inc. contract for Quality Assurance Services for the MMIS Reprourement Project, in addition to the services to be acquired, are:

- This amendment allows the State to retain the services of the contractor that, since 12/01/2004 has developed a strong knowledge base of NH Medicaid Business rules, as well as a detailed understanding of the State's MMIS requirements as documented in the NH MMIS RFP, and has been engaged effectively with State staff in the requirements validation and general system design phases of the NH MMIS Project over the past year.
- This extension builds on the effort of the contractor to date, and is the most efficient and cost-effective approach since the information that has been gained over the course of the past two years can be applied directly, without disruption of service, to future development phases, without the lost time and effort that would be necessary to assist a new vendor with overcoming a significant learning curve.
- Each of the lifecycle phases of MMIS design, development, and implementation effort builds on the last, placing significant value on

His Excellency, Governor John H. Lynch  
And the Honorable Executive Council  
November 30, 2006  
Page 4

resources who have had prior exposure and understanding of the new MMIS requirements to date, thereby enhancing efforts to maintain project progress and sustain productive momentum.

- The original quality assurance contract was approved prior to the approval of the contract for the MMIS implementation contractor. Quality assurance deliverables, deliverable due dates, and project timelines were estimated based on the projected MMIS implementation timeline. This amendment correctly aligns the DDI services of the Quality Assurance vendor with the iterative development methodology of the implementation contractor's approach, as well as with the deliverables and project timeline of the implementation effort.
- The Federal Centers for Medicare and Medicaid Services (CMS) Regional Office has approved the State's MMIS Reprourement Project's Implementation Advanced Planning Document (IAPD), which includes the procurement of Quality Assurance contractor services to support the MMIS implementation initiative.
- CMS approval will result in 90% Federal Financial Participation (FFP) and the remaining 10% using State General Funds to cover the costs of the Quality Assurance contractor.

Services included in this Amendment were not competitively re-bid since they are a continuation of the original contract deliverables and FOX is in the best position to continue uninterrupted support of the QA services for the MMIS project through implementation. The contract amendment is fixed price at the original purchase value and is not subject to re-approval from the federal Centers for Medicare and Medicaid Services.

#### BACKGROUND

The role of the Quality Assurance Contractor was described in the State's Implementation Advanced Planning Document for the NH MMIS Project, which was approved by the federal Centers for Medicare and Medicaid Services in May 2004. FOX Systems, Inc. was selected as the MMIS QA contractor through a competitive bid process. The Governor and Executive Council approved the original contract with FOX Systems on December 1, 2004.

Under the contract, FOX agreed to provide a variety of quality assurance services, including services to review and analyze NH Medicaid business rules in preparation for the onset of the development effort for the new NH MMIS. Between December 2004 and December 2005, FOX Systems staff worked with Department and OIT staff to complete Business Rules analysis and other pre-development analytical activities prior to the start-up of the MMIS Design, Development and Implementation effort.

Following a competitive bid, on December 7, 2005 the State awarded a contract to ACS State Healthcare to design, develop, and implement the new NH MMIS, and to provide on-going maintenance and fiscal agent operations services. The MMIS Project kick-off meeting was held in December 2005, with Joint Application Design Requirement Validation Sessions

His Excellency, Governor John H. Lynch  
And the Honorable Executive Council  
November 30, 2006  
Page 5

commencing in January 2006. Since January, FOX Systems staff has participated along with State staff in all requirement validation and general systems design sessions, and have been engaged in the review and comment of all implementation contractor deliverables.

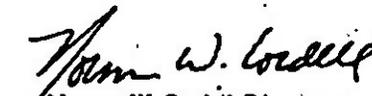
Given the complex and comprehensive nature of the MMIS implementation, the aggressive project implementation timeline, and the considerable cost investment of over \$26 million in the overall implementation effort, this extension of Quality Assurance contractor services to assist the State in ensuring that the MMIS meets the State's objectives is essential.

Source of Funds: 90% Federal Funds, 10% State General Funds

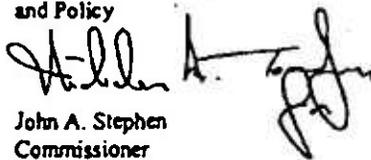
Geographic area to be served: Statewide

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

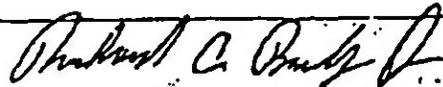
Respectfully submitted,

  
Norman W. Cordell, Director  
Office of Medicaid Business  
and Policy

Approved by:

  
John A. Stephen  
Commissioner

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Richard C. Bailey, Jr.  
Chief Information Officer



John A. Stephen  
Commissioner

Stephen A. Norton  
Director

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF MEDICAID BUSINESS AND POLICY

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FAX: 603-271-8113 TDD Access: 1-800-735-2964

OFF

November 1, 2004

His Excellency, Governor Craig R. Benson  
and the Honorable Executive Council  
State House  
Concord, NH 03301

12/1/04  
Late Item E

REQUESTED ACTION

Authorize the New Hampshire Department of Health and Human Services (DHHS), Office of Medicaid Business and Policy (OMBP), to enter into an agreement with FOX Systems Inc. (FOX), Scottsdale, AZ 85250 (Vendor Number 122726) to provide quality assurance services for the Medicaid Management Information System (MMIS) in the amount of \$2,977,995.00 from December 1, 2004, or date of Governor and Council approval, whichever is later, through June 30, 2007. Funds to support this agreement are available in the following accounts according to State Fiscal Year, with authority to adjust amounts, if needed and justified, between fiscal years:

<u>SPY</u>	<u>Account Number</u>	<u>Description</u>	<u>Amount</u>
2005	010-095-5691-031-0285	Computer Enhancements	\$ 986,127
2006	010-095-6126-097-0285	Medicaid Contracts	\$ 817,437
2007	010-093-6126-097-0285	Medicaid Contracts	\$ 1,174,431
Total			\$ 2,977,995

EXPLANATION

The purpose of the above requested action is to engage the services of FOX Systems, Inc. to provide Quality Assurance Services in support of the major information systems initiative to be undertaken by the Department in conjunction with the Office of Information Technology (OIT), to replace the existing Medicaid Management Information System and to implement a new MMIS by June 1, 2007. Given the need for a clear definition of business rules in preparation for development of the new MMIS, the project's aggressive implementation timeline, the expansiveness of the project's scope, the complex nature of the MMIS with its myriad of claims processing and payment functions, and to manage costs associated with the implementation, it is critical that the efforts of dedicated staff from the Department and OIT are reinforced with the services provided by the Quality Assurance contractor under this agreement, to help ensure the integrity of the system and that project objectives are met.

The Quality Assurance services to be provided by the contractor are structured to meet project objectives during two major phases of the MMIS implementation, in coordination with

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interfaces, new systems architecture, and expanded business operations support and claims adjudication and payment capabilities. The Quality Assurance Contractor will partner with the State to monitor that the functional requirements stipulated by the State, and approved by the Federal Government, are addressed adequately by the implementation contractor during the system design and development, that all aspects of the functional, technical, and operational components of the MMIS are verified and validated, and to monitor the project's progress according to plan.

The key drivers behind this request to contract for Quality Assurance Services for the MMIS Reprourement Project, in addition to the services to be acquired, are:

- The Federal Centers for Medicare and Medicaid Services (CMS) Regional Office has approved the State's MMIS Reprourement Project's Implementation Advanced Planning Document (IAPD), which includes the procurement of Quality Assurance contractor services to support the MMIS implementation initiative;
- CMS approval will result in 90% Federal Financial Participation (FFP) and the remaining 10% using State General Funds to cover the costs of the Quality Assurance contractor;
- The MMIS will process over 6 million Medicaid and other related claims totaling \$770 million a year and will issue payment to over 7,000 active providers for services provided on behalf of approximately 94,000 eligible recipients statewide; and the Quality Assurance services will help to ensure the integrity of claims and payment processing; and
- The pre-development business rules analysis to be conducted by the Quality Assurance vendor will enhance the Department's ability to confirm and document the business processing requirements for provider reimbursement methodologies in advance of requirements validation, thereby helping to keep the project moving forward from the onset.

FOX Systems, Inc. was selected for the MMIS QA contract through a competitive bid process. E-mail notification of the intent to publish a new RFP was sent to a comprehensive vendor list on May 13, 2004. Notification of the RFP publication was issued using standard Office of Information Technology (OIT) procedures. The Request for Proposals (RFP) was issued on May 14, 2004 and published on the Department of Administrative Services (DAS) website. Links to this website were also posted on the Department of Health and Human Services (DHHS) website and the OIT website. A mandatory bidder's conference was held on May 21, 2004. Formal responses by the Department and OIT to vendor questions were issued on June 2, 2004.

The Department received and evaluated three (3) proposals in response to the RFP - (Please see attached bidders list). These proposals were evaluated based on the vendor's approach, qualifications, price, and technical/service/project management, to determine the best solution at the best value to the State. The evaluations also included vendor on-site team presentations by each of the three vendors. FOX Systems, Inc. was selected as the winning

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### BACKGROUND

New Hampshire's current MMIS is a component-based system. It is comprised of three (3) distinct systems, each operated by a different vendor. The MMIS processes Medicaid payments for covered services provided to New Hampshire Medicaid-eligible persons in both its fee for service and pharmacy benefit management programs. The MMIS processed approximately 6.5 million claims, in excess of \$770 million in State Fiscal Year 2003 (SFY03). In addition, the MMIS performs various review, audit, and reporting functions to assess and evaluate the provision of Medicaid services and associated payment. The current MMIS meets all certification requirements as set forth by the Centers for Medicare and Medicaid Services (CMS) in the State Medicaid Manual Part 11 - Medicaid Management Information System.

The New Hampshire ADM (NH ADM) Fee for Service (FFS) system is the core component of the MMIS. It is the primary tool used by the Department of Health and Human Services (DHHS) to manage its Medicaid program and is operated by the State's fiscal agent, Electronic Data Systems (EDS). EDS implemented the NH ADM system in April 1994. The State owns the NH ADM hardware and software.

The FFS component is the traditional MMIS that processes all Medicaid claims, except for pharmacy, and issues payment to providers. Approximately 2.6 million claims for \$662 million were processed to payment through NH ADM in State Fiscal Year 2003. Recipient eligibility information is passed nightly to NH ADM from the eligibility determination system, New REIGHTS.

A second component of the New Hampshire MMIS is the Pharmacy Benefits Management System (PBM). The State has contracted with First Health Services Corporation (FHSC) as its Pharmacy Benefits Manager for system and operations support. The PBM component was implemented in November 2001 and processes pharmacy point of sale (POS) claims and issues payments, via checks, to pharmacy providers. Functions supported through the PBM system include pharmacy claims processing and payment, preferred drug list, pharmacy audits, as well as drug rebate, drug utilization, and other clinical pharmacy initiatives. It also supports the supplemental and the Omnibus Budget Reconciliation Act (OBRA) drug rebate and drug utilization programs, auditing, and various other clinical initiatives. Approximately 4 million claims for \$112 million were processed to payment through the PBM system in State Fiscal Year 2003 (SFY03).

The third component, the Medicaid Decision Support System (MDSS), developed using The Medstat Group Inc.'s proprietary reporting tools, Advantage Suite, supports the State's Management and Administrative Reporting System (MARS), Surveillance and Utilization Review System (SURS) and federal reporting requirements of MMIS. It also provides statistical and Medicaid trend analysis and reporting support and additional federal reporting functionality. MDSS receives a weekly data file from the NH ADM source system, including the data received from PBM.

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STATE OF NEW HAMPSHIRE  
 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 OFFICE OF INFORMATION SERVICES

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1/16/13  
 # 17

December 14, 2012

*SOLE SOURCE*

Her Excellency, Governor Margaret Wood Hassan  
 and the Honorable Council  
 State House  
 Concord, New Hampshire 03301

REQUESTED ACTION

*90% Fed 10% GEN*

Authorize the Department of Health and Human Services, Office of Information Services, to enter into a sole source amendment (Amendment 6) to an existing contract (Purchase Order # 1018352) with Cognosant, LLC (Vendor #223062) (formerly FOX Systems, LLC), 6263 North Scottsdale Road, Suite 200, Scottsdale, AZ 85250, for continuation of quality assurance services and expansion of the scope of services in compliance with the Centers for Medicare and Medicaid Services regulations related to the State's Medicaid Management Information System project by increasing the price limitation by \$2,663,798 (from \$9,606,677 to a new amount not to exceed \$12,270,475) and by extending the completion date from December 31, 2013, to December 31, 2014, effective December 19, 2012, or upon Governor and Executive Council approval, whichever is later. Governor and Executive Council approved the original contract on December 1, 2004 (Late Item #E), Amendment 1 on December 12, 2006 (Item #119A), Amendment 2 on December 11, 2007 (Item #60), Amendment 3 on December 18, 2008 (Item #57), Amendment 4 on June 23, 2010 (Item #95) and Amendment 5 on April 18, 2012 (Item #37). Funds are available in State Fiscal Year 2013 and are anticipated to be available in State Fiscal Years 2014 and 2015 upon the availability and continued appropriation of funds in future operating budgets with authority to adjust amounts between State Fiscal Years if needed and justified.

05-95-954010-5952 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES,  
 HHS-COMMISSIONER, OFFICE OF INFORMATION SERVICES, OFFICE OF INFORMATION SERVICES

State Fiscal Year	Class Object	Class Title	Current Modified Budget	Increase/ (Decrease)	Revised Modified Budget
SFY 2005	102/500731	Contracts for Program Services	\$426,820.00	\$0.00	\$426,820.00
SFY 2006	102/500731	Contracts for Program Services	\$818,733.00	\$0.00	\$818,733.00
SFY 2007	102/500731	Contracts for Program Services	\$527,267.00	\$0.00	\$527,267.00

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- Deliverables are produced at the cost outlined.

Additionally, the Department will review specific performance measures during the three (3) major phases of the project:

1. Pre-DDI Services:
  - Completed a Critical Report Analysis that was useful to the MMIS Project;
  - Defined and confirmed the business processing rules in a way that it was useful to the new MMIS; and
  - Proposed a logical conversion strategy that was effective during the implementation phase of the project.
2. DDI Quality Assurance Services:
  - Understood the State's requirement for the MMIS and ensured the new MMIS addressed the functional, technical, and operational requirements;
  - Assisted the State in Joint Application Design Sessions (JAD) and deliverables review;
  - Provided sufficient project monitoring;
  - Identified risk and proposed risk mitigation strategies;
  - Planned, prepared, and conducted requisite auditing and testing of the systems functionality and operations environment; and
  - Provided Independent Validation and Verification (IV&V) for the project.
3. Post-DDI Services:
  - Verifying that the requisite documentation is compiled and preparing the State for the CMS on-site MMIS certification review process; and
  - Helped prepare the State prepare for the CMS on-site visit.

Source of Funds: 90% Federal Funds, 10% State General Funds

Geographic area to be served: Statewide

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.