

TECHNICAL RESPONSE PACKET COPY

State of Arkansas Department of Human Services, Division of County Operations

Eligibility Support Services

RFP #: 710-23-074

May 8, 2024 | 1:00 PM CT

Karrie Goodnight
Arkansas Department of Human Services
Attn: Office of Procurement
112 West 8th Street, Slot W345
Little Rock, AR 72201



Technical Response Packet

Content Outline

Response Signature Page

Agreement and Compliance Page

Signed Addenda, if applicable

1. Addendum 1

E.O. 98-04 – Contract Grant and Disclosure Form

Equal Opportunity Policy

Proposed Subcontractors Form

Other Documents and/or information as may be expressly required in this *Bid Solicitation*. Label documents and/or information so as to reference the Bid Solicitation's item number.

1. Arkansas Certificate of Good Standing
2. Attachment H Boycott Certifications
3. Attachment I Client History Form

Technical Proposal Response to the *Information for Evaluation* section of the *Technical Proposal Packet*.

Response Signature Page

RESPONSE SIGNATURE PAGE

Type or print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION			
Company:	Public Consulting Group LLC		
Address:	148 State Street, 10th Floor		
City:	Boston	State: MA	Zip Code: 02109
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit		
Minority and Women Owned Designation*:	<input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> American Indian <input type="checkbox"/> Service-Disabled Veteran <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Women-Owned <input type="checkbox"/> Asian American <input type="checkbox"/> Pacific Islander American		
	AR Certification #: _____ * See <i>Minority and Women-Owned Business Policy</i>		

PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
<i>Provide contact information to be used for solicitation related matters.</i>			
Contact Person:	Dale McCourt	Title:	Manager
Phone:	(828) 808-1240	Alternate Phone:	(828) 214-3623
Email:	dmccourt@pcgus.com		

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input checked="" type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. <i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Solicitation Terms and Conditions for additional information.</i>

ILLEGAL IMMIGRANT CONFIRMATION
By signing and submitting a response to this <i>Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants and shall not employ or contract with illegal immigrants during the term of a contract awarded as a result of this solicitation.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel and shall not boycott Israel during the term of a contract awarded as a result of this solicitation. <input checked="" type="checkbox"/> Prospective Contractor does not and shall not boycott Israel.

An official authorized to bind the Prospective Contractor to a resultant contract shall sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Solicitation* may cause the Prospective Contractor's response to be rejected.

Authorized Signature: William S. Mosakowski Digitally signed by William S. Mosakowski
Date: 2024.05.03 09:34:06 -04'00' **Title:** President and CEO

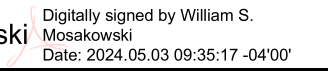
Printed/Typed Name: William S. Mosakowski **Date:** May 2, 2024

Agreement and Compliance Page

SECTIONS 1 – 4: VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: William S. Mosakowski  Digitally signed by William S. Mosakowski
Date: 2024.05.03 09:35:17 -04'00'

Use Ink Only.

Printed/Typed Name: William S. Mosakowski Date: May 2, 2024

Signed Addenda

State of Arkansas
DEPARTMENT OF HUMAN SERVICES
700 South Main Street
P.O. Box 1437 / Slot W345
Little Rock, AR 72203

ADDENDUM 1

TO: All Addressed Vendors
FROM: Office of Procurement
DATE: April 25, 2024
SUBJECT: 710-24-074 Eligibility Support Services

The following change(s) to the above referenced RFP have been made as designated below:

- Change of specification(s)
- Additional specification(s)
- Change of bid opening date and time
- Cancellation of bid
- Other

OTHER

- Attachment K – Remove and replace with 710-23-074 Attachment K Revised
- Attachment J – Remove and replace with 710-23-074 Attachment J Revised

ADDITIONAL SPECIFICATION(S)

- Section 4.1 Payment and Invoice Provisions – add the following language:
This could refer to Attachment C, Page 7 - After satisfactory presentation and review of the monthly status report by the Contractor, the deliverable will be signed off and the invoice can be submitted.
- Or for a shorter version – Contractor will invoice for monthly services. [710-19-1023 Attachment H Invoice Procedures.pdf \(arkansas.gov\)](#)

The specifications by virtue of this addendum become a permanent addition to the above referenced RFP. Failure to return this signed addendum may result in rejection of your proposal.

If you have any questions, please contact: Karrie Goodnight, DHS.OP.Solicitations@dhs.arkansas.gov (501) 320-3903

William S. Mosakowski
Vendor Signature

Digitally signed by William S. Mosakowski
Date: 2024.05.03 09:44:08 -0400

May 02, 2024
Date

Public Consulting Group LLC
Company

E.O. 98-04 – Contract Grant and Disclosure Form

Contract Number _____
 Attachment Number _____
 Action Number _____

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SUBCONTRACTOR: **Yes** **No** SUBCONTRACTOR NAME: Arkansas Foundation for Medical Care, Staffing Solutions Organization LLC

TAXPAYER ID NAME: Public Consulting Group LLC IS THIS FOR: Goods? Services? Both?

YOUR LAST NAME: _____ FIRST NAME _____ M.I.: _____

ADDRESS: 148 State St 10th floor

CITY: Boston STATE: MA ZIP CODE: 02109 COUNTRY: USA

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

FOR INDIVIDUALS *

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (√)		Name of Position of Job Held <small>[senator, representative, name of board/ commission, data entry, etc.]</small>	For How Long?		What is the person(s) name and how are they related to you? <small>[i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]</small>	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Relation
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

None of the above applies

FOR AN ENTITY (BUSINESS) *

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (√)		Name of Position of Job Held <small>[senator, representative, name of board/commission, data entry, etc.]</small>	For How Long?		What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?		
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Ownership Interest (%)	Position of Control
General Assembly								
Constitutional Officer								
State Board or Commission Member								
State Employee								

None of the above applies

Contract Number _____
Attachment Number _____
Action Number _____

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.
2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.
3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature William S. Mosakowski Digitally signed by William S. Mosakowski
Date: 2024.05.03 09:42:00 -04'00' Title President and CEO Date May 2, 2024
Vendor Contact Person Dale McCourt Title Manager Phone No. (828) 214-3623

Agency use only

Agency Number 0710 Agency Name Department of Human Services Agency Contact Person _____ Contact Phone No. _____ Contract or Grant No. _____

Equal Opportunity Policy

Equal Employment Opportunity and Affirmative Action

At Public Consulting Group, we are committed to creating solutions that matter for the communities we serve. We strive to create a workforce that reflects those communities and to build an inclusive culture that encourages, supports, and celebrates the diverse backgrounds of our employees. Our success derives from the combination of what we have in common, such as our shared values, vision, and purpose, as well as our differences in perspectives and life experiences. PCG celebrates these differences and believes that diversity drives innovation. The more we can embrace differences within PCG, the better we can serve our diverse clients, and the world in which we live, both now and in the future.

At PCG, we have four tenets that define how we as an organization pursue our mission. Our commitment to diversity and inclusion is embedded within each of these core values:

- **Impact.** Our public sector focus means we have a deep understanding of the challenges our clients face – from economic constraints to demographic shifts to regulatory changes – and what it takes to surmount them. We aim to build long-term client relationships because they allow us to work towards systemic, sustainable solutions that matter to our diverse communities worldwide.
- **Passion.** At PCG, our passion is service, and we strive to deliver results that lead to healthy, empowered, and successful individuals, families, and communities.
- **Community.** We seek to be diverse and inclusive; we encourage diverse thought and freedom of expression when working with and as part of our client communities, serving them wherever we go. We aim to actively create an environment that helps our leaders build a culture that reflects the inclusion PCG needs, and our clients deserve.
- **Entrepreneurial Spirit.** Throughout PCG, our talented people work together. We are committed to lifting the voices of all our employees to ensure a place where all ideas, backgrounds, needs, and solutions can flourish. We draw on the differences in who we are, what we've experienced, and how we think to fuel innovation and deepen our connections with the communities we serve.

PCG is an Equal Opportunity Employer dedicated to celebrating diversity and intentionally creating a culture of inclusion. We believe that we work best when our employees feel empowered and accepted, and that starts by honoring each of our unique life experiences.

In keeping with this policy and in compliance with federal law, including, but not limited to the provisions of title VII of the Civil Rights Act of 1964, Section 503 and 504 of the Rehabilitation Act of 1973, and the American's with Disabilities Act of 1990, all aspects of employment regarding recruitment, hiring, training, promotion, compensation, benefits, transfers, layoffs, return from layoff, company-sponsored training, education, and social and recreational programs are based on merit, business needs, job requirements, and individual qualifications. We do not discriminate on the basis of race, color, creed, religion, or belief, national, social, or ethnic origin, sex, gender identity and/or expression, age, physical, mental, or sensory disability, sexual orientation, marital, civil union, or domestic partnership status, past or present military service, citizenship status, family medical history or genetic information, family or parental status, or any other status protected under federal, state, or local law. PCG will not tolerate discrimination or harassment based on any of these characteristics. PCG believes in health, equality, and prosperity for everyone so we can succeed in changing the ways the public sector, including health, education, technology and human services industries, work.

PCG is also committed to fully utilizing and treating equally all minority groups, women, veterans, and disabled individuals by following an affirmative action policy and plan. The goals of this affirmative action policy and plan are to eliminate institutional barriers in employment that tend to perpetuate the status quo and to eliminate the effects of any past discriminations. In effectuating this affirmative action policy and the policy of equal

employment opportunity, I am requesting all staff to cooperate with our Equal Employment Opportunity/Affirmative Action (EEO/AA) Executive Vice President, Human Capital Management in working toward and achieving these goals.

Public Consulting Group LLC posts notices setting forth the provisions of this equal employment opportunity policy in conspicuous places, available to current employees and applicants for employment. The firm's equal opportunity and affirmative action commitment is also posted in all recruitment advertising.

Any questionable discriminatory actions relating to any protected status should be reported immediately to William S. Mosakowski, President, or to the designated Executive Vice President, Human Capital Management, at 148 State Street, Tenth Floor, Boston, Massachusetts, 02190.



William S. Mosakowski, President
Public Consulting Group LLC

Proposed Subcontractors Form

PROPOSED SUBCONTRACTORS FORM

• **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP
Arkansas Foundation for Medical Care (AFMC)	1020 West 4th Street, Suite 400	Little Rock, AR 72201
Staffing Solutions Organization LLC (SSO)	99 Washington Ave #1720	Albany, NY 12210

PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.

Other Documents and/or Information



**Arkansas Secretary of State
John Thurston**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

PUBLIC CONSULTING GROUP LLC

formed under the laws of the state of Delaware, and authorized to transact business in the State of Arkansas as a Foreign Limited Liability Company, was granted a Registration of Foreign Limited Liability Company by this office May 20, 2021.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 3rd day of January 2024.


John Thurston

Secretary of State

Online Certificate Authorization Code: ee39b20914fdebc

To verify the Authorization Code, visit sos.arkansas.gov



Department of Transformation and Shared Services

Governor Sarah Huckabee Sanders

Secretary Joseph Wood

Director Edward Armstrong

CERTIFICATION FOR BOYCOTT AND ILLEGAL IMMIGRANT RESTRICTIONS

Pursuant to Arkansas law, a vendor must submit the below certifications prior to entering into a contract with a public entity for an amount as designated by the applicable laws.

- 1. Israel Boycott Restriction: For contracts valued at \$1,000 or greater. A public entity shall not enter into a contract with a company unless the contract includes a written certification that the person or company is not currently engaged in a boycott of Israel. If at any time after signing this certification the contractor decides to engage in a boycott of Israel, the contractor must notify the contracting public entity in writing. See Arkansas Code Annotated § 25-1-503.
2. Illegal Immigrant Restriction: For contracts exceeding \$25,000. No state agency may enter into or renew a public contract for services with a contractor who employs or contracts with an illegal immigrant. A contractor shall certify that it does not employ, or contract with, illegal immigrants. See Arkansas Code Annotated § 19-11-105.
3. Energy, Fossil Fuel, Firearms, and Ammunition Industries Boycott Restriction: For contracts valued at, or exceeding, \$75,000. A public entity shall not enter into a contract with a company unless the contract includes a written certification that the person or company is not currently engaged in, and agrees for the duration of the contract not to engage in, a boycott of an Energy, Fossil Fuel, Firearms, or Ammunition Industry. If a company does boycott any of these industries, see Arkansas Code Annotated § 25-1-1102.

By signing this form, the contractor agrees and certifies that it does not, and shall not for the remaining aggregate term of the contract, participate in the activities checked below:

Do not boycott Israel.

Do not employ illegal immigrants.

Do not boycott Energy, Fossil Fuel, Firearms, or Ammunition Industries.

Table with 2 columns and 4 rows: Contract Number & Description, Name of Public Entity, Name of Vendor/Contractor, AASIS Vendor Number

Contractor Signature (with handwritten signature)

Date

Office of State Procurement

Client History Form

Instructions: This form is intended to help the State gain a full understanding of each Respondent's background and experience in eligibility determinations for Medicaid. This form **must** be accurately completed and signed by the same signatory who signed the Proposal Signature Page (please see final page below).

The State reserves the right to verify the accuracy of responses by contacting any of the listed clients; therefore, all applicable clients **must** be listed. For purposes of this form, the "client" is not an individual, but the entity which held the contract. By way of explanation, in the Contract resulting from this RFP, Arkansas's DHS will be the client. For each listed client, Respondents **must** include the client entity's name, address, and phone number. Additionally, Respondents are encouraged to provide an individual's contact information for a person at the client entity who is knowledgeable of the named project. If the State contacts the clients listed, the State reserves the right to either contact the listed individual and/or another person at the client entity. Omission of a relevant client will constitute a failure of form completion.

The boxes below each prompt will expand if necessary. If there are no contracts which meet the definition, Respondent **must** state "none."

1. Provide a company background summary including the date established, location, type of ownership, and the total number of employees that provide eligibility support services.

Public Consulting Group LLC (PCG) is a limited liability company and a subsidiary of Public Consulting Group Holdings, Inc. Headquartered in Boston, Massachusetts, PCG and its affiliates employ 2,000+ professionals worldwide—all committed to delivering solutions that change lives for the better. Since 1986, PCG has operated as a leading public sector solutions implementation and operations improvement firm that partners with health, education, and human services agencies to improve lives. Together with its affiliates, PCG offers clients a multidisciplinary approach to solve their challenges or pursue opportunities.

With the unwinding of the public health emergency continuity of coverage requirement, PCG developed an approach to assist public agencies with consulting and operational needs to address an unprecedented increase in eligibility redeterminations. Currently, PCG employs about 1,000 staff supporting operational units for state agencies in many aspects including nearly 300 eligibility support specialists who actively support states to perform Medicaid eligibility casework.

PCG's experience supporting Medicaid eligibility extends beyond providing staff augmentation. In addition to the projects listed below, PCG is providing to 32 states access to internal and external data through PCGOne, our fully configurable automated data broker service. Through this technology, PCG is supporting states by improving efficiency of the case workers, reducing eligibility error rates, and performing quality control and transparency throughout the process. By employing this solution, we have worked with our clients to automate their Medicaid eligibility functions and are happy to collaboratively consider how we can automate functions with DHS.

Our project teams have worked with states across the country to assess and improve eligibility business processes. PCG has conducted studies for our clients on their eligibility systems and infrastructure with the goal of identifying options for simplifying procedures, improving customer service, and reducing state expenditures. These studies and efforts have resulted in successfully redesigning and implementation of key processes for our clients.

Leveraging new technology and automation, improving community focus, and supporting eligibility workers stand as the foundational building blocks of every Medicaid eligibility related engagement. PCG's comprehensive process improvement approach, experience in Medicaid eligibility support & automation, and deep understanding of Medicaid eligibility processes make PCG a trusted partner in ensuring access to vital services for eligible individuals.

2. Please list three (3) examples where you served as the **prime contractor** for a project similar in size, complexity, and scope in the past five (5) years for a state government entity. Provide the following for each example: A description of work performed including experience with eligibility determinations for Medicaid applications, renewals, and changes of circumstance, the contract period, contract amount, staff FTE count, names, positions, and client contact information.

We are pleased to present the following examples of our work where PCG is currently providing or recently provided similar services to those requested in the RFP.

Project Title: MaineCare Eligibility Staff Augmentation Services

State, Agency: Maine, Office for Family Independence

Scope of Work: PCG provides critical support to OFI's MaineCare (Medicaid) eligibility and enrollment function during the unwinding of the public health emergency continuity of coverage requirement by providing data entry and analysis, corresponding with clients, and handling MaineCare cases.

Contract Period: January 2023 - Present

Contract Amount: Approx. \$10M

Staff FTE Count: 160

Agency Contact Information:

Central Operations Program Administration

Maine Department of Health and Human Services

Office for Family Independence

11 High Street

Houlton, ME 04730

Client Contact Information:

Jeff Farnsworth, Associate Director of Regional Operations

(207) 592-1353, Jeffrey.L.Farnsworth@maine.gov

Project Title: Medicaid Eligibility Support Services

State, Agency: Alaska, Department of Health, Division of Public Assistance

Scope of Work: The Alaska Department of Health Division of Public Assistance contracted with PCG to address a backlog in Medicaid eligibility determinations and related operations. PCG provides Medicaid eligibility support services and assistance in the following areas: Staffing, Training, Quality Assurance, Workforce Management, Computer Equipment

Contract Period: February 2023 - Present

Contract Amount: Approx. \$10M

Staff FTE Count: 85

Agency Contact Information:

Department of Health

PO Box 110650

Juneau, AK 99811-0650

Client Contact Information:

Jamie Moore, Statewide Workflow Manager, Division of Public Assistance

(800) 478-7778 ex 3837, Jamie.moore@alaska.gov

Project Title: Medicaid Eligibility Staff Augmentation Services

State, Agency: Montana, Department of Public Health and Human Services

Scope of Work: DHHS contracted with PCG to provide resources to perform eligibility services for MAGI/CHIP renewals upon expiration of Medicaid continuous enrollment, administrative tasks, and adjacent supporting tasks such as Public Assistance Hotline assistance.

Contract Period: April 2023 – April 2024

Contract Amount: Approx. \$5M

Staff FTE Count: 73

Agency Contact Information:

Department of Health and Human Services

1500 E Sixth Ave, PO Box 202925

Helena, MT 59620-2925

Client Contact Information:

Jessie Counts, Division Administrator, Human and Community Services Division

(406) 444-0640, jessie.counts@mt.gov

Authorized Signature: William S. Mosakowski

Digitally signed by William S. Mosakowski
Date: 2024.05.03 09:43:06 -04'00'

Title: President and CEO

Printed/Typed Name: William S. Mosakowski

Date: May 2, 2024

Technical Proposal Response

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E. 1 TECHNICAL APPROACH AND SOLUTIONS

Timeline and Milestone Planning

Provide a timeline and milestones for meeting requirements outlined in the solicitation.

Public Consulting Group LLC (PCG) has been implementing large-scale programs for states nationwide for decades. We understand how critical timing is to a program’s success and have experience quickly transitioning such programs from an incumbent into an efficient and cost-effective service.

Our top priority when executing on the below timeline is to ensure DHS receives the processing support needed quickly. PCG can mobilize resources and rapidly scale operations up or down based on project needs. This includes access to a large pool of qualified professionals with eligibility expertise that will allow PCG to provide 100 qualified Eligibility Specialists within 60 days of the contract’s start and quickly increase the number of FTEs as DHS requires. Once the appropriate number of FTEs are hired, the project team will utilize a phased training approach, working to train smaller classes of staff at a time, with the final class of staff being fully trained by early January. Using our bench of qualified candidates, our comprehensive training materials, and rigorous project management methodologies, PCG will work to have staff begin providing case processing support by the end of December.

Please note that while PCG has included a general project timeline in *Figure 1* below, PCG has also included an additional, in-depth milestone tracker within the following section.

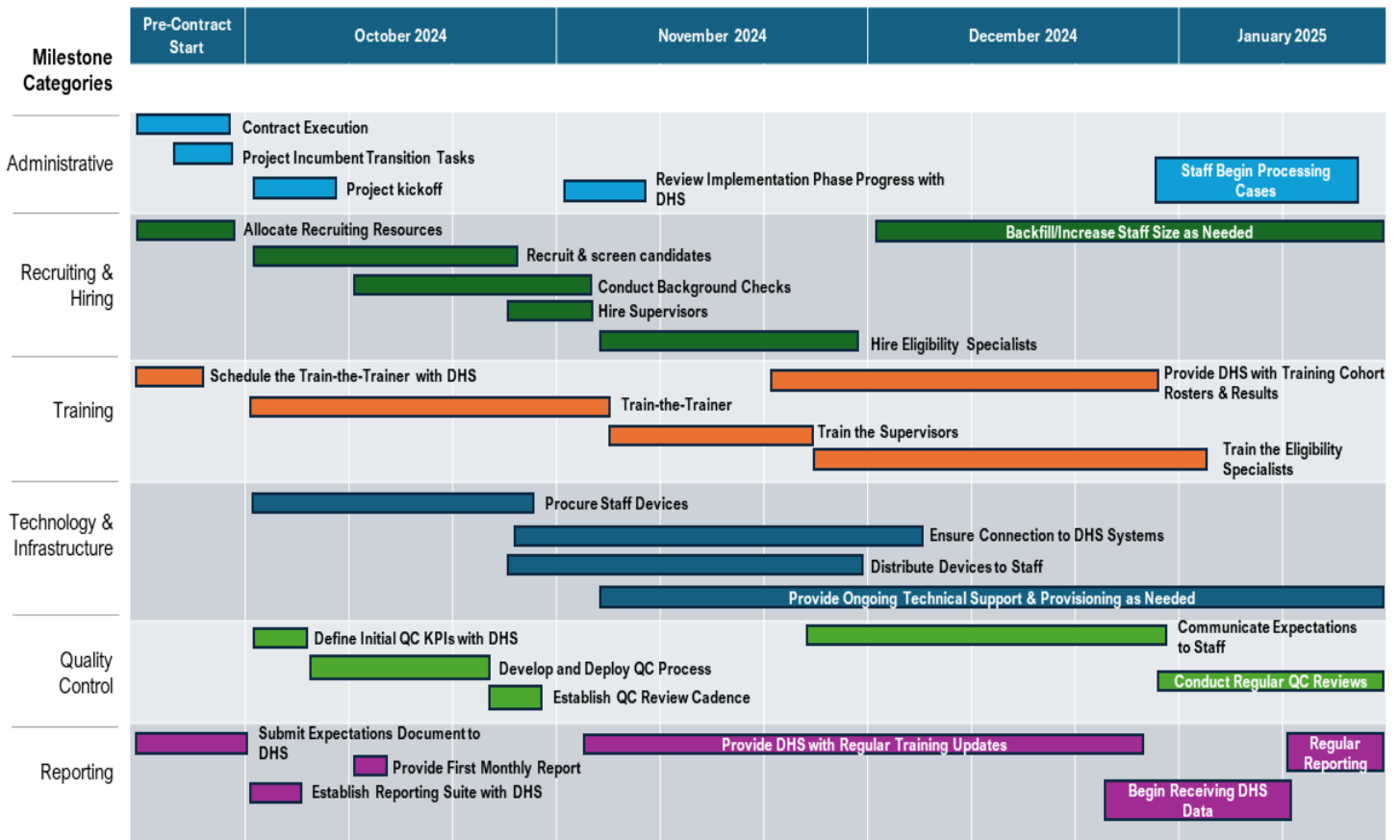


Figure 1: PCG Project Milestone Timeline.

Implementation Planning

Provide a detailed description of how the Prospective Contractor will implement services when the contract is signed.

Overview

To implement eligibility support services at the level of quality Arkansans deserve, PCG will partner with the Little Rock-based **Arkansas Foundation for Medical Care (AFMC) on project planning, staffing, training, reporting, and quality assurance tasks throughout the implementation phase and beyond.** In addition, PCG will be leaning on the staffing firm subsidiary of Public Consulting Group Holdings, Inc. as an additional subcontractor, **Staffing Solutions Organization LLC (SSO), to conduct recruitment, hiring, and human resources tasks for the project.** SSO recruiters have hired thousands of support staff across the country. The internal capability allows the PCG/AFMC project team to work in close coordination with recruiters, human resources, and payroll professionals to efficiently onboard staff.



Subcontractor Information

Our subcontractor, AFMC, will play a **vital role in the project’s implementation phase.** AFMC was established in 1972 as Arkansas’s Medicare Quality Improvement Organization (QIO). They are a non-profit 501(c)(3) corporation headquartered in Little Rock, AR, with an additional Fort Smith, AR office. For over 50 years, AFMC has provided critical Medicaid assistance, such as determining eligibility, selecting a high-quality health plan, and coordinating non-emergency transportation. AFMC provides these services to improve healthcare quality and advance health equity so eligible individuals can access cost-effective, high-quality healthcare. AFMC has a diverse and skilled staff that has overseen millions of customer interactions and Medicaid-related tasks.

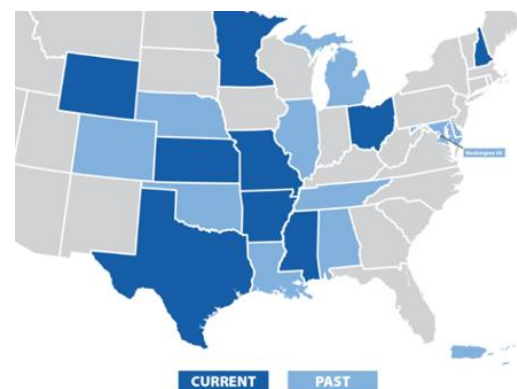


AFMC’s footprint extends well beyond Arkansas (*Figure 2*). AFMC has been at the forefront of healthcare reform and practice transformation as a trusted partner in private, state, and federal-led programs through contracts with Medicare, Medicaid, the Health Resources and Services Administration, and the Department of Justice, as well as public health, health systems, and universities.

50+ years of relevant Medicare and Medicaid experience

AFMC has served continuously as the Medicare Quality Improvement Organization (QIO) for Arkansas since the inception of the Centers for Medicare and Medicaid Services (CMS) peer review program in 1972. With CMS’s reorganization of QIOs in 2014, AFMC has continuously maintained our QIO-like entity status. AFMC is part of a regional Quality Improvement Network (QIN-QIO) that includes Arkansas, Mississippi, Nebraska, Puerto Rico, Texas, and the U.S. Virgin Islands. AFMC works with providers and patients in Arkansas and Mississippi to improve healthcare quality.

Figure 2: AFMC’s contractual footprint spans multiple states.



AFMC has a long-standing relationship and history with the Arkansas Department of Human Services (DHS) for numerous contracts, giving AFMC a deep understanding of the dynamics and nuances of interactions with DHS. Since 1985, AFMC has

continuously held the Medicaid utilization review contract with the DHS Division of Medical Services (DMS). Additional contracts include provider outreach, policy, and program education, beneficiary services, non-emergency transportation (NET) administration services, member services call center, Medicaid quality improvement, and Medicaid Management Information System (MMIS) technical assistance and training. Additionally, AFMC works with the DHS Division of Provider Services and Quality Assurance (DPSQA) to

perform inspections of care, health and safety licensure/certification, and quality of care reviews. These contracts demonstrate AFMC’s in-depth knowledge and expertise of Medicaid policies, procedures, and protocols.

Key Contacts

Given that this project involves considerable collaboration, it is essential to have a communication plan that will define all communication methods and status update expectations during project implementation. A communication plan will be delivered to DHS before the contract starts. Please find a PCG stakeholder communication matrix below detailing the key contacts for the implementation phase.

Stakeholder Communication Matrix – Project Implementation Phase		
Name	Position	Contact Information
Dale McCourt	Executive Lead	dmccourt@pcgus.com
Darnyelle Cmil	Project Director	dcmil@pcgus.com
Emily Fox	Operations Manager	efox@pcgus.com

Figure 3: Project Implementation Stakeholder Matrix.

Technology Approach

PCG and AFMC will provide devices to all FTEs connecting to the DHS network, with security being the most important. PCG and AFMC will provide staff with HP Chromebooks to ensure security while not sacrificing performance. All FTEs can access the DHS systems via a Virtual Desktop Infrastructure (VDI), which PCG’s IT Support will fully support. The Chromebooks that staff will be using will not allow staff to download or save any DHS data locally, and this solution is scalable as it is cost-effective and low risk. These devices do not need initial provisioning and can be sent immediately to staff, ensuring rapid deployment. PCG and AFMC are confident that this solution allows staff to complete all required tasks within the scope of work, however, should DHS prefer PCG and AFMC to provide staff with more sophisticated devices for additional scopes of work, we can provision more expensive laptops.

Risk Management

Understanding how project risks will be identified, assessed, and mitigated is crucial in PCG project implementation planning. Before the contract starts, PCG will conduct a risk identification analysis to highlight potential risks that could impact successful implementation and contract delivery. This analysis will include engaging stakeholders, subject matter experts, and project team members to use experience and historical data points to inform identification.

The project team will evaluate the assessment and prioritize risks based on probability and impact. The project team will then develop mitigation strategies to minimize the likelihood and impact or implement proactive measures to reduce or transfer risk. In addition, PCG will develop a Contingency Plan to address risks that cannot be mitigated or eliminated and identify alternative courses of action to ensure readiness. Throughout the implementation phase and project, PCG will establish monitoring and accountability mechanisms to monitor and control risks. These mechanisms include scheduling regular reviews, updating our internal risk register, and identifying potential warning signs.

PCG will communicate all risk management plans with DHS and evaluate mitigation strategies as the project evolves.

Implementation Plan

Please find PCG’s full proposed Implementation Plan outlining steps we and our subcontractor, AFMC, will take to provide this service for consideration below.

Public Consulting Group Proposed Project Implementation Plan			
Category	Task	Responsible	Finish Date
Project Launch	Internal Kickoff	PCG, AFMC	9/16/2024
	Develop Master Workplan	PCG, AFMC	9/20/2024
	Develop Incumbent Transition Plan	PCG, AFMC	9/20/2024

	Provide Deliverable Expectations Document and Communication Plan	PCG, AFMC	9/27/2024
	Contract Start	PCG, AFMC, DHS	10/01/2024
	Stakeholder Kickoff Meeting	PCG, AFMC, DHS	10/01/2024
	Develop Reporting and Meeting Cadence	PCG, AFMC, DHS	10/01/2024
	Milestone: Project Launch Complete		
Recruiting and Hiring	Allocate Recruiting Resources	PCG, AFMC	9/20/2024
	Draft Job Descriptions for Supervisors & Specialists	PCG, AFMC	9/27/2024
	Post Job Descriptions	PCG, AFMC	10/01/2024
	Begin Outreach to Pre-Qualified Candidates	PCG	10/04/2024
	Begin Recruiting & Initial Screening of Candidates (Supervisors & Specialists)	PCG, AFMC	10/04/2024
	Identify Candidates for Hire	PCG, AFMC	10/10/2024
	Prep Welcome Packages for Supervisors	PCG, AFMC	10/11/2024
	Provide Offer Letters and Start Dates to Supervisors	PCG, AFMC	10/14/2024
	Conduct Criminal Background Checks on Supervisor Candidates	PCG, AFMC	10/25/2024
	First Day: Conduct Administrative Onboarding for Supervisors	PCG, AFMC	11/11/2024
	Milestone: All Eligibility Specialist Supervisors Hired		
	Identify All Eligibility Specialist Candidates	PCG, AFMC	11/01/2024
	Prep Welcome Packages for Eligibility Specialists	PCG, AFMC	11/01/2024
	Provide Offer letter and Start Date to Eligibility Specialists	PCG	Cohort 1 – 11/04/2024 Cohort 2 – 11/06/2024 Cohort 3 – 11/11/2024 Cohort 4 – 11/13/2024
	Conduct Background Checks on Eligibility Specialist Candidates	PCG	Cohort 1 – 11/15/2024 Cohort 2 – 11/19/2024 Cohort 3 – 11/22/2024 Cohort 4 – 11/26/2024
	First Day: Conduct Administrative Onboarding for Specialists	PCG, AFMC	Cohort 1 – 11/18/2024 Cohort 2 – 11/20/2024 Cohort 3 – 11/25/2024 Cohort 4 – 11/27/2024
	Milestone: All Eligibility Specialists Hired		
Training	Obtain Curriculum and Resources Developed by DHS	AFMC, DHS	10/01/2024

	Coordinate and Execute the Train-the-Trainer Session	AFMC, DHS	10/01/2024	
	Establish Training Monitoring and Reporting Methods	PCG	11/01/2024	
	Milestone: PCG prepared to execute Train-the-Trainer Model			
	Provide DHS with Supervisor Training Class Facilitation Notice	PCG, AFMC	10/29/2024	
	Provide DHS with Supervisor Training Class Rosters	PCG, AFMC	11/05/2024	
	System Access Request for Supervisors	PCG, AFMC	11/05/2024	
	Begin Training for Supervisors	AFMC	11/12/2024	
	Complete Training for Supervisors	AFMC	12/03/2024	
	Provide DHS with Supervisor Training Completion Status	PCG, AFMC	12/03/2024	
	Milestone: PCG completed training for supervisors			
	Provide DHS with Eligibility Specialist Training Class Facilitation Notice	PCG, AFMC	Cohort 1 – 11/06/2024 Cohort 2 – 11/08/2024 Cohort 3 – 11/13/2024 Cohort 4 – 11/15/2024	
	Provide DHS with Eligibility Specialist Training Class Roster	PCG, AFMC	Cohort 1 – 11/13/2024 Cohort 2 – 11/15/2024 Cohort 3 – 11/20/2024 Cohort 4 – 11/22/2024	
	System Access Request for Eligibility Specialists	PCG, AFMC	Cohort 1 – 11/13/2024 Cohort 2 – 11/15/2024 Cohort 3 – 11/20/2024 Cohort 4 – 11/22/2024	
	Begin Training for Specialists	AFMC	Cohort 1 – 11/20/2024 Cohort 2 – 11/22/2024 Cohort 3 – 11/27/2024 Cohort 4 – 12/02/2024	
	Complete Training for Specialists	AFMC	Cohort 1 – 12/27/2024 Cohort 2 – 12/31/2024 Cohort 3 – 01/06/2025 Cohort 4 – 01/08/2025	
	Provide DHS with Specialist Training Completion Status	PCG	Cohort 1 – 12/27/2024 Cohort 2 – 12/31/2024 Cohort 3 – 01/06/2025 Cohort 4 – 01/08/2025	
	Milestone: PCG Completed Training for Specialist			
	Technology Infrastructure	Prepare Chromebook Devices	PCG, AFMC	10/15/2024
		Prepare Staff Roster	PCG, AFMC	Cohort 1 – 11/06/2024 Cohort 2 – 11/08/2024 Cohort 3 – 11/13/2024 Cohort 4 – 11/15/2024
		Ship Devices to Staff	PCG, AFMC	Cohort 1 – 11/15/2024

			Cohort 2 – 11/19/2024 Cohort 3 – 11/22/2024 Cohort 4 – 11/26/2024
	Ensure Connection to PCG Systems	PCG, AFMC	Cohort 1 – 11/18/2024 Cohort 2 – 11/20/2024 Cohort 3 – 11/25/2024 Cohort 4 – 11/27/2024
	Request DHS Knowledge Management System Access for Staff	PCG, AFMC	Cohort 1 – 11/15/2024 Cohort 2 – 11/18/2024 Cohort 3 – 11/22/2024 Cohort 4 – 11/25/2024
	Ensure Connection to DHS KMS	PCG, AFMC, DHS	Cohort 1 – 11/20/2024 Cohort 2 – 11/22/2024 Cohort 3 – 11/27/2024 Cohort 4 – 11/29/2024
	Request DHS System Access for Staff	PCG, AFMC	Cohort 1 – 12/17/2024 Cohort 2 – 12/21/2024 Cohort 3 – 12/30/2025 Cohort 4 – 01/02/2025
	Milestone: All Systems in Place for Eligibility Support Services		
	Provide Ongoing Technical Support	PCG	Ongoing
Provision New Devices as Needed	PCG, AFMC	Ongoing	
Quality Control	Develop Quality Control Process/Program and Review with DHS	PCG, AFMC	10/01/2024
	Define Initial Quality KPIs with DHS	PCG, AFMC	10/08/2024
	Configure a Second Party Review in ARIES	AFMC, DHS	10/08/2024
	Develop Quality Standards and Rating Systems Program	PCG, AFMC	10/25/2024
	Establish Quality Assurance Review Cadence	PCG, AFMC	10/25/2024
	Train Staff on QA Expectations & Processes	AFMC	12/20/2024
	Provide DHS with a Monthly QA Status Report	PCG, AFMC	Ongoing
	Milestone: QC Program Deployed		
Risk Management	Conduct Risk Identification Analysis	PCG	09/27/2024
	Develop Risk Mitigation Strategy	PCG	10/04/2024
	Develop Contingency Plan to Address Risk	PCG	10/09/2024
	Establish Monitoring and Accountability Mechanism	PCG	10/11/2024
Milestone: Project Risk Management Plan Established			

	Communicate Risk Management Plans to Stakeholders	PCG	Ongoing
	Execute Continuous Improvement via lesson Learned and Mitigation Effectiveness	PCG	Ongoing
Project Operations	Develop Go-Live Readiness Plan	PCG, AFMC	09/27/2024
	Assign Responsibilities to Team Members	PCG, AFMC	09/27/2024
	Establish Internal Communication Methods	PCG, AFMC	09/27/2024
	Execute Go-Live Readiness Training	PCG, AFMC	10/01/2024
	Begin Operations Support Eligibility Support Services	PCG, AFMC	12/27/2024
	Milestone: Eligibility Support Services Begin and Regular Reporting Begins		
	Meet Case Volume Demand as Defined by DHS	PCG, AFMC	Ongoing
	Monitor Progress Using Project Management Tools	PCG, AFMC	Ongoing
	Identify and Address Issues or Obstacles	PCG, AFMC	Ongoing
	Provide DHS With Agreed Reporting	PCG, AFMC	Ongoing

Figure 4: Proposed Project Implementation Plan.

Project Reporting Experience

Provide a list and description of reports provided in a previous project of similar size and scope.

PCG has a 30+ year history of managing large-scale operations for state agencies. We understand the importance of precise and timely reporting to keep key stakeholders informed and identify trends and issues that need to be addressed. While supporting states in their Medicaid eligibility caseload, PCG delivered various reports to inform decision-makers. PCG reviewed the Reporting requirements listed in Attachment C: Performance Based Contracting, and our project team is confident in our ability to deliver these reports in a concise and timely manner. Should PCG be selected to work with DHS on this engagement, PCG and AFMC will partner to produce a Deliverable Expectations Document and work closely with the department to develop our reporting suite and distribution schedule that meets the department’s specific and evolving needs. **A joint PCG and AFMC team will handle all reporting requirements to combine AFMC’s Arkansas Medicaid expertise with PCG’s extensive reporting capabilities.**

Please find a detailed list of reports we provide to our current or recent Medicaid eligibility support services projects in Alaska, Maine, and Montana, as well as reports we included in previous large-scale projects.

Public Consulting Group Project Reporting Matrix			
Report Title	Report Cadence	Metrics Included	Client Benefit
Alaska DPA Medicaid Eligibility Project Weekly Status Report	Weekly	<ul style="list-style-type: none"> ▶ Administrative updates ▶ Current staffing levels ▶ Workforce management updates ▶ Training cohort statuses ▶ Monthly, weekly, and daily call center productivity ▶ Quality assurance approach and methodologies ▶ High-level quality assurance review results 	<ul style="list-style-type: none"> ▶ Summarizes project workflow changes ▶ Provides general productivity insights ▶ Details staff technology access and system updates ▶ Details insight into training plan success and lessons learned
Alaska DPA Medicaid Eligibility Project Monthly Progress Report	Monthly	<ul style="list-style-type: none"> ▶ Call Center Productivity and Performance ▶ Quality Assurance review scoring (by individual) 	<ul style="list-style-type: none"> ▶ Provides month-over-month productivity analysis ▶ Communicates quality improvement areas and high-performers
Maine OFI MaineCare Project Report	Weekly	<ul style="list-style-type: none"> ▶ Case task productivity (Daily, Weekly, & Monthly) ▶ Call center productivity and performance (Daily, Weekly) 	<ul style="list-style-type: none"> ▶ Displays daily task productivity and week-over-week improvement ▶ Detailed daily workflow focus areas for the project team
Maine OFI MaineCare Productivity & Quality Assurance Report	Monthly	<ul style="list-style-type: none"> ▶ Current staffing levels ▶ Administrative updates ▶ Eligibility task completion and backlog ▶ Call center productivity and performance ▶ Quality assurance 	<ul style="list-style-type: none"> ▶ Provides month-over-month productivity review ▶ Details staffing efforts and hiring statuses if applicable ▶ Increased focus on QA and any improvement areas
Montana DPHHS Medicaid Staff Augmentation Weekly Productivity Report	Weekly	<ul style="list-style-type: none"> ▶ Administrative updates ▶ Current staffing levels ▶ Qualitative staff feedback ▶ Training & onboarding statuses ▶ Case processing productivity and backlog ▶ Weekly call center productivity data ▶ Cumulative quality assurance results 	<ul style="list-style-type: none"> ▶ Summarized high-level workflow updates ▶ Provided week-over-week case productivity review ▶ Detailed hiring and onboarding efforts ▶ Highlighted weekly call center statistic changes
Montana DPHHS Medicaid Staff Augmentation Monthly Productivity and Quality Assurance Report	Monthly	<ul style="list-style-type: none"> ▶ Current staffing levels ▶ Training completion totals ▶ Monthly case processing productivity ▶ Monthly call center productivity data ▶ Quality assurance methodology for each task ▶ Monthly quality assurance review results ▶ Corrective action statuses 	<ul style="list-style-type: none"> ▶ Provided month-over-month case productivity review ▶ Summarized monthly call center statistics ▶ Provided a detailed look into how QA reviews were conducted in the past month

Public Consulting Group Project Reporting Matrix			
Report Title	Report Cadence	Metrics Included	Client Benefit
Montana DPHHS Medicaid Staff Augmentation Weekly Training Report	Weekly	<ul style="list-style-type: none"> ▶ Training Methodology and Analysis ▶ Completion status by course ▶ Live training attendance 	<ul style="list-style-type: none"> ▶ Detailed training progress for all recently hired staff ▶ Provided insight into which training topic staff excelled in or struggled with
NY Contact Tracing VCC Productivity Report	Weekly	<ul style="list-style-type: none"> ▶ Current Staffing Levels ▶ Weekly Case Productivity ▶ Case Volume by County ▶ Call Center Productivity ▶ Call Type Analysis ▶ Scale Up & Down Progress 	<ul style="list-style-type: none"> ▶ Provided New York State with crucial information regarding the caseload and where case volume was increasing ▶ Included important call type information to understand staff workload
NJ Contact Tracing VCC Performance Metrics Report	Weekly	<ul style="list-style-type: none"> ▶ Cases Assigned per Employee ▶ Cases Completed ▶ Contacts Made per Employee 	<ul style="list-style-type: none"> ▶ Provided employee-specific daily productivity data compared to State productivity ▶ Details team max and median daily productivity

Figure 5: PCG Project Reporting Matrix.

Below are visuals of the types of regular deliverables DHS can expect from the PCG team (see Figure 6). These include agendas for stakeholder meetings, ad hoc planning documents, such as hiring plans, and data analysis through visual tools like Microsoft Power BI to identify program trends and patterns for effective program management.

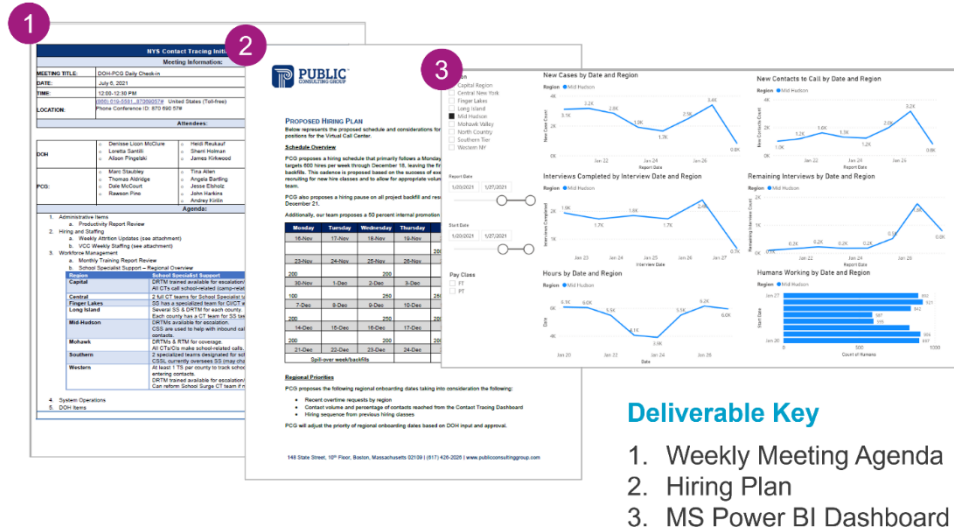


Figure 6: PCG Example Deliverables.

PCG will employ our in-house business intelligence, automation, and advanced analytics platforms to provide more benefit and value to DHS. PCG is ready to commit a team of seven analytics professionals to help optimize reporting for this engagement. We will deliver the same or similar reports listed in Figure 5 on the defined cadence that the state seeks; however, we can also provide these reports in a near-real-time dashboard that can be accessed by state personnel at their convenience. We typically use Microsoft’s Power BI platform to produce dashboards and reports; however, we are also very experienced in using Tableau and Microsoft QuickSight. PCG can conform to the business intelligence

platform that the state prefers. **By utilizing a near real-time dashboard, DHS can view and use information as needed instead of waiting for the next reporting cycle.**

In addition to web-enabled dashboards, PCG also proposes the use of automation software. PCG uses Microsoft's Power Automate platform to automate repetitive and/or tedious business processes. In similar engagements, we have automated quality assurance, staff management, and invoicing processes. The main benefits of process automation are that it takes human error out of the process, allows our experienced professionals to focus on more critical tasks.

Finally, if DHS explores this option, PCG can offer advanced analytics, including artificial intelligence, machine learning, and advanced forecasting techniques. We can deploy models that can aid in hiring decisions (i.e. use prediction variables that indicate future performance) and/or use forecasting methods to help inform the type and number of employees to be hired. **If DHS chooses to use these models, all data will be held within PCG's secure tenant and Arkansas data will not be used to train models for other clients or customers.**

Security Plan

Provide a Security Plan as outlined in section 2.8 of the solicitation.

Technology Solution Overview

PCG and AFMC's technology solution is focused on mitigating risk, rapid scalability, and end-user productivity. As mentioned, PCG and AFMC will be providing staff with HP Chromebooks. These Chromebooks are low-cost, and staff will be able to securely connect to the DHS Network through a Virtual Desktop Infrastructure (VDI). With this solution, staff will not be able to download DHS data locally but will be able to connect to the DHS systems via a secure browser. PCG and AFMC will coordinate with DHS to ensure staff can perform all tasks listed within the scope of work on these devices.

PCG performs a yearly assessment of third parties to ensure the subcontractors comply with HIPAA and PCG contractual requirements.

Data Management Approach

All PCG applications in the scope of this RFP undergo regular audits and security vulnerability testing to assure up-to-date compliance with industry security standards. In creating our Information Security Program, various regulations and frameworks, such as HIPAA, HITECH, FERPA, and NIST 800-53 rev. 5, are considered to support the security of all data at PCG. PCG undergoes a series of annual audits and assessments by an external security audit firm to validate PCG's ability to meet regulatory security requirements.

PCG has developed an enterprise-wide data HIPAA-compliant destruction program that allows for consistent, secure data disposal throughout the company. This program includes both destruction of hard and soft copies of data. Every PCG office has at least one secure shredding bin to allow for disposal of hard copies of confidential data. The secure bins are regularly emptied by a third-party vendor that ensures secure destruction of everything in each bin.

Soft copies (data on electronic devices) are handled in one of two ways, depending on whether the device will be re-used. If the device is to be reused within PCG, it is thoroughly sanitized and wiped (using DoD 5220.22-M standards) so that no data remains when it moves on to its secondary use. If a device is to be destroyed, it is sent for secure disposal and destruction in a HIPAA-compliant manner as well by a vendor that provides a certificate of destruction for every device.

Cloud assets are handled according to internal policies and procedures in compliance with all appropriate federal, state, and local laws, regulations, and contractual requirements. These policies and procedures align with each company's SOC 2 controls and vary according to the type of asset being deleted:

subscription, VM, data, etc. All data destruction procedures ensure that data is unrecoverable upon completion of the procedure and applicable waiting periods.

Data Protection

As a hosted solution provider, PCG acknowledges and accepts that it is incumbent on every service provider to enable proper protection and control for the management and safekeeping of all data, and particularly for the data that we are entrusted to store on behalf of our clients.

PCG will take necessary steps to:

- ▶ Develop and follow appropriate protections and controls,
- ▶ Apply appropriate standards (e.g., NIST 800-53 rev. 4, ISO 27001) to our environments, and
- ▶ Comply with pertinent regulations (e.g., HIPAA, FERPA, state privacy laws) governing the protection of sensitive/confidential data.

We are committed to maintaining a healthy process of periodic audits and reviews of our program to continue to meet and exceed our clients' goals and objectives in protecting sensitive data. This allows us to evolve and adapt to address an ever-changing environment and threat landscape. As an indicator of how seriously we take data protection, PCG has successfully maintained an annual SOC2 Type II attestation from a certified third-party auditor in accordance with the requirements of the American Institute of Certified Public Accountants (AICPA).

The Contractor must retain qualified Information Security and Privacy staff to manage, provide and meet all information security and privacy requirements and contractual deliverables.

PCG will retain qualified Information Security and Privacy staff to support this effort. PCG has identified the following IT security and privacy subject matter experts to oversee all information security and privacy requirements.

- ▶ **Michael Bedford:** CISSP, CTT+, Security+, Citrix Certified Administrator, VMware certified professional, Microsoft Certified Professional, Microsoft Certified Trainer, Certified HIPAA Professional (CHP), Certified, HIPAA Security Specialist (CHSS), Certified Information Privacy Manager (CIPM), GIAC Certified Security Consultant (GCSC), Certified Information Security Manager (CISM), Certified Information Security Auditor (CISA), Certified Business Continuity Professional (CBCP), IT Infrastructure Library Foundations (ITIL)
- ▶ **Fawad Khan:** Certified Information Systems Security Professional (CISSP), Cisco Certified Network Professional – Security (CCNP), Cisco Certified Internetwork Expert – Security (CCIE)
- ▶ **Kimberley Kirby:** GIAC Information Security Fundamentals (GISF), GIAC Security Leadership (GSLC)

Data security and privacy are core to PCG's mission. PCG recognizes that having robust privacy and security programs is critical in minimizing the impact of threats inherent in today's workplace and computing environments. PCG has invested and continues to invest millions of dollars into our infrastructure so that all PCG and client data, networks, and applications are protected against cyber threats and malicious activity.

PCG Risk Approach

Network Security Controls

PCG has made significant investments in security solutions across all the organization. Although PCG has segmented business units that, in many ways, operate independently, the Information Security program was deliberately created so that program governance could be centralized where possible. All of PCG's business units have some level of interaction with very sensitive data, such as PHI, PII, or student records. Thus, PCG expects all business units to be held to the same security requirements and controls across the board.

In addition to the enterprise architecture, PCG regularly reviews its network architecture to support deployment of systems/devices to accommodate high availability and network segmentation.

Perimeter Security

PCG's network is partitioned into multiple subnetworks and associated virtual local area networks (VLANs), which default to having no physical or logical access to each other ("trust no one" model). PCG performs segmentation in the cloud using industry-standard practices. Cloud environment segmentation is performed through the use of virtual networks (VPCs) and business unit accounts. This approach allows for segmentation between business units and their customers wherever it is possible to do so. Business unit data is physically and logically separated to provide security and bandwidth and avoid performance impacts caused by other systems. PCG employs Skybox to validate proper network configuration by following information security best practices and standards.

System Security and Data Sensitivity Classification

A thorough Data Classification Policy and Standard has been developed to support the appropriateness of controls in place as data travels within and outside of our network. Due to the nature of our business, most of the data that PCG handles is confidential or sensitive in nature. The Data Classification Policy clearly states that uncategorized data needs to assume the highest level of classification (confidential) and be handled as appropriate for that level.

As dictated by our Data Classification Policy and Standard, we may not be able to share all requested attachments as part of the RFP process but are happy to respond to specific requests should DHS require more information. We maintain these restrictions to protect our clients' best interest, as they assure the security of our solutions and all client data with which we have been entrusted. We will do our best to accommodate all requests to the extent possible and most information that we are unable to provide as part of the public disclosure process can be provided following the award of a contract with an executed Non-Disclosure Agreement.

PCG's vulnerability management solution, Rapid7, allows for on-demand scanning of the PCG network to:

- ▶ Identify top vulnerabilities, most vulnerable system types, and most vulnerable hosts, for example:
 - Missing operating system (OS) security patches
 - Missing application security patches
 - Insecure ciphers allowed, indicating a deviance from PCG standards
 - PCG Governance, Risk, and Compliance and Information Security Program Overview
- ▶ Find open ports and services running in the target scope and match them to well-known published vulnerabilities that are updated regularly in the tool's signature database if they exit the target infrastructure.
- ▶ Identify systemic issues and root cause

Vulnerability scans are performed at least quarterly, and as needed based on specific alerts regarding security threats, discovery of an exploit, or changes/additions to infrastructure. All scan details are triaged to validate the vulnerabilities found and to remediate them as required.

Penetration testing

In addition to performing regular internal vulnerability scans, PCG also works with a vendor to perform a full external penetration test annually. Following the scan, PCG's Information Security team receives a report of vulnerabilities and then works to remediate them, where required. The vendor performs a second test after remediation actions are completed to confirm remediation.

Intrusion Management

PCG utilizes Alert Logic's Threat Manager and FireEye's industry-leading intrusion detection systems (IDS), which provide near real-time visibility and analysis of the traffic on PCG's network. A content inspection area analyzes all traffic going to and from critical systems on the network. FireEye can detect multi-flow, multi-stage, zero-day, polymorphic, ransomware and other advanced attacks. These tools are also set to

prevent callbacks for malware that may exist within the PCG network, causing the malware to be rendered useless as it cannot reach back to its host.

All events that are detected by these tools are tied into the logging software also used by PCG, so that PCG's Information Security team is alerted when an event that requires further investigation is detected. The 24/7 Security Operations Center can also use the IDS data to analyze known threats in real-time when patterns of malicious activity or other anomalous traffic are observed.

Monitoring and Reporting

PCG uses Digital Guardian's data loss protection (DLP) tool to protect against data loss as data moves from PCG's private network to its public network and thus moves outside of PCG's direct control. This solution contains multiple policies for data identification, and it receives, monitors, and inspects all egress data to support secure communications and traffic. Monitoring occurs based on the following criteria:

- ▶ Types of data, such as PHI, PII, PCI data, etc.
- ▶ Keywords that indicate sensitive data
- ▶ Sensitive document characteristics

The DLP solution logs all attempts, even those that are successfully blocked, to transmit confidential information out of the organization without authorization. The tool alerts PCG of any compliance violations so that the Information Security team can follow up to determine where issues may exist. The DLP tool has been deployed on all endpoint devices (e.g., workstations) on PCG's network. This allows for monitoring at a device/user level to detect when an individual attempts to move sensitive data off of the network.

PCG's data loss protection tool is tied to network traffic and endpoints, as well as PCG's email communications, to monitor egress traffic, allowing the Information Security team to gain visibility and control, and enforce policy enforcement where necessary.

PCG also utilizes additional layers of defense to protect data from any compromise. The iBoss Web Security gateway integrated with FireEye Malware Protection is utilized on every workstation, and Microsoft Defender ATP is used for endpoints. These layers protect against ransomware, phishing, scamming, and malicious websites.

PCG requires that all anti-virus software installed on computing systems will be active and enabled at all times. Personnel are not permitted to suspend or disable the state of the software from monitoring and checking a system for malicious code. Policies are enforced on end-user computer systems to ensure virus scan coverage on PCG computer systems. Virus signatures are updated daily.

All instances of installed anti-virus software are configured to constantly scan and defend, in real-time, its host computing system from the ingress of malicious code. This is to protect the host and prevent the proliferation of malicious code to other systems. In parallel with this, such anti-virus software is also configured to perform routine scans of the entire host's file system. Procedures are in place to regularly monitor the Information Security Program to validate that it is operating in a manner reasonably calculated to prevent unauthorized access to or unauthorized use of confidential data and for escalating it as necessary. The monitoring includes internal reviews by the Information Security Officer, annual SOC2 Type II audits conducted by an external third party, annual penetration testing conducted by an external third party, and quarterly vulnerability scans.

Host Hardening

Workstations, servers, and network devices at PCG are hardened in a manner tailored for each specific device class. Secure configurations have been developed for all approved workstation and server operating systems and software applications, and these configurations are deployed to all devices on the PCG network. The secure configurations are maintained as standardized system images that are validated and refreshed quarterly to update their serviceability, availability, and secure configuration.

Workstations are hardened by group policy that includes, but is not limited to, enforcement of:

- ▶ Password complexity.
- ▶ Inactivity timeout timer.
- ▶ Renaming and disabling of Local Administrator and Guest accounts.
- ▶ Digitally signed communication between workstations and Active Directory (AD)
- ▶ Auto-play disabled for removable media.
- ▶ Login security banner.
- ▶ Host-based firewall enabled.

Network devices are configured by following a standard deployment checklist that requires a specific list of settings to be configured, such as preventing remote administration of network devices unless connected via multi-factor VPN, using Network Address Translation so that no publicly routable addresses are on trusted interfaces, logging remote management sessions, and forcing termination by session time limit. PCG firewalls have additional hardening requirements that go above and beyond the requirements for other network devices, such as being configured to block any remote access methods that are not encrypted at network ingress points. All requirements are updated at least two times per year, or when a new release is provided.

PCG utilizes industry-leading tools (e.g. Lacework, AWS Configs, Orion, and Skybox) to manage and report cloud configurations against compliance requirements or standards such as: SOC 2, NIST 800-53, or industry best practices, etc. These compliance reports inform PCG when and where there is either a gap in security or whenever a baseline change occurs that should be addressed.

Remote Access

Every PCG workstation has our Data Loss Protection solution deployed directly on the endpoint. This allows us to monitor network traffic on both direct and remote connections. Additionally, PCG has deployed iBoss web security gateway, a cloud-based solution that takes our network security protections and wraps them around each PCG workstation. Instead of having to manually connect to the network for protection, each workstation is now protected regardless of network connection. This allows us to protect our data and our clients' data no matter where our employees are located.

In addition to protecting data on the PCG workstations using endpoint technologies, we have deployed a Desktop-as-a-Service platform. This platform accommodates the creation of virtual workspaces that allow authorized users to securely work on PCG's network from anywhere without compromising security and privacy solutions.

Network devices are configured by following a standard deployment checklist that requires a specific list of settings to be configured, such as preventing remote administration of network devices unless connected via multi-factor VPN, using Network Address Translation so that no publicly routable addresses are on trusted interfaces, logging remote management sessions, and forcing termination by session time limit. PCG firewalls have additional hardening requirements that go above and beyond the requirements for other network devices, such as being configured to block any remote access methods that are not encrypted at network ingress points. All requirements are updated at least twice a year or when a new release is provided.

Encryption

Confidential data in PCG's custody is encrypted while it is at rest when stored on workstations and desktops, removable media, or as backups.

It is also encrypted when in motion over untrusted networks, including data traveling via Internet, Wi-Fi, or non-PCG managed/unprotected networks. PCG also employs encryption in its email system to appropriately secure outbound emails containing confidential information. PCG's encryption standards include the following:

- ▶ Wi-Fi
 - Wireless signal encryption WPA2+AES-CCMP is used

- WEP or WPA are not used in any circumstances
- WPA2+TKIP can be used in situations where compatibility issues arise
- ▶ Web Services
 - Secure protocols are used, including HTTPS, FTP-SSL, Secure-FTP
 - TLS 1.2+ based encryption
 - SSL 2.0, SSL3.0, Telnet or SSH v1 are not used
- ▶ IPsec
 - IPsec ESP parameters are used wherever IPsec protocol is required, IPsec AH are not used.
 - Encryption: AES-256 or better.
 - Integrity: SHA-256 or better.
 - Authentication: DH-2048 or better, or ECDH-256.
 - DES or 3DES based encryptions are not used.
- ▶ Email:
 - TLS 1.2 + based encryption

Integration with Statewide Active Directory Services

PCG can fully support integration with statewide active directory services.

Interface Security

A key tenet of Information Security is the use of Authentication, Authorization, and Accounting (AAA) to control access to resources. PCG has implemented tools that allow for the use of AAA for access control so that network devices, servers, systems and other PCG assets are accessed securely, accounts are used as intended, and all AAA activity is logged as it is performed. These tools require multi-factor authentication to connect to the PCG network or assets.

Network devices are configured by following a standard deployment checklist that requires a specific list of settings to be configured, such as preventing remote administration of network devices unless connected via multi-factor VPN, using Network Address Translation so that no publicly routable addresses are on trusted interfaces, logging remote management sessions, and forcing termination by session time limit. PCG firewalls have additional hardening requirements that go above and beyond the requirements for other network devices, such as being configured to block any remote access methods that are not encrypted at network ingress points. All requirements are updated at least two times per year, or when a new release is provided.

Security Test Procedures

In creating the PCG Information Security Program, we considered a variety of regulations such as HIPAA, FERPA, and NIST 800-53 rev. 5. Consequently, in addition to a robust monitoring and reporting infrastructure, PCG's systems undergo annual penetration testing conducted by an external 3rd party and quarterly vulnerability scans. All PCG applications in the scope of this RFP undergo regular audits and security testing to ensure compliance with industry security standards.

PCG application security policies govern application security testing (AST), which covers both static and dynamic code scanning and analysis. PCG provides its development teams access to industry-leading AST tools for scanning and analysis activities. Security baselines are created from the Open Web Application Security Project (OWASP) Top 10 and The Common Weakness Enumeration (CWE)/System Administration, Networking, and Security Institute (SANS) Top 25 Most Dangerous Software Errors. Application scanning is required before deploying a PCG application or software component. Applications are scanned, at minimum, annually and/or upon major revisions.

Managing Network Security Devices

A configuration management database (CMDB) is deployed at PCG and contains a full inventory of all critical technical assets, including, but not limited to, network devices, workstations, and servers. Effective configuration management establishes a discipline for maintaining relevant information throughout an

information system or system component's lifecycle. PCG's CMDB is used as an authoritative source for PCG's technical inventory and is synched regularly to increase its accuracy and consistency with other tools used to maintain our systems.

The CMDB includes the following information to enable tracking, reporting, and maintaining of accountability:

- ▶ Asset tag or unique identifier
- ▶ Date of purchase/assignment/transfer
- ▶ Device status (e.g. Active, Decommissioned)
- ▶ Asset type and sub-type (e.g. network device, managed switch)
- ▶ Manufacturer
- ▶ Model
- ▶ Serial number
- ▶ Physical location
- ▶ Application supported
- ▶ Asset owner
- ▶ Disposal/Sanitization Certificate (for devices once they are decommissioned)

PCG's CMDB is deployed using the Remedyforce tool, which is also used for incident and change management. The correlation of these processes in the Remedyforce tool creates operational efficiencies and often may allow for a shorter downtime because of the information that can be provided on demand. Additionally, we use the CMDB as a baseline for our inventory, which is critical in capturing compliance metrics that help us to catch and remediate operational issues before they become incidents or breaches.

Security Patch Management and Remediation

PCG's information systems regularly undergo both preventative and predictive maintenance to maintain optimal and secure performance. When maintenance results in equipment requiring disposal, PCG follows written procedures to obtain certification of sanitization prior to release from organizational control. In the case of equipment re-use, PCG requires that all sensitive data is overwritten using DoD 5220.22-M methods or destroyed prior to employing the equipment for its new purpose.

PCG has regular, established maintenance windows during which systems may be taken offline, as needed, without impacting its business. These maintenance windows allow for reduced risk of client disruption while conducting routine maintenance. Many types of ongoing maintenance are performed at PCG, including, but not limited to, regular patch management and equipment lifecycle management.

Security patching at PCG is deployed on a defined lifecycle based on the determined priority of any patches that the vendor releases. Any patches deemed critical to security are deployed to all PCG assets within no more than two weeks. All other security patches are deployed according to a monthly cycle, and all other, less-critical patches are deployed at least quarterly (every third month).

In addition to system maintenance, PCG also regularly reviews and maintains documentation, including policies and procedures that support continuous improvements are made to systems and services whenever possible. Thorough documentation is key to multiple aspects of management and operations at PCG and is used to reduce security risks by increasing consistency of operating.

PCG promotes accountability, identifies and addresses gaps in compliance, and conducts regular compliance assessments. These compliance assessments include self-assessment procedures and third parties' assessment and compare operations to established policies and standards. PCG recognizes that operational consistency is a cornerstone of a successful security program and strives to identify and remediate compliance gaps before they become security events that put PCG and its clients at risk.

Compliance gaps are identified through several mechanisms designed to examine the effectiveness of our security solutions, including regular collection of compliance metrics and review of audit logs and

operational documentation. Compliance metrics are comprised of PCG's security and compliance programs and are intended to measure operational effectiveness of the designed security controls and identify areas where process or solution improvements are required. These metrics include, but are not limited to, the following:

- ▶ Percentage of changes to physical/logical access with an associated access request ticket (target: 100%)
- ▶ Percentage of servers and workstations with endpoint protection and up-to-date anti-virus (target: 100%)
- ▶ Percentage of servers and workstations in compliance with PCG hardened configuration and security settings (target: 100%)
- ▶ Percentage of servers and workstations with latest patches installed (target 100%)
- ▶ Types of incidents generated and time-to-resolution (target: P1 [1 day] – P5 [10 days])
- ▶ Number of outages by category and time to resolution (target: 0 outages)
- ▶ Number and types of changes across the company (target: 0 Non-Break Fix Emergency Changes)

PCG is involved in ongoing audits throughout the year, including specific business units and the firm as a whole. These audits vary in scope based on client requirements and/or firm compliance initiatives.

Secure Communications over the Internet

PCG uses Digital Guardian's data loss protection (DLP) tool to protect against data loss as data moves from PCG's private network to its public network and thus moves outside of PCG's direct control. This solution contains multiple policies for data identification, and it receives, monitors, and inspects all egress data to support secure communications and traffic. Monitoring occurs based on the following criteria:

- ▶ Types of data, such as PHI, PII, PCI data, etc.
- ▶ Keywords that indicate sensitive data
- ▶ Sensitive document characteristics

The DLP solution logs all attempts, even successfully blocked ones, to transmit confidential information out of the organization without authorization. The tool alerts PCG of any compliance violations so that the Information Security team can follow up to determine where issues may exist. The DLP tool has been deployed on all endpoint devices (e.g., workstations) on PCG's network. This allows for monitoring at a device/user level to detect when an individual attempts to move sensitive data off of the network.

PCG's data loss protection tool is tied in not only to network traffic and endpoints, but also to PCG's email communications, to allow for monitoring of egress traffic, allowing the Information Security team to gain visibility, control, and to allow for policy enforcement where necessary.

PCG also utilizes additional layers of defense to protect data from any compromise, iBoss Web Security gateway integrated with FireEye Malware Protection is utilized on every workstation, along with Microsoft Defender ATP for endpoints. These layers protect against ransomware, phishing, scamming and malicious websites.

Logging

PCG utilizes industry leading tools for log aggregation, including centralized log gathering and correlation with monitoring and alerting tools. These systems are monitored by a combination of internal resources and Alert Logic, a third-party managed security service provider (MSSP) that delivers actionable intelligence for event remediation.

Whenever technically feasible, PCG's infrastructure systems feed log data into Alert Logic's Log Manager correlation engine that aggregates data and applies the logs to correlate events across multiple data feeds. This correlation applies not only to PCG's data feeds, but across data feeds fed to the engine from all clients using the Alert Logic tool. All logs and the correlation data are monitored 24/7 by the Security Operations

Center (SOC), which is responsible for notifying the PCG Information Security Team within 15 minutes of identifying any security events requiring additional investigation.

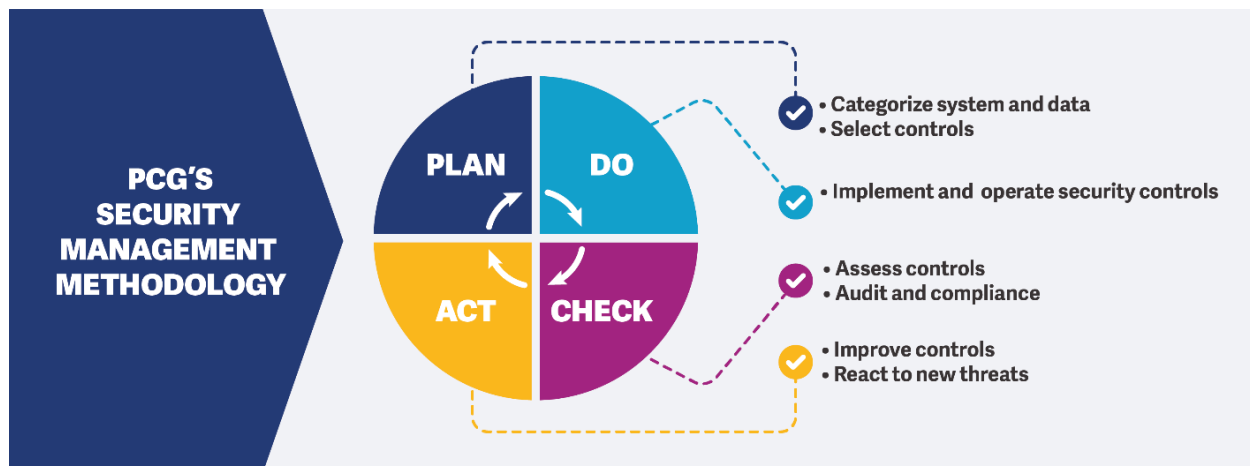
PCG's critical infrastructure generates logs whenever any of the following activities are requested to be performed by the system:

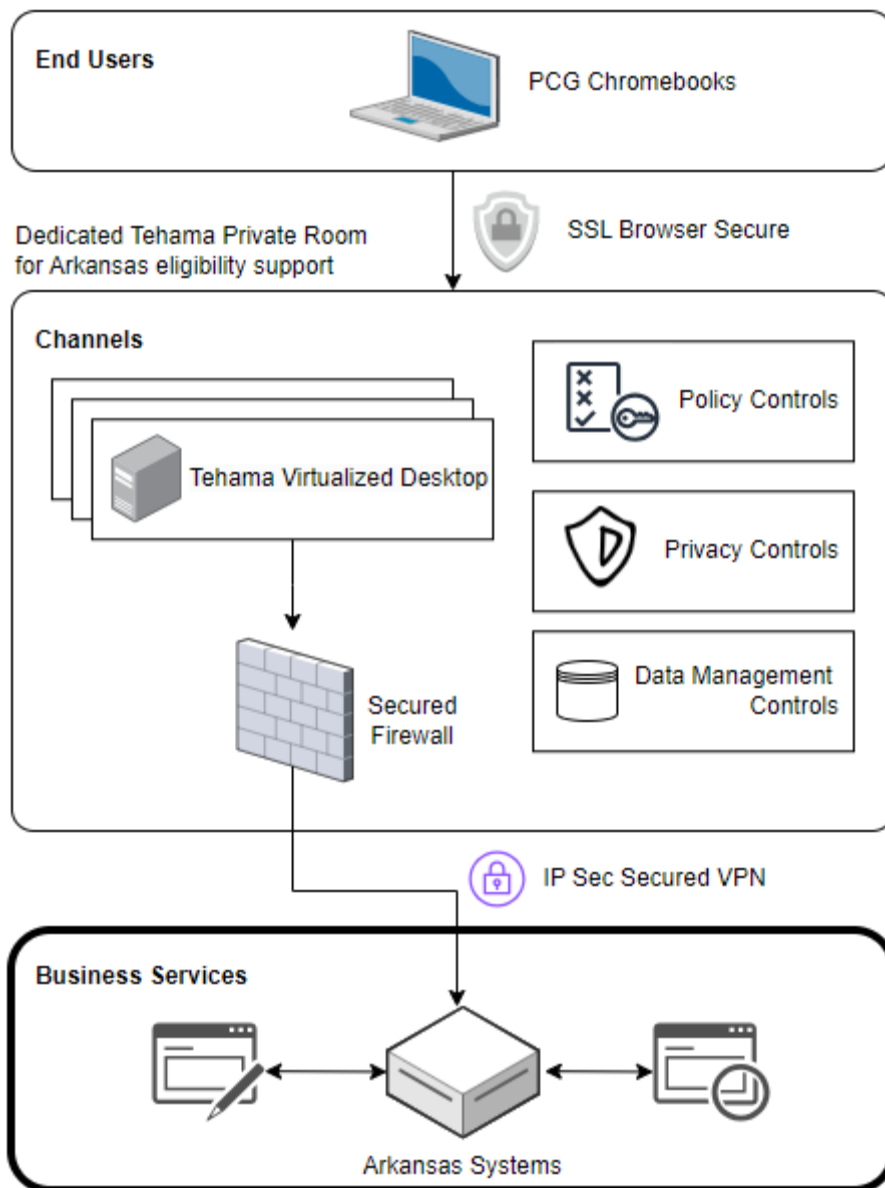
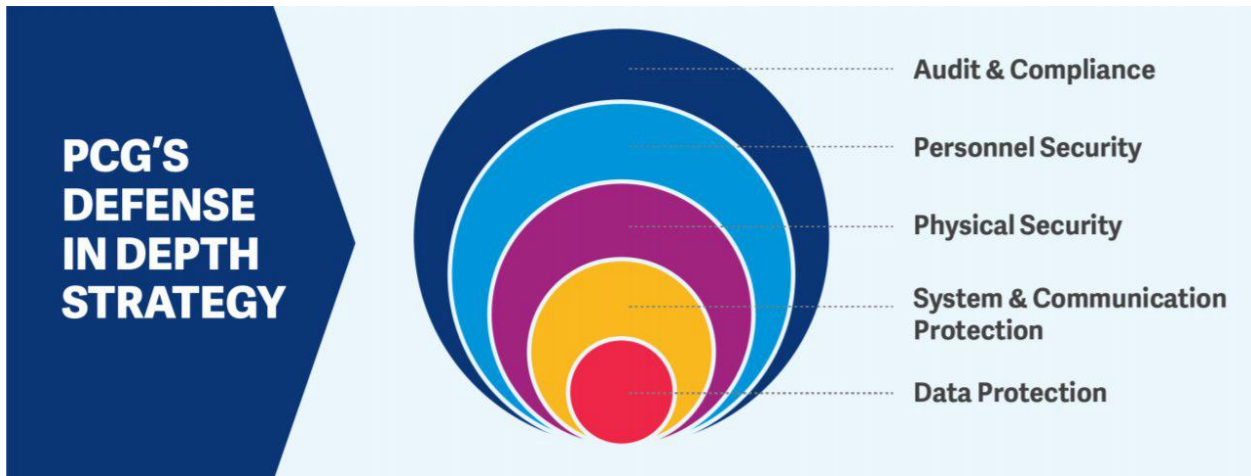
- ▶ Create, read, update, or delete confidential information
- ▶ Authentication events
- ▶ Privileged access activity
- ▶ Detection of suspicious/malicious activity (such as from an Intrusion Detection/Intrusion Prevention System (IDS/IPS), or anti-malware system)
- ▶ Create, modify, or revoke access rights, including:
 - ▶ Adding a new user or group
 - ▶ Changing user privilege levels
 - ▶ Changing file permissions
 - ▶ Changing database object permission
 - ▶ Changing firewall rules
- ▶ User password changes
- ▶ System, network, or services configuration changes including installation of software patches and updates or other installed software changes

Log data is replicated to an alternate cloud storage location where it can be accessed in the case of an emergency/disaster scenario. It is preserved according to our data retention policy and can be used to investigate and audit specific events whenever necessary.

IT Security Diagrams

As PCG expands to use various cloud environments for applications, all business units must make technology decisions based on what will conform to the Information Security policies and standards. PCG's Information Security policies and standards are not designed to be vendor-specific, but rather define technological requirements and controls so that business units can make decisions based on their own industry's best practices.





All Programmatic Privacy and Security Controls

Significant investment has been made to create consistent documentation for both security governance and operations. PCG has developed a comprehensive set of information security policies and standards that align with appropriate regulations, standards, and other guidance, such as with NIST SP 800-53 rev. 4 and ISO 27001. These policies are critical to maintaining the appropriate level of emphasis on the security of our company and our clients. Operational documentation, including procedures and best practice documents, has also been created so that operations are consistent and maintain the security controls that PCG has implemented.

PCG's policies and standards are classified as 'Sensitive' and cannot be shared with external parties without a Non-Disclosure Agreement (NDA) in place. PCG operates across multiple industries and individual policies do not provide a full picture of the security posture of our company. They additionally contain information that could compromise the security of our solutions and data entrusted to us by our clients. Instead of providing policies as requested, we can provide a list of all policies along with a summary of what each contains. The full text of our policies can be made available for review following the signing of confidentiality agreements or the inclusion of appropriate confidentiality provisions upon reward of a contract.

The Details of Security, Privacy and Consent Management

PCG's Privacy Policy governs personal data collection, handling, and processing. The main tenets of the policy include collecting minimum necessary data, identifying and securing Personally Identifiable Information (PII) throughout its lifecycle, and prohibiting the sale of PII. PCG additionally has a Data Breach and Notification Standard that guides breach notification activities should an incident occur.

PCG typically handles data on behalf of government agencies or departments and is thus not required to provide notice of data processing. In cases where it is required to do business, PCG's Privacy Office and Legal team are engaged to address requirements according to the jurisdiction in which data is processed. Although notice may not be publicly provided, PCG has extensive policies and procedures related to appropriate data handling and protection. Due to the nature of our business, many of our systems or employees handle significant amounts of personally identifiable information and regulated data. As such, we recognize that privacy must be factored into any decisions made regarding protecting and handling that data.

PCG's Privacy Program operates in parallel to the Information Security team. Whereas Information Security's focus is protecting our company, our clients, and the data we hold, the Privacy team focuses on the perspective of the individual whose data we hold. Because these two vantage points may conflict at times, the programs were separated to exist as equal partners under the umbrella of the larger Governance, Risk, and Compliance team.

PCG has operations in each of the United States, requiring the Privacy team to regularly coordinate with Legal to understand all newly introduced and existing legislation that impacts privacy. This includes laws specific to handling healthcare and education data and any comprehensive privacy laws with a broader scope. As new laws are released, the Privacy team reviews and tracks the impact and establishes expert knowledge on the laws and how they apply to PCG and its clients.

Approach to Maximizing Sharing of Data (provided from any external source) While Complying with all Appropriate Rules, Regulations, and Policies

A thorough Data Classification Policy and Standard has been developed to support the appropriateness of controls as data travels within and outside our network. Due to the nature of our business, most of the data that PCG handles is confidential or sensitive in nature. The Data Classification Policy clearly states that uncategorized data needs to assume the highest level of classification (confidential) and be handled as appropriate for that level.

As dictated by our Data Classification Policy and Standard, we may not be able to share all requested attachments as part of the RFP process. We maintain these restrictions to protect our clients' best interest,

as they assure the security of our solutions and all client data with which we have been entrusted. We will do our best to accommodate all requests to the extent possible and most information that we are unable to provide as part of the public disclosure process can be provided following the award of a contract with an executed Non-Disclosure Agreement.

User Roles, Security Permissions, and Administrative Functions

PCG systems use role-based access control to grant access to data and systems for authorized users. All users are assigned a role (i.e., user type) as part of the account provisioning process. Access to data within the systems is restricted to just those areas and data sets to which a user's role has been authorized.

In addition to access and permission controls, role-based access defines which roles have the capability to add and/or modify the defined roles (i.e., access administration). Using role-based access accommodates the principle of least privilege by granting each role the minimum acceptable access for the associated job function. Roles are based on the typical tiers of administrator rights, change/modify rights, and read-only rights, although they may vary by system depending on the type of data or intended use of the system.

Role-based access at PCG also facilitates separation of duties and requires that administrators use separate privileged and non-privileged accounts for administrative and non-administrative activities, respectively. Administrative account activity is logged and reviewed for anomalies and accounts are created, where technically feasible, with traceability to an individual.

Maintaining Safeguard Confidentiality

PCG requires that all staff review and accept the Security and Confidentiality Policy prior to beginning their employment and annually thereafter. This policy serves as a non-disclosure agreement between PCG and its employees to apply during and extend after employment.

A designated Information Security Officer maintains and supervises the PCG Information Security Program. The scope of the security measures is reviewed at least annually, or whenever there is a material change in PCG's business practices that may implicate the security or integrity of confidential data stored or handled by our company. PCG's Information Security Program is closely tied to the following management methodology:

- ▶ Predict: Analyze evidence and anticipate attack types based on knowledge of industry
- ▶ Prevent: Deploy solutions and processes designed to avoid a successful attack
- ▶ Detect: Use defined tools and processes to identify events that were not prevented
- ▶ Respond: Investigate and remediate event and recommend new preventive measures for the future

Privacy Requirement Adherence

Everyone in the PCG workforce, including temporary employees and contractors, is required to complete a number of training courses upon hire and on an annual basis thereafter. Training topics include HIPAA, security, and privacy. In certain cases, additional Family Education Rights and Privacy Act (FERPA) or other trainings are also required.

The security and privacy training suite was developed to include the following types of content in order to accommodate various learning styles:

- ▶ Practical exercises in security and privacy awareness training that simulate actual cyber-attacks.
- ▶ Recognizing and reporting potential indicators of an insider threat.
- ▶ Practical exercises in security and privacy training that reinforce training objectives.
- ▶ Recognizing suspicious communications and anomalous behavior on information systems.

In addition to annual required training, PCG's Information Security team has implemented a comprehensive awareness program that spans all areas of security. The team regularly interacts with the PCG workforce to promote security awareness through a number of avenues, including simulations of security events, informational newsletters, and marketing materials.

Additional Protocols

Data security and privacy are core to PCG's mission. PCG recognizes that having robust privacy and security programs is critical in minimizing the impact of threats inherent in today's workplace and computing environments. PCG has invested and continues to invest millions of dollars into our infrastructure so that all PCG and client data, networks, and applications are protected against cyber threats and malicious activity.

Our clients are entrusted with a wealth of valuable data and access to critical systems, which means the downstream impacts of a data breach or cyberattack may have dire consequences. Unfortunately, the pace of data breaches impacting the public sector continues to grow at alarming levels. PCG takes these threats seriously and faces them head on. For example, in December of 2021, the Log4Shell was discovered and announced to the world. Due to the widespread use of Log4J, this exploit has potential to be a critical vulnerability for many industries and companies. PCG immediately coordinated vulnerability scanning across our environments to detect, contain, and remediate any places where this code was used. While PCG was ultimately proven to be unaffected by the exploit, the successful deployment of our incident response plan and ongoing vulnerability management program, PCG has been able to stop all attacks attempting to use this exploit. Log4Shell is just one of the many vulnerabilities that are discovered every day, and a good example of why a speedy response is essential to the success of a cyber-security program. This event demonstrates our dedication to keeping our security program as current and up to date as possible to protect our client data.

As stated by PCG's Chief Information Security Officer (CISO), "PCG is a trusted partner above all else. Effective partnerships require trust and accountability. Our information security program is built from the ground up so that we can hold our clients' data and trust in the highest regard and prove it through continual assessments and rigorous testing."

Roles and Responsibilities to be Performed by the Vendor and by DHS

PCG will provide Managed ChromeBooks as access workstation to Tehama. Managed includes, patching, updates, identity management, Antivirus, Web security (no access to general internet), device lock/wipe etc.

Tehama Virtualized Desktop will be used as a Gateway to Client's systems. This includes logging, monitoring, session replay, segmentation, encryption, with a Separate Identity and Email Domain for access management and collaboration.

Subcontractor Privacy and Security Compliance Statement

AFMC's Privacy and Security Officer oversees all activities related to developing, implementing, and maintaining AFMC confidentiality, HIPAA, and other privacy and security policies in compliance with applicable federal and state laws. AFMC routinely creates, accesses, transmits, receives, stores, maintains, and handles protected health information (PHI) and personally identifiable information (PII). Employing the minimum necessary rule, we limit access to all data. We have robust policies, procedures, and processes to manage access, handling, storage, and destruction of data. The referenced laws and regulations are integral to our processes and are monitored for changes, which are then replicated in corporate policies and practices.

AFMC employs multiple safeguards to protect the receipt, transmission, use, and maintenance of PHI/PII by system users. The first safeguard we apply is the minimum necessary rule: staff only have access to what they need to complete their work. Further, PHI/PII is stored on protected AFMC network drives (never on a user's local drive) and access to a staff member's user account requires multifactor authentication. Each user has a unique login ID and password. AFMC's systems access control identifies each user and prevents unauthorized users from entering or using information resources. All user logins are audited multiple times each year and on an ad hoc basis. Our system revokes all inactive login IDs and access points upon notice from Human Resources that a user is no longer working in a capacity that requires a login ID or if a user's job responsibilities change.

AFMC requires home offices be set up in a confidential work environment. Employees are instructed to face workstations away from doors and windows. If such a set-up is not possible, the workstation requires a privacy screen filter for users whose work involves use of PHI/PII. Additionally, home workspaces may not be set up near a voice listening device. A picture of the employee's home office space must be submitted to and approved by HR and IT as part of the onboarding process. AFMC follows PCGs encryption standards as noted in the Encryption section of this document.

If PHI/PII will be discussed in a virtual meeting, the meeting invitation must inform invitees that the meeting may contain PHI/PII, may not be recorded, and that it is the responsibility of all attendees to ensure non-authorized individuals cannot see the screen or overhear the meeting conversation. AFMC staff are required to complete Security Awareness training upon hire and annually. This training syllabus includes the definitions of PHI and PII, and employees are made aware of the penalties imposed for improper use or dissemination of PHI/PII.

To provide secure office and systems access to our Little Rock and Fort Smith (Arkansas) locations, each campus has a unique entranceway and office space access controlled by a security access control system. Users receive access cards for their designated areas. Entrance without an access card is not allowed. Visitors check in via the AFMC receptionist and must always be accompanied by an AFMC employee. Each AFMC office is equipped with security cameras in common access and hall areas that function 24 hours per day, 365 days per year. Both AFMC office locations contain closed-access rooms that can be checked out, if needed, for discussion involving PHI or documents containing protected information.

Training Plan

Provide a detailed training plan including the amount of time for a new worker to be fully trained, maximum number of students per class, list of classes each person will take, passing scores, number of attempts to pass, how new policies and procedures will be trained, and approach to training new workers.

PCG and AFMC recognize that a well-trained workforce is critical to the success of this engagement and the quality of our staff's output. Over the past three decades, PCG has developed training materials, conducted training sessions, and assessed training effectiveness through quality assurance and assessment processes for a wide variety of state level projects. Most recently, PCG has focused efforts over the past two years on similar eligibility projects in Alaska, Maine, and Montana. In each of these projects, PCG has taken the lead or provided substantial support in training staff to handle a wide range of eligibility tasks, including end-to-end Medicaid eligibility application processing. **For training support on this engagement, we have partnered with AFMC who will take the lead on all training related activities to ensure that their wealth of Arkansas Medicaid experience is passed onto the staff.** This extensive experience and partnership positions PCG as a trusted partner to assist DHS in addressing eligibility backlogs and ensuring that eligible individuals and families maintain uninterrupted public assistance and health coverage.

Training Approach

While AFMC will work with DHS to ensure the training plan meets expectations, PCG brings extensive experience in training for eligibility projects, having successfully trained hundreds of employees for very similar engagements. This experience will help shape the general approach as we work collaboratively with AFMC. Our collaborative approach to staff training is adaptable and tailored to the unique requirements of each engagement, and considers the needs of staff, the project, and the department. We recognize that a one-size-fits-all training approach is insufficient. PCG employs a diverse range of proven effective training methods, ensuring that our staff are well prepared. These methods include:

- ▶ **Tailored Training Plans** – Customized training content that aligns with learners' prior knowledge and job roles.

- ▶ **Blended Learning** – A mix of virtual classes, e-learning modules, workshops, and hands-on practice. For this engagement, AFMC will leverage their learning management system (LMS) to manage training task assignments, conduct assessment scoring, and ensure training program completion. The LMS includes classroom-based learning modules, ARIES training, and annual privacy and security training.
- ▶ **Active Learning** – Engaging participants through discussions, problem-solving, case studies, and simulations.
- ▶ **Feedback and Assessment** – Regular performance feedback and formative assessments.
- ▶ **Microlearning** – Bite-sized modules for efficient learning.
- ▶ **Hands-On Practice** – Simulating real-world tasks using the ARIES system.
- ▶ **Peer Learning and Collaboration** – Encouraging interaction among learners.
- ▶ **Reinforcement and Refreshers** – Periodic reviews to prevent knowledge decay. On this engagement, AFMC will use the quality results to inform ongoing training initiatives and activities.

We pride ourselves on a deep understanding of eligibility systems. **In our recent work on the Alaska eligibility project, our PCG project staff have immersed themselves in the AK eligibility system.** As the project scope expanded, so did our familiarity with the eligibility system. We are poised to leverage the collective knowledge of our 85 staff members and facilitate additional learning opportunities.

PCG's current eligibility system specific training focuses on the following:

- ▶ Processing Application Registration
- ▶ Sending Cards and Coupons to Clients
- ▶ Generating and Sending Notices to Clients
- ▶ Writing Case Notes
- ▶ Updating Contact/Personal Information
- ▶ Verifying Benefits Issuance

Given our familiarity with eligibility systems and AFMC's expertise, our partnership positions us as leaders who can cross-train staff, minimize the learning curve and maximize project impact.

Through completing and training staff to perform these tasks, PCG has built a team with a wealth of knowledge using eligibility systems. These resources and their existing system knowledge will be leveraged for this engagement. Training classes associated with these tasks can be directly applied to the training that eligibility specialists and supervisors will receive. **PCG's experience training staff to perform these tasks and familiarity navigating eligibility systems provides an important foundation to build upon as AFMC, with the support of PCG, provides training to eligibility specialists and supervisors.**

New Hire and Ongoing Training

New hire training will take place throughout a five-week period (**25 business days**) for eligibility coordinators. Supervisors will have a three-week training period (15 business days). This shortened training period for supervisors is accomplished through prioritizing hiring pre-qualified staff with prior knowledge of a Medicaid eligibility system.

Prior to new hire training, PCG and AFMC will work with DHS to gain access and familiarity with the DHS Knowledge Management System (KMS), as this will be an integral part of delivering training materials to staff and keeping them up to date on policy. After initial discussions, AFMC will have the training team attend the train the trainer sessions to prepare for supervisors and eligibility specialists to come on board. AFMC, PCG, and the DHS team will meet regularly throughout the train the trainer period to discuss training progress and other topics. Below is an outline of our proposed training schedule for newly hired supervisors and eligibility specialists.

New Hire Training Approach – Eligibility Specialists	
Week	Class Topics
1	<ul style="list-style-type: none"> ▶ Project Introduction Meeting ▶ Staff Orientation ▶ Complete Employment Paperwork ▶ PCG Eligibility and Compliance Trainings ▶ DHS specific Compliance Trainings ▶ Daily Training Cohort Check Ins ▶ Supervisor Meet and Greet ▶ ARIES Introduction
2	<ul style="list-style-type: none"> ▶ ARIES Trainings ▶ Daily Training Cohort Check Ins ▶ Weekly and Ad-Hoc Assessments
3	<ul style="list-style-type: none"> ▶ ARIES Trainings ▶ Daily Training Cohort Check Ins ▶ Weekly and Ad-Hoc Assessments
4	<ul style="list-style-type: none"> ▶ ARIES Trainings ▶ Daily Training Cohort Check Ins ▶ Weekly and Ad-Hoc Assessments
5	<ul style="list-style-type: none"> ▶ ARIES system Wrap Up Sessions ▶ Daily Training Cohort Check Ins ▶ Weekly and Ad-Hoc Assessments ▶ Distribute Training Effectiveness Survey

New Hire Training Approach – Supervisors	
Week	Class Topics
1	<ul style="list-style-type: none"> ▶ Project Introduction Meeting ▶ Staff Orientation ▶ Complete Employment Paperwork ▶ PCG Eligibility and Compliance Trainings ▶ Supervisor Specific Trainings ▶ DHS specific Compliance Trainings ▶ Daily Training Cohort Check Ins ▶ Supervisor Meet and Greet ▶ ARIES Introduction/Trainings
2	<ul style="list-style-type: none"> ▶ ARIES Trainings ▶ Daily Training Cohort Check Ins ▶ Weekly and Ad-Hoc Assessments
3	<ul style="list-style-type: none"> ▶ ARIES Trainings ▶ Daily Training Cohort Check Ins ▶ Weekly and Ad-Hoc Assessments

Prior to finalizing training plans, AFMC will work with DHS to understand training requirements and review DHS training materials. To establish a successful training program, the training team will need to deeply understand the material and how it will be presented to the supervisors and staff to ensure high-quality training. After completion of new hire training, PCG and AFMC will evaluate training effectiveness using quality assurance mechanisms, performance assessments, surveys, and internal and external feedback loops. **PCG and AFMC will store proof of all training activities and certifications in the designated DHS repository.**

PCG understands that training does not end with the completion of new hire training. Training is an integral part of the engagement from start to finish. PCG uses our quality assurance process and feedback loops to identify specific skills and knowledge gaps among staff and supervisors. Once these gaps have been identified, our team will design training modules using DHS and PCG developed materials and original

content to close the gaps and ensure high quality work. Similar to evaluating new hire training processes, PCG and AFMC will monitor the effectiveness of ongoing training through quality assurance mechanisms, performance assessments, surveys, and internal and external feedback loops.

Staff Training Assessments

Training assessments play a critical role in evaluating training effectiveness and staff's understanding of the content and ability to perform job duties that align with quality standards on all our eligibility engagements. In the RFP, DHS outlines that the DCO Training SOP allows two attempts to pass the training tests and that the employee must retake the entire training courses to attempt another test. **PCG and AFMC will follow the same guidelines for training tests for this engagement for training tests.** We also propose that staff should have a two-day period for review between the first and second attempts. To help support staff, PCG and AFMC will provide additional coaching for staff should they not pass the first or second attempts. This support sets a positive tone and understanding between the project team, supervisors, and eligibility specialists that support will be given to those who need it. In addition to setting a tone, this support reinforces trainees to learn from their mistakes and helps trainers highlight areas of improvement to guide trainees toward success. At the same time, staff will be aware of the training expectations and consequences should they not pass training assessments.

Additionally, PCG will ensure that appropriate passing grades are in place. **Staff will be required to pass all training tests with an 85 percent or above.** This passing score ensures that staff understand the content and staff attrition remains low and stable throughout the engagement. The quality improvement process discussed in this proposal's *Quality Improvement Plan* section will ensure that all staff are meeting quality standards regardless of the earned passing score for training tests.

Policies and Procedures Training Approach

First and foremost, clear communication is key to providing training for policy and procedure changes. As we navigate change management within our eligibility support projects, we emphasize a comprehensive approach to ensure staff comprehension.

PCG has successfully followed the approach below to train staff on new policies and procedures:

1. **Documentation and Standard Operating Procedure (SOP) Creation** – Our team will create a written document to explain the changes and ensure the storage of that update is accessible for all eligibility specialists, supervisors, and the project team.
2. **Deliver Information to Staff** – PCG and AFMC will deliver the written documentation to staff, ensuring they understand the implications of the change and their role in supporting it.
3. **Establish Accountability** – PCG and AFMC will fold this change into performance metrics and the quality assurance process to ensure adherence. In addition to including the changes in metrics, PCG and AFMC can also test the knowledge of staff through other methods, such as quizzes, discussions, and technology engagement tools.
4. **Conduct Presentation/Training Session** – If needed, AFMC's training team will lead a session to train all eligibility specialists and supervisors on the change. During this session, the changes, the implications on business process implications, and the methods by which staff will be held accountable will be reviewed. Staff will also be educated on the consequences of non-compliance.
5. **Establish Feedback Loop** – As a result of changes, PCG and AFMC will create an environment that encourages questions and clarification. This will be accomplished through Q&A sessions, chat forums, and/or scheduled office hours with the training team.
6. **Provide Regular Updates** – PCG and AFMC will regularly provide communication to staff about policy and procedure changes and reminders about where the written documentation is stored. In addition to updates coming from project team, PCG uses supervisory staff to reinforce regular updates in team meetings.

Training Logistics

Due to its numerous benefits, PCG has chosen a cohort approach for staff eligibility specialists. **Cohorts will be comprised of a maximum of 30 eligibility specialists.** The seven supervisors will start before the eligibility specialists and have a smaller cohort group.

Benefits of smaller, staggered cohort-based training are:

- ▶ A more personalized and effective learning experience achieved through individualized attention and comprehensive question and answer dialogue
- ▶ Higher learning retention, as they enable more interactive and engaging sessions
- ▶ Minimizes disruption to operations as not all staff members are away from their duties simultaneously
- ▶ Increased participation and engagement, fostering a more conducive learning environment.
- ▶ Trainers and supervisors can closely monitor each trainee's progress and provide timely feedback and support, ensuring each learner is on track with their learning objectives.

With engaging materials, PCG and AFMC will ensure a positive learner experience. Communication remains paramount, and we adapt strategies based on context and feedback.

The AFMC and PCG partnership will leverage decades of experience between both organizations working with state Medicaid agencies, including Arkansas. AFMC's Arkansas eligibility experience will allow for real-time understanding of client needs and provide quick feedback to DHS regarding issues or challenges that come up as we work together. This synergy will provide better service to Arkansas—at a lower cost—and benefit Arkansas DHS.

Quality Improvement Plan

Provide a quality improvement plan that describes the Prospective Contractor's approach to quality assurance to meet 95% accuracy including quality control processes for monitoring the quality of performance, communicating deficiencies, and obtaining feedback.

Quality improvement is at the core of all PCG engagements. PCG focuses on making quality measurable and aligned with the unique requirements of each project. More specifically, our eligibility work presented an opportunity to build quality improvement programs for eligibility specific workflows. These programs have helped us manage the work of hundreds of staff performing a wide variety of eligibility support services. We understand that quality is of the utmost importance regarding public assistance and Medicaid programs and have demonstrated this over the last two years. **In addition, PCG has chosen to partner with AFMC to support quality for this engagement. AFMC works with state governments, including Arkansas, on various quality initiatives.** Their utilization review accreditation commission (URAC) certification demonstrates their commitment to quality. This certification requires annual adherence to nationally recognized standards for quality and accountability.

Quality Management Approach

PCG takes a four-phase approach to quality management. Below we will walk through each phase and identify the actions to be taken by PCG and AFMC to ensure that the quality standards and objectives outlined in this RFP, listed below, are met.

- ▶ Staff must meet at least **95 percent accuracy** of the monthly quality measurement.
- ▶ **10 percent of tasks** will be randomly reviewed for each eligibility specialist by the contractor each month.
- ▶ The percentage of tasks returned for correction for each eligibility specialist shall **not exceed 5 percent** of the tasks reviewed.

Phase 1: Quality Planning

Quality planning sets the foundation for the project by defining quality objectives and determining the processes required to meet them.

Action Steps:

1. Review and finalize quality objectives and standards.
2. Identify key deliverables and quality criteria for each.
3. Develop a comprehensive quality management plan that defines roles, responsibilities, and communication channels related to the quality improvement process.
4. Conduct a risk assessment to anticipate potential quality issues and develop mitigation strategies.
5. Develop quality assurance checklist(s) in collaboration with DHS.
6. Develop quality assurance tools for quality assurance data collection and analysis.
7. Develop process for random selection of completed tasks for quality assurance reviews.

Phase 2: Quality Assurance

Quality assurance focuses on preventing errors by implementing processes and standards throughout the project.

Action Steps:

1. Provide training and resources to team members to ensure they understand their role, responsibilities, and expectations regarding the quality assurance process.
2. Conduct regular quality assurance reviews to assess adherence to quality standards.
3. Monitor quality assurance performance metrics and provide feedback to supervisors, staff, and DHS.

Phase 3: Quality Control

Quality control involves monitoring project activities and outputs to ensure they meet the defined quality standards. This phase is ongoing throughout the project.

Action Steps:

1. Implement inspection and testing procedures to prevent deviations from the quality requirements.
2. Document and address scores below quality standard.
3. Continuously monitor and evaluate quality control metrics.
4. Evaluate the need for and implement changes to staff training, business processes, etc. to improve quality outcomes.

Phase 4: Continuous Quality Improvement Tools

Continuous quality improvement focuses on identifying opportunities for enhancing processes and outcomes throughout the project lifecycle.

Action Steps:

1. Foster a culture of continuous improvement by encouraging feedback from team members and stakeholders.
2. Analyze quality assurance performance data to identify trends and opportunities.
3. Implement process improvements and best practices to enhance efficiency and effectiveness.
4. Regularly review and update quality management processes and standards based on lessons learned and evolving project requirements.

Quality Management Approach in Action

AFMC will be leading the quality management for this engagement with PCG's support. **AFMC will provide a Quality Manager and Quality Control Leads to lead the quality management program and initiatives.** As an example of how the team will operationalize the quality management approach in the previous section, AFMC will:

1. With DHS approval, the Quality Manager and Quality Control Leads will design a quality assurance program. The QA program will be centered around security protocols, policies, and standard operating procedures to ensure Eligibility Specialists interpret and apply best practices and recommended procedures for case tasks.
2. The Quality Manager and Quality Control Leads design a Salesforce quality assurance scorecard for evaluating Eligibility Specialists to ensure they comply with DHS policy, perform tasks properly, and process cases correctly.
 - a. Each individual case activity will be assigned a score, producing a cumulative score at the end of the scorecard.
 - b. QA will use the scorecard to identify a case in ARIES, observe the activities the Eligibility Specialist performed to process the case, review documentation requirements and other procedures, and evaluate whether the Eligibility Specialist performed the task and processed the case correctly.
 - i. AFMC will use this process to ensure a random review of 10% of all tasks performed by existing Eligibility Specialists each month.
 - ii. AFMC will use this process to ensure a random review of 95% of all tasks performed by new Eligibility Specialists each month.
 - c. All assessments will be recorded in Salesforce and reported to DHS each month.
3. Prior to the completion of tasks, **the Quality Manager and/or Quality Control Leads will perform a second-party review in ARIES for the first 30 days after each new Eligibility Specialist's employment.**
4. The Quality Manager and Quality Control Leads process reports in a real-time dashboard, allowing management to view tasks performed and cases processed per Eligibility Specialist.
 - a. These reports will help the QA team ensure that all contract deliverables are met each day.
 - b. The Quality Manager will report all quality control review results to DHS each month.
5. The Training Manager and Training Specialist will utilize the results of the QA review to drive quality assurance, enhance coaching opportunities, identify training needs, and recommend process improvements.

Eligibility Quality Management Experience

Using the quality management approach outlined above, PCG built foundational quality assurance programs that exceeded the expectations of our state partners. The programs were piloted with select supervisors and staff to gather feedback and ensure we were gathering all necessary data to accurately determine quality. We reported our quality results monthly and made reporting, operational, and training changes as a result of client feedback on report contents, quality scores, and feedback from staff and supervisors to promote continuous quality improvement.

As the scope of our work grew, PCG began to expand upon the foundational program to include more robust checklists and tools, automation, and quality dashboards for data visualization. These tools have helped our eligibility projects achieve high remarks from both state partners and public assistance beneficiaries on the quality of work our staff provide. First, as mentioned previously in the *Project Reporting Experience* section of this proposal, PCG can leverage Microsoft Power BI, or other similar platforms, to build quality assurance dashboards for project staff and supervisors to monitor the quality metrics on an individual, team, and project wide basis. On the Montana project, our team built a quality assurance dashboard to monitor the quality assurance scores for all eligibility coordinators. The project team and supervisors were able to see quality scores and track progress over time.

In addition to the logistics side of quality assurance, PCG has experience with the people side of quality assurance. If quality issues are identified, supervisors are trained to follow specific action steps to support the staff's success. These steps are as follows:

1. **Education Review** – Supervisors and/or quality team members will schedule a one-on-one session to review any education, coaching, or additional support needs to address quality issue(s) identified.

2. **Performance Improvement Plan** – This is issued to clarify expectations of acceptable performance and/or conduct, develop an action plan for improvement, and give the employee time to correct the issues before moving to formal corrective action.
3. **Corrective Action** – Supervisors will utilize the corrective action plan described in the *Project Management Approach* section of this proposal.

To note, dependent on the nature of the quality issue identified, these action steps are not necessarily followed in a linear nature.

PCG has proven methods to measure, monitor, and address quality for this engagement. **With our approach, experience, and partnership with AFMC we are confident that we can build a quality program to ensure that the 95 percent quality goal will be met.**

E.2 BACKGROUND, EXPERIENCE, AND QUALIFICATIONS

Client History Form Question 1

PCG is a limited liability company and a subsidiary of Public Consulting Group Holdings, Inc. Headquartered in Boston, Massachusetts, PCG and its affiliates employ 2,000+ professionals worldwide—all committed to delivering solutions that change lives for the better. Since 1986, PCG has operated as a leading public sector solutions implementation and operations improvement firm that partners with health, education, and human services agencies to improve lives. Together with its affiliates, PCG offers clients a multidisciplinary approach to solve their challenges or pursue opportunities.

PCG has decades of experience working with Medicaid eligibility processes and an unmatched breadth of expertise in the field.

With the unwinding of the public health emergency continuity of coverage requirement, PCG developed an approach to assist public agencies with consulting and operational needs to address an unprecedented increase in eligibility redeterminations. **Currently, PCG employs about 1,000 staff supporting operational units for state agencies in many aspects including nearly 300 eligibility support specialists who actively support states to perform Medicaid eligibility casework.**

PCG's experience supporting Medicaid eligibility extends beyond providing staff augmentation. In addition to the projects listed below, **PCG is providing to 32 states access to internal and external data through PCGOne, our fully configurable automated data broker service. Through this technology, PCG is supporting states by improving efficiency of the case workers, reducing eligibility error rates, and performing quality control and transparency throughout the process.** By employing this solution, we have worked with our clients to automate their Medicaid eligibility functions and are happy to collaboratively consider how we can automate functions with DHS.

Our project teams have worked with states across the country to assess and improve eligibility business processes. **PCG has conducted studies for our clients on their eligibility systems and infrastructure with the goal of identifying options for simplifying procedures, improving customer service, and reducing state expenditures.** These studies and efforts have resulted in successfully redesigning and implementation of key processes for our clients.

Leveraging new technology and automation, improving community focus, and supporting eligibility workers stand as the foundational building blocks of every Medicaid eligibility related engagement. PCG's comprehensive process improvement approach, experience in Medicaid eligibility support and automation, and deep understanding of Medicaid eligibility processes make PCG a trusted partner in ensuring access to vital services for eligible individuals.

Key Personnel Resumes

As directed by DHS, PCG and AFMC can provide senior consulting staff who have extensive experience on Medicaid eligibility work and staff augmentation projects. Our key personnel will lend expertise and lessons learned from our other engagements to ensure DHS benefits from previous solutions similar in scope and scale to this engagement. The key personnel dedicated to this project are below. Please find full resumes for our key personnel within *Appendix 1*.



Dale McCourt, PMP - Executive Lead

Dale McCourt serves as a Manager at PCG and has been with the firm since 2011. Mr. McCourt is a certified Project Management Professional (PMP) and brings over 25 years of experience spanning many industries where he has served in a variety of roles. Mr. McCourt recently served as the Project Director on PCG's New York Contact Tracing initiative, managing a workforce of over 8,000. Dale's innate curiosity and eagerness to solve problems using process improvement techniques and developing technology solutions has manifested itself in the development of new product lines and technologies aimed at proactively guarding against Medicaid provider fraud, waste, and abuse as well as educating providers on Medicaid compliance, through high-touch, technology-driven provider oversight techniques.



Darnyelle Cmil, PMP - Project Director

Darnyelle Cmil is a seasoned professional with over two decades of experience in health and human services. She holds a Project Management Professional (PMP) certification, demonstrating her mastery in project management. Additionally, her Lean Six Sigma Black Belt (LSSBB) certification underscores her commitment to process improvement, efficiency, and standardization. As a Director of Operations at PCG's health practice area, Ms. Cmil oversees critical initiatives, including Eligibility Support Services in multiple states, addressing backlogs related to Medicaid and public assistance determinations. Prior to her current projects, Ms. Cmil successfully led a substantial contact tracing program initiative in New Jersey. Her adept project management skills and ability to handle large-scale remote operations were instrumental in the program's success. Darnyelle's deep-rooted understanding of community and family engagement informs her work. She leverages data, research, and business process analyses to diagnose system challenges and develop practical solutions. Her outstanding project management and coaching skills have been recognized nationally. Ms. Cmil is dedicated to human services and health care policy, striving to improve the communities served by PCG.



Emily Fox, MSc - Operations Manager

Ms. Fox is a driven and highly adaptable project and people manager with over 10 years of experience spanning many industries. Ms. Fox currently holds a Google Project Management certification. Ms. Fox is currently serving as the Quality Assurance and Training Lead for PCG's Medicaid Eligibility Support Services engagement in Alaska. In this position, Ms. Fox is responsible for managing a team of 85 staff and serves as the project lead on eligibility system functionality, including ARIES. Ms. Fox is well versed in Agile & Scrum methodologies, resource development & maintenance, and staff training. Ms. Fox received a Masters of Science degree in Cognitive Psychology and Neuropsychology from the University of Kent in the United Kingdom and a Bachelor of Science degree in Biopsychology from Messiah University.



Phyllis Harvey - Training Manager

Ms. Harvey is a Lean Six Sigma Training certified professional with over 20 years of experience spanning many industries including the medical field, mentoring, training, and quality assurance. Ms. Harvey currently serves as the Internal Quality Assurance/Quality Control Manager at AFMC. In this role, Ms. Harvey leverages her core competencies of quality assurance, training & mentoring, database administration, and policy & procedure development. Ms. Harvey obtained her Nursing Prerequisites from Arkansas State University in Beebe, Arkansas and a degree in Business Management from Pulaski Technical College.



Jenisa Williams - Quality Assurance Manager

Ms. Williams is seasoned quality assurance professional who currently serves as the Internal Quality Assurance/Quality Control Lead for AFMC. In this role, Ms. Williams provides guidance, leadership, and support in all aspects of QA/QC to ensure conformance with applicable state, federal, and contractual requirements. Ms. Williams is well versed in Arkansas Medicaid eligibility and policy as well as state information systems (ARIES and Interchange). Ms. Williams brings extensive Arkansas Medicaid experience having worked in positions pertaining to AR Medicaid since 2016. Ms. Williams holds a certificate in Health Care Studies and a Certificate in General Studies from the University of Arkansas Pulaski Technical College.



Susie Moore - Subject Matter Expert

Ms. Moore has over 20 years of experience providing corporate compliance and management. Ms. Moore currently serves as the Chief Compliance Officer at AFMC where she implements and oversees AFMC's corporate compliance and quality assurance programs. Within this role, Ms. Moore is responsible for evaluating all processes for impact and maintaining visibility at all levels within the company. Ms. Moore is a certified Compliance and Ethics Professional and is affiliated to the Society of Corporate Compliance and Ethics. Ms. Moore holds a Bachelor of Science degree in Human Services from Henderson State University in Arkadelphia, Arkansas.



Rich Albertoni - Subject Matter Expert

Mr. Albertoni has 16 years of experience working in state public health programming and Medicaid. He has held leadership positions in eligibility, budget and finance, and benefits and waivers. He understands the challenges government leaders face in reforming large, complex programs, and is committed to helping clients achieve goals to optimize local and regional healthcare access. His most recent projects include work for the Alaska Department of Health and Human Services, Medicaid Reform Strategic Advertising, and the Maryland Department of Health, Medicaid Program, Opportunity Assessment where he is serving as the project lead for both engagements.

Client History Form Question 2

We are pleased to present the following examples of our work where PCG is currently providing or recently provided similar services to those requested in the RFP.

Project Title: MaineCare Eligibility Staff Augmentation Services

State, Agency: Maine, Office for Family Independence

Scope of Work: PCG provides critical support to OFI's MaineCare (Medicaid) eligibility and enrollment function during the unwinding of the public health emergency continuity of coverage requirement by providing data entry and analysis, corresponding with clients, and handling MaineCare cases.

Contract Period: January 2023 - Present

Contract Amount: Approx. \$10M

Staff FTE Count: 160

Agency Contact Information:

Central Operations Program Administration
Maine Department of Health and Human Services
Office for Family Independence
11 High Street
Houlton, ME 04730

Client Contact Information:

Jeff Farnsworth, Associate Director of Regional Operations
(207) 592-1353, Jeffrey.L.Farnsworth@maine.gov

Project Title: Medicaid Eligibility Support Services

State, Agency: Alaska, Department of Health, Division of Public Assistance

Scope of Work: The Alaska Department of Health Division of Public Assistance contracted with PCG to address a backlog in Medicaid eligibility determinations and related operations. PCG provides Medicaid eligibility support services and assistance in the following areas: Staffing, Training, Quality Assurance, Workforce Management, Computer Equipment

Contract Period: February 2023 - Present

Contract Amount: Approx. \$10M

Staff FTE Count: 85

Agency Contact Information:

Department of Health

PO Box 110650

Juneau, AK 99811-0650

Client Contact Information:

Jamie Moore, Statewide Workflow Manager, Division of Public Assistance

(800) 478-7778 ex 3837, Jamie.moore@alaska.gov

Project Title: Medicaid Eligibility Staff Augmentation Services

State, Agency: Montana, Department of Public Health and Human Services

Scope of Work: DHHS contracted with PCG to provide resources to perform eligibility services for MAGI/CHIP renewals upon expiration of Medicaid continuous enrollment, administrative tasks, and adjacent supporting tasks such as Public Assistance Hotline assistance.

Contract Period: April 2023 – April 2024

Contract Amount: Approx. \$5M

Staff FTE Count: 73

Agency Contact Information:

Department of Health and Human Services

1500 E Sixth Ave, PO Box 202925

Helena, MT 59620-2925

Client Contact Information:

Jessie Counts, Division Administrator, Human and Community Services Division

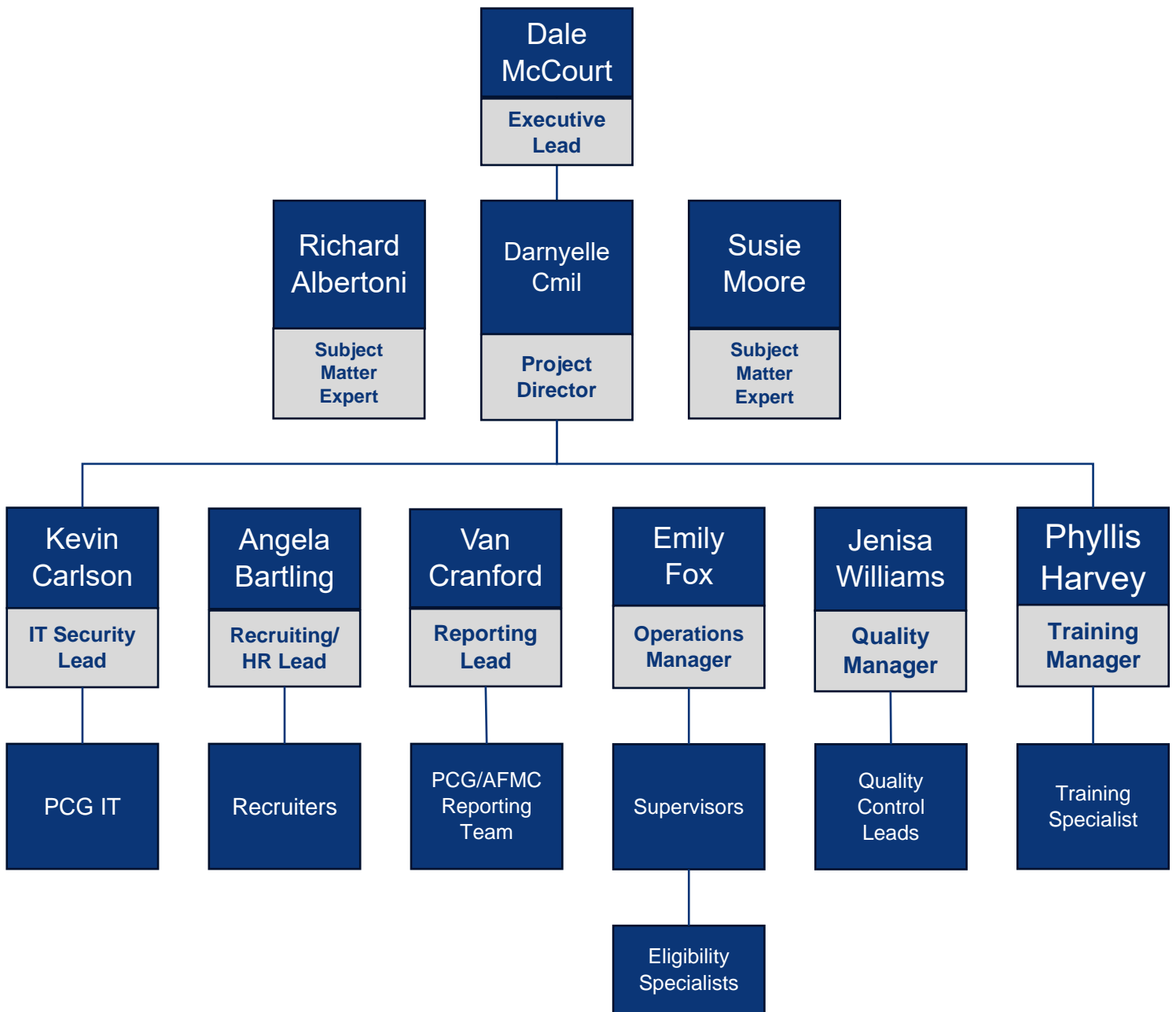
(406) 444-0640, jessie.counts@mt.gov

E.3 PROJECT MANAGEMENT, ORGANIZATION AND STAFFING

Organizational Chart

Provide an organizational chart that displays the overall business structure including proposed personnel job titles and lines of supervision.

To ensure the highest level of service to DHS, we offer an experienced project team to provide staff. Our joint PCG/AFMC full project team includes staff with expertise in Medicaid eligibility, project management, hiring and workforce management, training, reporting, and quality assurance. We believe that the combined strengths, skills, and experience of our team sets us apart from our competitors. Outlined below is the proposed team organizational chart detailing the overall business structure for this engagement.



Project Management Approach

Describe the approach to project management and project control methods including the following:

1. *How the contract will be managed*
2. *How contract activities will be controlled*

PCG understands that our contracts involve many moving parts and sensitive timelines. Each contract in our portfolio is assigned a project director. The project director is then responsible for ensuring all expectations within the contract are agreed to by all stakeholders and are met throughout the project.

While the executive lead, project director, and many others on the project team hold Project Management Professional (PMP) certifications, the project director is also assisted in managing the project by PCG Health’s Project Management Office (PMO) throughout the project life cycle—Initiating, Planning, Executing, and Closing. **The PMO works with PCG’s project directors as a third-party source of project management expertise and quality assurance, ensuring that Project Management Institute (PMI) standards are followed in all projects we undertake.**

PCG manages each contract according to the *PMBOK*® Project Management Process, which defines the project life cycle in five phases: Initiating, Planning, Executing, Monitoring and Controlling, and Closing (depicted below). PCG will follow specific steps and create or monitor certain documents during each phase to ensure the contract is efficiently managed.

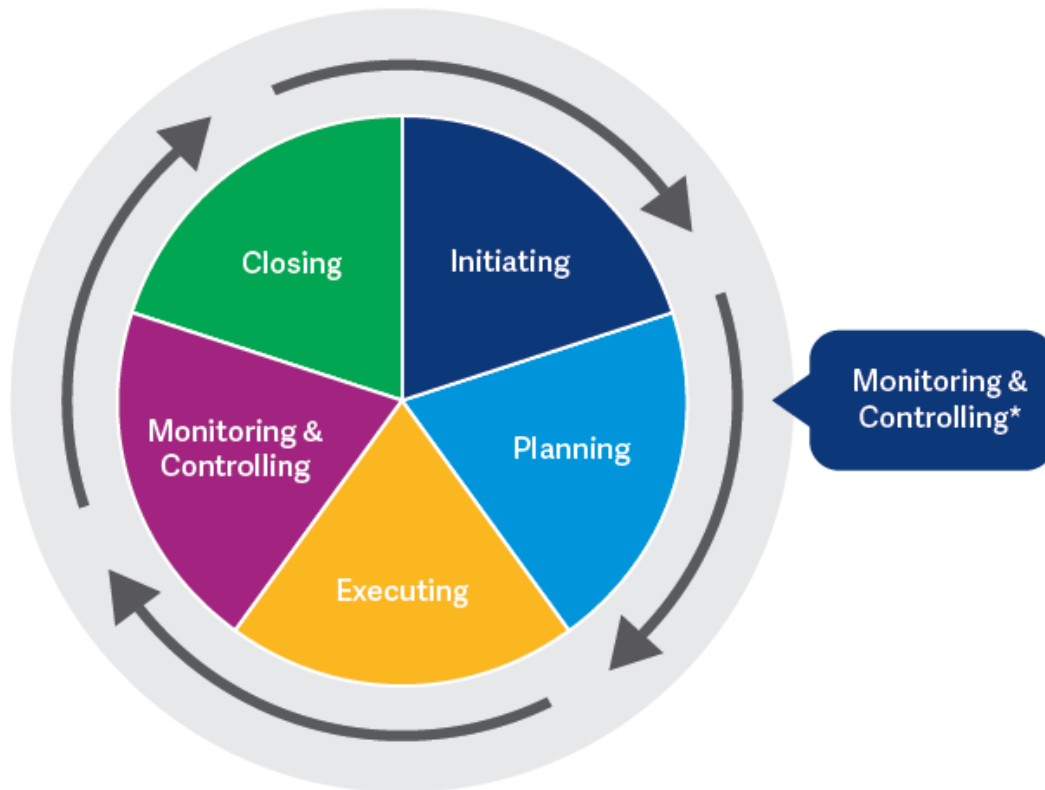


Figure 7: PMBOK® Project Management Process.

Initiating

When PCG Health prepares a response to a client’s RFP, the Initiation phase of the contract life cycle begins. During initiation for this contract, the PCG project team evaluated the RFP, ensuring that we possess the necessary resources to carry out the project work. At this point, PCG also worked with AFMC

to determine which services they will provide and signed a teaming agreement with them. **Since AFMC will deal with protected health information (PHI), PCG required that they follow HIPAA compliance standards and sign a Business Associate Agreement (BAA) along with their contract.** Finally, the project team collaborated to create high-level project documents based on the scope of work. These documents are a planning measure to provide initial estimates of the project's scope, budget, and resource needs. They will be refined once project work begins and PCG gathers more detailed project requirements from stakeholders.

Planning

The second piece of the project and contract life cycle, Planning, begins once PCG and the client sign the contract. Following contract approval, PCG will plan a brief phone call with DHS to precede the project's formal kick-off meeting. During this call, the client and the project director will review the Statement of Work together to form an identical understanding of the project. This brief meeting establishes a mutual consensus of the project's structure and goals. It enables PCG and the PMO to better refine the preliminary project documents for the kick-off meeting.

The planning phase concludes with the project kick-off meeting. At this meeting, PCG will gather detailed requirements from the project stakeholders, allowing us to finalize the project's Work Breakdown Structure (WBS), Schedule, and Communications Matrix. PCG will also use this meeting time to review potential risk factors with stakeholders to compile the initial Risk Register. Once these documents are complete, PCG will send them to DHS for a final approval and signoff.

Executing

The third piece of the project life cycle is the execution phase. During this time, PCG conducts project work according to the Project Management Plan. While project work is underway, PCG's project director will gather team performance data (to be analyzed in Monitoring and Controlling), improve project efficiency, conduct meetings, and implement any approved changes resulting from the PCG Change Management Process. If needed, the project manager will also request changes to the project during this phase, which the stakeholders can approve or reject.

For an engagement of this size, PCG suggests holding a weekly status update meeting initially. However, meeting frequency will be established upon finalization of the Communications Matrix during project kickoff.

Monitoring and Controlling

The fourth phase is Monitoring and Controlling, which occurs throughout the entire contract life cycle. In monitoring and controlling, the project director will ensure contract performance expectations are set and continually analyze the team performance during executing to see if project work matches those expectations. If a potential variance from the project scope is identified, PCG and the project stakeholders will initiate the Change Management process.

The Change Management Plan is created during the Planning phase. This document outlines the process to be employed if a change is proposed to any aspect of the project scope. All proposed changes should be in the form of a change request, which can be submitted to the PCG project manager by any project team member or stakeholder.

There will never be a point when PCG's project director or project team will change the project baselines without stakeholder knowledge. Instead, all change requests will first be submitted to the project director and brought before DHS to evaluate the impact of implementation. If the change request is approved, the project director and stakeholders will determine the next steps (i.e., corrective or preventative actions) to implement the change. Though we expect minimal changes to this project's baseline, PCG's Change Management process is designed to effectively facilitate the implementation of any that occurs.

Should PCG become aware that corrective or preventive actions are required to ensure contract activity management and compliance, PCG will implement Corrective and Preventive Action (CAPA). CAPA focuses on the systematic investigation of the root causes of identified problems or identified risks. The

CAPA process and analysis, as illustrated in *Figure 8*, is needed to establish a system for ensuring that adverse conditions are promptly identified, documented, and reported to management.

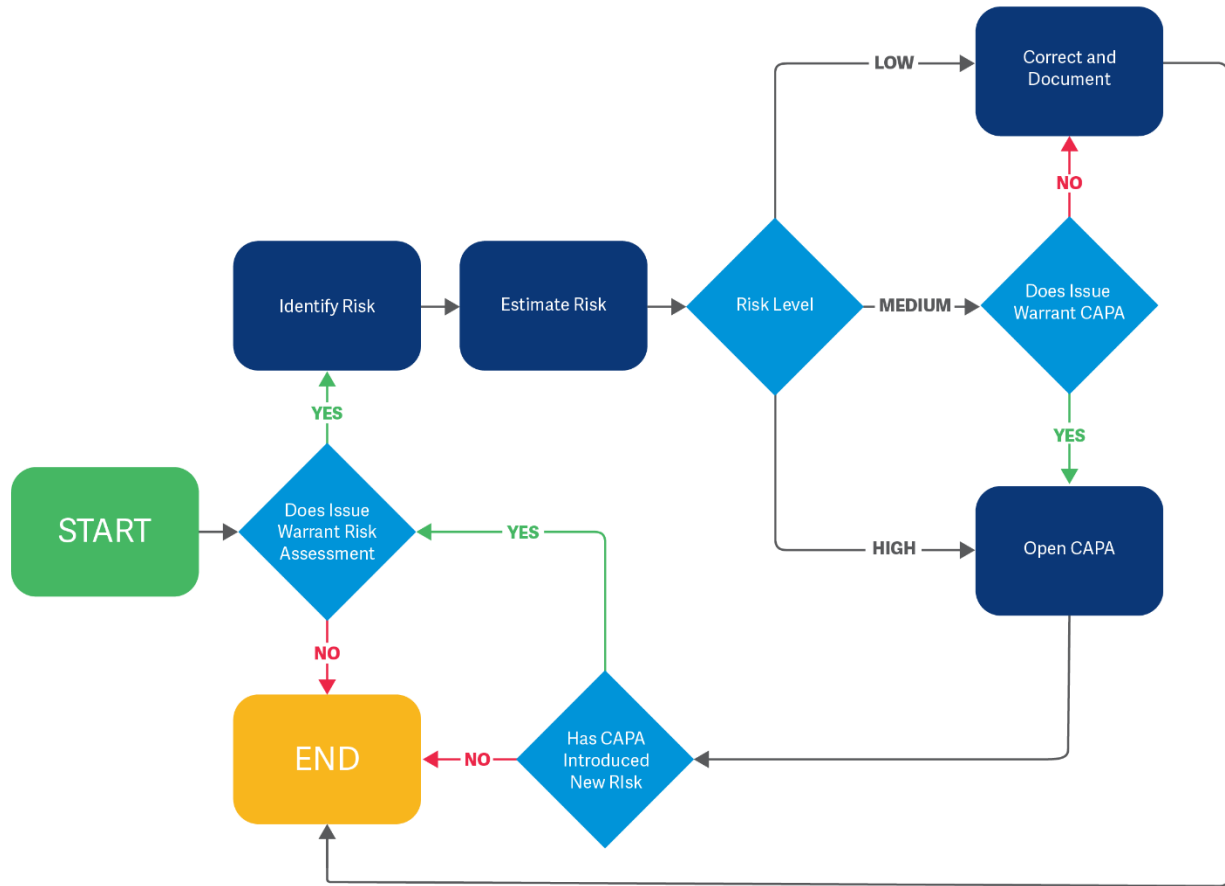


Figure 8: Corrective and Preventative Action.

Closing

The final phase in the project and contract life cycle is Closing. This crucial step is completed annually in order to evaluate the previous year of PCG’s project performance. To begin this phase, PCG ensures we have received client signoff on all deliverables. However, evaluation of our performance doesn’t end with client signoff. PCG will also send DHS an online Client Feedback Survey, which allows project stakeholders to provide feedback on PCG’s project. At this juncture, PCG and DHS can also discuss reprioritization and any changes to the project scope that DHS deems appropriate for the following year. To complete Closing, the PCG project team will collectively fill out an internal Lessons Learned survey to reflect on our project successes and areas for improvement. The collaborative survey response process gives PCG the chance to learn from past performance so that our work continually improves.

Project Staffing Approach

- Describe the approach to project staffing:*
1. *The screening and selection process for meeting staffing requirements*
 2. *Staff management and support to ensure high retention rates*

Staff Recruitment

Based on the number of staff requested, PCG recommends onboarding staff in four different cohorts comprised of between 25 to 30 eligibility specialists per cohort. **PCG and AFMC will hire qualified staff that are located within the United States with priority given to those located in Arkansas.** These staff

will work on a fully remote basis during the operating hours of Monday through Friday from 8:00 AM to 5:00 PM Central Time.

As mentioned in previous sections, PCG will leverage its affiliate company, Staffing Solutions Organization (SSO). SSO is utilized as a business line to serve the PCG Health practice area, as well as other areas of expertise at PCG. SSO provides staff recruitment services, timesheet and payroll, and employee performance management services. Working in partnership with SSO, PCG has hired and onboarded thousands of staff for projects servicing low-income Medicaid and State-based Marketplace populations as well as staff for surge support COVID-19 programs in states such as New York, Maine, New Jersey, Massachusetts, and Ohio. **SSO brings to the PCG team a creative and data-driven staffing perspective that allows us to staff with a keen eye for maximizing the efficiency of the budget and the ability to provide exceptionally qualified candidates for this engagement.**

In addition to SSO, PCG will lean on AFMC to assist in ensuring top-tier, local candidates will be sourced for this project.

Project Preparation

Throughout September 2024, PCG and AFMC will be focused on establishing a solid recruiting and HR foundation to ensure a successful hiring campaign from the start. PCG will be allocating recruiting resources, finalizing job descriptions, establish screening interview scripting and guidance, and standardizing and finalizing recruitment processes. Given our recruiting teams will be leaning on established and successful strategies and processes, our team is confident in our ability to deliver once the project formally begins.

Outreach

PCG's major differentiator is our database of pre-screened and pre-qualified candidates who have worked for us previously on a Medicaid eligibility support project. **Not only are these candidates pre-qualified, but they are also now familiar with the Medicaid eligibility systems.** Once the project begins, PCG will officially post and market the job descriptions for all positions. Our recruiting team will then begin outreach to these pre-qualified candidates as they will have already completed a background check, completed HIPAA, PHI, and other PCG-required training, received high marks for performance evaluations, and demonstrated experience quickly adapting to project needs. PCG is also adept at finding qualified multilingual candidates to increase the effectiveness of our workforce. **We create specific job postings to recruit and hire bilingual employees. PCG will ensure at least 10 percent of staff will be bilingual.**

PCG will prioritize recruiting prior employees with experience using Medicaid Eligibility systems.

Beyond our pre-qualified candidates who are familiar with Medicaid eligibility systems, PCG and SSO possess a database of over 150,000 of our prior employees and applicants. Using our databases combined and effectively marketing the job descriptions across the major job board websites, we will ensure the project has a deep bench of potential candidates to recruit at a moment's notice.

Recruitment and Screening

PCG works collaboratively with SSO to identify top tier candidates who understand the importance and the impact their work has on the communities they are serving. To do this, recruiters focus on key attributes such as a knowledge of Arkansas or other government programs, computer skills, education, and second language capabilities. Once a recruiter has reviewed a candidate's resume and conducted a screening interview, the candidate is submitted for project team approval. An authorized member of the project team reviews the resume, interview notes, and offers a hiring decision. **Given the staffing requirements of this project, PCG recruiters will continuously recruit and screen candidates throughout the project duration to ensure there is a deep and refreshed pool of qualified candidates to submit for eventual hire.**

Onboarding

Once candidates have been identified for hire, the PCG recruiting team begins the hiring process. Recruiters will first offer a verbal offer and discuss the position in more detail with the candidate to ensure there are no outstanding questions. The recruiter will then extend a formal written offer outlining the future employee’s start date, position, rate of pay, and other vital administrative information. **The recruiting team will then initiate the background check using HireRight. This background check will satisfy the criminal background check requirement found in section 2.7 of the RFP is often completed within 5 to 7 business days.**



Once the background check has been cleared, PCG begins preparing for the new hire’s arrival. This preparation includes shipping their PCG-provided technology to their home, queuing up pre-start communication outlining crucial information such as payroll or I-9 completion, and connecting them with their new supervisor. PCG and AFMC will be providing staff with a full benefit plan, which includes 10 paid holidays, 10 days of PTO, a benefits package including health, dental, vision and 401k.

On the first day, the new hire begins orientation training to ensure they have the tools they need to succeed before beginning project specific training.

Staff Management

Another key PCG differentiator is our ability to retain quality staff. **PCG experiences an attrition rate of 4.36 percent on our two active Medicaid eligibility support projects** and even experience months where no staff leave the project.

Medicaid Eligibility Support Projects Attrition Rates		
	ME	AK
Avg - Overall	4.08%	4.64%
Avg – Recent (Last Four Months)	2.81%	2.45%
Lowest Month	0.00%	0.00%

We attribute our staff retention to our flexible staffing models, performance monitoring and cross-training modules.

Staffing Model

PCG will implement a supervisory model of one supervisor for every 14 or 15 staff. To ensure PCG meets the staffing requirements listed in the RFP, PCG and AFMC will hire seven Supervisors to oversee the 100 requested Eligibility Specialists, as displayed in Figure 9. We have seen that this ratio allows for supervisors to build close-knit teams virtually even while working within a large workforce. Supervisors will report directly to the project Operations Manager.

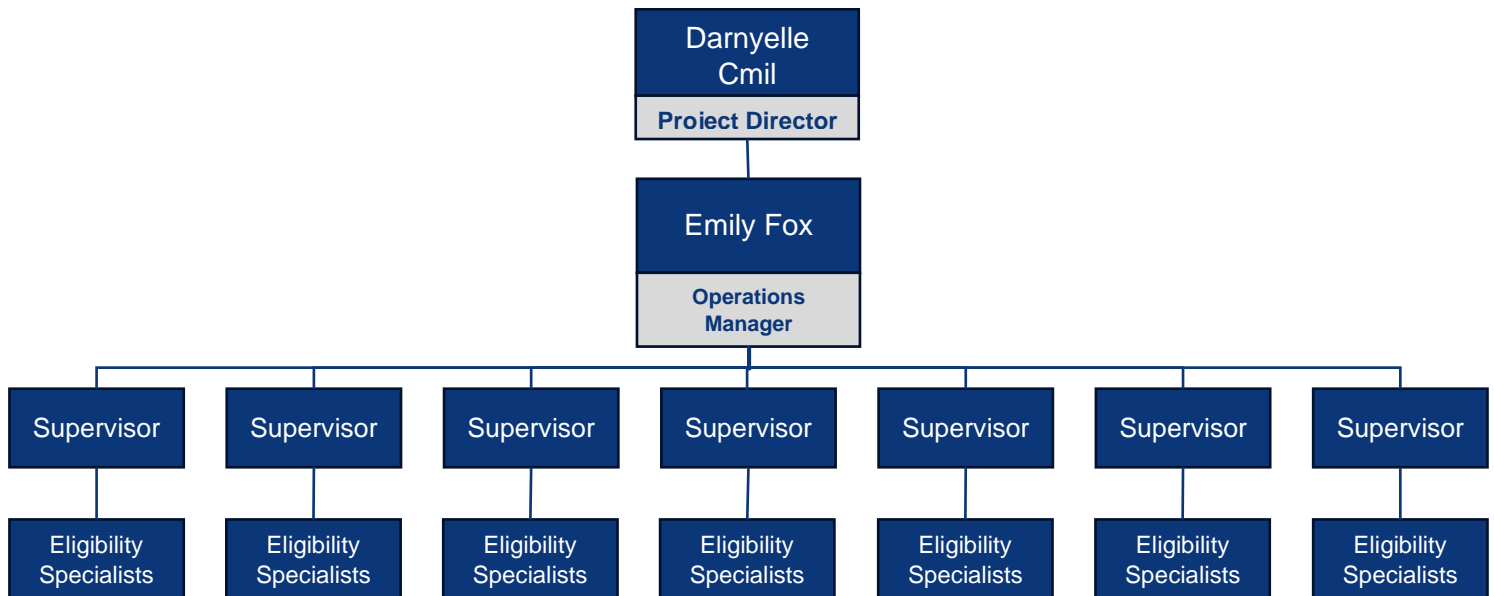


Figure 9: FTE Organization Chart.

PCG is well aware that projects of this nature evolve during the project’s life cycle. As such, our project teams have developed a staffing matrix outlining the required skill sets and supervisory ratios for different phases of the project and different tasks that may be required of staff. We have seen that this preparation and communication with staff prior to any major priority shift provides staff with direction and understanding for what is to come.

Performance Monitoring

We believe that the synergy between meticulous planning and engaged staff is paramount. When our team members become more than contributors, they become catalysts for our shared mission and elevate their performance. Our supervisor teams on similar projects conduct regular performance reviews with the priority being on staff engagement and providing constructive feedback to staff or celebrating their recent achievements. Beyond these regular and formal check-ins, our virtual teams will conduct daily/weekly huddles to review priorities and updates for the workforce, support for technology, mechanisms to escalate questions or issues, and sharing of best practices. We also conduct periodic town halls to collect further feedback and provide communication on the status of project operations as well as distribute a monthly newsletter highlighting productivity and staff-focused updates.

Cross-Training

Increasing staff versatility is crucial in retaining quality staff as a project progresses. Our project teams have identified core competencies and essential tasks common to all eligibility specialists and have designed cross-training modules to ensure proficiency across those key areas. As we have cross-trained staff, the more specialized staff have become, which in turn creates more support structures for new or struggling staff. We have seen that these support systems beyond just their supervisors create a healthy team environment and happier employees.

Staffing Continuity Plan

Provide a staffing continuity plan that allows for staffing need changes throughout the contract, including the ability to scale up or down quickly.

PCG and AFMC fully understand the importance of business planning and continuity from both a project team and FTE perspective throughout the contract. PCG and AFMC will submit our business continuity plan within thirty days of the contract start date and will collaboratively update our plan annually or at the request of DHS.

FTE Staffing Continuity

Hiring Plan

PCG and AFMC will ensure FTE staffing needs will be met throughout the contract and acknowledge the acceptable performance measures listed within the RFP. As mentioned, PCG has a long history of launching large-scale staffing projects quickly and effectively. Given this history, we are confident that the below timeline will satisfy the DHS staffing requirement of being fully staffed within 60 days of the contract’s start.

FTE Eligibility Specialist Hiring Timeline	
Date Complete	Action
09/20/2024	Assign Recruiters
09/27/2024	Draft Job Descriptions
10/01/2024	Post Job Descriptions
10/01/2024	Begin Outreach to Pre-Qualified Candidates
10/04/2024	Begin Recruiting Applicants & Screening
10/28/2024	Project Team Review of Identified Candidates
11/01/2024	Select Candidates for Hire/Extend Verbal Offers
11/01/2024	Recruiters Identify Candidates for Backfill
11/04/2024 - 11/13/2024	Extend Written Offer Letters
11/15/2024 - 11/26/2024	Conduct Background Checks
11/18/2024 - 11/27/2024	Conduct First Day Onboarding
11/27/2024 – End of Contract	Regularly update and refresh candidate backfill pool

To hire and onboard all staff before November 30, 2024, PCG and AFMC will utilize a phased hiring approach breaking up the staff into four hiring cohorts of between 20 to 30 staff each. Breaking our hiring into cohorts and implementing a phased hiring approach provides our recruiting staff with the ability to adjust staffing allocations as needed and expedite the hiring process for each cohort.

Scalability

Our recruiting staff will not stop recruiting once 100 FTE eligibility specialists have been hired. While we are proud of our low attrition on similar projects, PCG understands how important a deep hiring bench is to a project’s success. Our project teams have established predefined triggers or thresholds that indicate when staffing adjustments are necessary. These triggers are based on factors such as the volume of applications or changes in program requirements. **As you can see in Figure 10, on our recent contact tracing project in New York, in using our deep hiring bench and these established triggers, we were able scale up quickly and hire hundreds of staff in weeks.**

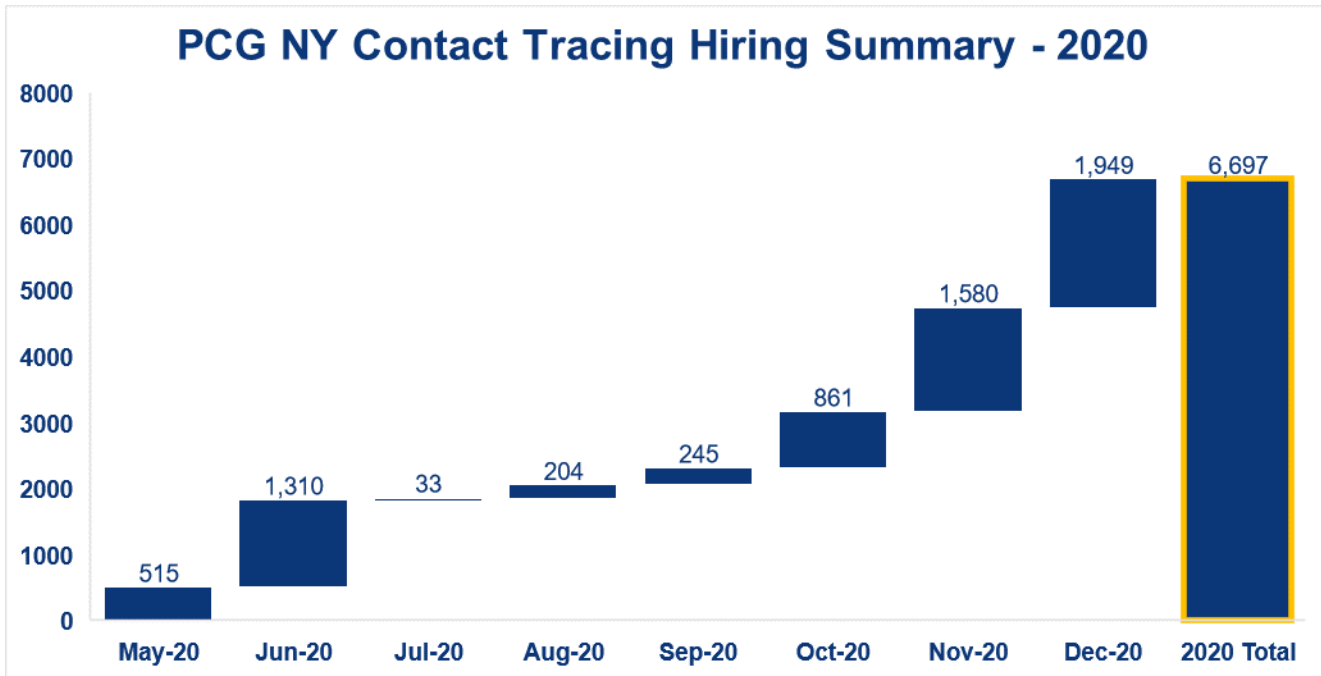


Figure 10: PCG NY Contact Tracing Hiring Summary, 2020.

While our recruiters continue to source candidates to fill any staffing needs on short notice, **our project leaders will be focused on implementing key performance indicators, regularly assessing workload trends, and ensuring an open line of communication between the project team and DHS.** Our project team will work to anticipate upcoming changes in workload, review productivity and service level adherence, and proactively reallocate resources between teams or departments as needed. The project team will inform all stakeholders of this productivity and be ready to implement a flexible staffing model should DHS deem it necessary.

Technology Scaling

A key benefit of our technological and device solution is its ability to scale. PCG and AFMC have established a process so that if DHS requires additional staff on short notice, device procurement will not stand in the way. Beyond delivering the device quickly, setting up the device from an end-user perspective is seamless. Staff will immediately have access to the required applications, ensuring onboarding and training can begin quickly. On the flip side, should DHS require PCG and AFMC to scale down operations on a moment’s notice, this solution solves the problem of not being able to retrieve sensitive data and information post-employment. Once the employee has been separated, PCG and AFMC are able to deactivate the Chromebook remotely. This remote deactivate combined with the inherent inability to save DHS data locally considerably mitigates risk.

Training Timeline

Once DHS has provided PCG and AFMC with all relevant training materials and the Train-the-Trainer style training sessions have completed, **PCG anticipates it will take approximately 25 business days to fully train a cohort** with the last cohort fully trained no later than January 10, 2025. This training timeline estimation considers federally recognized holidays and lessons learned on our current or recent similar Medicaid eligibility support projects. Rapid hiring and onboarding are crucial; however, quality is our highest priority, and we believe that this dedicated training will allow our staff to become intimately familiar with DHS processes and achieve the level of quality expected.

Project Team Continuity

From day one, PCG and AFMC will deploy a fully prepared, deeply knowledgeable project management team within the DHS active project structure. While PCG and AFMC do not foresee a need for a project team staffing change throughout the contract, we are well aware that changes can occur. Should a key member of the project team take a leave of absence, is terminated, or is otherwise unavailable to the project and DHS, PCG and AFMC will alert all relevant stakeholders immediately that a change is forthcoming.

If a change in the key personnel occurs and backup resources are needed, PCG will look towards our established four resource pools within PCG to identify the backup. These resource pools bring a broad inventory of skills that will ensure the project's continued success and mitigate any interruption in service delivery. The resource pools are as follows below:



Subject Matter Expert Pool includes staff with various certifications, including, but not limited to, ITIL v3 Foundation Certification and Certified Information Systems Security Professional (CISSP).



Project Manager Pool features Project Management Professional (PMP®)-certified staff deeply knowledgeable of project management best practices.



Program Process Analyst Pool encompasses PMO experts who provide industry-leading advice to help ensure that Program and project resources are highly skilled, trained and aligned.



Business Analyst Pool is fully equipped and ready to assist DHS and project teams with reporting and tracking, as well as system support and administration.

PCG will look to plug in high-performing staff from our other Medicaid eligibility support projects. PCG has a long history of identifying strong staff within roles and promoting them into management positions with client approval. Should a member of the project team require replacement, PCG will prioritize backfilling that role with someone who intimately knows Medicaid eligibility systems and has the appropriate credentials to succeed. PCG will submit all resumes of the potential replacement candidates and allow DHS the opportunity to interview and approve a replacement for the vacated position.

PCG is confident that our proposed roles and team structure will ensure contract success. Our ability to remain organized internally, while delegating resources effectively, allows us to manage and coordinate Medicaid eligibility support service projects to ensure our clients achieve all project goals while providing top-tier service to the communities our client serve.

APPENDIX 1

Key Personnel Resumes

Dale McCourt, PMP

Manager, Public Consulting Group LLC

Dale McCourt, Manager, and certified Project Management Professional (PMP) has been a member of the PCG team since 2011. Mr. McCourt brings over 25 years of experience spanning many industries where he has served in a variety of roles. His innate curiosity and eagerness to solve problems backed by his project and program management experience has manifested itself in the development and implementation of new service offerings that focus on serving client needs.

Relevant Experience

Alaska, Maine and Montana (January 2023 – present)

Department of Health, Project Sponsor

Project: PCG was selected by each of these states to recruit, hire, employ and manage Eligibility Specialist and support staff (i.e. supervisors, trainers, QA, etc.). We serve in a variety of roles for each of these clients including front line call center, back-office processing to ensure eligibility applications are complete and member update tasks. For the State of Maine, we were granted approval by CMS to make eligibility determination decisions.

Key Responsibilities: Serving as the Project Sponsor, ultimately responsible for ensuring we're meeting contract requirements and providing outstanding value and satisfaction to our clients.

Department of Health, State of New York

New York State Contact Tracing Initiative (May 2020 – June 2022): Project Director

Project: PCG was selected by the New York State Department of Health (NYS DOH) to recruit, hire, and employ contact tracers to help ensure a safe transition from the pandemic closures and stay-at-home orders. At the height of the pandemic, we had a virtual staff of over 8,000 performing diverse functions related to contact tracing, staff management, and specialized school-related contact tracing, and case investigation work. PCG was responsible for executing a scope of work that includes recruiting and onboarding, supervision and training, technology management, reporting and project management.

Key Responsibilities: Serving as the Project Director for the NYSDOH Contact Tracing Initiative. Oversee the execution of diverse client deliverables. Ensuring outcomes are clearly defined, executed, and communicated internally and externally.

Darlington County School District, State of South Carolina

COVID-19 Testing and Contact Tracing Program (September 2021 – March 2022): Project Director

Project: PCG was selected by DCSD to provide COVID-19 testing and contact tracing services to the district. PCG and its subcontractor provide weekly testing to symptomatic students and staff and provide test results to the district daily. PCG's contact tracing team performs case investigation, contact tracing, and follow-up with symptomatic students and staff.

Key Responsibilities: Serves as Project Director for the DCSD Testing and Contact Tracing Program. In this role, he is responsible for stakeholder engagement and subcontractor oversight.

Division of Medical Assistance, State of North Carolina

Medicaid and Health Choice Provider Site Visits and Training Project (April 2012 – December 2021): Project Manager

Key Responsibilities: Oversee all aspects of the North Carolina provider site visit and online training programs; develop and implement all processes; designed and oversaw the development of PIVOT (Provider Information Verification Oversight Technology) used to collect and verify provider information while conducting provider site visits; oversee completion of more than 20,000 North Carolina provider site visits and trained over 50,000 Medicaid providers.

Department of Medicaid, State of Ohio

Ohio Home and Community-Based Service Waiver Provider Site Visit & Training Program (October 2014 – June 2021): Project Manager

Project: PCG led multiple day training seminars on behalf of the Ohio department of Medicaid. The training focuses upon the most critical issues facing state finance officers, including, but not limited to overview of the Medicaid program, Medicaid services, Medicaid administration, revenue optimization, health care reform.

Key Responsibilities Overall planning and management of the execution for the Ohio Medicaid provider site visit and online training programs; developed, designed and managed all aspects of the project; develop project scope of work documents and project plans; documents opportunities to integrate systems and resources to fulfill project requirements; ensured effective communications and relationships between the client and project team members were maintained; managed the system development process; prepared and presented written and oral technical reports and presentations; organized and conducted project team meetings; ensured compliance with Ohio Administrative code laws and state statutes.

Professional Background**Public Consulting Group LLC**

Asheville, NC - 2011 – Present

Hope Women's Cancer Centers – EHR Implementation Manager

Asheville, NC - 2009 – 2011

Global Development Resources – COO

Asheville, NC - 2006 – 2008

Microdyne Outsourcing, Inc. – Manager of Finance & Administration

Asheville, NC - 1999 – 2005

Unum – Senior Actuarial Analyst

Asheville, NC - 1993 – 1999

Mathematics & Computer Science Teacher

Asheville, NC - 1988 - 1993

Education

University of Maine at Farmington

Farmington, ME

Bachelor of Science, Mathematics and Computer Science, 1988

Project Management Professional

References

Name	Dale Smith
Position	Audit Manager, Provider Operations Division of Health Benefits – Provider Operations North Carolina Medicaid North Carolina Department of Health and Human Services
Telephone Number	919- 623-2247

Name	Daniel Cohen
Position	Chief Operating Officer Office for Family Independence Maine Department of Health and Human Services
Telephone Number	207-624-4101

Darnyelle Cmil, MSW, PMP, LSSBB*Director of Operations at Public Consulting Group LLC*

Darnyelle Cmil, a seasoned professional with over two decades of experience in health and human services, brings a wealth of expertise to the table. She holds a Project Management Professional (PMP) certification, demonstrating her mastery in project management. Additionally, her Lean Six Sigma Black Belt (LSSBB) certification underscores her commitment to process improvement, efficiency, and standardization. As a Director of Operations at PCG's health practice area, Ms. Cmil oversees critical initiatives, including Eligibility Support Services in multiple states, addressing backlogs related to Medicaid and public assistance determinations. She also provides operations management for Maine's Long Term Support Services (LTSS) project and supports contract tracing efforts in Cincinnati, Ohio. Prior to her current projects, Ms. Cmil successfully led a substantial contact tracing program initiative in New Jersey. In this role, Darnyelle was responsible for overseeing 100 supervisors and coordinating the efforts of 2000 contact tracers. Her adept project management skills and ability to handle large-scale remote operations were instrumental in the program's success. Darnyelle's deep-rooted understanding of community and family engagement informs her work. She leverages data, research, and business process analyses to diagnose system challenges and develop practical solutions. Her outstanding project management and coaching skills have been recognized nationally. Ms. Cmil is dedicated to human services and health care policy, striving to improve the communities served by PCG.

Relevant Experience**Department of Health (DOH), Division of Public Assistance (DPA), State of Alaska**

Alaska Eligibility Operations Support (August 2022 – Present): Director of Operations

Project: PCG was selected by DPA to provide eligibility support in response to a backlog of eligibility determinations and related operations. PCG performs call center services to support DPA operations. PCG recruited, hired, and manages a remote workforce of 82 staff to provide operations support.

Ms. Cmil: Provides leadership; oversees all operations managers, quality assurance leads, staff, and supervisors; monitors operations, policies, and workflows; develops strategies to streamline business processes, and improve overall efficiency and performance of staff.

Department of Health and Human Services (DHHS), Office for Family Independence (OFI), State of Maine

Maine Eligibility Operations Support (May 2023 – Present): Director of Operations

Project: PCG was selected by OFI through a competitive procurement process to recruit, onboard, and manage staff to support eligibility operations. PCG successfully hired 52 staff, including two PHE Supervisors and 50 PHE Associates, during the six-week implementation and provides ongoing administrative management of all staff to support OFI's programmatic needs. Currently, PCG manages over 150 staff that support eligibility operations.

Ms. Cmil: In her leadership capacity, Ms. Cmil oversees all operations managers, quality assurance leads, staff, and supervisors. She is responsible for monitoring operations, policies, and workflows to ensure that operations run smoothly and optimally. Ms. Cmil develops strategies to streamline business processes, and she is dedicated to improving overall efficiency and performance of staff.

Department of Public Health and Human Services (DPHHS), State of Montana

Montana Eligibility Operations Support (April 2023 – Present): Director of Operations

Project: PCG was selected by DPHHS through competitive procurement to assist the Department with eligibility operations in support of the Public Health Emergency unwinding. PCG provides over 65 operational staff to support eligibility case processing and call center support functions. Staff support

eligibility operations by conducting client interviews, supporting PCG established phone lines to answer client questions for MAGI only cases, processing renewals start to finish, and supporting the state phone lines. Additionally, PCG oversees all areas of outsourced operations, including project management, technology support, training support, quality assurance, workforce management, and reporting and analysis.

Ms. Cmil: Leads and oversees all operations managers, quality assurance leads, staff, and supervisors. She is in charge of monitoring operations, policies, and workflows. Ms. Cmil develops strategies to streamline business processes, and to improve performance of staff and maximize overall efficiency.

City of Cincinnati, Department of Health, State of Ohio

Community Contact Tracing Corps Deployment Provider (October 2022 – Present): Director of Operations

Project: PCG is working with the City of Cincinnati Health Department to staff the Cincinnati Health Department's COVID-19 Response Team. Team members will be cross-trained, and Contractor shall ensure that all Team Members can perform in any of the following roles: special assignment contact tracers/case investigators – skilled in outbreak investigations; data support contact tracers; infection prevention; vaccine site support; vaccine scheduling; and/or epidemiological outbreak investigation support.

Ms. Cmil: Provides operations management, oversees all contact tracing staff, monitors metrics, and develop strategies to improve outcomes and performance.

Department of Health, State of New Jersey

Community Contact Tracing Corps Deployment Provider (July 2020 – May 2023): Project Manager

Project: PCG collaborated with the New Jersey Department of Health (NJ DOH) to identify and recruit highly qualified individuals for the critical task of executing contact tracing activities. Our primary focus was to ensure that potential contact tracer staff possessed a deep understanding of the communities they served and were well-versed in the geographical nuances of their assigned areas. To achieve this, PCG worked closely with the State, meticulously implementing mandated training materials and curriculum. We diligently tracked the successful completion of the required training, ensuring that our contact tracers were well-prepared and equipped to handle their responsibilities effectively. The PCG team managed 100 supervisors, with 2,000 staff serving and collaborating with all 21 counties in NJ. The project comprised 565 cities, townships, and boroughs in NJ, which rely on 94 local health departments (LHDs).

Ms. Cmil: Provided exceptional project and operations management. She oversaw all contact tracing staff and supervisors, meticulously monitoring key metrics. Her strategic insights and proactive approach led to continuous improvements in outcomes and performance. Under her guidance, our contact tracing efforts were streamlined, efficient, and aligned with the State and LHD operations. Ms. Cmil's contributions were instrumental in achieving our mission, and her dedication exemplified the highest standards of project management and quality assurance.

Public Catalyst Relevant Work

Technical Assistance and System Assessments (July 2012 – May 2023): Senior Consultant

Project: Public Catalyst works with multiple jurisdictions in providing technical assistance, coaching staff and leadership on how to interpret, analyze and present child welfare and human services data to manage cases, assess practice and improve performance.

Ms. Cmil: Facilitating in over ten jurisdictions nationally and training nearly 1,000 staff, Ms. Cmil specializes in making data meaningful, best practice coaching, and accountability tools to help build better systems with better results. She is skilled at utilizing complex quantitative cohort analyses; the development and implementation of qualitative review tools and quality review reporting and analyses; business process mapping; and information integration and presentation. Ms. Cmil supports systems to develop accessible, real-time data reporting; and utilize data to identify strengths and challenges, as well as developing practical solutions. Detailed areas of practice include child welfare, system Performance Improvement Plans, cross-

divisional approaches, including community service programs, public assistance, child welfare, childcare and domestic and sexual violence services.

Professional Background

Public Consulting Group

Boston, MA - May 2023 – Present

Public Catalyst

Greater New York City Area, NY - August 2012 – May 2023

Middlesex County College

Middlesex, NJ - June 2014 – March 2023

New Jersey Department of Children and Families

Trenton, NJ - September 2000 – August 2012

Education

Rutgers University

New Brunswick, NJ

Master of Social Work, Social Work and Public Administration, 2012

Lesley University

Cambridge, MA

Bachelor of Science, Education and Social Sciences, 1996

Certifications / Publications / Special Skills

- ▶ Project Management Professional, Project Management Institute, issued December 2022
- ▶ Lean Six Sigma Black Belt, Educate 360, issued April 2024
- ▶ Rutgers Business School, Certification Candidate in SHRM

References

Name	Kelsie Kastelitz
Position	Business Process Specialist Montana Department of Public Health and Human Services Public Assistance
Telephone Number	406-237-0568

Name	Kimberly Bettencourt
Position	Central Business Manager Maine Department of Health and Human Services Office of Family Independence
Telephone Number	207-532-5007

Rich Albertoni**Manager at Public Consulting Group LLC**

Richard Albertoni is a seasoned veteran of Medicaid and state health care innovation. His long tenure with the Wisconsin Department of Health Services (1992-2000 and 2003-2011) included several Medicaid leadership roles - Director of Eligibility, Deputy Director of Fiscal Services and Section Chief for the Hospital and Pharmacy benefits.

Mr. Albertoni served as a key member of Wisconsin's Medicaid leadership team on several high-profile projects. These projects included implementation of a hospital assessment, expansion of BadgerCare Plus eligibility, competitive procurement for managed care, approval of 1115 demonstration waivers and commencement of payment reform.

Since joining PCG in 2011, Mr. Albertoni has been the firm's consulting lead on state healthcare transformations ranging from Health Insurance Marketplace implementation, Medicaid expansion, Managed Care Implementation and Mental Health System Reform. He specializes in helping states find unique solutions to healthcare innovation that meet local needs. For example, he helped Arkansas and New Hampshire implement Medicaid Expansions that leveraged Marketplace Qualified Health Plans as the delivery system. He is currently being leveraged as a Health Insurance Marketplace subject matter expert by CMS as part of an effort to expand the use of Section 1332 State Innovation waivers.

Relevant Experience**Alaska Department of Health and Social Services, State of Alaska**

Medicaid Reform Strategic Advising (May 2019 – Present): Medicaid Program Consulting

Project: Provide a proof-of-concept review of a draft set of reforms Alaska was considering containing cost and make Medicaid more sustainable for the future. This concept included a delivery system that included Exchange Qualified Health Plans, Reference Based Pricing and a Per Capita Cap on program expenditures.

Mr. Albertoni: Served as project lead and principal advisor to the Medicaid Director and DHSS Commissioner. Guided PCG staff work and policy conclusions for the research work. Presented initial and final recommendations to DHSS staff. Due to the success of this effort, Alaska retained PCG as a longer-term advisor to the DHSS Commissioner through September 2020.

Maryland Department of Health, State of Maryland

Medicaid Program Opportunity Assessment (July 2018 – February 2019): Medicaid Program Consulting

Project: Provide a high-level assessment of Medicaid program operations to identify areas of opportunity to improve customer service, enrollee health outcomes and program efficiency and effectiveness. Meet with lead administrators of all major business areas to accomplish this.

Mr. Albertoni: Served as project lead. Represented PCG feedback to Medicaid Director, Department Secretary and Medicaid program staff. Facilitated work of the internal PCG team to emerge with major areas of focus for further study. Established project standards for comparing Maryland efforts against national Medicaid program best practices.

Center for Consumer Information and Insurance Oversight (CCIIO)

1332 Waiver Technical Assistance Project (May 2018 – Present): Insurance Reform Consulting

Project: Assist CCIIO with the development of Affordable Care Act (ACA) Section 1332 Waiver models and application templates. 1332 waivers permit states to design state-based alternatives to the federal health insurance exchange. CCIIO is an office within the Center for Medicare and Medicaid Services (CMS)

of the U.S. Department of Health and Human Services (DHHS). CCIIO sought PCG for this work based on our broad experience helping states implement insurance marketplace provisions of the ACA.

Mr. Albertoni: Develop reform ideas for CMS consideration. Advise the federal government on state needs to strengthen their individual and small group markets. Lead team effort to assess changes in rules and regulations necessary to give states greater flexibility for marketplace reforms. Provide Medicaid program insights to help CCIIO understand Marketplace-Medicaid coordination issues.

Mississippi Division of Medicaid, State of Mississippi

Mississippi Delivery System Consulting (November 2015 – November 2018): Delivery System Consultant

Project: Provide Medicaid delivery system consulting to the Mississippi Division of Medicaid.

Mr. Albertoni: Supervise tasks completed by the consulting team, including an organizational analysis, development of policies and procedures, review of supplemental payment models, development of a quality strategy and assistance with state plan amendments and policy briefing papers.

Arkansas Health Insurance Marketplace, State of Arkansas

Professional Services Contractor (April 2014 – April 2018): Healthcare Innovation Consultant

Project: Helped Arkansas design, develop and plan implementation for an employer benefit intended to strengthen low-income coverage in the employer-sponsored insurance market. Facilitated program integration among the Marketplace, Medicaid and the Insurance Department to successfully utilize Qualified Health Plans (QHPs) as the Medicaid delivery system. Assist the Health Insurance Marketplace with the design, development, and implementation of a process to certify the qualified health plans that will be participating in Arkansas' exchange. Support Arkansas at federal gate and design review meetings, as well as with completion of the plan management section of Exchange Blueprint.

Mr. Albertoni: Worked as PCG's lead consultant to the Arkansas Marketplace Board and Insurance to design, develop, and implement the delivery system for the Medicaid Private Option and Arkansas Works Employer Sponsored Insurance (ESI) initiative. Also served as consulting lead for the successful launch of the Small Business Health Options Program (SHOP) portal, which was delivered on time and on budget.

Arkansas Health Insurance Marketplace, State of Arkansas

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design, development, and implementation of a process to certify the qualified health plans that will be participating in Arkansas' exchange. Support Arkansas at federal gate and design review meetings, as well as with completion of the plan management section of Exchange Blueprint.

Mr. Albertoni: Worked as PCG's lead consultant to the Arkansas Marketplace Board and Insurance to design, develop, and implement the delivery system for the Medicaid Private Option and Arkansas Works Employer Sponsored Insurance (ESI) initiative. Also served as consulting lead for the successful launch of the Small Business Health Options Program (SHOP) portal, which was delivered on time and on budget.

Washington Office of Financial Management, State of Washington

Assessment of State Mental Health System (May 2016 – December 2017): Delivery System Consultant

Project: Assess the current mental health system infrastructure and programming in Washington State, making recommendations for reform of community programs and hospital care. Developed a managed care risk model to establish a framework for coverage of 90 and 180-day civil commitments through the managed care entities under contract with Medicaid.

Mr. Albertoni: Led a team of consultants who recommended future roles for the two state psychiatric hospitals with regard to civil and forensic care. The project also considered steps to integrate behavioral health into commercial managed care and establishment of new mobile crisis units and step up/step down transitional care facilities.

Tennessee Health Care Finance Administration, State of Tennessee

TennCare Eligibility Services Project Management (September 2015 – June 2016): IT Systems Consultant

Project: Provide Project Management for two eligibility system upgrades, which included the CoverKids Eligibility System Redesign and TennCare Eligibility Redeterminations.

Mr. Albertoni: Provided Medicaid eligibility policy consulting to assist the project team in establishing business requirements. Supervise the work of project management staff and assured that the projects were launched on schedule in December 2015.

New Hampshire Insurance Department, State of New Hampshire

New Hampshire Insurance Project (March 2013 – June 2015): Medicaid Expansion Consultant

Project: Provide Plan Management consulting services for New Hampshire's Federal Partnership Exchange.

Mr. Albertoni: Supervise entirety of project. Provide technical support of compliance examination and market analysis functions for Qualified Health Plan (QHP) certification. Work with staff from Compliance, Market Conduct, Rate Review and Legal to develop internal operational procedures and checklists for QHP certification process.

Professional Background

Public Consulting Group

Boston, MA - December 2011 – Present

Wisconsin Medicaid

WI – January 2003 – December 2011

Education

University of Washington at Seattle

Seattle, WA

Master of Public Administration, 1990

Santa Clara University

Santa Clara, CA

Bachelor of Arts in English, 1986

References

Name	Heather Carpenter
Position	Deputy Director Alaska Department of Insurance
Telephone Number	907-465-2518

Name	Cheryl Gardner
Position	Executive Director Access Georgia
Telephone Number	801-209-9707

SUSIE MOORE
Chief Compliance Officer

Education

**HENDERSON STATE UNIVERSITY,
 ARKADELPHIA, AR**
 Bachelor of Science in Human Services, 1992

Certification

Certified Compliance and Ethics Professional

Affiliations

Society of Corporate Compliance and Ethics

Experience

Arkansas Foundation for Medical Care (AFMC), Fort Smith, AR (1997 – Present)

Chief Compliance Officer (2006 – Present)

- Implement and oversee AFMC's corporate compliance and quality assurance programs
- Maintain and expand visibility at all levels within the company
- Train all staff and board of directors
- Recommend and implement compliance and quality assurance initiatives
- Evaluate processes for impact

Director of Human Resources (2003 – 2006)

- Directed operations in all areas of Human Resources including benefit administration, workers compensation, affirmative action, FMLA, recruiting, training, hiring, and policy development

Human Resource Manager (1999 – 2003)

- Managed various functions within Human Resources including benefit administration, affirmative action, recruiting, training, and orientation

Administrative Assistant to Finance & Personnel (1997 – 1999)

- Provided support to management and staff in all areas of Human Resources

Additional Experience

Comprehensive Juvenile Services, Fort Smith, AR (1994 – 1996)

Foster Care Recruiter/Trainer

Department of Human Services, Fort Smith, AR (1992 – 1994)

Family Service Worker, Foster Care Specialist

Core Competencies		
Corporate Management	Compliance	Program
Quality Assurance and Evaluation		
Training and Development		
State and Federal Contract Regulations		
Human Resources Administration		
Policy Development and Implementation		
Leadership		

References

Name	Woody Harrelson
Position	President The Hatcher Agency
Telephone Number	501-375-3737

Name	Patricia Williams
Position	Former Executive Assistant to the Board of Directors (Retired) AFMC
Telephone Number	479-414-2889

Emily Fox**Quality Assurance and Training Lead**

Ms. Emily Fox is a driven and highly adaptable certified project and people manager, currently working as the Quality Assurance and Training Lead for the PCG Alaska Medicaid project. She is the lead PCG subject matter resource for Alaska Public Assistance programs, including SNAP, Medicaid, Senior Benefits, and Heating Assistance, as well DPA systems, including EIS, ARIES, ILINX, ECOS, and more. Ms. Fox is responsible for direct client communication, resource development and maintenance, training of staff, and data collection, analysis, and reporting.

Relevant Experience**State of Alaska, Division of Public Assistance**

Eligibility Staffing Services (March 2023 – Present): Quality Assurance & Training Lead; Eligibility Supervisor

Project: PCG was selected by DPA to provide eligibility support in response to a backlog of eligibility determinations and related operations. PCG performs call center services to support DPA operations. PCG recruited, hired, and manages a remote workforce of 82 staff to provide operations support.

Ms. Fox: Co-Manager for a project team of 85, working closely with the VCC Manager to oversee the daily responsibilities of 8 supervisors and 70+ Eligibility Associates. She is the direct liaison to Alaska DPA Leadership, maintaining daily contact and taking action on procedural updates and verification, staff expectations, and project goals. She is the Project Lead on DPA system functionality- ARIES, EIS, ECOS, ILINX, Genesys, and Current, regularly assisting staff in system access troubleshooting, training on new system features, and providing clarity on procedural steps to better assist clients. Ms. Fox collects, analyzes, and reports staff productivity data in daily updates, weekly client meetings, and monthly productivity reports. She creates innovative solutions to staff productivity needs, including the creation of Excel Spreadsheets, Microsoft forms, and automations.

State of New York, New York State Department of Health (NYSDOH)

New York State Contact Tracing Initiative (June 2020 – June 2022): Regional Training Specialist; Community Support Lead

Project: PCG was selected by NYSDOH to recruit, hire, and employ contact tracers to help ensure a safe transition from the pandemic closures and stay-at-home orders. At the height of the program, PCG managed over 8,000 staff within a Virtual Call Center performing diverse functions related to contact tracing, staff management, specialized school-related contact tracing, and case investigation work. PCG executed a scope of work that included: recruiting and onboarding, supervision and training, technology management, and project management. The engagement had a dedicated project management staff of 10 FTE.

Ms. Fox: Served as the direct supervisor of up to 100 staff members at a time. She was instrumental in the development and ongoing evolution of workflow, documentation, and responsibilities for 400+ remote staff members across over 15 NYS counties. She developed and led training for new and existing staff members including a 10-day onboarding curriculum, professional development, and day-to-day operational queries. She created learning resources distributed and presented throughout the state, including recorded presentations, infographics, technical instructions, and surveys. Ms. Fox also designed and monitored automation processes for data collection, analysis, and distribution for staff and health department partners.

Professional Background

Staffing Solutions Organization

Syracuse, NY – June 2020 – Present

Kent Union & University Student Advice Center

Canterbury, Kent, UK – January 2019 – May 2019

National Vision, Inc.

Utica, NY – May 2014 – December 2018

Education

University of Kent

Canterbury, UK

Master of Science, Cognitive Psychology and Neuropsychology, 2020

Messiah University (formerly College)

Grantham, PA

Bachelor of Science, Biopsychology

Certifications / Publications / Special Skills

- ▶ Human Resources Management Specialization, University of Minnesota, In Progress
- ▶ IT Support Professional Certificate, Google, In Progress
- ▶ Project Management Professional Certificate, Google, September 2022
 - Foundations of Project Management
 - Project Initiation: Starting a Successful Project
 - Project Planning: Putting It All Together
 - Project Execution: Running the Project
 - Agile Project Management
 - Capstone: Applying Project Management in the Real World
- ▶ NYS Citizen Public Health Training, Cornell University, May 2021
 - Excel Skills for Business, Macquarie University, February 2021
 - Graphs & Charts
 - Macro Writing & VBA
 - Formulas/Shortcuts- CONCAT, COUNTIF, VLOOKUP
 - Pivot Tables
 - Conditional Formatting & Data Validation

References

Name	Phillip Hill
Position	Project Manager (previously Regional Manager for the New York State Contact Tracing Program)

Telephone Number	607-643-2795
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Name	Karen Sanderson
Position	Eligibility Office Manager 2, State of Alaska, Division of Public Assistance
Telephone Number	907-830-7836

PHYLLIS HARVEY
Training Manager

Education

NURSING PREREQUISITES

Arkansas State University, Beebe, AR

BUSINESS MANAGEMENT

Pulaski Technical College

Certifications

Lean Six Sigma Training

Experience

**ARKANSAS FOUNDATION FOR MEDICAL CARE,
 LITTLE ROCK (AFMC), AR (2018 – PRESENT)**

Internal Quality Assurance/Quality Control Manager

Audit inbound and outbound phone calls per contractual deliverables and requirements
 Maintain working knowledge of contracts, policies, and procedures across departments
 Work on special projects as deemed necessary by management
 Provide input and assist with development of scorecards for quality audits

CORE COMPETENCIES

Quality Assurance and Auditing

Policy and Procedure Development

Training and Mentoring

Database Administration

Report Generation and Presentations

STEP MINISTRIES, NORTH LITTLE ROCK, AR (2012 – 2018)

Mentoring Coordinator

Created and coordinated biblically based curriculum and activities
 Conducted interviews to assess potential mentor-mentee pairings
 Created tracking system to monitor progress of mentor-mentee relationships
 Made inner city home visits to interview kids and parents for the program
 Served as administrator for external database
 Served as counselor or group leader at camps and retreats

ARKANSAS REGIONAL ORGAN RECOVERY AGENCY, LITTLE ROCK, AR (2002 – 2009)
Quality Assurance Manager (2003 – 2009)

Developed Quality Assurance/Improvement Program to meet U.S. Food and Drug Administration (FDA) standards
 Managed FDA and external client audits
 Conducted medical chart reviews and audited referrals
 Trained and audited external call center
 Created and trained on internal and external Standard Operating Procedures
 Chaired Continuous Quality Improvement Committee
 Created monthly/quarterly reports for meetings and board of directors
 Created and maintained departmental budget

Procurement Coordinator (2002 – 2003)

Conducted organ donor awareness in-services to hospital personnel
 Responsible for taking tissue call and team leading on recoveries
 Helped Tissue Manager develop temporary quality system

Functioned as Operating Room Assistant on organ recoveries

Additional Experience

ARKANSAS CHILDREN'S HOSPITAL, LITTLE ROCK, AR
Admissions Counselor

SURGICAL INNOVATIONS AND SERVICES, LITTLE ROCK, AR
Area Sales/Operation Manager, Clinical Support Specialist

Baptist Health, North Little Rock, AR
Surgical Scrub Technologist III

References

Name	Andrea Allen
Position	AFMC Supervisor MMIS
Telephone Number	501-553-7701

Name	Gloria Boone
Position	AFMC VP Member Services
Telephone Number	870-918-0944

Name	Mindy Dunn
Position	AFMC Human Resources Director
Telephone Number	501-804-2517

JENISA WILLIAMS
Quality Assurance Manager

Education

CERTIFICATE IN HEALTH CARE STUDIES

CERTIFICATE IN GENERAL STUDIES

University of Arkansas Pulaski Technical College
 2013 – 2015

Experience

ARKANSAS FOUNDATION FOR MEDICAL CARE, LITTLE ROCK, AR (2016 – PRESENT)

INTERNAL QUALITY ASSURANCE/QUALITY CONTROL TEAM LEAD (2022 – PRESENT)

Assist with managing day-to-day operations in the QA/QC department

Provide guidance, leadership, and support in all aspects of QA/QC

Ensure conformance with applicable state, federal, and contractual requirements

Participate in weekly meetings to assist in projects with manager

Manage dual validations on escalated scorecards

Provide new hire and annual QA/QC Standards of Excellence training to all contact center staff to ensure contract deliverables, contract regulations, and URAC requirements are met

Prepare and distribute weekly QA management reports

INTERNAL QUALITY ASSURANCE SPECIALIST (2019 – 2022)

Monitored calls to improve quality and performance of interactions by the customer service representative

Ensured that the calls were a representation of the values of the company

RESEARCH ANALYST (2016 – 2019)

Assisted with incoming requests for information pertaining to Arkansas Medicaid

Researched caller issues and determined the appropriate party or course of action to address the request

Maintained a database of calls received and the action taken regarding billing and any client complaints, and resolution

Additional Experience

ROSE OF SHARON CHURCH (2018 – PRESENT)

MUSIC DIRECTOR

Lead all aspects of the music department, including scheduling and leading choir rehearsals, and recruiting new singers and volunteers under the guidance of the church minister

OFFICE TEAM / OFFICE ASSISTANT, LITTLE ROCK, AR (2015 – 2016)

Temporary employee, State of Arkansas and AFMC

FIDELITY INFORMATION SERVICES, LITTLE ROCK, AR (2012)

DATA INFORMATION ASSOCIATE II

CORE COMPETENCIES
Arkansas Medicaid Contact Center Customer Service, Eligibility, and Policy
Leadership
State Information Systems (ARIES and InterChange)
Quality Assurance/Quality Control (QA/QC)
Medicaid Expansion Knowledge
QA/QC Standards of Excellence Training

Performed data entry, keyed checking deposits and balanced bank accounts.

References

Name	Kiana Smith
Position	AFMC Supervisor Service Center
Telephone Number	501-212-8681

Name	Mindy Dunn
Position	AFMC Human Resources Director
Telephone Number	501-804-2517