

**HEALTH
INFORMATION
DESIGNS**




Response to Request for Quote for Clinical Web Portal (RFQ MED 12002)

Copy

*Submitted to the State of West Virginia, Department of Health and Human
Resources, Office of Purchasing*

October 27, 2011

Name of Vendor:	Health Information Designs, Inc.
Business Address:	391 Industry Drive, Auburn, AL 36832
Telephone Number:	334-466-3086
Authorized Contact Person:	G. Robert DiBenedetto, Jr.
Title:	President & CEO
Email Address:	rob.dibenedetto@hidinc.com
Signed:	
Date:	October 25, 2011



391 Industry Drive
Auburn, Alabama 36832

October 25, 2011

Donna D. Smith, Senior Buyer
WV Department of Health and Human Resources
Office of Purchasing
One Davis Square, Suite 100
Charleston, WV 25301

Dear Ms. Smith:

Health Information Designs, Inc. (HID) is pleased to provide the following proposal in response to Request for Quote MED 12002 for a Clinical Web Portal for enrolled West Virginia Medicaid prescribers.

HID has read and will comply with all contract terms and conditions of the RFQ. HID is fully able to supply the products and services that meet the requirements defined in this RFQ as evidenced by the details of this RFQ response.

HID's proposal includes the following requirements:

- 1) A completed and signed Attachment A, Cost Sheet, as specified in Section 3.3 of the RFQ.
- 2) A completed and signed Attachment B, Special Terms and Conditions, as specified in Section 3.3 of the RFQ.
- 3) Responses to mandatory requirements of Section 2.3 of the RFQ.
- 4) A completed and signed Purchasing Affidavit, as specified in Section 3.5 of the RFQ.
- 5) Signed RFQ Addenda.

HID appreciates the opportunity to respond to this RFQ and looks forward to the opportunity to demonstrate the ability to provide the services specified in MED 12002. HID is proud of our strong, successful relationship with the Bureau as the current provider of the MediWeb Clinical Web Portal. HID looks forward to continuing this partnership as the best candidate for this RFQ.

If you need any further information in support of the proposal, please feel free to contact me.

Sincerely,

A handwritten signature in cursive script, appearing to read "G. Robert DiBenedetto, Jr.".

G. Robert DiBenedetto, Jr., MBA
President & CEO

Contents

Cost Sheet	1
Introduction	1
Special Terms and Conditions.....	3
Introduction	3
Appendices.....	5
Overview	5
Appendix 1 – Mandatory Requirements.....	6
Introduction	6
HID’s Approach to Clinical Web Portals.....	6
Clinical functionality.....	6
...in an integrated, browser-based system	6
System Requirements.....	7
Vendor Provisions.....	16
Vendor Experience.....	22
Optional Services.....	40
Appendix 2 – Purchasing Affidavit.....	42
Introduction	42
Appendix 3 – Surescripts Certifications	43
Introduction	43
Appendix 4 – CWP User’s Guide	44
Introduction	44
Appendix 5 – ePrescribing User’s Guide.....	45
Introduction	45
Appendix 6 – Resumes.....	46
Introduction	46
Appendix 7 – Signed RFQ Addenda.....	47
Introduction	47

Cost Sheet

Introduction

HID provides a completed *RFQ Attachment A, Cost Sheet*, on the following page.



Attachment A: Cost Sheet

Cost information below as detailed in the RFQ and submitted.

	Year 1	Year 2 (Optional Renewal)	Year 3 (Optional Renewal)
Start Up Cost			
Yearly Operating Cost	\$288,543.49	\$288,543.49	\$288,543.49
Total Yearly Cost	\$288,543.49	\$288,543.49	\$288,543.49
Grand Total for Three (3) Year Contract Period			\$865,630.47

Vendor will invoice all costs in arrears in twelve (12) equal monthly installments.

The cost proposal will be evaluated based on the total three (3) year period grand total amount.

Optional Services:

Optional Services as specified in Section 2.3.5 shall be bid as an all-inclusive hourly rate and shall require Bureau approval of a Statement of Work and submission of a related Cost Estimate.

Hourly Rate: Year 1 \$85.00
 Hourly Rate: Option Year 1 \$85.00
 Hourly Rate: Option Year 2 \$85.00

Health Information Designs, Inc.

(Company)

G. Robert DiBenedetto, Jr., Pres. & CEO/

(Representative Name, Title)

334-466-3028/888-419-1312

(Contact Phone/Fax Number)

10/25/11

(Date)

Special Terms and Conditions

Introduction

HID provides a completed and signed *RFQ Attachment B, Special Terms and Conditions*. HID acknowledges the requirements of the RFQ and will meet or exceed each of the specifications outlined in the attachment.



Attachment B: Special Terms and Conditions

If a vendor's Quotation includes proprietary language, an electronic copy omitting any proprietary language for publishing to the DHHR web-site shall be submitted.

Agree that BMS retains ownership of all data, procedures, programs, work papers and all materials gathered or developed under the contract with West Virginia.

Vendor Debrief: As the evaluation and award process has been described and documented, unsuccessful vendors have the opportunity to request a Debrief. That Debrief will be conducted at BMS facilities, privately, with the requesting vendor, the buyer and appropriate members of the evaluation committee. The vendor's proposal will be discussed, and the evaluation committee scoring and contract award will be explained. This will help vendors understand the process, be more competitive by improving their proposals, and will increase their potential for winning bids.

I certify that I have acknowledged the additional contract provisions contained in Attachment B and that the Quotation meets or exceeds all additional requirements as listed.

Health Information Designs, Inc.
(Company)
G. Robert DiBenedetto, Pres. & CEO/

(Representative Name, Title)
334-466-3028/888-419-1312

(Contact Phone/Fax Number)
10/25/11

(Date)

Appendices

Overview

The table below lists each appendix provided with HID's response to *RFQ 12002 for the Clinical Web Portal*.

No.	Contents
1	Response to RFQ Section 2.3, Mandatory Requirements
2	Purchasing Affidavit
3	Surescripts Certifications
4	Excerpt from MediWeb Clinical Web Portal User's Guide
5	Excerpt from ePrescribing User's Guide
6	Resumes
7	Signed RFQ Addenda

Appendix 1 – Mandatory Requirements

Introduction

HID provides the following responses to *RFQ 12002, Section 2.3 Mandatory Requirements*.

HID's Approach to Clinical Web Portals

HID is among the nation's leaders in Web interface solutions for Medicaid agencies. The comprehensive approach to electronic health records enables providers and beneficiaries to work as partners in encouraging member wellness and prevention—the most effective means for improving the overall health of Medicaid recipients and effectively controlling the growth of prescription drug program costs.

HID's Clinical Web Portal (CWP), gives providers a “one-stop” solution for writing electronic prescriptions, submitting prior authorization requests, and reviewing member claims and medical history.

Clinical functionality...

- The clinical web portal provides easy-to-read snapshots of the member's pharmacy, diagnosis and procedure (emergency, in-member and out-member) claims history. The Web pages can be configured to display additional information, if needed.
- Providers have access to at least 24 months of member medical and pharmacy claims to inform their prescribing decisions.
- Using the ePrescribing tool, providers can submit electronic prescriptions to the pharmacy of the member's choice.
- Providers can submit prior authorization requests to the PA Help Desk using HID's PAXpress electronic prior authorization submission tool.

...in an integrated, browser-based system

- Providers need only one secure user ID and password to access ePrescribing electronic prescribing tool, PAXpress electronic prior authorization submission tool, eligibility verification, patient profiles, and other features and functions.
- The clinical web portal requires no equipment other than a standard personal computer (or hand-held wireless device) with Internet access.
- The clinical web portal can interface with third-party networks (for example, Surescripts®).

- The clinical web portal meets all HIPAA standards for the confidentiality and security of member information.

System Requirements

2.3.2.1 Is updated at a minimum of once weekly with claims data (medical and pharmacy) in order to provide access to current member history for Medicaid prescribers and providers.

HID meets this requirement. As the current vendor, HID receives medical and pharmacy claims data once a week from Molina Medicaid Solutions, BMS' current MMIS contractor, and will continue to do so upon award of this contract. Each week medical and pharmacy claims data are uploaded into the CWP so that enrolled Medicaid prescriber and providers have access to current member claims history for pharmacy, diagnosis, in-member/out-member, and procedure claims.

2.3.2.2 Displays twenty four (24) months of claims history received from the MMIS vendor and MCO encounter data files (including medical, pharmacy, laboratory, x-ray, institutional, emergency room visits, out-member visits, diagnosis codes, member demographic information, medical providers, prescribers and pharmacy National Provider Identifiers (NPI) and names, and procedure codes) and automatically edit diagnosis/procedure codes for Medicaid members. When necessary, the Vendor must mine additional record layout data (e.g. MCO encounter data files), accept additional fields such as the prescriber's NPI and Drug Enforcement Administration (DEA) numbers, and perform additional programming in order to use/apply the new data to the members' profiles.

HID meets this requirement. HID currently provides and will continue to provide BMS with a CWP that display twenty four (24) months of claims history received from the MMIS vendor and MCO encounter data files, including:

- Medical
- Pharmacy
- Laboratory
- X-ray
- Institutional
- Emergency Room Visits
- Procedure codes
- Diagnosis Codes
- Member Demographic Information
- Provider, Prescriber, and Pharmacy National Provider Identifies (NPI)
- Provider, Prescriber, and Pharmacy Names

HID's CWP database automatically cross-references diagnosis and procedure codes with the files received from First DataBank in order to provide a narrative description of the codes in each member profile. HID also performs the following processing functions:

- Data mining of additional record layout data
- Acceptance of additional fields
- Performance of additional programming necessary to use and apply the new data to the members' profiles

In other words, raw data from the MMIS is processed and formatted to provide easy-to-understand and actionable information for providers and other CWP users.

HID will perform appropriate edits and data mining functions to provide users with information that will be useful in enabling them to make more informed prescribing and dispensing decisions, helping to improve quality of care and controlling program costs.

The CWP provides a wealth of information for users, including:

- Pharmacy History

Search		Patient Summary		Pharmacy History		Details																												
Patient Lookup		Date Range: 09/15/09 to 09/24/09		Submit																														
<ul style="list-style-type: none"> PAXpress Manage Account Forms Admin 		<h3>Pharmacy History</h3> <p>NATHANIEL WILSON</p> <p>DOB: 09/03/83 Sex: Male</p> <table border="1"> <thead> <tr> <th>Date of Service</th> <th>Rx Number</th> <th>GCN</th> <th>Drug Description</th> <th>Strength</th> <th>Qty</th> <th>Days</th> <th>Pharmacy Number</th> <th>Prescriber Number</th> </tr> </thead> <tbody> <tr> <td>09/11/09</td> <td>8961596</td> <td>12868</td> <td>NEXIUM</td> <td>40MG</td> <td>30</td> <td>30</td> <td>0141834000</td> <td>1295781177</td> </tr> <tr> <td>09/03/09</td> <td>7284674</td> <td>35793</td> <td>NAPROXEN</td> <td>500MG</td> <td>60</td> <td>30</td> <td>0227799018</td> <td>1295781177</td> </tr> </tbody> </table>						Date of Service	Rx Number	GCN	Drug Description	Strength	Qty	Days	Pharmacy Number	Prescriber Number	09/11/09	8961596	12868	NEXIUM	40MG	30	30	0141834000	1295781177	09/03/09	7284674	35793	NAPROXEN	500MG	60	30	0227799018	1295781177
Date of Service	Rx Number	GCN	Drug Description	Strength	Qty	Days	Pharmacy Number	Prescriber Number																										
09/11/09	8961596	12868	NEXIUM	40MG	30	30	0141834000	1295781177																										
09/03/09	7284674	35793	NAPROXEN	500MG	60	30	0227799018	1295781177																										

- Diagnosis History

Search		Patient Summary		Diagnosis History		Pharmacy History		Hospital Procedure History		Non-Hospital Procedure History		Details																																							
Patient Lookup		Date Range: 01/01/09 to 06/19/09		Submit																																															
<ul style="list-style-type: none"> PAXpress Manage Account Forms Admin 		<h3>Diagnosis History</h3> <p>BOY WILSON</p> <p>DOB: 09/03/83 Sex: Male</p> <table border="1"> <thead> <tr> <th>Current Date of Service</th> <th>Diagnosis</th> <th>ICD9 Code Description</th> <th>First Date of Service</th> <th>Physician Number</th> </tr> </thead> <tbody> <tr> <td>02/24/09</td> <td>4254</td> <td>OTH PRIMARY CARDIOMYOPATHIES</td> <td>02/24/09</td> <td>0011814000</td> </tr> <tr> <td>02/15/09</td> <td>8831</td> <td>OPEN WOUND FINGER COMPLICATED</td> <td>02/15/09</td> <td>0001342003</td> </tr> <tr> <td>02/15/09</td> <td>9594</td> <td>OTH UNS INJURY HAND EX FINGER</td> <td>02/15/09</td> <td>0001342003</td> </tr> <tr> <td>01/23/09</td> <td>4254</td> <td>OTH PRIMARY CARDIOMYOPATHIES</td> <td>01/23/09</td> <td>0011814000</td> </tr> <tr> <td>01/23/09</td> <td>27800</td> <td>OBESITY UNSPECIFIED</td> <td>01/23/09</td> <td>0011814000</td> </tr> <tr> <td>01/14/09</td> <td>V4502</td> <td>IMPLANTABLE CARDIAC DEFIB IN SITU</td> <td>01/14/09</td> <td>0010400000</td> </tr> <tr> <td>01/09/09</td> <td>4254</td> <td>OTH PRIMARY CARDIOMYOPATHIES</td> <td>01/09/09</td> <td>0011814000</td> </tr> </tbody> </table>										Current Date of Service	Diagnosis	ICD9 Code Description	First Date of Service	Physician Number	02/24/09	4254	OTH PRIMARY CARDIOMYOPATHIES	02/24/09	0011814000	02/15/09	8831	OPEN WOUND FINGER COMPLICATED	02/15/09	0001342003	02/15/09	9594	OTH UNS INJURY HAND EX FINGER	02/15/09	0001342003	01/23/09	4254	OTH PRIMARY CARDIOMYOPATHIES	01/23/09	0011814000	01/23/09	27800	OBESITY UNSPECIFIED	01/23/09	0011814000	01/14/09	V4502	IMPLANTABLE CARDIAC DEFIB IN SITU	01/14/09	0010400000	01/09/09	4254	OTH PRIMARY CARDIOMYOPATHIES	01/09/09	0011814000
Current Date of Service	Diagnosis	ICD9 Code Description	First Date of Service	Physician Number																																															
02/24/09	4254	OTH PRIMARY CARDIOMYOPATHIES	02/24/09	0011814000																																															
02/15/09	8831	OPEN WOUND FINGER COMPLICATED	02/15/09	0001342003																																															
02/15/09	9594	OTH UNS INJURY HAND EX FINGER	02/15/09	0001342003																																															
01/23/09	4254	OTH PRIMARY CARDIOMYOPATHIES	01/23/09	0011814000																																															
01/23/09	27800	OBESITY UNSPECIFIED	01/23/09	0011814000																																															
01/14/09	V4502	IMPLANTABLE CARDIAC DEFIB IN SITU	01/14/09	0010400000																																															
01/09/09	4254	OTH PRIMARY CARDIOMYOPATHIES	01/09/09	0011814000																																															

▪ Hospital Procedure History

Search	Patient Summary	Diagnosis History	Pharmacy History	Hospital Procedure History	Non-Hospital Procedure History	Details
---------------	---------------------------------	-----------------------------------	----------------------------------	--	--	-------------------------

Patient Lookup Date Range: 01/01/09 to 05/15/09
[Submit](#)

- › PAXpress
- › Manage Account
- › Forms
- › Admin

Hospital Procedure History

JAMES BROWN
 DOB: 11/29/72
 Sex: Male

Hospital Inpatient Procedure History

Date of Service	Procedure Code	Procedure Code Description	Diagnosis	Provider Number	Referring Physician Number
02/28/09	73120	RADEX HAND 2 VIEWS	OTH UNS INJURY HAND EX FINGER	0008505000	3810012557

Hospital Outpatient Procedure History

Date of Service	Procedure Code	Procedure Code Description	Diagnosis	Provider Number	Referring Physician Number
02/28/09	99140	ANES COMP EMER CONDITIONS SPEC	OPEN WOUND OF HAND	3810010865	3810012557
02/28/09	00400	ANES INTEG EXTREMITIES ANTERIOR TRUNK PERINEUM	OPEN WOUND OF HAND	3810010865	3810012557
02/28/09	00400	ANES INTEG EXTREMITIES ANTERIOR TRUNK PERINEUM	OPEN WOUND OF HAND	3810010865	3810012557

Hospital Emergency Room Procedure History

Date of Service	Procedure Code	Procedure Code Description	Diagnosis	Provider Number	Referring Physician Number
02/28/09	73130	RADEX HAND MINIMUM 3 VIEWS	OPEN WOUND OF FINGER	0006523000	3810001677
02/28/09	00204	EMER DEPT HI SEVERITY&URGENT EVAL	OPEN WOUND OF HAND	3810001581	

▪ Non-Hospital Procedure History

Search	Patient Summary	Diagnosis History	Pharmacy History	Hospital Procedure History	Non-Hospital Procedure History	Details
---------------	---------------------------------	-----------------------------------	----------------------------------	--	--	-------------------------

Patient Lookup Date Range: 01/01/09 to 05/15/09
[Submit](#)

- › PAXpress
- › Manage Account
- › Forms
- › Admin

Non-Hospital Procedure History

JAMES BROWN
 DOB: 11/29/72
 Sex: Male

Date of Service	Procedure Code	Procedure Code Description	Provider Number	Referring Physician Number
03/01/09	J2405	INIEC ONDANSETRON HYDROCHLORID	0001144000	
03/01/09	J2780	INJECTION, RANITIDINE HYDROCHL	0001144000	
02/28/09	A0429	AMB SVC, BLS, EMERGENCY TRANS	0001155005	
02/28/09	80048	BASIC METABOLIC PANEL CALCIUM TOTAL	0001155000	
02/28/09	85025	BLD# COMPL AUTO HHRWP&AUTO DIFFIAL	0001155000	

2.3.2.3 Meets all Health Insurance Portability and Accountability Act (HIPAA) requirements for the protection of Medicaid member's personal health information (PHI).

HID meets this requirement. HID has been handling confidential information such as personal income tax data, financial data, and Protected Health Information (PHI) for many years. Because we process health information, HID must be and is HIPAA-compliant. This compliance requires strict security measures for our computer systems, physical plant, and personnel. HID closely monitors our computing practices and physical security to ensure compliance is maintained consistently and continuously.

2.3.2.4 Provides access for designated healthcare providers (e.g. prescribers and dispensers) through an authorized log in to access their member's medical history and an additional personal identification method such as a Personal Identification Number (PIN), linked to the prescriber's log-in information, for ePrescribing.

HID meets this requirement. Designated healthcare providers, including prescribers and dispensers, can obtain access to the CWP through an authorized login process in order to access to their member's medical history and an additional personal identification method, Personal Identification Number (PIN), linked to the prescriber's login information, for ePrescribing.

Registration

Prescribers and dispensers may gain access to the system after they have completed the following two (2) steps:

- Submitted a completed and notarized access request form to HID containing:
 - User contact information
 - NPI
 - DEA
 - State License Number
 - User's password
- Provided copies of the applicant's DEA and State License documentation

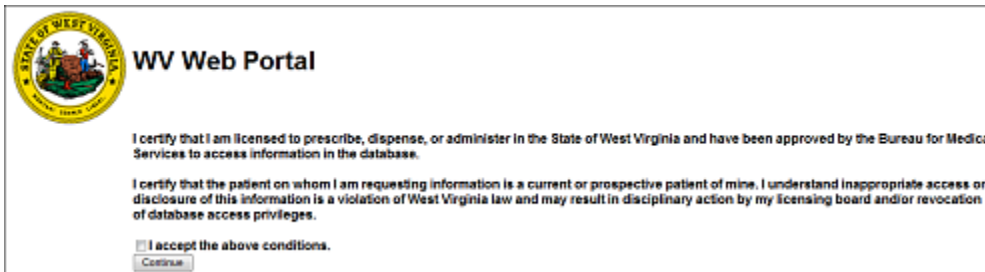
HID's Help Desk staff enter each applicant's information to the CWP and notify the user, via two separate secure emails, of their user ID, password, and PIN. The PIN is utilized as a phone password for any user who calls the help desk for assistance and to gain access to HID's ePrescribing tool, interface to send electronic prescriptions.


If there is any question regarding an applicant's information or documentation, or if any information and/or documentation is missing, HID's Help Desk staff will contact the applicant to resolve the issue.

Authentication

All approved users are required to provide their user ID and password each time they log into the CWP, known in West Virginia as MediWeb. Before viewing a member's Medicaid claims history, users are required to certify that they are licensed to prescribe, dispense, or administer in the State(s) in which they practice and have been approved by the West Virginia Bureau for Medical Services to access information in the database by accepting the terms and conditions listed. In addition, users must certify that the member being queried is a current or prospective BMS recipient and that they have written authorization from the member to access his medical and pharmacy history.

The complete certification and acceptance statement is displayed below.



 **WV Web Portal**

I certify that I am licensed to prescribe, dispense, or administer in the State of West Virginia and have been approved by the Bureau for Medical Services to access information in the database.

I certify that the patient on whom I am requesting information is a current or prospective patient of mine. I understand inappropriate access or disclosure of this information is a violation of West Virginia law and may result in disciplinary action by my licensing board and/or revocation of database access privileges.

I accept the above conditions.

2.3.2.5 Accepts web-based prior authorization requests on smart forms, created in LiveCycle, a program for creating forms with expandable text fields, and transfers them to the Prior Authorization Help Desk for processing through a secure and HIPAA compliant electronic method of transmission.

HID meets this requirement. As part of the CWP, HID currently provides the PAXpress electronic prior authorization submission tool. PAXpress allows providers to create PA requests using smart forms and transmits those forms for adjudication using secure and HIPAA-compliant transmission. HID's CWP accepts smart forms, created in LiveCycle, which include expandable text fields so that prescribers may supply complete information to support their PA request. Currently, the MediWeb CWP supplies the following PA request smart forms:

- Antifungal Drug Prior Authorization Form
- COX-2 Inhibitor Prior Authorization Form
- General Drug Prior Authorization Form
- Growth Hormone Prior Authorization Form
- Home Infusion Therapy Prior Authorization Form
- Pharmacy Diabetic Supplies Limit Exception Form
- Preferred Drug List Prior Exemption Request Form
- Provigil/Nuvigil Prior Authorization Form
- Suboxone/Subutex Prior Authorization Form
- Synagis Prior Authorization Form
- XOLAIR Prior Authorization Form

Additional forms may be created as requested to meet the needs of BMS as modifications are made to the preferred drug list and prior authorization clinical edit criteria.

The following image illustrates a smart form for a Preferred Drug List Exemption Request.



Rational Drug Therapy Program
 West Virginia University School of Pharmacy
 On Behalf of the WV Bureau for Medical Services
 PO Box 9511 HSCN
 Morgantown, WV 26506

FAX, Phone, Mail Completed form to:
 FAX: 1-800-531-7787
 Phone: 1-800-847-3859
 (Please print or type)

Preferred Drug List Exemption Request

Patient Name (Last)	(First)	(MI)	WV Medicaid ID Digit ID #:	Date of Birth
Practitioner Name (Last) (First) (MI)				
Practitioner Address: (Street)		(City)	(State)	(Zip)
Practitioner DEA Number	Return Phone #	Return FAX #		
Non-Preferred Medication Name:	Dose	Directions		
Diagnosis:		(Optional) Diagnosis Code (ICD-9-CM)		

Please answer each of the following questions for your request to prescribe a non-preferred drug for your patient.*

1. Has the patient experienced treatment failure with the preferred product(s)? Yes No

2. Does the patient have a condition that prevents the use of the preferred product(s)? Yes No

If YES, list the condition(s) in the box below:

2.3.2.6 Houses, supports and maintains WVeScript, a Surescripts certified ePrescribing application, that is web-based and accessible from any web enabled device for prescribers enrolled in the web portal.

HID meets this requirement. As a part of WV’s MediWeb, HID currently provides and will continue to provide ePrescribing, HID’s electronic prescribing tool which is accessible from any web-enabled device by authorized prescribers. Enrolled prescribers have access to ePrescribing from their office computers, web enabled PDAs/phones and notebook/tablet computers. ePrescribing is available to enrolled prescribers at no cost to encourage more prescribers to send prescriptions electronically.

As a part of the SureScripts network, ePrescribing users have access to the largest network of independent, chain and institutional pharmacies in the nation.

HID is a certified Surescripts Solutions Provider for each of the three areas deemed critical for effective ePrescribing:

- Prescription Benefit
- Medication History
- Prescription Routing

HID provides a copy of our SureScripts certifications as Appendix 3 and an excerpt of the ePrescribing User's Guide for Prescribers is provided in Appendix 5.

2.3.2.6.1 Maintain and update the WVeScript application per the most current National Council for Prescription Drug Programs (NCPDP) standards, HIPAA guidelines, and standards imposed by SureScripts to maintain certification and allow for transactions required for certified electronic prescribing.

HID meets this requirement. HID understands the importance of maintaining and operating up-to-date systems. HID ensures that the ePrescribing tool utilizes the most current National Council for Prescription Drug programs (NCPDP) standards, HIPAA guidelines, and standards imposed by SureScripts in order to maintain certification and allow for transactions required for certified electronic prescribing. As part of the ongoing commitment to maintaining the functionality of ePrescribing, HID participates in ongoing training and certification with SureScripts.

2.3.1.6.2 Incorporate the most current First Data Bank drug utilization review files for editing and alerting prescribers about potential adverse drug events for drugs electronically prescribed.

HID meets this requirement. HID incorporates the most current First DataBank drug utilization review files for editing and alerting prescribers about potential adverse drug events for drugs electronically prescribed.

Within the ePrescribing tool, HID provides prospective drug utilization review (Pro DUR) edits based on the National Drug Data File Plus (NDDF Plus) from the industry leader in clinical decision support, First DataBank. Specifically, the ePrescribing component incorporates the NDDF Plus Core Bundle, which includes the following clinical modules:

- **Drug Allergy Module™** – The Drug Allergy Module consolidates information about drugs known to cause allergic reactions, cross-sensitivities and drug intolerances by identifying and averting drug-allergy issues. Drug-allergy screenings also look at inactive medication ingredients such as latex and peanuts. A specially-developed Allergen Pick List streamlines workflow by giving the user the most convenient way to quickly and easily record a member's allergy, enabling fast and convenient member allergy profiling.
- **Duplicate Therapy Module™** – The Duplicate Therapy Module helps prevent members from receiving duplicate drug therapies through the deployment of highly specific clinical screening of duplicate drug therapies with clinical relevance. The module has the ability to detect potentially problematic duplications, not simply two drugs in the same therapeutic class that are valid to be prescribed together. For further refinement, there is a customizable field to indicate how many duplicates are acceptable for a specific grouping—helping to minimize alert fatigue. The Duplicate Therapy Module includes more than 400 Duplicate Therapy Classes with links from a drug product to appropriate classes.

- **Drug-Drug Interaction Module™** – The Drug-Drug Interaction Module enhances the ability of healthcare professionals to identify and prevent clinically-significant drug interactions. The module includes drug interaction information for FDA-approved drugs, over-the-counter (OTC) drugs, drug alternative therapies and drug-inactive ingredients. Management of message overload is achieved through superior configurability. By offering more specific categories of interactions, users can fine tune alerts using severity levels and subcategories such as “conflicting evidence exists.” The module also includes concise summary messages and professional monographs that refer to the primary medical literature—allowing further choice in how to treat interaction groupings.
- **Min/Max Dose Modules™** – Min/Max Dosing Modules provide drug dosing information to healthcare professionals on the most frequently prescribed drugs. This five-module set offers an easy-to-implement resource for quick check information on the usual range of daily doses for adult, pediatric and geriatric members.

2.3.2.6.3 Ensure that WVeScript is enabled to send requests to and receive requests from Surescripts regarding member eligibility, drug history, formulary requests and route the electronic prescription to the pharmacy designated by the prescriber.

HID meets this requirement. HID will ensure that the ePrescribing tool is enabled to send requests to and receive requests from Surescripts regarding member eligibility, drug history, and formulary requests. HID will also ensure that ePrescribing routes the electronic prescription to the pharmacy designated by the prescriber.

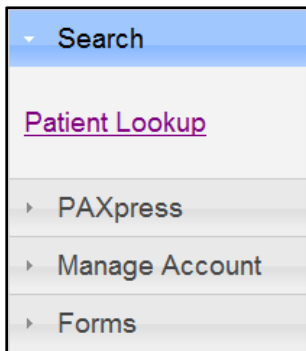
HID’s ePrescribing tool is certified as a SureScripts Solutions provider for the following areas:

- Prescription Benefit, which includes the member eligibility and formulary checks
- Medication (drug) History
- Prescription Routing, which includes routing new prescriptions to the member’s chosen pharmacy and allows pharmacies to electronically submit refill requests to prescribers.

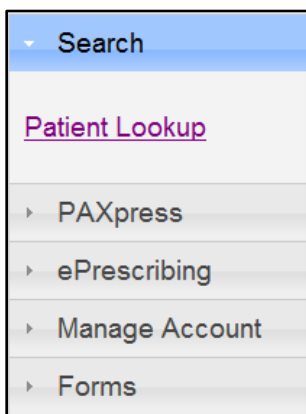
Verification of HID’s Surescripts certification may be obtained on the Surescripts website for Certified Physician Software Vendors. HID also provides our Surescripts certifications in Appendix 3.

2.3.2.6.4 Ensure that the WVeScript application can only be accessed by licensed prescribers enrolled in the web portal. (Only licensed prescribers should see the WVeScript module when utilizing the web portal.) This function must not be available to any user who is not a licensed prescriber.

HID meets this requirement. HID employs role-based security, a system of user permissions, to ensure that each system and tool is only accessible by approved users. Using these protocols, HID will ensure that users can see and access only the modules they have been approved for. For example, in the current WV MediWeb system, a user enabled only to perform patient lookup searches and submit PA requests will see the following MediWeb menu bar:



Users who have been approved for ePrescribing will see the MediWeb menu bar with the ePrescribing link added.



Managing ePrescribing user access by permission levels assures that *only* those users approved to submit electronic prescriptions have the ability to access the ePrescribing tool. HID, at the direction of BMS, only grants the ePrescribing permission level to licensed prescribers who present evidence of their ability to prescribe prescriptions drugs as part of their completed MediWeb Access Request form.

Users who are attempting to access the ePrescribing tool will be required to pass an additional level of authentication by entering their PIN.

HID will work closely with BMS to resolve any questions regarding prescriber credentials. HID is committed to providing the highest levels of security for BMS as well as for all of the information contained in the MediWeb Clinical Web Portal.

Vendor Provisions

The Vendor must provide:

2.3.3.1 Software that will pull data files at a minimum of once weekly on a day agreed upon by BMS, the MMIS vendor for BMS, and the Vendor.

HID meets this requirement. HID's CWP currently pulls data files from the MMIS vendor, Molina Medicaid Solutions, once weekly on a day agreed upon by BMS, Molina and HID. All claims data is downloaded and loaded into the clinical web portal database within 24 hours of receipt. HID works closely with Molina to make sure that all claims data is transmitted and received accurately and on a timely basis. HID will continue to provide this service, upon contract award.

2.3.3.2 Coding and testing of the clinical web portal at least forty eight (48) hours before implementation.

HID meets this requirement. Because HID constructed, operates and maintains the current MediWeb CWP, there will be only a minimal implementation period. The implementation period will have no effect on any of the current operational services and only includes development and implementation of the annual survey. HID will, however, code and test at least forty-eight (48) hours prior to implementation of any system upgrades, modifications, and enhancements before implementation and throughout the contract.

2.3.3.3 Training manuals for all enrolled providers for all functions of the clinical web portal, including utilization of the ePrescribing tool, WVeScript at the time of implementation of the web portal.

HID meets this requirement. HID believes that up-to-date documentation is vital. HID's technical writing team continually updates system documentation to reflect all modifications, updates, and enhancements to the system. HID will provide training manuals for all enrolled providers for all functions of the CWP, including ePrescribing and PAXpress tools, at the time of implementation. Because HID serves as the current vendor, these guides have already been designed, developed and provided to BMS for these tools. During the implementation period, HID will update these materials to reflect the addition of the annual survey.

All documentation is designed, developed, and maintained by HID's expert technical writing team, led by Connie Lewis, MBA, HID's Director of Technical Writing. Ms. Lewis has 21 years of experience in various aspects of the Information Technology field. She has extensive experience designing, writing, and publishing both online and

hardcopy user documentation for commercial software projects and for training purposes. Ms. Lewis is committed to developing clear, usable, and user-friendly documentation and serves as a user advocate in each project she undertakes. She continues to oversee the customization of these documents for each client as well as the maintenance of these documents throughout the contract-life.

Any required system modification or maintenance function that occurs outside regularly-scheduled operations will be documented and presented to BMS to determine its business impact and to obtain approval to perform the action. Once approved, HID will performed the required work and inform BMS of its successful implementation. As stated above, all affected documentation will be then updated accordingly.

All technical documentation will be available electronically. HID provides sample technical documentation as Appendices 4 and 5.

2.3.3.4 A help desk, available from 8:30 AM-5:30 PM Eastern Standard Time (EST) on Monday through Friday, including holidays to provide support for providers enrolling in the clinical web portal and WVeScript and to utilize all functions of the clinical web portal including:

2.3.3.4.1 Processing enrollment applications (approved by the Bureau) for prescribers and pharmacy providers and assigning user identification names and passwords for access to the portal. These must be transmitted to the providers in within three (3) business days of the request for enrollment by mail, fax or e-mail in a HIPAA secure manner.

2.3.3.4.2 Assignment of Personal Identification Numbers (PINs) to licensed prescribers for use of WVeScript and transmit those numbers in a HIPAA secure manner within three (3) business days of the request for enrollment.

2.3.3.4.3 Enrolling prescribers who wish to ePrescribe with Surescripts and performing any other requirement necessary for prescribers to engage in ePrescribing utilizing WVeScript within two (2) business days of receiving their enrollment application.

2.3.3.4.4 Assisting providers with user names, passwords and PINs when necessary in case of loss within twenty four (24) hours of their request

HID meets this requirement. HID's focus on delivering high quality, professional support to our clients enables us to support the residents of our client states with positive healthcare outcomes and organizational cost-containment. HID will provide multiple support options including email addresses and toll-free numbers for the help desk and technical support, and online user guides.

HID will provide toll-free and online help desk support for users throughout the life of the contract. The toll-free number will be staffed from 8:00 a.m. to 5:00 p.m. Eastern Standard Time, Monday through Friday, including agreed upon holidays, and voice mail access will be available at all other times.

User documentation will be available online, including navigation instructions, screen-sensitive conceptual overviews, and step-by-step instructions for entering and managing data.

HID's help desk staff are thoroughly educated and trained to provide high-quality customer and technical support for providers enrolling in the CWP and to utilize all functions of the clinical web portal including:

- Processing enrollment applications, approved by the Bureau, for prescribers and pharmacy providers and assigning user identification names. Applicants supply their own passwords on the access request form. All applications are processed and entered into the user database within three (3) business days of the request for enrollment. In most instances, enrollment occurs on the same day that HID receives the completed and approved application.
- Assigning PINs to licensed prescribers for use of the ePrescribing tool and ensuring transmission of those numbers is completed in a HIPAA-compliant manner within three (3) days of the request for enrollment. Once applicants are entered into the CWP user database and activated, the system sends each user two emails:
 - The first email contains the user's unique user ID.
 - The second email contains the user's unique PIN. This email also advises users that the PIN should be stored in a secure location and that it must be used when calling the help desk and to access the ePrescribing tool.
 - Both emails are sent within three (3) business days of the request for enrollment.
- Enrolling prescribers who wish to submit electronic prescriptions with Surescripts and performing any other requirement necessary for prescribers to engage ePrescribing through the CWP, within two (2) business days of receiving their enrollment application.

HID's help desk works closely with prescribers, many of whom are utilizing ePrescribing for the first time, to ensure that they understand how to use system functions and features such as eligibility searches, formulary checks, ProDUR information, prescription information, pharmacy searches, and prescription submission. In addition, HID's help desk assists prescribers in managing their refill prescriptions and answering any other questions prescribers may have.
- Assisting providers with user names, passwords and PINs when necessary in case of loss, within twenty four (24) hours of their request.

2.3.3.5 Monthly reports, delivered within fifteen (15) business days from the end of the month for activity on the website including, but not limited to:

2.3.3.5.1 The number of prescribers and dispensers accessing the website and the functions accessed.

2.3.3.5.2 Audit log of member profiles accessed.

2.3.3.5.3 A report of the prescribers utilizing WVeScript and the number of transactions completed.

HID meets this requirement. HID currently provides and will continue to provide BMS with monthly reports, delivered within fifteen (15) business days from the end of the month, for activity on the website including, but not limited to:

- The number of prescribers and dispensers accessing the website and functions accessed.
- Audit log of member profiles accessed.
- A report of the prescribers utilizing WVeScript and the number of transactions completed.

2.3.3.6 Additional Required Documents

2.3.3.6.1 An annual survey of healthcare providers accessing the portal to determine their satisfaction with the portal in the areas of training, ease of use, and level of assistance/support provided for coordination of care of their members.

2.3.3.6.2 A document containing disaster and data recovery planning operations in the event of a service operations disruption.

2.3.3.6.3 A description of the privacy and security measures employed for protection of the PHI contained in the clinical web portal.

2.3.3.6.4 A proposed work plan detailing how the vendor will perform/complete the services required in an efficient manner with the BMS fiscal agent and BMS staff time required must be included.

HID meets this requirement. Upon contract award, HID will provide the Bureau with the following documents:

- An annual survey of healthcare providers accessing the portal to determine their satisfaction with the portal in the areas of training, ease of use, and level of assistance/support provided for coordination of care of their members. This survey will be designed and conducted by March of 2012, with results reported to BMS by April 30, 2012.
- A document containing disaster and data recovery planning operations in the event of service operations disruption for the clinical web portal was submitted to BMS in May 2009. Within 30 days of contract award, HID will submit an updated and revised version of the Disaster and Recovery Plan.
- HID's Disaster and Recovery Plan, submitted to BMS in May of 2009 also contains a description of the privacy and security measures employed for protection of the PHI

contained in the clinical web portal. This information will again be provided to BMS within 30 days of contract award.

- A proposed work plan detailing how HID will perform and complete the services required in an efficient manner with the BMS fiscal agent and BMS staff time required is included below. Because HID is the current vendor for the clinical web portal and WV ePrescribing, there will be minimal implementation unless BMS chooses to enact any or all of the optional services included in this proposal.

Task	Resource
<i>Implementation Tasks – approximately 50 hours</i>	
Design annual survey	Project Manager, Database Manager, and Technical Writer
Receive BMS approval for annual survey	Project Manager
Education of help desk staff on annual survey	Project Manager
Test system additions, upgrades, enhancements, modifications (48-hrs prior to implementation date)	Project Manager, Database Manager
“Go Live”	ALL
<i>Daily Operational Tasks</i>	
Process WV MediWeb Access Request Forms, to include: <ul style="list-style-type: none"> ▪ Verify form is complete & information accurate ▪ Required documentation is supplied ▪ Access request forms are properly notarized ▪ Data enter User information into the MediWeb user database ▪ Activate new users ▪ Send email containing user ID ▪ Send email containing user's PIN 	Help Desk Staff, Project Manager
Help Desk provides user assistance for: <ul style="list-style-type: none"> ▪ Password resets ▪ General questions regarding MediWeb and/or ePrescribing usage ▪ Technical assistance for MediWeb and/or ePrescribing users 	System Personnel, Help Desk Staff, Project Manager
<i>Weekly Operational Tasks</i>	
Pull claims data from the WV MMIS Vendor	Database Manager, System Personnel
Process claims data	Database Manager, System Personnel
Load claims data into the MediWeb database	Database Manager, System Personnel
<i>Monthly Operational Tasks</i>	
Monthly Reports to include: <ul style="list-style-type: none"> ▪ The number of prescribers and dispensers accessing the clinical web portal and the functions accessed ▪ Audit log of member profiles accessed ▪ A report of prescribers utilizing WVeScript and the number of transactions completed 	Project Manager, System Personnel

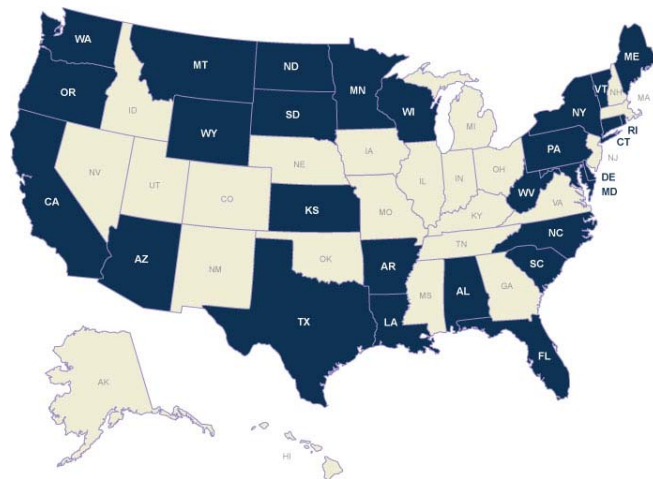
Surescripts Webinars	Project Manager, System Personnel
<i>Quarterly Operational Tasks</i>	
Quarterly ePrescribing User Census for First DataBank's ProDUR modules	Project Manager, System Personnel
<i>Annual Operational Tasks</i>	
Annual Survey of healthcare providers accessing the clinical web portal to determine their level of satisfaction with the portal in the areas of training, ease of use, and level of assistance/support provided for the coordination of care of their members.	Project Manager, System Personnel, Help Desk Staff
<i>As-Needed Operational Tasks</i>	
User Guide Updates for MediWeb and ePrescribing	Project Manager, System Personnel, Technical Writer
Update Access Request (Enrollment) Forms	Project Manager, System Personnel, Technical Writer
Development of HIPAA Compliant Procedures for enrolling ancillary staff or other state agencies who may need to access MediWeb.	Project Manager, System Personnel, Technical Writer
System upgrades to meet new HIPAA or technical standards (e.g. 5010, NCPDP 10.6, or EPCS)	Project Manager, Database Manager, System Personnel
Surescripts Certification Activities to meet new requirements (e.g. 5010, NCPDP 10.6, or ECPS)	Project Manager, Database Manager, System Personnel
Documentation updates including: <ul style="list-style-type: none"> ▪ Disaster planning and recovery ▪ Privacy and security measures ▪ Work Plans for system enhancements or changes 	Project Manager, Database Manager, System Personnel, Technical Writer

Vendor Experience

For more than 30 years, HID has combined clinical and information technology expertise to recognize health care challenges and develop solutions to help health care organizations successfully meet them. The success in doing this is proven through renewed contracts with our current clients and the continued ability to successfully compete in the marketplace to add new clients. With a reputation for putting clients first and a history of continuous growth, HID sets the standard for client satisfaction and value-added partnerships.

HID was founded in 1976 to help health care organizations improve member health while reducing operating costs. HID's combination of clinical, professional, and information technology expertise has helped the company become a leader in health care analytics and pharmacy support services; providing clinical data management, analysis, and development and management of secure databases to public and private sector clients in 27 states, including 17 Medicaid agencies, 14 departments of health and boards of pharmacy, and multiple private pharmacy benefits management organizations.

HID has served West Virginia Department of Human Services, Bureau of Medical Services for 4 years. HID is proud of the strong partnership with the agency and hold firm the commitment to support BMS in the achievement of its mission and goals. HID currently provides the following services to BMS:



- Automated Prior Authorization
- P&T Committee Support
- Clinical Web Portal
- ePrescribing

Automated Prior Authorization

HID's RxPert[®] automated prior authorization (PA) processing system evaluates and processes PA requests at the point of sale. The automated processing provides rapid and efficient processing of prescription drug claims and shortened turnaround time for members, as well as reducing the number of calls to the PA Help Desk for routine PA requests.

RxPert's database stores recipient information, including pharmacy, medical, and lab work claims. When a prescription is entered at the point of sale, the prescription is compared against criteria created from client-approved guidelines that check for appropriate age and gender, previously unsuccessful therapy, stable therapy, and disease states. If the required criteria for approval are met, RxPert immediately issues approval to the pharmacist. If the criteria are not met, the claim is rejected and the pharmacist is notified that the provider must submit a manual PA request.

P&T Committee Support

HID dispensers assist the P&T Committee in identifying drug classes that provide the greatest cost savings without negative impacts on member quality of care or outcomes. As a result of the extensive clinical expertise, exhaustive reviews of prior and current drug utilization, and national experience in this area, HID is poised to provide pertinent, up to the minute recommendations.

Clinical Web Portal

HID designed and implemented the MediWeb Clinical Web Portal for the West Virginia Bureau for Medical Services. This allows prescribers and dispensers to view, using a standard Web browser, 24 months of pharmacy claims, diagnosis claims, or procedure claims history. Prescribers and dispensers who have been approved for access to the MediWeb Clinical Web Portal may also submit prior authorization requests via the PAXpress feature.

ePrescribing

HID worked with BMS to successfully expand the MediWeb Portal to include an ePrescribing component. This feature uses input screens to securely capture prescription information and electronic signatures and transmit that information directly to the pharmacy selected by the member or through an interface with third-party e-prescribing networks (e.g. RxHub and similar networks).

The Vendor must provide:

2.3.4.1 References from at least three (3) states, excluding West Virginia, in which the Vendor has been engaged in Medicaid projects within the past five (5) years, along with a detailed description of the work performed for each reference.

HID is committed to providing systems and services to public and private clients and helping our clients provide improved health care in a cost-effective manner. HID provides reference information for three current clients on the following pages:



Alabama Medicaid Agency Contract

The components of HID’s contract with the Alabama Medicaid Agency are described in the table below.

Alabama Medicaid Agency Contract	
Service	Description
RetroDUR Clinical Criteria Processing, Intervention Management, and Data Analysis and Decision Support	<p>HID’s RxExplorer® system comprises two main components: a clinical criteria processing and intervention management engine (DURBase) and a pharmacy data analysis and decision support (DADS) tool.</p> <p>HID’s clinical staff work with the Alabama Medicaid Agency to determine and define which clinical interventions should take place. This information serves as the basis for the therapeutic criteria, which are loaded into RxExplorer’s DURBase application, the engine that drives the RetroDUR process. DURBase runs claims against the therapeutic criteria to examine the data for drug-drug interactions, drug-disease contraindication and precautions, overutilization, underutilization, disease states, and cost savings. Upon completion, DURBase produces a full Initial Criteria Exception Report (ICER) that identifies potential drug-related problems in the cycle and the number of occurrences of each problem, subdivided into risk categories (high, medium, low). The ICER is reviewed by HID’s clinical staff, who propose which criteria exceptions should be examined in more depth. The chosen therapeutic criteria exceptions are then processed and member profiles are created. DURBase is also used to conduct monthly reviews of the claims submitted to HID to update each member’s drug history.</p> <p>The information from the selected member profiles is used to create educational intervention packets and the packets are sent to the prescribers for each member. Cost effectiveness of each intervention is calculated, and along with prescriber feedback, is provided to the State.</p> <p>The DADS component of RxExplorer is a user-friendly, browser-based data mining tool that combines quick and easy access to standard reports as well as robust ad hoc reporting tools. Using this, the Agency user can perform a host of analytic tasks; for example, the user can readily view graphical representations of drug utilization trends.</p>

Alabama Medicaid Agency Contract	
Service	Description
Profile Review (ProfileXpress)	HID's clinical staff review member profiles for those members who have been selected as high-risk using ProfileXpress™, HID's electronic profile review system. Upon review of demographic, diagnostic, pharmacy and medical claims data, the profile reviewer can choose to send an educational mailing to the provider or recommend the member for the state lock-in program, when appropriate. HID reviews approximately 300 profiles each month for the Alabama Medicaid Agency.
Academic Detailing and Educational Interventions	<p>HID performs educational intervention by educating Alabama Medicaid providers on the proper administration of medications in accordance with evidence based rules.</p> <p>One of the largest intervention projects that HID has performed for the Alabama Medicaid Agency dealt with asthma. Members were chosen based on pre-defined criteria such as over-utilization of beta agonists or recent asthma related emergency room visits. Once selected, the recipient's drug history profile and diagnosis data were reviewed by a clinical pharmacist. Those members who appeared to be at risk for developing negative outcomes associated with asthma and who had no other chronic lung condition noted on their history were flagged and their provider was sent an interventional letter, a 12-month drug history member profile, and educational materials related to asthma. The total cost savings to the Agency was substantial.</p>
DUR/RDUR Board Support	HID understands that DUR Board meetings are critical to an effective DUR program and that many of the administrative activities of the Board often rely on a high-level clinical understanding. HID coordinates DUR Board Meetings to update therapeutic criteria, provider education, and interventions for retrospective and prospective DUR. In providing support to the Alabama Medicaid DUR Board, HID offers valuable expertise, a firm understanding of related services, and clinical objectivity.
Provider Newsletters	HID offers additional provider education through the production of a quarterly newsletter, which is posted on the Web site HID maintains for the Alabama Medicaid Agency and sent to all major provider associations through the Agency's listserv. The newsletter provides information about any changes taking place within the Medicaid program, PDL updates, general clinical information, and any information regarding criteria changes and/or clarifications.
On-Site Clinical Pharmacist	HID assigns a clinical pharmacist to work full time on-site at the Alabama Medicaid Agency office. This pharmacist possesses superior clinical competence, demonstrated proficiency in drug therapy management, has at a minimum two years experience in outmember/community pharmacy, is licensed in the State of Alabama, holds a current preceptor license, and is in good standing with the Alabama Board of Pharmacy. The clinical pharmacist's work schedule is determined by the Alabama Medicaid Agency Director of Pharmacy, based on how she can best serve the Agency; however, the majority of her time is normally spent providing clinical support to the Agency's Pharmacy Program staff.

Alabama Medicaid Agency Contract	
Service	Description
Quarterly/Annual Reports and CMS Report Preparation	In order to assess the productivity of the Medicaid program, HID provides the Alabama Medicaid Agency with quarterly and annual reports that include valuable summary information such as current Board activity and statistical analysis of cost savings, trends in usage, and intervention review. These reports often highlight the changes that could be made to improve quality of care and cost effectiveness. HID also supports the Agency in their preparation of the annual CMS Report.
Automated Prior Authorization and Electronic Prior Authorization	<p>HID's RxPert[®] automated prior authorization (PA) processing system evaluates and processes PA requests at the point of sale. The automated processing provides rapid and efficient processing of prescription drug claims and shortened turnaround time for members, as well as reducing the number of calls to the PA Help Desk for routine PA requests.</p> <p>RxPert's database stores recipient information, including pharmacy, medical, and lab work claims. When a prescription is entered at the point of sale, the prescription is compared against criteria created from client-approved guidelines that check for appropriate age and gender, previously unsuccessful therapy, stable therapy, and disease states. If the required criteria for approval are met, RxPert immediately issues approval to the pharmacist. If the criteria are not met, the claim is rejected and the pharmacist is notified that the provider must submit a manual PA request.</p> <p>HID's PAXpress[™] application allows providers to securely submit PA requests using their PC's browser and an Internet connection. The electronic submission saves providers time. Instead of having to complete paper forms and fax them to the PA Help Desk, they can complete the forms online and send them directly.</p>
PA Help Desk	<p>Providers may submit requests to the PA Help Desk electronically using PAXpress or by fax, e-mail, U.S. mail, or over the telephone. PA Help Desk staff adjudicate the PA requests according to the criteria approved by the Alabama Medicaid Agency.</p> <p>HID's PA Help Desk functions are conducted in a paperless environment. Paperless processing significantly decreases turnaround time, enhancing the quality of member care as well as providing a more effective and efficient solution for HID's clients. In addition, this "EcoGreen" approach provides a more sensitive approach to the environment.</p> <p>All PA transactions managed through RxPert, as well as those managed through HID's PA Help Desk staff, are posted in the PA database. HID and authorized Agency staff can access this data securely using an Internet browser to determine the status of any PA request.</p>

Alabama Medicaid Agency Contract	
Service	Description
Surveillance Utilization Review and Case Management System (Fraud and Abuse Detection Pilot Project)	HID is currently implementing the newest healthcare informatics solution, SURVEIL , a seamlessly integrated surveillance utilization review and case management system, as a pilot project for the program integrity division of Alabama Medicaid. SURVEIL provides the solution to unravel complex and sophisticated fraud and abuse strategies in the healthcare system. SURVEIL is a comprehensive exception processing system designed to identify patterns and trends that may lead to potential fraud and abuse. Conceived by a team of business and technical experts, including a nationally-recognized fraud and abuse expert, SURVEIL optimizes the identification of potential fraud and abuse through the prospective identification of emerging fraudulent patterns and retrospective evaluation of paid and rejected claims data. SURVEIL is used to identify providers and beneficiaries who commit fraud against the healthcare community in both the private and public sectors.

Contact Information for Alabama Medicaid Agency

Kelli Littlejohn, PharmD
 Pharmacy Program Manager, Medical Services Division
 Alabama Medicaid Agency
 501 Dexter Avenue (PO Box 5624)
 Montgomery, AL 36103-5624
 334-353-4525
kelli.littlejohn@medicaid.alabama.gov



Maryland Department of Health and Mental Hygiene Contract

The components of HID’s contract with the Maryland Department of Health and Mental Hygiene are described in the following table.

Maryland Department of Health and Mental Hygiene	
Service	Description
RetroDUR Clinical Criteria Processing, Intervention Management, and Data Analysis and Decision Support	<p>HID’s RxExplorer® system comprises two main components: a clinical criteria processing and intervention management engine (DURBase®) and a pharmacy data analysis and decision support (DADS) tool.</p> <p>HID’s clinical staff work with the Department of Health and Mental Hygiene to determine and define which clinical interventions should take place. This information serves as the basis for the therapeutic criteria, which are loaded into RxExplorer’s DURBase application, the engine that drives the RetroDUR process. DURBase runs claims against the therapeutic criteria to examine the data for drug-drug interactions, drug-disease contraindication and precautions, overutilization, underutilization, disease states, and cost savings. Upon completion, DURBase produces a full Initial Criteria Exception Report (ICER) that identifies potential drug-related problems in the cycle and the number of occurrences of each problem, subdivided into risk categories (high, medium, low). The ICER is reviewed by HID’s clinical staff, who propose which criteria exceptions should be examined in more depth. The chosen therapeutic criteria exceptions are then processed and member profiles are created. DURBase is also used to conduct monthly reviews of the claims submitted to HID to update each member’s drug history.</p> <p>The information from the selected member profiles is used to create educational intervention packets and the packets are sent to the prescribers for each member. Cost effectiveness of each intervention is calculated, and along with prescriber feedback, is provided to the Department.</p> <p>The DADS component of RxExplorer is a user-friendly, browser-based data mining tool that combines quick and easy access to standard reports as well as robust ad hoc reporting tools. Using this, the Department user can perform a host of analytic tasks; for example, the user can readily view graphical representations of drug utilization trends.</p>
Profile Review (ProfileXpress)	<p>HID’s clinical staff review member profiles for those members who have been selected as high-risk using ProfileXpress™, HID’s electronic profile review system. Upon review of demographic, diagnostic, pharmacy and medical claims data, the profile reviewer can choose to send an educational mailing to the provider or recommend the member for the state Lock-In program, when appropriate.</p>

Maryland Department of Health and Mental Hygiene	
Service	Description
Lock-In Program	If a recipient's member profile is selected for Lock-In, HID coordinates sending notification letters to the appropriate prescribers, dispensers, and the recipient and locking in the recipient to a particular pharmacy or provider. An HID clinical pharmacist, based on site at the Maryland Medicaid office, reviews approximately 300 profiles each month. The Maryland Medicaid Corrective Managed Care Advisory Committee reviews selected cases quarterly to determine what specific actions should be taken based on each recipient's behavior.
Educational Interventions	HID performs educational intervention by educating Maryland Medicaid providers on the proper administration of medications in accordance with evidence based rules. To further provider education, a live Continuing Education (CE) program was developed and hosted by HID which discussed pain management. Four hours of CE credits were awarded to prescriber and pharmacist attendees.
DUR/RDUR Board Support	HID understands that DUR Board meetings are critical to an effective DUR program and that many of the administrative activities of the Board often rely on a high-level clinical understanding. HID coordinates DUR Board Meetings to update therapeutic criteria, provider education, and interventions for retrospective and prospective DUR. In providing support to the Maryland Medicaid DUR Board, HID offers valuable expertise, a firm understanding of related services, and clinical objectivity.
Provider Newsletters	HID offers additional provider education through the production of a quarterly newsletter, which is distributed to all Maryland Medicaid providers. This newsletter includes information about recent Medicaid updates and general clinical information of value to providers.
Quarterly/Annual Reports and CMS Report Preparation	In order to assess the productivity of the Medicaid program, HID provides the Maryland Department of Health and Mental Hygiene with quarterly and annual reports that include valuable summary information such as current Board activity and statistical analysis of cost savings, trends in usage, and intervention review. These reports often highlight the changes that could be made to improve quality of care and cost effectiveness. HID also supports the Department in their preparation of the annual CMS Report.

Maryland Department of Health and Mental Hygiene	
Service	Description
Drug Use Management Program Assistance	<p>The Department of Health and Mental Hygiene is charged with the responsibility of evaluating the accessibility to medications and the quality of drug use management programs of each of its managed care organizations on an annual basis. HID provides support to the Department in this effort by clinically reviewing and evaluating the drug formulary and drug use management programs in place for each managed care organization (MCO).</p> <p>Using Department-approved standards, HID developed a drug use management program annual assessment survey. This survey is sent annually to each MCO with the goals of obtaining information regarding MCO compliance with the standards and determining areas within the drug use management programs that need improvement. The areas included in the study are:</p> <ul style="list-style-type: none"> ▪ P&T Committee ▪ Formulary System ▪ Generic Substitution ▪ Therapeutic Interchange ▪ Prior Authorization ▪ Drug Utilization Review ▪ Disease Management <p>HID clinicians review each survey upon submittal and create a report to the Department, which includes the detailed findings of the survey and any additional observations related to survey results.</p>
Epocrates Formulary Maintenance	<p>HID also supports the Department of Health and Mental Hygiene by hosting and maintaining six (6) formularies, including five (5) MCO formularies and the Maryland Medicaid PDL, on Epocrates.</p> <p>In conjunction with Epocrates, HID processes PDL and formulary updates weekly for those new drugs that are added to the system. Also, HID contacts the five MCOs to verify coverage of new drugs and any changes to their formularies, on a monthly basis. Updates are entered into the Epocrates system by an HID clinical pharmacist weekly. Epocrates updates its system on Wednesday of the following week. As a result, providers have up to date information on a weekly basis.</p> <p>The Maryland Medicaid P&T Committee meets twice a year to recommend PDL changes. However, minor changes to the PDL are updated weekly as necessary. For example, if a drug becomes available generically or if quantity limits or prior authorization criteria are updated.</p> <p>HID also adds detailed comments, which can include Web links, to the Epocrates listing for some drugs. This is helpful in directing providers to external Web sites regarding information such as prior authorization criteria and forms.</p>

Contact Information for Maryland Department of Health and Mental Hygiene

Athos Alexandrou, RPh
Deputy Director, Pharmacy Program
State of Maryland Dept. of Health and Mental Hygiene
201 West Preston Street, Room 408
Baltimore, MD 21201
410-767-5369
alexandroua@dhmh.state.md.us



North Dakota Department of Human Services Contract

The components of HID’s contract with the North Dakota Department of Human Services are described in the following table.

North Dakota Department of Human Services Contract	
Service	Description
RetroDUR Clinical Criteria Processing, Intervention Management, and Data Analysis and Decision Support	<p>HID’s RxExplorer® system comprises two main components: a clinical criteria processing and intervention management engine (DURBase®) and a pharmacy data analysis and decision support (DADS) tool.</p> <p>HID’s clinical staff work with the North Dakota Department of Human Services to determine and define which clinical interventions should take place. This information serves as the basis for the therapeutic criteria, which are loaded into RxExplorer’s DURBase application, the engine that drives the RetroDUR process. DURBase runs claims against the therapeutic criteria to examine the data for drug-drug interactions, drug-disease contraindication and precautions, overutilization, underutilization, disease states, and cost savings. Upon completion, DURBase produces a full Initial Criteria Exception Report (ICER) that identifies potential drug-related problems in the cycle and the number of occurrences of each problem, subdivided into risk categories (high, medium, low). The ICER is reviewed by HID’s clinical staff, who propose which criteria exceptions should be examined in more depth. The chosen therapeutic criteria exceptions are then processed and member profiles are created. DURBase is also used to conduct monthly reviews of the claims submitted to HID to update each member’s drug history.</p> <p>The information from the selected member profiles is used to create educational intervention packets and the packets are sent to the prescribers for each member. Cost effectiveness of each intervention is calculated, and along with prescriber feedback, is provided to the Department.</p> <p>The DADS component of RxExplorer is a user-friendly, browser-based data mining tool that combines quick and easy access to standard reports as well as robust ad hoc reporting tools. Using this, the Department user can perform a host of analytic tasks; for example, the user can readily view graphical representations of drug utilization trends.</p>
Profile Review (standard)	<p>HID’s clinical staff review member profiles for those members who have been selected as high-risk. Upon review of demographic, diagnostic, pharmacy and medical claims data, the profile reviewer can choose to send an educational mailing to the provider or recommend the member for the state lock-in program, when appropriate.</p>

North Dakota Department of Human Services Contract	
Service	Description
Academic Detailing and Educational Interventions	HID performs educational intervention by educating North Dakota Medicaid providers on the proper administration of medications in accordance with evidence based rules.
DUR/RDUR Board Support	HID understands that DUR Board meetings are critical to an effective DUR program and that many of the administrative activities of the Board often rely on a high-level clinical understanding. HID coordinates DUR Board Meetings to update therapeutic criteria, provider education, and interventions for retrospective and prospective DUR. In providing support to the North Dakota Medicaid DUR Board, HID offers valuable expertise, a firm understanding of related services, and clinical objectivity.
Provider Newsletters	HID offers additional provider education through the production of a quarterly newsletter, which is distributed to all North Dakota Medicaid providers. This newsletter includes information about recent Medicaid updates and general clinical information of value to providers.
Quarterly/Annual Reports and CMS Report Preparation	In order to assess the productivity of the Medicaid program, HID provides North Dakota Department of Human Services with quarterly and annual reports that include valuable summary information such as current Board activity and statistical analysis of cost savings, trends in usage, and intervention review. These reports often highlight the changes that could be made to improve quality of care and cost effectiveness. HID also supports the Department in their preparation of the annual CMS Report.
Rebate Administration and Dispute Resolution	HID's approach to providing Drug Rebate Dispute Resolution centers around the provision of an Account Pharmacist and clinical and administrative support team who work directly with drug manufacturers to review documentation of drug rebate calculations and resolve disputes associated with them. HID will receive new disputes from Purchasing Agency. Additionally, HID will work with manufacturers to identify currently outstanding disputes. Once disputes are identified, HID will work with Purchasing Agency and drug manufacturers, and utilize Purchasing Agency drug rebate data to determine the outcome of the disputes.
PA Help Desk	<p>Providers may submit requests to the PA Help Desk electronically using PAXpress or by fax, e-mail, U.S. mail, or over the telephone. PA Help Desk staff adjudicate the PA requests according to the criteria approved by the Department.</p> <p>HID's PA Help Desk functions are conducted in a paperless environment. Paperless processing significantly decreases turnaround time, enhancing the quality of member care as well as providing a more effective and efficient solution for HID's clients. In addition, this "EcoGreen" approach provides a more sensitive approach to the environment.</p> <p>All PA transactions managed through RxPert, as well as those managed through HID's PA Help Desk staff, are posted in the PA database. HID and authorized Department staff can access this data securely using an Internet browser to determine the status of any PA request.</p>

North Dakota Department of Human Services Contract	
Service	Description
Drug Lookup	HID created and maintains a Web portal that allows prescribers and dispensers to look up information about prescription drug coverage for the North Dakota Medicaid program Searches can be conducted using NDC, NDC/date, drug name and drug name/date. Prescribers and dispensers can then determine coverage status, pricing (EAC/MAC), prior authorization status, copay, and quantity limits. This has reduced the numbers of calls into the Department regarding reimbursement and coverage questions and improved adherence to North Dakota's PDL.

Contact Information for North Dakota Department of Human Services

Brendan Joyce, Pharm.D.
Pharmacy Services Administrator
ND Dept. of Human Services
600 E. Blvd. Ave., Dept. 325,
Bismarck, ND 58505
701-328-4023
bjoyce@nd.gov

2.3.4.2 Vendor must have demonstrated experience certifying (1) ePrescribing application with Surescripts.

HID meets this requirement. HID is certified as a Surescripts Solution Provider for all three ePrescribing functions: Prescription Benefit (including eligibility and formulary), Medication History, and Prescription Routing (including new, refill and mail-order).

HID understands that certification with Surescripts is not a one-time event. HID participates in monthly webinars with Surescripts to ensure that HID staff members are knowledgeable regarding the latest technological and regulatory developments. In addition, HID attends Surescripts Participants Workshops at least once a year. HID will attend the Surescripts Participant's Workshop in Minneapolis, November 1-3, 2011.

As part of the on-going commitment to maintain the certification with Surescripts, HID is in the final stages of the 5010 implementation and will be re-certifying with Surescripts on the most recent NCPDP standards in 2012. In addition, HID is taking steps to begin the process for certification of the electronic prescribing of controlled substances (EPCS). This includes Surescripts certification as well as DEA controlled audits to ensure the highest levels of system security and prescriber authentication.

Copies of HID's Surescripts certifications are provided as Appendix 3.

2.3.4.3 A list of projects and workloads currently scheduled.

HID works diligently to ensure our resources are scalable to meet the needs of our current and future clients, so that there is minimal impact on a client due to another client's implementation or contract enhancement. HID currently serves 17 Medicaid agencies with a variety of health care analytics and pharmacy support systems and services including Retrospective Drug Utilization Review, Prior Authorization, CWP, ePrescribing, Lock In, Academic Detailing, and Surveillance Utilization Review.

Current implementations include implementation of 2 projects for prior authorization and 3 for prescription drug monitoring. However, these projects have minimal impact on HID's ability to maintain the Clinical Web Portal, ePrescribing, and PAXpress tools because HID has assigned dedicated resources to managing the ongoing operations of these services already in place for the current contract. In addition, HID has already scheduled the work and resources necessary for the 5010 implementation later this year and Surescripts re-certification for the new NCPDP standards in 2012.

2.3.4.4 A timeline showing implementation of services.

Because HID currently provides MediWeb clinical web portal and WV ePrescribing services minimal implementation is necessary. HID will require approximately 50 hours to design and implement the annual survey. No other implementation activity will be necessary. A timeline detailing implementation activities is provided on page 20.

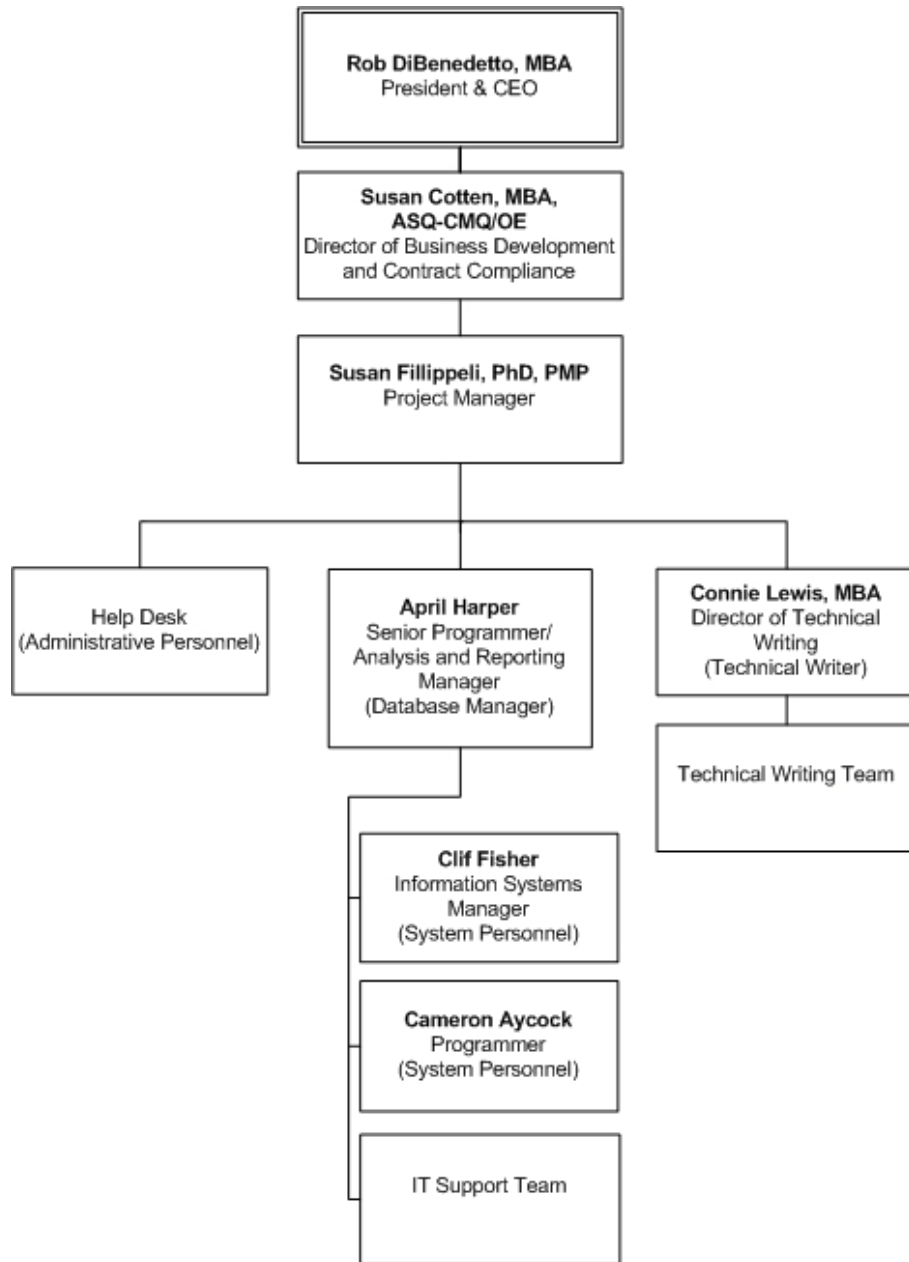
2.3.4.5 Proposed staff for the project including, at a minimum, a project manager, database manager, system personnel, technical writer and administrative personnel along with a functional organizational chart indicating the proposed project structure.

HID has all of the core competencies, knowledge, and experience necessary to continue to deliver a sophisticated, successful CWP for BMS. HID’s CWP team has expertise in a wide-range of fields, providing great support for the many aspects of a successful CWP solution. Almost all of HID’s CWP team members have served on the team since its inception in 2008.

HID proposes the following named key staff for professional and technical operations and support of this project:

Role	Staff Member
Corporate Oversight	Rob DiBenedetto, MBA – President and CEO
Contract Compliance	Susan Cotten, MBA, CMQ/OE – Director of Business Development and Contract Compliance
Project Manager	Susan Fillippeli, PhD, PMP – Project Manager
Database Manager	April Harper – Senior Programmer and Analysis and Reporting Manager
System Personnel	Clif Fisher – Information Systems Manager
System Personnel	Cameron Aycock – Software Engineer
Technical Writer	Connie Lewis, MBA – Director of Technical Writing

In addition to these named key staff, HID will provide ample professional administrative and technical support teams for the WV CWP project. The organization chart below illustrates the functional structure of the CWP team.



2.3.4.6 Job descriptions and resumes for the project manager, System Personnel and any other staff who will work on any part of this contract, specifying experience, relevant education and training

HID provides job descriptions for all named key staff below.

- **Rob DiBenedetto, MBA – Chief Executive Officer**, will provide overall supervision and leadership for the project team. Mr. DiBenedetto’s responsibilities include supervising day-to-day operations as well as long-term research and development activities. Mr. DiBenedetto will provide corporate management and support for the CWP project for the duration of the contract.
- **Susan Cotten, MBA, ASQ-CMQ/OE – Director of Business Development/Contract Compliance**, is responsible for ensuring all client deliverables are met for every HID contract. Ms. Cotten brings more than ten years of quality management and compliance experience to her work at HID. Ms. Cotten works closely with developers to ensure that project management and software development processes are in place and follow best practice guidelines. Ms. Cotten is directly involved with contractual compliance and deliverable tracking for all current contracts. Ms. Cotten will work directly with the Project Manager and IT team to ensure that all contractual deliverables are met for the duration of the contract.
- **Susan Fillippeli, PhD, PMP - Project Manager**, brings a broad array of experience in product business logic and project and account management to Health Information Designs. With a Ph.D. in Communication she has held faculty positions at the University of Alabama in Huntsville, The University of Puget Sound, and most recently, Auburn University. Dr. Fillippeli has five (5) years of experience in Medicaid and State health program and policy supervisory positions and five (5) years of experience configuring new products and software applications. She has served as Project and Project Manager and overseen the deployments of RxExplorer RDUR (Pennsylvania), RxPert AutoPA (West Virginia), Clinical Web Portal and ePrescribing (West Virginia), Cost of Dispensing Survey (Alabama) and RxSentry Prescription Drug Monitoring Program (Oregon), as well as coordinating new project developments for one of our clients in the private sector. Through her experience, she is able to stay informed on the current standards and trends in the healthcare industry, specifically regarding Medicaid programs. She will help to supervise the product business logic and BMS policies to ensure compliance throughout the life of the contract.
- **April Harper – Senior System Personnel/Analysis and Reporting Manager**, manages over 100 databases containing approximately five (5) billion claims. In her multi-faceted position, Ms. Harper plays a pivotal role in developing and implementing HID’s healthcare analytics systems. She designs the structure of each new database, loads the initial data, and creates the corresponding maintenance schedules and procedures. She then manages an experienced technical team responsible for executing data loads, performing maintenance and optimization, and troubleshooting customer issues. Ms. Harper developed the Clinical Web Portal and ePrescribing tools. Ms. Harper will support the WV CWP project for the duration of the contract.

- **Clif Fisher – Information Systems Manager**, is responsible for the day-to-day management of data coordination with fiscal agents and the state Medicaid and public health programs for which HID conducts pharmacy benefit management and disease management services. A significant part of this responsibility involves keeping the various network servers, hardware and software, and telecommunications systems needed for file transfer up and running and operating efficiently. Coupled with this operational responsibility, Mr. Fisher also performs ongoing technical support – assisting customers with data questions and technical issues and coordinating with other HID technical and development resources as necessary. Mr. Fisher will support the WV CWP project for the duration of the contract.
- **Cameron Aycock – Programmer**, is responsible for the development and maintenance of the clinical web portal system. Mr. Aycock has more than 14 years of software engineering and development experience, including more than ten (10) years experience assessing technical environment operations and processes, testing system functions and security features, writing file format conversions, developing new processes and systems, enhancing software packages and maintaining hardware. Mr. Aycock is responsible for developing and maintaining database applications, such as the clinical web portal and ePrescribing systems on the server side and maintenance of Progress database. Mr. Aycock performs ad hoc reporting on the clinical web portal and ePrescribing systems and manages the client data feed connections. Additionally, Mr. Aycock evaluates requests for new or modified program and system enhancements, including formulating a plan and outlining steps required for development, testing, and documentation of system modifications.
- **Connie Lewis, MBA – Director of Technical Writing**, has 21 years of experience in various aspects of the Information Technology field. She has extensive experience designing, writing, and publishing both online and hardcopy user documentation for commercial software projects and for training purposes. Ms. Lewis is committed to developing clear, usable, and user-friendly documentation and serves as a user advocate in each project she undertakes. She continues to oversee the customization of these documents for each client as well as the maintenance of these documents throughout the contract-life. Ms. Lewis has overseen documentation development and maintenance for more than 18 implementation projects, including the WV CWP (MediWeb) and ePrescribing (WVeScript). Ms. Lewis will provide support of all documentation development during the implementation phase of the contract and will be responsible for any and all updates to product documentation and communications for the WV CWP project for the duration of the contract.

Optional Services

The Vendor shall provide additional services to comply with externally driven changes to BMS programs and requirements, including any state or federal laws, rules and regulations. Services provided by the Vendor could include but not be limited to assistance with policy development, impact analysis, requirements definition and testing activities that require substantial subject matter expertise derived from experience in other states, other healthcare organizations or participation in federal activities. Provide implementation support as requested

HID understands that the needs and goals of Medicaid agencies, including BMS, are contingent upon federal and state laws, rules and regulations. With a keen eye to these relationships, HID understands that Medicaid agencies experience constant fluctuation based on policies and trends in the industry as well as politics. HID is proud of our nimble nature and our ability to provide steady and consistent support to our clients, including changes to their programs. HID will provide additional services to comply with any externally driven changes to BMS programs and requirements, including state or federal laws, rules, and regulations. HID will provide assistance in the following areas:

- Assistance with policy development
- Impact analysis
- Requirements definition
- Testing activities
- Subject matter expertise
- Participation in federal activities
- Implementation support, as requested

Additionally, in an effort to keep our clients on the forefront of industry trends and needs, HID recommends the following optional services enhancements to the current CWP to increase usability and efficient work flow for prescribers through implementation of

1. Sub-accounts for prescriber staff members
2. Ability to submit multiple prescriptions for a single member at one time

Surescripts requires that a member's first name, last name, gender, date of birth, street address, city, and zip code be entered into the system for each prescription. Modification 1 will allow Prescribers enrolled in WVeScript to apply for PIN numbers that are assigned to specific individuals in the prescriber's office. HID can assign a user permission for staff under the prescriber's user ID so that all ePrescribing activities can be audited. HID would create a new permissions category allowing designated staff to perform data entry functions only. The prescriber's PIN would be required to submit the prescription electronically. Based on recent feedback from WV prescribers, this system modification will result in increased system usage.

Even with staff performing the data entry function, prescribers have provided feedback that they often write more than one prescription for each member. The current ePrescribing system, as certified by Surescripts, requires each prescription to begin with

the eligibility check, which means that the member's information must be entered for each prescription the prescriber wants to write. Modification 2 would allow prescribers to send multiple prescriptions for a single member without re-entering the required member information described above.

Both modification 1 and modification 2 will require additional development and re-certification of the ePrescribing system by Surescripts.

Appendix 2 – Purchasing Affidavit

Introduction

HID provides a completed and signed Purchasing Affidavit on the following page.

STATE OF WEST VIRGINIA
Purchasing Division**PURCHASING AFFIDAVIT**

West Virginia Code §5A-3-10a states: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

EXCEPTION: The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

Under penalty of law for false swearing (**West Virginia Code §61-5-3**), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

WITNESS THE FOLLOWING SIGNATUREVendor's Name: G. Robert DiBenedetto, Jr./Health Information Designs, Inc.Authorized Signature: *G. Robert DiBenedetto, Jr.* Date: 10/19/11State of AlabamaCounty of Lee, to-wit:Taken, subscribed, and sworn to before me this 19th day of October, 2011.My Commission expires May 14, 2013.

AFFIX SEAL HERE

NOTARY PUBLIC

Brinda Pulinsett

Appendix 3 – Surescripts Certifications

Introduction

HID provides copies of our three (3) current Surescripts Certifications on the following pages.

Certification is hereby granted to:

Health Information Designs

eScript v 1.0

for successful completion of:

- 1) Message: NewRx to Mail Order
- 2) Surescripts XML Implementation Guide v4.21

Granted on: July 20th, 2010

Rossalyn Bruce, Certification Project Manager

Grantor Name and Title



Certification is hereby granted to:

Health Information Designs

eScript v 1.0

for successful completion of:

1. Messages: NewRx, RxRenewal, STATUS, ERROR;
2. Surescripts XML Implementation Guide V4.20;
3. Connectivity direct to Surescripts via HTTPS;
4. Directories 4.0

Granted on: July 20th, 2010

Rossalyn Bruce, Certification Project Manager

Grantor Name and Title



Certification is hereby granted to:

Health Information Designs

eScript v 1.0

for successful completion of:

- 1) X12N 0040401X92A1 Eligibility transactions (270/271)
- 2) Prescription History (RXHREQ/RXHRES)
- 3) NCPDP Formulary and Benefit Load version 1.0
- 4) Surescripts ePrescribing Activity Report version 1.0
- 5) Surescripts Application Certification Requirements version 1.2

Granted on: August 23rd, 2010

Rossalyn Bruce, Certification Project Manager

Grantor Name and Title



Appendix 4 – CWP User’s Guide

Introduction

HID provides an excerpt of the most current *MediWeb Clinical Web Portal User’s Guide* on the following pages.

Pharmacist and Prescriber User's Guide

v1.1

**West Virginia Bureau for Medical Services
MediWeb Portal**



September 2010

This page intentionally left blank.

Contents

1	Document Overview	1
	Purpose and Contents	1
	Formatting Conventions	1
2	System Overview	3
	About This Chapter	3
	About MediWeb	3
	Patient and Pharmacy Claims History.....	3
	Electronic Prior Authorization Requests.....	3
3	Patient and Pharmacy Claims History	5
	About This Chapter	5
	Logging On To MediWeb	5
	Search	6
	Patient Lookup	6
	Diagnosis History	8
	Pharmacy History	9
	Hospital Procedure History	10
	Non-Hospital Procedure History	11
	Details	12
4	PAXpress	15
	About This Chapter	15
	About PAXpress.....	15
	Using PAXpress.....	16
5	Using eScript for ePrescribing	19
	About This Chapter	19
	About ePrescribing.....	19
	Using eScript.....	19
	Log On to eScript and View the Request Queue	19
	Submit an Eligibility Request	20
	Manage Refill Requests	23
	Generate a New Prescription for a Denied Refill Request.....	25
	View Prescription Status Information	26
6	Account Management and Forms	29
	About This Chapter	29
	Manage Account	29
	Forms.....	30
	BMS MediWeb Portal Access Request Form.....	30
	Authorization to Disclose Personal Health Information Form	30
	Notice to Medicaid Members	30

7	Assistance and Support	31
	Technical Assistance	31
	Administrative Assistance	31
8	Document Information	33
	Formatting Conventions	33
	Version History.....	34
	Change Log	34

List of Tables

Table 1 - Diagnosis History Window Field Descriptions	9
Table 2 - Pharmacy History Window Field Descriptions	10
Table 3 - Hospital Procedure History Window Field Descriptions	11
Table 4 - Non-Hospital Procedure History Window Field Descriptions	12
Table 5 - Details Window Field Descriptions	13
Table 6 - Prior Authorization Request Forms	15
Table 7 - PA Form Navigation	17
Table 8 - Prescription Status Values	20
Table 9 - Prescription Window Field Descriptions	22
Table 10 - Pharmacy Window Field Descriptions	23
Table 11 - Generate New Prescription Window Field Descriptions	26
Table 12 - Text Formats	33
Table 13 - Document Version History	34
Table 14 - Document Change Log	34

This page intentionally left blank.

1 Document Overview

Purpose and Contents

The *MediWeb Pharmacist and Prescriber User's Guide* serves as a guide for West Virginia pharmacists and prescribers using the West Virginia BMS MediWeb Portal (hereinafter referred to as "MediWeb") to view patient and pharmacy claims history.

This guide also includes information about using PAXpress, the portion of MediWeb that provides pharmacists and prescribers the ability to submit online prior authorization (PA) requests.

Formatting Conventions

The following tables describe the formatting conventions used in this document:

Window or Web Page Element	Format
Execution buttons	Begin with uppercase letters and appear in bold type, for example, "Click Continue ."
Windows	Begin with uppercase letters and appear in bold type, for example, "Close the Patient Summary window."
Icons	Begin with uppercase letters and appear in bold type, for example, "Click the Help icon."

Format	Used to Designate...
Bold	References to execution buttons, windows, file names, menus, icons, or options
<i>Italic</i>	References to external documents
<i>Bold Italic</i>	Emphasized text, for example, <i>Do not close this window.</i>
<i>Times New Roman Italic</i>	Text you must type in a field or window, for example, <i>01/01/10.</i>
Blue text	Hyperlinks to other sections of this document or websites

This page intentionally left blank.

2 System Overview

About This Chapter

This chapter provides an overview of the MediWeb application.

About MediWeb

MediWeb allows you to access your patients' medical and pharmacy claims history, and electronically submit prior authorization (PA) requests.

Important note: Before using MediWeb, you must complete and submit a Bureau for Medical Services (BMS) MediWeb Portal Access Request Form. This form, along with instructions for completion, is available on the West Virginia Department of Health and Human Resources Web site at: <http://www.wvdhhr.org/bms> and is also provided in [Appendix A](#) of this document.

Patient and Pharmacy Claims History

After completing a MediWeb access request form and receiving approval from the BMS, you can log on to MediWeb and access up to 24 months of the following types of patient medical and pharmacy claims history:

- A summary of all patient pharmacy, inpatient, outpatient, emergency room, and non-hospital claims
- Diagnosis history
- Pharmacy history
- Hospital procedure history
- Non-hospital procedure history

Electronic Prior Authorization Requests

A PA request is required when you write or receive a prescription for a drug that is not on the preferred drug list, or if a PA request is required for clinical reasons. Via PAXpress within MediWeb, you have the ability to create and electronically submit PA requests directly to the Rational Drug Therapy Program (RDTP) Help Desk.

The following forms are currently available for PA requests; however, forms will be added as prior authorization requirements are updated:

- COX-2 Inhibitor (COX-1 Sparing) Brand Name NSAID Approval
- Linezolid (Zyvox©) Prior Authorization
- Modafinil Prior Authorization
- Neuraminidase Inhibitor Prior Approval
- Palivizumab Prior Authorization Request

- Preferred Drug List Exemption Request
- Request for Exemption from Criteria
- Risperidone Long Acting Injection Exemption Request

For the most current list of forms, visit the West Virginia Department of Health and Human Resources Web site at: <http://www.wvdhhr.org/bms>.

3 Patient and Pharmacy Claims History

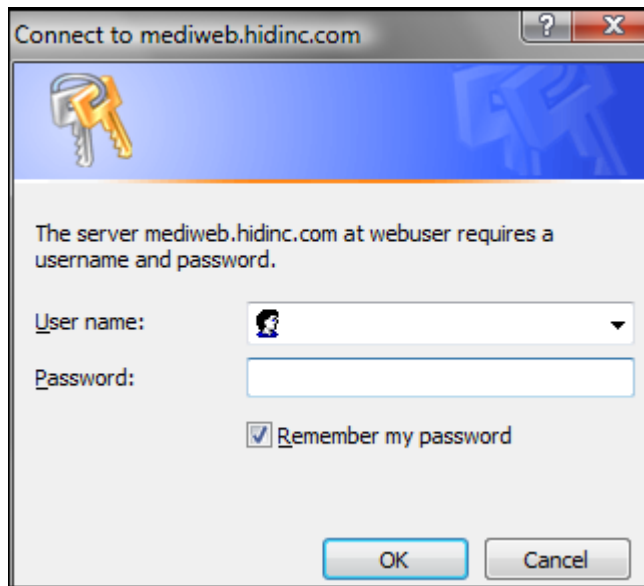
About This Chapter

This chapter contains information about how to log on to and use MediWeb to view patient and pharmacy claims history information.

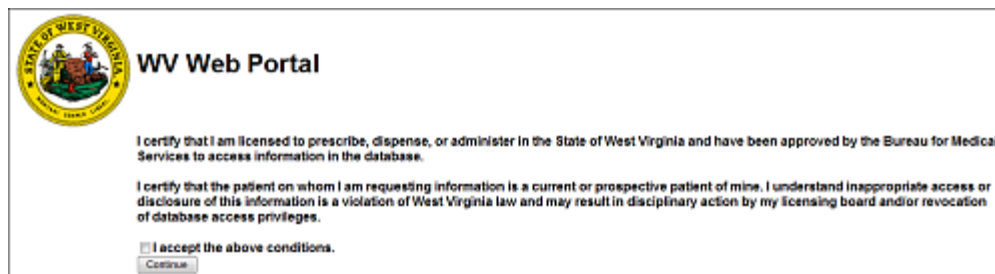
Logging On To MediWeb

Perform the following steps to log on to MediWeb:

- 1 Open an Internet browser window and type the following URL in the address bar: <https://mediweb.hidinc.com>. A window similar to the following is displayed:

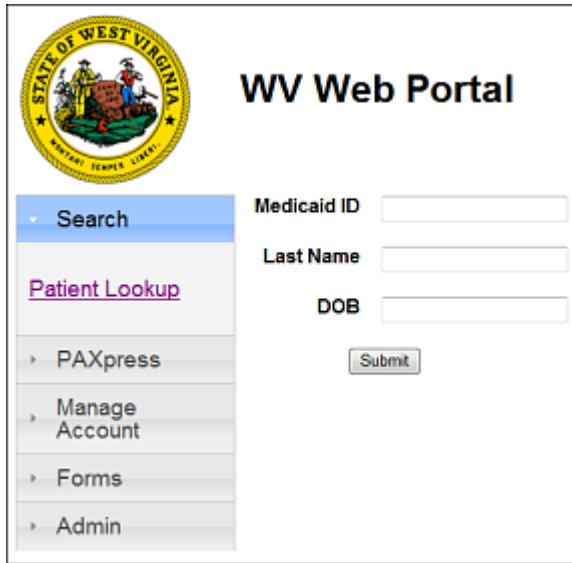


- 2 Type your user name in the **User name** field.
- 3 Type your password in the **Password** field.
- 4 Click **OK**. A window similar to the following is displayed:



- 5 Review the agreement, and then click the **I accept the above conditions** check box.

A window similar to the following is displayed:



Before accessing patient information, you must provide the following before clicking **Submit**:

- Patient's Medicaid ID number
- Patient's last name (as it appears on the patient's Medicaid ID card)
- Patient's date of birth (as it appears on the patient's Medicaid ID card)

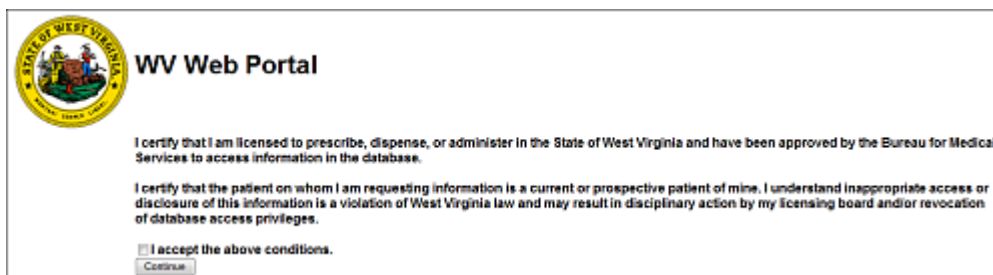
Search

The Search function allows you to search for a specific patient using the **Patient Lookup** function. Once you have located the patient, you may view patient diagnosis, pharmacy, hospital procedure, and non-hospital procedure information. These functions are described in the following topics.

Patient Lookup

Perform the following steps to search for a patient:

- 1 Log on to MediWeb. For more information, see "[Logging On To MediWeb.](#)"
- 2 Click **Search**, and then click **Patient Lookup**. The following window is displayed:



- 3 Select the **I accept the above conditions** check box to certify your request, and then click **Continue**. The following window is displayed:

- 4 Type the patient's Medicaid ID number in the **Medicaid ID** field.
- 5 Type the patient's last name (as it appears on the patient's Medicaid ID card) in the **Last Name** field.
- 6 Type the patient's date of birth (as it appears on the patient's Medicaid ID card), using the *mm/dd/yyyy* format, in the **DOB** field.
- 7 Click **Submit**. The **Patient Summary** window is displayed:

Date of Service	Rx Number	GCN	Drug Description	Strength	Qty	Days	Pharmacy Number	Prescriber Number
08/11/09	6961596	12869	NEXIUM	40MG	30	30	0141834000	1295791177
08/03/09	7264674	35793	NAPROXEN	500MG	60	30	0227799018	1295791177
08/03/09	4506522	70339	HYDROCODONE, ACETAMINOPHEN	7.5-500MG	40	10	0227799018	1295791177

The **Patient Summary** window displays a summary of all pharmacy claims information for the selected patient.

The following topics describe how to access and view the information displayed on each of the tabs available on the **Patient Summary** window:

- o [Diagnosis History](#)
- o [Pharmacy History](#)
- o [Hospital Procedure History](#)
- o [Non-Hospital Procedure History](#)
- o [Details](#)

Diagnosis History

This window displays patient diagnosis information for the currently-selected patient for the most recent 60 days.

- 1 Log on to MediWeb. For more information, see the "[Logging On To MediWeb](#)" and "[Patient Lookup](#)" topics.
- 2 On the **Patient Summary** window, click the **Diagnosis History** tab. A window similar to the following is displayed:

Search	Patient Summary	Diagnosis History	Pharmacy History	Hospital Procedure History	Non-Hospital Procedure History	Details
Patient Lookup	Date Range: 01/01/09 to 06/19/09 Submit					
PAXpress	Diagnosis History					
Manage Account	BOY WILSON					
Forms	DOB: 09/03/83					
Admin	Sex: Male					
	Current Date of Service	Diagnosis	ICD9 Code Description	First Date of Service	Physician Number	
	02/24/09	4254	OTH PRIMARY CARDIOMYOPATHIES	02/24/09	0011814000	
	02/15/09	8831	OPEN WOUND FINGER COMPLICATED	02/15/09	0001342003	
	02/15/09	9594	OTH UNS INJURY HAND EX FINGER	02/15/09	0001342003	
	01/23/09	4254	OTH PRIMARY CARDIOMYOPATHIES	01/23/09	0011814000	
	01/23/09	27800	OBESITY UNSPECIFIED	01/23/09	0011814000	
	01/14/09	V4502	IMPLANTABLE CARDIAC DEFIB IN SITU	01/14/09	0010400000	
	01/09/09	4254	OTH PRIMARY CARDIOMYOPATHIES	01/09/09	0011814000	

Note: The system displays the most recent 60 days of claims history. To view claims for another time frame, type start and end dates in the **Date Range** fields (using the *mm/yy/yyyy* format), and then click **Submit**.

The following table provides information about each of the fields displayed on this window:

Field	Description
Current Date of Service	Most recent date the diagnosis was submitted
Diagnosis	ICD-9 code number
ICD9 Code Description	Name and/or description of the submitted diagnosis
First Date of Service	First date that the diagnosis was submitted

Appendix 5 – ePrescribing User’s Guide

Introduction

HID provides an excerpt of the *ePrescribing User’s Guide* on the following pages.

eScript User's Guide for Prescribers

**West Virginia Bureau for Medical Services
MediWeb Portal
v1.0**



September 2010

This page intentionally left blank.

Contents

1	Using eScript for ePrescribing	1
	About This Document.....	1
	About ePrescribing.....	1
	Using eScript.....	1
	Log On to eScript and View the Request Queue	1
	Submit an Eligibility Request	3
	Manage Refill Requests	6
	Generate a New Prescription for a Denied Refill Request.....	8
	View Prescription Status Information	9
2	Assistance and Support	11
	Technical Assistance	11
	Administrative Assistance	11
3	Document Information	13

This page intentionally left blank.

1 Using eScript for ePrescribing

About This Document

This document explains how to use the MediWeb ePrescribing function (hereinafter referred to as "eScript") to electronically generate prescriptions.

About ePrescribing

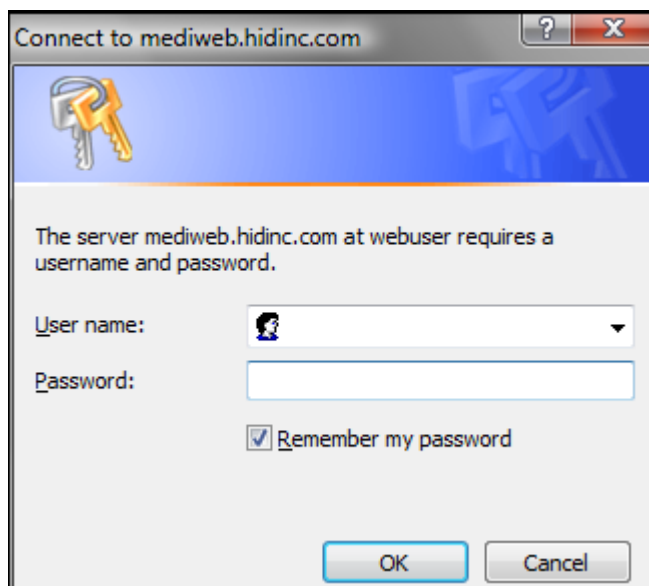
Electronic prescribing ("ePrescribing") is the process of using an automated data entry and transmission system to generate a prescription in place of writing a prescription by hand. ePrescribing is preferable because it increases prescription accuracy, reduces medical errors and lowers healthcare costs. Within the MediWeb Portal, eScript offers providers one-stop access for patient claims and medical history and creating and sending electronic prescriptions to the pharmacy designated by the patient.

eScript securely captures prescription information and electronic signatures, and transmits the data directly to the pharmacy selected by the patient or through the interface with SureScripts[®], a third-party ePrescribing network.

Using eScript

Log On to eScript and View the Request Queue

- 1 Open an Internet browser window and type the following URL in the address bar: <https://mediweb.hidinc.com>. A window similar to the following is displayed:



- 2 Type your user name in the **User name** field.
- 3 Type your password in the **Password** field.
- 4 Click **OK**. A window similar to the following is displayed:

WV Web Portal

I certify that I am licensed to prescribe, dispense, or administer in the State of West Virginia and have been approved by the Bureau for Medical Services to access information in the database.

I certify that the patient on whom I am requesting information is a current or prospective patient of mine. I understand inappropriate access or disclosure of this information is a violation of West Virginia law and may result in disciplinary action by my licensing board and/or revocation of database access privileges.

I accept the above conditions.

Continue

- 5 Review the agreement, and then click the **I accept the above conditions** check box. The MediWeb Portal home page is displayed.

Note: If requests for prescription refills exist, an alert message is displayed on the MediWeb home page that includes the number of refill requests awaiting determination via eScript. See "[Manage Refill Requests](#)" for more information.

- 6 Click **ePrescribing** on the MediWeb home page.
- 7 Click **eScript**. The following window is displayed:

Enter your pin code to begin eprescribing.

Pin

Submit

- 8 Type your PIN in the **Pin** field.

Note: Your PIN was created and sent to you via e-mail when you created your MediWeb account.

The **Request Queue** window is displayed:

Report Filter:

PENDING RESPONSE ERROR HISTORY ROUTING COMPLETE

BEGIN DATE: 09/15/10 END DATE: 09/16/10

NAME SEARCH:

Submit Filter Changes

Request Queue

Eligibility Request Manage Refills (19 New) Prescription Status

Request Status	Date-Time	Patient Name	Address/City/St	Patient Date of Birth	Dependants
HISTORYRESPONSE	09/16/10 - 9:17 AM	Cross, David	6785 Laughalot Lane Trenton NJ	09/10/72	

Appendix 6 – Resumes

Introduction

HID provides resumes of named key staff on the following pages.

Professional Summary

As President and Chief Executive Officer (CEO) of HID, Rob DiBenedetto manages approximately 150 employees providing health analytics systems and services to Medicaid and public health programs in 27 states. Mr. DiBenedetto's responsibilities include supervising day-to-day operations as well as long-term research and development activities.

Mr. DiBenedetto manages each new project with a keen eye toward satisfying the customer's expectations. This involves understanding the customer's business domain and procedures as well as the technical and product requirements. With complex projects, this also involves managing large teams of clinical professionals, technical specialists, subcontractors, and customer liaisons using the PMBOK® Guide methodology and best practices. Although some of the projects he oversees are extremely large in scope, Mr. DiBenedetto deals with each new implementation – whether large or small – with the same attention to detail and focus on meeting and exceeding the customer's expectations.

Mr. DiBenedetto has supervised the implementation of a wide variety of systems and programs for the 27 state Medicaid and public health programs that HID serves, including prescription drug monitoring, data analytics and business intelligence, retrospective drug utilization review, prior authorization, lock-in, preferred drug lists, controlled substance reporting, and disease management. Mr. DiBenedetto takes a hands-on approach to project management. Rather than delegating the management of tasks and issues, Mr. DiBenedetto remains involved until he knows that tasks are completed or issues have reached resolution. As CEO, he also oversees each program's continuing operation and supervises the account managers who work directly with the programs.

With more than 14 years managing systems development and implementation and a business education focused in marketing and finance, Mr. DiBenedetto is well equipped to deal with the myriad of activities involved in operations and project management. In his tenure at HID, he has gained extensive insight into the challenges facing state agencies and the needs of health care providers and beneficiaries, as well as specific experience guiding the analysis, programming, and operational activities necessary to provide systems and programs that serve these groups.

Significant Facts

- Rob DiBenedetto's latest effort was the successful implementation of a large-scale health analytics and reporting system. The project, which he managed using the PMBOK methodology, covered 25 man-years.
- In the last five years, Health Information Designs, Inc. has grown at an average rate of 25 percent per year. Mr. DiBenedetto's careful supervision of company operations has been especially significant during this rapid growth period.

Professional Experience

HEALTH INFORMATION DESIGNS, INC., AUBURN, ALABAMA
PRESIDENT AND CHIEF EXECUTIVE OFFICER, 2010–PRESENT
CHIEF OPERATING OFFICER, 1997-2010

- Oversees all staff and operations
- Determines and implements organizational policies and procedures
- Provides pricing and staffing information for proposals
- Manages new projects from the proposal stage, through implementation, to production
- Regularly communicates with customers to determine status and resolve issues
- Directly supervises all HID account managers
- Works closely with the HID CEO on operational issues and strategic direction
- Sponsors ongoing education of HID clinical and technical professionals
- Attends national and regional industry meetings to determine strategic landscape, customer challenges, and industry developments
- Researches opportunities for new system or service offerings, and improvements to existing systems or services

PFIZER INC., NEW YORK, NY
DIRECTOR OF ACCOUNTS, SOUTHERN UNITED STATES, 1995-1997

- Analyzed opportunities to position product brands
- Analyzed market space for new opportunities
- Supervised account managers in field
- Worked with account managers to build name recognition for branded products

Education/Certifications

MBA, Finance, 1995, University of Alabama, Tuscaloosa, AL

BS, Marketing, 1991, Auburn University, Auburn, AL

References

Brendan Joyce, PharmD
Administrator, Pharmacy Services
North Dakota Department of Human Services
600 East Boulevard Avenue, Dept. 325
Bismarck, ND 58505
(701) 328-4023
bjoyce@nd.gov

Lydia Kosinski, RPh
DUR-SUR Manager
NY Department of Health
OMM-DMFC&PI-BIE-RAUR
Suite 222-224
800 N. Pearl Street
Albany, NY 12204
(518) 474-6866
lj02@omig.state.ny.us

David Mark Carpenter, PhD
Department of Mathematics and Statistics
College of Science and Mathematics
Auburn University
Auburn, AL 36830
(334) 844-3620
carpediem@auburn.edu

Professional Summary

Susan Cotten brings ten years of quality management and compliance experience to her work at Health Information Designs. At HID, Ms. Cotten works closely with developers to ensure that project management and software development processes are in place and follow best practice guidelines. Ms. Cotten also serves as a Quality Control and Compliance Manager. In this capacity, she has developed and maintained a process to ensure compliance with the terms and conditions of HID contracts.

After receiving her MBA in 1997, Ms. Cotten started her career in logistics at Allyn International Services, Inc. Working for Allyn's client General Electric (GE) Energy Services, Ms. Cotten managed a team of logistics specialists with responsibility for managing transportation and shipment schedules and ensuring that deliveries were completed on time. From this position, Ms. Cotten rapidly progressed to manager of Allyn's domestic logistics operations, and then to manager of Allyn's European Pole operations. Promoted again in 2003, Ms. Cotten assumed responsibility for all of Allyn's international logistics operations for GE Energy, managing operations in Europe, Asia, South America, and Africa.

Ms. Cotten is an expert in process development. With ultimate responsibility for ensuring that measurables were met, one of Ms. Cotten's primary responsibilities was to create and document organizational processes and train her team on these processes. She was also responsible for developing processes for new international offices, which had to mirror the operations performed in the United States, yet take into account differences such as cultural practices, taxes, and costs.

In terms of process improvement and oversight, Ms. Cotten worked closely with GE's Center of Excellence (COE), using the Six Sigma methodology to analyze and improve business processes. Each COE unit was assigned a Six Sigma black belt (certified expert) who was responsible for cost savings, metrics, monitoring and tracking information. As new black belts were assigned by GE to work with her team, Ms. Cotten was responsible for training them on the logistics center-of-excellence business processes.

With a total commitment to excellence and process compliance, Ms. Cotten has ensured on-time deliveries, service quality and significant cost savings for her clients.

Key Competencies

- Quality Assurance experience to include seven years managing operational workflows utilizing Six Sigma methodology.
- Extensive experience in defining critical to quality processes, measuring to goal, analyzing proper fit, and controlling improvements in high volume processing environments.
- Significant client service background to include metric and report creation, cost containment, efficiency/productivity analysis, and continuous improvement protocols.
- Key responsibilities in financial audits, productivity improvements, and overall contract compliance.

Professional Experience

HEALTH INFORMATION DESIGNS, INC., AUBURN, ALABAMA
DIRECTOR OF BUSINESS DEVELOPMENT/CONTRACT COMPLIANCE, 2010–PRESENT
CONTRACT PROPOSAL SPECIALIST/CONTRACT COMPLIANCE, 2009-2010

- Develop Internal pricing models
- Develop internal quality control methodologies
- Create and manage internal process mapping protocols
- Manage all new proposal development
- Manage all business development activities
- Create and implement tracking of quality performance measurables per contract
- Monitor cost savings reporting

INDEPENDENT CONTRACTOR, AUBURN, ALABAMA
BUSINESS DEVELOPMENT MANAGER, 2005–2007

- Managed business development for Southeast U.S.
- Provided Logistics, Supply Chain, Tax Management, Customs Compliance, and Quality & Process reengineering services for multiple clients
- Led marketing and implementation strategies for regional area

ALLYN INTERNATIONAL SERVICES, INC., FORT MYERS, FL
OPERATIONS MANAGER, 2003–2005

- Managed in house team of 50+ specialists to include oversight for global call center and 4000 US domestic and international freight movements per month.
- Responsible for global client satisfaction and fulfillment of logistics CTQ's for customer jobsite and plant production schedules.
- Key tasks involved cost savings analysis, monitoring data for goal benchmarks, meeting all quality assurance measurable, project management responsibilities for global sourcing group, and creation of savings/ on-time metrics for multiple clients
- Software development project team for in house logistics management application
- Participation in global sourcing and contract negotiations
- Contract sourcing responsibility to include cost saving reporting, metric creation, and performance of all contract quality measurables.

INTERNATIONAL TEAM MANAGER, 2001–2003

- Assisted in establishment of European, South American and Asian logistics offices to include staffing, training, and process management.
- Responsible for all inbound US freight moves for GE Energy, GE Energy Products Europe, GE Energy Services, and GE Infrastructure.
- Created and monitored Customs Compliance metrics for all international freight moves to include on time delivery, cost savings, liquidated damage tracking, and vendor compliance.
- Key client contact for GE Logistics Center of Excellence.
- Contract sourcing responsibility to include cost saving reporting, metric creation, and performance of all contract quality measurables.

Susan Cotten, MBA, ASQ-CQM/OE Director of Business Development/ Contract Compliance Manager

EUROPEAN POLE MANAGER, 2000–2001

- Set up responsibilities for European headquarter office in Prague, Czech Republic to include training and process management.
- Creation of all logistics tracking report specifications for Oracle based software.
- Responsible for all inbound freight to US from Europe.
- Contract sourcing responsibility to include cost saving reporting, metric creation, and performance of all contract quality measurables.

LOGISTICS SPECIALIST/TEAM LEADER, 1998–2000

- Provided logistics consulting/supply chain management services for GE Energy Services US.
- Developed and implemented standardized operational processes for global offices in Europe, Asia, and South America
- Performed key responsibilities to include financial and operational analysis, fulfillment of client Critical-to-Quality elements, and high level issue resolution.
- Contract sourcing responsibility to include cost saving reporting, metric creation, and performance of all contract quality measurables.

Technical Competencies

- MS Office Suite 2000-2007, including Microsoft Project

Education/Certifications

- MBA, International Business and Marketing , 1997, University of South Florida
- BA, International Studies and Governmental Affairs, 1993, University of South Florida
- Certified Manager of Quality/Organizational Excellence (CMQ/OE), American Society for Quality, 2011

Professional Affiliations

- Member, American Society for Quality (ASQ), 2010

References

Allen Trevett
Allyn International Services, Inc.
13391 McGregor Blvd.
Fort Myers, FL 33919
(239) 489-9900, x 1200

Susan Cotten, MBA, ASQ-CQM/OE Director of Business Development/
Contract Compliance Manager

Kristin Pulling
G.E. Energy
1 River Road
Schenectady, NY 12345
(518) 385-7140

Lawrence Casola
Senior Contracts Analyst
DHL Express, USA
(859) 620-9711
larry.casola@gmail.com

Professional Summary

Susan Fillippeli brings a broad array of experience in product business logic and project and account management to Health Information Designs. With a Ph.D. in Communication she has held faculty positions at the University of Alabama in Huntsville, The University of Puget Sound, and most recently, Auburn University.

Dr. Fillippeli has five (5) years of experience in Medicaid and State health program and policy supervisory positions and five (5) years of experience configuring new products and software applications. She served as Project Manager for the Alabama Medicaid Cost of Dispensing Survey and was instrumental in the implementation of the survey and reporting. She has also served as Project and Account Manager and oversaw the deployments for HID's implementations for RxExplorer (RDUR-Pennsylvania), RxPert (Auto PA), Clinical Web Portal and ePrescribing (West Virginia), and RxSentry (PDMP-Oregon), as well as coordinating new project developments for one of our clients in the private sector, PMSI. Through her experience, she is able to stay informed on the current standards and trends in the healthcare industry, specifically regarding Medicaid programs. She will help to supervise the product business logic and DMS policies to ensure compliance throughout the life of the contract.

As the Communication Specialist for HDI Solutions, Inc. and Health Information Designs, Inc., Dr. Fillippeli is responsible for all of the internal and external communication functions for both companies. Her duties include the production of company newsletters, promotional and marketing materials, press releases, communication plans, web site content, as well as assisting in developing content for proposals and bids. Dr. Fillippeli first began working with HID and HDI as a consultant in 2003, but was brought aboard full time in February of 2006.

In 2004 Dr. Fillippeli was appointed by Governor Bob Riley to serve on the Alabama Women's Commission. Serving as Chairman of the 2005 "Women's Day at the Capitol," Dr. Fillippeli spearheaded an effort by the Commission to raise \$10,000 to provide grant money for housing workshops that enabled low income women in underserved areas of Alabama to learn the skills and purchase materials to make critical repairs to their homes. Governor Riley reappointed Dr. Fillippeli to the Commission in 2008 and she was elected Chairman in January, 2009. Under her leadership, the Alabama Women's Commission is currently engaged in a campaign to raise awareness of and provide resource materials for women in Alabama suffering from post partum depression. This campaign is targeted toward providers, community resource organizations and women in Alabama with children under age one.

Significant Facts

- Dr. Fillippeli was certified as a Project Management Professional (PMP) by the Project Management Institute in February, 2010.
- Dr. Fillippeli has served as Project Manager for six (6) separate HID product solutions.
- Dr. Fillippeli serves as an adjunct faculty member of the Auburn University Department of Communication and Journalism.
- Dr. Fillippeli was appointed by Governor Bob Riley to the Alabama Women's Commission in 2004. Governor Riley reappointed her to this position in 2007. She was elected Chairman in January, 2009.

Professional Experience

HEALTH INFORMATION DESIGNS, INC., AUBURN, ALABAMA

PROJECT MANAGER AND COMMUNICATION SPECIALIST, FEBRUARY 2006–PRESENT

- Serves as Project Manager for RxExplorer (Pennsylvania), RxPert (Auto PA), Clinical Web Portal, and ePrescribing implementations (West Virginia), Alabama Medicaid Cost of Dispensing Survey as well as coordinating new project development one of our clients in the private sector, PMSI. Specific duties include responsibility for all aspects of project management including initiation, planning, execution, monitoring and closing. As a Project/Account Manager, Dr. Fillipeli has developed a reputation for creating a strong communication rapport with clients and stakeholders that translates into the successful achievement of project objectives. In addition, Dr. Fillipeli is involved in the design and development of advertising and promotional materials, press releases, Web content, employee newsletter, production of training and user manuals for clients as well as working as part of proposal/bid writing team for HDI Solutions, Inc. and Health Information Designs, Inc.

AUBURN UNIVERSITY, AUBURN, ALABAMA

ADJUNCT INSTRUCTOR, 2003–PRESENT

- Courses taught: Political Communication, Communication Strategies in Social Movements, Special topics: Presidential Campaign Rhetoric (Senior-level courses)

PHRONESIS CONSULTING, AUBURN, ALABAMA

OWNER AND FOUNDER, 2001–PRESENT

- Consulting practice working with corporate clients and political candidates on designing and implementing effective communication strategies. Partial list of clients include HDI Solutions, Inc., Health Information Designs, Inc., Emergency Response Training Systems, Inc., Auburn University School of Pharmacy, Campaign for Alabama, Governor Bob Riley, Alabama Treasurer Kay Ivey, Judges Tommy Bryan and Terri Thomas, Alabama Court of Civil Appeals, Judge Pam Baschab, Alabama Court of Criminal Appeals, and Alabama House Minority Leader Mike Hubbard.

AUBURN UNIVERSITY, AUBURN, ALABAMA

ASSISTANT PROFESSOR, 1994–2001

- Courses taught: Advanced Public Speaking, Persuasion, Business and Professional Speaking, Speechwriting, Political Communication, Communication and Social Movements, Graduate level: Rhetorical Theory and Criticism, Qualitative Research methods.

THE UNIVERSITY OF PUGET SOUND, TACOMA, WASHINGTON

VISITING ASSISTANT PROFESSOR, 1993–1994

- Courses taught: Public Speaking, Business and Professional Speaking, Rhetorical Theory and Criticism, Media Criticism

THE UNIVERSITY OF ALABAMA AT HUNTSVILLE, HUNTSVILLE, ALABAMA

INSTRUCTOR/ASSISTANT PROFESSOR, 1990–1993

- Courses taught: Public Speaking, Rhetorical Theory and Criticism, Persuasion, Communication Theory

Education/Certifications

PhD, Communication Studies, 1993, University of Iowa, Iowa City, IA
MA, Communication Studies, 1985, University of Georgia, Athens, GA
BS, Communication Arts, 1980, Appalachian State University, Boone, NC

Technical Competencies

- Systems and Databases
Microsoft Office, Microsoft Project, Microsoft SharePoint, HTML, Adobe Creative Suite

Community Leadership

Vice Chairman, Alabama Women's Commission. Appointed by Governor Bob Riley in 2003 and reappointed in 2007.

Chairman, Third Congressional District, Alabama Republican Party (third elected term).
(member, ALGOP Steering Committee.)

References

Vicki Cunningham, RPH
Drug Utilization Review Coordinator
West Virginia Department of Health and
Human Services
Bureau for Medical Services
350 Capitol Street, Room 251
Charleston, WV 25301
Phone 304.558.6541
FAX 304.558.1542
Vicki.m.cunningham@wv.gov

Kelli Littlejohn, RPh, PharmD
Director, Pharmacy Services
Alabama Medicaid Agency
501 Dexter Avenue
PO Box 5624
Montgomery, AL 36103-5624
Phone 334.353.4525
Fax 334.353.5623
Kelli.littlejohn@medicaid.alabama.gov

Sara Drake, RPh
Pharmacy Program Manager
Minnesota Department of Human Services
P.O. Box 64984
St. Paul, MN 55164-0984
(651) 431-2504
sara.j.drake@state.mn.us

Professional Summary

As the Senior Programmer and Analysis and Reporting Manager for HID, April Harper manages over 100 databases containing approximately five (5) billion claims and oversees analysis and reporting operations making use of data stored in these databases. In her multi-faceted role, Ms. Harper plays a pivotal role in developing and implementing HID's health analytics systems. She designs the structure of each new database, loads the initial data, and creates the corresponding maintenance schedules and procedures. She then manages an experienced technical team responsible for executing data loads, performing maintenance and optimization, and troubleshooting customer issues.

Through her work, Ms. Harper has become very familiar with the medical and pharmacy datasets used by the state Medicaid and public health programs for which HID provides services. Ms. Harper has been with HID since the inception of the Auburn, Alabama facility in 1999. Ms. Harper has developed, deployed, and monitored several of HID's products for Medicaid and other state clients. She was an integral participant in the development of HID's Retrospective DUR system, RxExplorer®, and currently creates all new databases and oversees operations for Retrospective DUR customers. She was also instrumental in developing HID's automated Prior Authorization (PA) software, RxPert®, creates the databases to support this product, and oversees the analysis and reporting operations for it. Her latest development projects have included software for RxSentry®, HID's Prescription Drug Monitoring Program (PDMP), and software for HID's Standard and Supplemental Rebate programs. She has also assessed business processes, process controls, and reporting of these controls for these HID products.

Ms. Harper takes an active role in modifying software and designing databases to meet the customer's needs. She participates in product demonstrations for customers, sometimes as a presenter and other times as an analyst. In analyst mode, Ms. Harper's participation involves determining and clarifying customer requirements. She then manages systems developers and technical staff during development and implementation to ensure that the requirements are met. Once the implementation is complete, Ms. Harper serves as the primary analyst and developer for new reports. Her knowledge and experience means that HID can provide a nimbleness and flexibility in report development that outpaces larger competitors.

Ms. Harper has more than 13 years experience assessing data base management systems in a technical operations environment, providing data base development and performance tuning, and product data base performance monitoring and error-messaging systems.

Ms. Harper has extensive experience using Progress in a variety of operating environments. In addition, she works on a daily basis with JavaScript™. She also works extensively with the Microsoft® Office applications, including Access™, and is versatile in providing a variety of report outputs such as HTML, RTF, and Adobe® Acrobat® PDF.

Significant Facts

- April Harper has more than 13 years experience in programming, database administration, and operating systems, and more than six (6) years experience in managing prescription drug monitoring programs (PDMP) for the 14 HID PDMP clients.
- Ms. Harper's knowledge of HID's products, databases, and customers is comprehensive, since she has designed virtually every customer database that supports HID's products including RDUR, PA, CWP, ePrescribing, manual PA, prescription drug monitoring, and supplemental and standard rebate program software.
- Ms. Harper has been instrumental in ensuring that every one of HID's software programs uses a browser-based interface.

Professional Experience

HEALTH INFORMATION DESIGNS, INC., AUBURN, ALABAMA

DATABASE ADMINISTRATOR AND ANALYSIS AND REPORTING MANAGER, 1999–PRESENT

NEW CUSTOMER (OR NEW PROJECT) RESPONSIBILITIES

- Demonstrates RxPert product for potential clients
- Attends demonstrations to determine customer requirements and develop specifications
- Evaluates existing HID products to determine how products can be modified to satisfy customer needs
- Develops new HID application software
- Sets up structure for new Progress databases
- Creates databases and loads data
- Performs analysis to determine reporting needs
- Develops standard and ad hoc reports
- Manages other technical staff during project implementation
- Works directly with clients to manage requirements
- Manages projects to determine that requirements are met
- Develops and documents schedules and procedures for database maintenance

ONGOING RESPONSIBILITIES

- Explores methods to improve clinical efficacy and operational efficiency, making subsequent changes to HID software
- Administers Progress databases, including performing regular maintenance and building indexes
- Performs analysis and develops new reports in response to customer requests
- Oversees operations for RxExplorer and RxPert applications
- Manages developers involved in technical projects

JAY R. SMITH MANUFACTURING COMPANY, MONTGOMERY, AL

SYSTEMS ANALYST, 1998–1999

- Developed Progress database projects using 4GL language
- Administered Progress databases in UNIX environment
- Developed help applications using Microsoft Help Workshop

Technical Competencies

SOFTWARE AND PROGRAMMING

- Numerical analysis and engineering programs in C/C++ and Matlab, Server-side objects such as tables, indexes, database constraints, storage, Javascript, Microsoft Office, Adobe

DATABASE ADMINISTRATION

- Relational database administration and development in Progress/UNIX, Progress/Linux, and Progress/Windows environments

OPERATING SYSTEMS

- UNIX, Linux, and Microsoft Windows operating systems

Education/Certifications

BS, Applied Mathematics , 1998, Auburn University, Auburn, AL

References

Howard C. Anderson, Jr., RPh
Executive Director
North Dakota Board of Pharmacy
1906 E. Broadway Ave.
P.O. Box 1354
Bismarck, ND 58502-1354
(701) 328-9535
ndboph@btinet.net

Peggy A. King, RPh
Director
Office of Pharmacy Services, Bureau for Medical Services
350 Capitol Street, Room 251
Charleston, WV 25301
(304) 558-5963
peggy.a.king@wv.gov

Charles C. Thomas, BPharm, RPh, FAPhA
State Pharmacy Director
Alabama Department of Public Health
201 Monroe Street, Suite 1010
Montgomery, AL 36130-3017
(334) 206-5666
charlie.thomas@adph.state.al.us

Professional Summary

As Information Systems Manager, Clif Fisher is responsible for the day-to-day management of data coordination with fiscal agents and the state Medicaid and public health programs for which HID conducts pharmacy benefit management and disease management services. A significant part of this responsibility involves keeping the various network servers, hardware and software, and telecommunications systems needed for file transfer up and running and operating efficiently. Coupled with this operational responsibility, Mr. Fisher also performs ongoing technical support – assisting customers with data questions and technical issues and coordinating with other HID technical and development resources as necessary.

In addition to his systems management and technical support responsibilities, Mr. Fisher prepares data files for loading, performs data loads, analyzes data and creates reports using Progress® in various operating environments, and performs database maintenance and backup procedures.

In many cases, Mr. Fisher receives reporting or system requests from a customer, analyzes the request in the context of the customer's business domain, and translates the request into technical specifications before passing it to the Analysis and Reporting Manager. He also serves as a liaison between customers and HID systems developers by explaining customer requirements and ensuring that the final systems meet program requirements in an efficient and effective manner.

Mr. Fisher has more than eight (8) years of experience as a technical analyst and has deployed HID products, (some Medicaid-related applications), for more than 14 clients. He has more than eight (8) years experience assessing technical environment operations and processes, performance monitoring, and error-messaging systems.

Professional Experience

HEALTH INFORMATION DESIGNS, INC., AUBURN, ALABAMA INFORMATION SYSTEMS MANAGER, 2003–PRESENT

- Monitors technical environment operations and processes
- Configures and administers Linux servers
- Configures and administers Microsoft servers, including Exchange Server
- Administers production hardware and software
- Administers telecommunications network
- Administers firewalls
- Analyzes customer's business needs and translates to technical specifications
- Analyzes, maps, and develops data parsing code to extract data from customer-supplied data files
- Creates/develops new database-driven reports
- Runs existing reports
- Loads and maintains databases
- Creates database backup scripts
- Serves as technical contact for customers
- Serves as primary technical contact for corporate/commercial and governmental clients

- Serves as technical contact for HID employees

AFNI INC., OPELIKA, AL

TECHNICAL SPECIALIST, 2002–2003

- Supported computer network, including hardware, software and telephony
- Performed technical troubleshooting
- Assisted new and existing users with technical tasks

Technical Competencies

PROGRAMMING

- Created server-side objects such as tables, indexes, database constraints, storage

DATABASE ADMINISTRATION

- Performed relational database administration and development in Progress/UNIX, Progress/Linux, and Progress/Windows environments

OPERATING SYSTEMS

- Administered databases running in UNIX, Linux, and Microsoft Windows operating systems

Education/Certifications

BS, Management Information Systems , 2001, Auburn University, Auburn, AL

Microsoft Certified Professional, 2001–Present

CISCO Certified Network Associate, 2001–2003

Professional Associations

Association of System Managers, Auburn University chapter, 2001–Present

References

Matthew Foster, PharmD

Clinical Pharmacy Manager

PMSI

175 Kelsey Lane

Tampa, FL 33619

(813) 318-6786

matthew.foster@pmsionline.com

Kelli D. Littlejohn, RPh, PharmD
Director, Pharmacy Services
Alabama Medicaid Agency
501 Dexter Avenue
P.O. Box 5624
Montgomery, AL 36103-5624
(334) 353-4525
kelli.littlejohn@medicaid.alabama.gov

Brendan K. Joyce, PharmD
Administrator, Pharmacy Services
North Dakota Department of Human Services
600 East Blvd., Dept. 325
Bismarck, ND 58505
(701) 328-4023
bjoyce@nd.gov

Professional Summary

Cameron Aycock is a programmer with more than 14 years of software engineering and development experience. He has more than ten (10) years experience assessing technical environment operations and processes, testing system functions and security features, writing file format conversions, developing new processes and systems, enhancing software packages and maintaining hardware. Mr. Aycock has significant experience in the fields of 3-D graphics, CAD, accounting, advertising, health care, statistics, and law enforcement software systems with a focus on meeting each client's particular business needs with quality and diligence.

At HID, Mr. Aycock is responsible for developing and maintaining database applications, such as the clinical web portal and ePrescribing systems on the server side and maintenance of Progress database. Mr. Aycock performs ad hoc reporting on the clinical web portal and ePrescribing systems and manages to client data feed connections. Additionally, Mr. Aycock evaluates requests for new or modified program and system enhancements, including formulating a plan and outlining steps required for development, testing, and documentation of system modifications.

Mr. Aycock has experience with a wide variety of tools and applications including .Net framework, C#, C/C++, Delphi, and Java. For the majority of his career, Mr. Aycock has worked with N-tier application development for various back-end database systems including DB2, Oracle, MS SQL Server, Sybase, local text files, and proprietary binary storage formats. Mr. Aycock brings to the table the flexibility to work with an array of tools to create a system to meet each client's needs, solve problems efficiently, and meet long term business requirements, such as maintenance, re-use, training, and personnel.

Professional Experience

HEALTH INFORMATION DESIGNS, INC., AUBURN, ALABAMA PROGRAMMER, 2011–PRESENT

- Monitors technical environment operations and processes
- Analyzes customer's business needs and translates to technical specifications
- Analyzes, maps, and develops data parsing code to extract data from customer-supplied data files
- Creates/develops new database-driven reports
- Runs existing reports
- Loads and maintains databases
- Creates database backup scripts
- Serves as primary technical contact for clinical web portal and ePrescribing users

MEDSEEK, BIRMINGHAM, ALABAMA DEVELOPER – HOSPITAL/CLINIC WEB PORTALS, 2011

- Assigned to support the Dot Net Nuke Patient Portal products, as well as a custom JavaScript ColdStone application.
- Used C#, ASP.Net and Dot Net Nuke.
- Day to day operations included independent customer relations and satisfaction for custom modifications.

- Regularly worked with team members on new application portals developed in ASP .Net with C# and SQL Server.

FEDERAL SIGNAL RIVERCHASE – BIRMINGHAM, ALABAMA

DEVELOPER – LAW ENFORCEMENT SOFTWARE, 2009-2010

- Maintained In-Car Mobile application as well as real-time server in Delphi 5 and Delphi 2006.
- Wrote multiple reporting modules for Velocity RMS application in C# / ASP.Net.
- Created web service application interface (SOAP) to Velocity RMS in C#. The service was then called by the Delphi client for multiple product synchronization.
- Used Reporting services with Visual Studio 2008 and Sql Server for click-once deployment of our records management solution.
- Created custom reports for e-ticket interface to allow officers to input tickets electronically with identical ticket layout for ease of use.

ONE DOMAIN INC., BIRMINGHAM, ALABAMA

DEVELOPER - TELEVISION STATION SOFTWARE, 2008

- Worked eight months as an employee for this Birmingham AL software firm that develops media planning, research, and business intelligence software to television stations in the US.
- Wrote a custom application using Delphi and custom T-SQL to migrate the company's existing and proprietary CRM system from Firebird into Microsoft's CRM database in SQL Server 2005.
- Worked on application level CRM system, and ported it from Delphi 5 to Delphi 2007. The standalone product called "Neo" was eventually merged into the main product "Media Office".
- Tools: Delphi 5, Delphi 2007, MS SQL Server 2005, Firebird, IB Expert, Dev Express components, and Report Builder.

MARKETRON INTERNATIONAL, BIRMINGHAM, ALABAMA

SOFTWARE ENGINEER - TELEVISION STATION SOFTWARE, 2002-2008

- Marketron offers tools to simplify the process of buying radio advertising using a web portal.
- Maintained and worked on nearly all Marketron products using Borland Delphi 5-7, Visual Basic 6, SQL Server 2000, SQL Server 2005, IBM DB2, and C# using Visual Studio 2005.
- Wrote a SQAD (pre-defined cost for advertisements) data conversion application in C# to use the data in Marketron TvSales.
- Maintained the Station Analysis product in Visual Basic 6, this product is a reporting tool for stations, and it reports against a MS SQL Server 2000 database.
- Worked in the next generation product: TvSales 7.0 using MDAC 2.8, ADO, Delphi 7, and MS SQL Server in a 2-tier configuration.
- Worked with QA, PDCs, IT, and web development on many occasions to find and solve problems and issues in need of immediate repair.
- Wrote the NHTI (Nielsen Hispanic Television Index) data conversion application to allow clients to use Nielsen national weekly ratings information in the system.
- Maintained the HSP platform capabilities of TvSales, allowing clients to use Citrix hosting environment for application deployment.
- Wrote the TvSales -> Marketron Television Traffic interface that allows TvSales to submit orders to a MS SQL Server/DB2 database for traffic and broadcasting. This interface also allows for reconciliation after broadcast and invoicing. It also allows the salesperson to pull available air-time from the traffic system for selling.
- Suggested and implemented a coloring system to aid in the visual representation of the number of available spots that is now an industry standard practice.

- Worked on our web-based reporting application in cooperation with Cold Fusion to allow clients to generate an XML file suitable for 3rd party importing.
- Modified multiple forms with a custom tool for a new branding of the application from Omega32 to TvSales, saving development time.

HI-MARK SOFTWARE, ATLANTA, GEORGIA

SOFTWARE ENGINEER - TRAVEL AGENCY AND CORPORATE TRAVEL REPORTING SOFTWARE, 2000-2002

- Used Delphi 4 Client/Server and the BDE to complete the behind schedule TravelMan 4.0 application. The product is now in use with numerous clients including IBM, Microsoft, Daimler-Chrysler, and Dell Computer Corp.
- Traveled to Dell Computer Corp. headquarters to implement new TravelMan 4.0 system in Delphi. This task included writing a corporate-structure add-on to the product, and a corporate-structure import program, all on-site.
- Improved "Data Dictionary" and "Lookups" section of TravelMan 4.0 with near rewrite in Delphi to conform to multiple databases including Oracle 8i, MS SQL Server 7.0, MS SQL Server 2000, Sybase SQL Anywhere, Sybase System 11, and Paradox 8.
- Aided in design and implementation of multi-threaded query-engine in Delphi to build necessary datasets for the report generation in Paradox 8.
- Implemented coding-standards guidelines, general software operational procedures, and set up a version control system with MS VSS.
- Aided in designing Web-Man 2000 product using Midas for DCOM, ActiveX controls for a Decision Cube (OLAP), and the Dart portion of TravelMan 4.0, all in Delphi. The web server is MS Internet Information Server.
- Began preliminary investigation into using JBuilder 4.0 enterprise for next-generation Web-Man/TravelMan for a complete web-based product. This process has included research towards building a Java based report designer for the web, cross-platform access using a to-be-determined XML format for the report file and data exchange, and CORBA for the servlet - EJB server - applet communication structure.

DATA COUNT INC. (NOW MARKETRON), WINSTON SALEM, NORTH CAROLINA

SOFTWARE ENGINEER - RADIO TRAFFIC SOFTWARE, 1999 – 2000

- Assigned to the client side of a 3-tier application named "D32" for radio that handles scheduling, billing, and report generation utilizing Delphi 4/5 professional, "raw" ADO (not ADO express), "raw" DCOM (not MIDAS), Crystal Reports, MS SQL Server 6.5, and MS SQL Server 7.
- Built an automated order-entry system to aid stress-testing the application with multiple, and simultaneous server transactions using Delphi.
- Worked on an automatic report criteria system in Delphi, that allowed users to enter their report criteria without the need to open and modify the report design.

PARASOFT INC. (NOW NOREGON), WINSTON SALEM, NORTH CAROLINA

INTERN - VEHICLE NETWORK SOFTWARE FOR LARGE COMMERCIAL TRUCKS, 1998-1999

- Responsible for testing of the bridge/Gateway product that allowed the translation of legacy vehicle networks (J1587) to talk to the current network specification (J1708).
- Wrote file format conversion utility in Visual Basic 5.0 for the company's 16-bit vehicle network monitor to their new 32-bit version.
- Maintained hardware and set-up incoming machines for employees.

- Wrote Windows VxD in C++ for the DLA (Data Link Adapter) product allowing clients to monitor vehicle network information as it happens.

MISCELLANEOUS PERSONAL PROGRAMMING PROJECTS

- Developed and sold an application that allows the user to generate a fully closed 3-Dimensional mesh in real-time of the human scalp in Delphi. The application interfaced via RS-232 to a 3-D pen (Polhemus Patriot). OpenGL was used to display the position in real-time during point capture. It was then able to generate an enclosed mesh from the point cloud information from the pen. It would also export the final mesh in STL and ASCII DXF formats for transmission to a CNC factory where it is milled out and used by the vendor, saving time and money on mold-making and shipping charges opposed to a plaster mold.
- Developed a 3D math game for children to aid in learning multiplication, division, addition, and subtraction. The 3D engine was rendered via Direct X and software rendering.
- Wrote a batch scanning utility in C# for loading pictures into digital format.
- Responsible for all C/C++ modifications to the Torque engine and scripting system during the development of the independent game "The Chronicles of Ny"
- Published by the "Unofficial Newsletter of Delphi Users".

Technical Competencies

LANGUAGES

- C#, C/C++, Perl, Python, Java, x86 asm, Basic/Visual Basic, TCL/Lua & Other scripting, Borland Delphi 3-2007

DATABASES

- MS SQL Server 6.5-2008, IBM DB2, Oracle 8i, MS Access, MySQL, Paradox, Firebird, Interbase, MS ADO/ODBC/OLE DB

TECHNOLOGIES

- Regular expressions, HTML/XML, MS COM/DCOM, Win 32 API, Open GL, Direct X, Media Wiki, WPF/Silverlight, Cold Fusion, Apache, IIS

SOFTWARE ENGINEERING TOOLS

- UML w/Design Patterns and Implementation, n-Tier Application Development, Visual Source Safe, CVS, Subversion, Test Track, Microsoft CRM/Sharepoint, Cross-functional Teams, Software Estimation, Development Life Cycle

Education/Certifications

Forsyth Technical Community College, Computer Programming, 1998-1999

North Carolina School for the Arts, Film Making, 1995-1997

Professional Summary

Connie Lewis has 24 years of experience in various aspects of the Information Technology field. She has extensive experience designing, writing, and publishing both online and hardcopy user documentation for commercial software projects and for training purposes. Her largest software documentation project comprised 16 customer documents, the largest of which was 1000 pages, and an online help system including 3000 context-sensitive help entries.

Ms. Lewis is committed to developing clear, usable, and user-friendly documentation and serves as a user advocate in each project she undertakes. At McKesson Provider Technologies, Ms. Lewis's commitment to the end user was recognized when she was selected by corporate management to design and manage the implementation documentation for McKesson's high profile "closed loop" solution, a suite of five integrated software systems.

Working closely with product managers, design teams, database and system developers, implementation consultants, and users, Ms. Lewis has developed user documentation and training materials for numerous systems and has designed, developed, and implemented context-sensitive online help systems. She has worked for five years in computer training, both for educational institutions and for business. As part of her training responsibilities, she designed syllabi, developed course material and training packets, conducted training sessions, and supervised other trainers.

Ms. Lewis has coordinated the documentation production and delivery from teams of programmers, functional experts, and technical writers. In addition, she has experience in computer programming, has participated in both the design and test phases of software development, and has done computer consulting.

Significant Facts

- Developed product documentation rated as the best among the five top competitors in definitive healthcare industry survey (KLAS). (McKesson Corporation, 2002-2005)
- In five years, designed, supervised, and participated in authoring over 160 books and product resources, and a comprehensive context-sensitive help system with over 1800 entries. (McKesson Corporation, 2000-2005)
- Designed single-sourcing system to satisfy user demand for documentation in both online and printable (book) formats. (McKesson Corporation, 2002)
- Developed an online guide, which provides checklists and procedures to facilitate the implementation of five integrated products over a one-year timeframe. (McKesson Corporation, 2004)
- Participated in and contributed process documentation toward two successful Level 3 CMM assessments (EDS Corporation, Dayton, OH 1999; Montgomery, AL 2000)
- Designed procedural and context-sensitive help functionality, wrote online help system, and authored user and implementation books for medical billing system. (Control-o-fax Corporation, 1995)

- Designed migration of EDI conversion procedures from midsize computer to desktop computer, using Mercator mapping software. Redesign reduced overall conversion time by a factor of 5. (Control-o-fax Corporation, 1996)
- Designed, taught, and authored course materials (primary or supplementary) for software application classes for traditional students and corporate executives. (American Institute of Commerce, 1991-1993)

Professional Experience

HEALTH INFORMATION DESIGNS, INC., AUBURN, ALABAMA

DIRECTOR OF TECHNICAL WRITING, 2006–PRESENT

- Regularly reports to executive team on deliverable status, quality measures, and strategic direction
- Analyzes contractual requirements, audience, and business need to design deliverables for state and private-sector clients
- Creates or supervises the creation of system, user and training documentation
- Outlines, edits and produces, or supervises production of other project deliverables or internal documents
- Serves as final editor and content contributor for all new business proposals

McKESSON CORPORATION, MONTGOMERY, ALABAMA

MANAGER, TECHNICAL WRITING, 2001–2006

SENIOR TECHNICAL WRITER, 2000–2001

- Responsible for all product documentation for Horizon® Meds Manager, one of the top five pharmacy software applications for large and mid-size hospitals
- Developed all local templates and participated in development of corporate standards and templates
- Regularly reported to upper management on project status and strategic direction
- Supervised senior and junior level writers

EDS CORPORATION, MONTGOMERY, ALABAMA

TECHNICAL WRITING SPECIALIST, 1998–2000

- Wrote and compiled Windows online help, created and wrote project documentation in accordance with Air Force standards, analyzed and documented systems and processes, managed documentation teams, and presented results to client

Projects:

- 11/99-12/00 – lead technical writer, CRS (Battle Creek, MI)
- 10/99-11/99 – senior technical writer, CAS-A/C Merge
- 7/99-9/99 – project lead, Y2K End-to-End Testing
- 6/99 – documentation specialist, CMM Level 3 Assessment (Dayton, OH)
- 2/99-5/99 – lead technical writer, Y2K End-to-End Testing
- 7/98-1/99 – technical writer, CAS-D Development

HEALTHCARE SYSTEMS, MONTGOMERY, ALABAMA

ANALYST, 1997–1998

- Supported customer sites running MEDICS pharmacy software and documented MEDICS data interfaces
- Performed system administration functions on the following multi-user operating systems: SCO UNIX, Novell, and Windows NT

RHEEM MANUFACTURING, MONTGOMERY, ALABAMA

TECHNICAL EDUCATOR, 1997

- Supported users at corporate headquarters on Novell, UNIX, Windows NT, Lotus SmartSuite, and WordPerfect Suite
- Wrote and distributed appropriate user documentation

CENTRAL ALABAMA HOME HEALTH SERVICES, INC., AUBURN, ALABAMA

TECHNICAL EDUCATOR, 1996–1997

- Instructed clinical and non-clinical employees on Windows NT 3.51 and 4.0 operating systems; MS Office 97 and Office 95 applications

CONTROL-O-FAX CORPORATION, WATERLOO, IA

EDUCATION SPECIALIST, 1993–1996

- Designed and wrote user's guide (500 pages) and all online help screens (700 screens) for Ultra-Bill 3™ – a medical accounts receivable management system
- Designed database structure used for Ultra-Bill 3 online help
- Wrote documentation for Ultra-Notes™ – software that enables physicians to bar code progress notes
- Tested Ultra-Bill 3 multi-user releases on a peer-to-peer network
- Developed system to translate non-standard text formats to standard formats for electronic data interchange (using Mercator software)

AMERICAN INSTITUTE OF COMMERCE, CEDAR FALLS, IA

CHAIR AND INSTRUCTOR, BUSINESS COMPUTER SPECIALIST PROGRAM, 1991–1993

Courses taught:

- Software Applications, Computer Concepts, Advanced Spreadsheets and Macros, Word Processing I and II, Networks & Systems, Introduction to the PC, dBase and Online Programming, Microcomputer Programming

Administrative responsibilities:

- Established program advisory board to review program requirements and local employer needs
- Developed student competency requirements based on local and regional employment market; analyzed and revised program curriculum based on competency requirements
- Wrote and standardized syllabi
- Developed internship program and affiliations with local companies
- Conducted an analysis of classroom hardware needs and researched network alternatives

WHITMAN & RANSOM, GREENWICH, CT

SOFTWARE CONSULTANT / ADMINISTRATIVE AND LEGAL ASSISTANT, 1988–1990

- Installed and maintained periodic releases of Infortext billing software
- Used Wang VS software to prepare final copies of trust and estates and real estate legal documents under stringent deadlines

AT&T, WHITE PLAINS, NY

PROGRAMMER, 1987

- Wrote improvement maintenance code for COBOL and IMS batch programs; wrote JCL scripts

IBM, WHITE PLAINS, NY

PROGRAMMER (STUDENT INTERN), 1986

- Used IBM REXX programming language to create an online survey for use by field sales personnel
- Presented project results to management team

IBM, THOMAS J. WATSON RESEARCH CENTER, YORKTOWN HEIGHTS, NY

COMMUNICATIONS ASSISTANT (STUDENT INTERN), 1985–1986

- Researched and wrote articles for company publication
- Conducted marketing survey of research personnel; used SAS software to perform statistical analysis of survey results

Education/Certifications

MBA, Management Information Systems, 1987, Pace University, White Plains, NY

BA, Philosophy, 1984, State University of New York, Purchase, NY

BA, Literature, 1984, State University of New York, Purchase, NY

Professional Affiliations

Member, Society for Technical Communication

Awards

New York State Regents Scholar; National Merit Letter of Commendation

References

Todd Beran, Program Coordinator
Prescription Drug Monitoring Program
Oregon Public Health Division
Oregon Health Authority
800 NE Oregon St., Suite 772
Portland, OR 97232
(971) 673-1105
todd.beran@state.or.us

Dimitria Pope
Project Manager
Medicaid/CHIP Vendor Drug Program
Texas Health and Human Services
Commission
11209 Metric Blvd. Bldg. H
Austin, TX 78758
(512) 491-1135
Dimitria.Pope@hpsc.state.tx.us

Cody Wiberg, PharmD, MS, RPh.
Executive Director
Minnesota Board of Pharmacy
2829 University Avenue SE, Suite 530
Minneapolis, MN 55414
(651) 201-2830
cody.wiberg@state.mn.us

Meika Zilberberg, MS
Program Coordinator
Vermont Department of Health
Division of Alcohol and Drug Abuse
Programs
108 Cherry Street, P.O. Box 70
Burlington, VT 05402-0070
(802) 652-4147
mzilber@rdh.state.us

Appendix 7 – Signed RFQ Addenda

Introduction

HID provides signed RFQ addenda on the following pages.



Request for Quotation

State of West Virginia
 Department of Health & Human Resources
 Office of Purchasing
 One Davis Square, Suite 100
 Charleston, WV 25301

RFQ NUMBER
MED12002

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF
DONNA D. SMITH 304-957-0218

V E N D O R	Health Information Designs, Inc. 391 Industry Drive Auburn, AL 36832
----------------------------	--

S H I P T O	BUREAU FOR MEDICAL SERVICES 350 CAPITOL STREET, ROOM 251 CHARLESTON, WV 25301-3706
----------------------------	--

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FUND
--------------	---------------	----------	--------	------

BID OPENING DATE: 10/27/2011 BID OPENING TIME: 1:30 PM

LINE	QUANTITY	UOP	CAT.NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
ADDENDUM NO. 1						
1. QUESTIONS AND ANSWERS ARE ATTACHED.						
2. ADDENDUM ACKNOWLEDGEMENT IS ATTACHED. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN DISQUALIFICATION OF YOUR PROPOSAL.						
REQUISITION NO.: MED12002						
ADDENDUM ACKNOWLEDGEMENT						
I HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING CHECKED ADDENDUM(S) AND HAVE MADE THE NECESSARY REVISIONS TO MY PROPOSAL, PLANS AND/OR SPECIFICATION, ETC.						
ADDENDUM NO.'S"						
NO. 1 <u> X </u>						
NO. 2 _____						
NO. 3 _____						
NO. 4 _____						
NO. 5 _____						
I UNDERSTAND THAT FAILURE TO CONFIRM THE RECEIPT OF THE ADDENDUM(S) MAY BE CAUSE FOR REJECTION OF PROPOSAL.						

SEE REVERSE FOR TERMS AND CONDITIONS

SIGNATURE <i>Donna D. Smith</i>	TELEPHONE 334-466-3086	DATE 10/19/2011
TITLE President & CEO	FEIN 59-1676558	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFP, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED "VENDOR"



Request for Quotation

State of West Virginia
 Department of Health & Human Resources
 Office of Purchasing
 One Davis Square, Suite 100
 Charleston, WV 25301

RFQ NUMBER
MED12002

PAGE
2

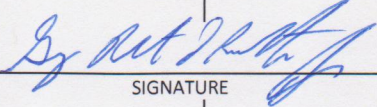
ADDRESS CORRESPONDENCE TO ATTENTION OF
DONNA D. SMITH
304-957-0218

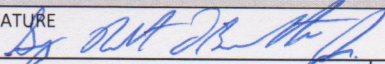
V E N D O R	Health Information Designs, Inc.
	391 Industry Drive
	Auburn, AL 36832

S H I P P E R T O	BUREAU FOR MEDICAL SERVICES
	350 CAPITOL STREET, ROOM 251
	CHARLESTON, WV 25301-3706

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FUND

BID OPENING DATE: OCTOBER 27, 2011 BID OPENING TIME: 1:30 PM

LINE	QUANTITY	UOP	CAT.NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>VENDOR MUST CLEARLY UNDERSTAND THAT ANY VERBAL REPRESENTATION MADE OR ASSUMED TO BE MADE DURING ANY ORAL DISCUSSION HELD BETWEEN VENDOR'S REPRESENTATIVES AND ANY STATE PERSONNEL IS NOT BINDING. ONLY THE INFORMATION ISSUED IN WRITING AND ADDED TO THE SPECIFICATIONS BY AN OFFICIAL ADDENDUM IS BINDING.</p>						
				 SIGNATURE		
				Health Information Designs, Inc.		
				COMPANY		
				10/19/2011		
				DATE		
END OF ADDENDUM NO. 1						

SEE REVERSE FOR TERMS AND CONDITIONS		
SIGNATURE 	TELEPHONE 334-466-3086	DATE 10/19/2011
TITLE President & CEO	FEIN 59-1676558	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFP, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED "VENDOR"

**GENERAL TERMS & CONDITIONS
PURCHASE ORDER/CONTRACT**

- 1. ACCEPTANCE:** Seller shall be bound by this order and its terms and conditions upon receipt of this order.
- 2. APPLICABLE LAW:** The laws of the State of West Virginia and the BMS Purchasing Manual shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.
- 3. NON-FUNDING:** All services performed or goods delivered under BMS Purchase Orders/Contracts are to be continued for the terms of the Purchase Order/Contract, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, the Purchase Order/Contract becomes void and of no effect after June 30.
- 4. COMPLIANCE:** Seller shall comply with all federal, state and local laws, regulations and ordinance including, but not limited to, the prevailing wage rates of the WV Division of Labor.
- 5. MODIFICATIONS:** This writing is the parties' final expression of intent. No modification of this order shall be binding unless agreed to in writing by the Buyer.
- 6. ASSIGNMENT:** Neither this Order or any monies due, or to become due hereunder may be assigned by the Seller without the Buyer's consent.
- 7. WARRANTY:** The Seller expressly warrants that the goods and/or services covered by this order will: {a} conform to the specifications, drawings, samples or other description furnished or specified by the BUYER; {b} be merchantable and fit for the purpose intended; and/or {c} be free from defect in material and workmanship.
- 8. CANCELLATION:** The director of the DHHR Office of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 9. SHIPPING, BILLING & PRICES:** Prices are those stated in this order. No price increase will be accepted without written authority from the Buyer. All goods or services shall be shipped on or before the date specified in the Order.
- 10. LATE PAYMENTS:** Payment may only be made after the delivery of goods or services. Interest may be paid on late payments in accordance with the *West Virginia Code*.
- 11. TAXES:** The State of West Virginia is exempt from the federal and state taxes and will not pay or reimburse such taxes.
- 12. RENEWAL:** Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon contract null and void, and terminate such contract without further order.
- 13. BANKRUPTCY:** In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
- 14. HIPAA BUSINESS ASSOCIATE ADDENDUM:** The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.htm and is hereby made part of the agreement provided that the Agency meets the definition of a Cover Entity (45 CFR § 160.103) and will be disclosing Protected Health Information (45 CFR § 160.103) to the vendor.
- 15. CONFIDENTIALITY:** The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedure, and rules.
- 16. LICENSING:** Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirement by any state or local agency of West Virginia, including but not limited to, the West Virginia Secretary of State's Office, the West Virginia Insurance Commission, or any other state agency or political subdivision. Furthermore, the vendor must provide all necessary releases to obtain information to enable the Director or spending unit to verify that the vendor is licensed and in good standing with the above entities.



West Virginia Department of Health and Human Resources
The Bureau for Medical Services
 BMS Request For Quotation MED12002

<p>1. Per the Quotation Format on page 6 of the RFQ, Vendors are only to submit the Title Page, Table of Contents, Attachment A, and Attachment B as the response. Are vendors to include any response to the specifications in section 2.3 Mandatory Requirements?</p>	<p>Yes, the respondent must address each mandatory line item request at the line item level.</p>
<p>2. Section 3, Vendor Quotation, Page 6, Are vendors to provide only the information requested in 3.1-3.3 of the RFP?</p>	<p>If a Vendor is eligible for Resident Vendor Preference (3.6), this form must be submitted with the Quotation.</p>
<p>3. Mandatory Requirements, Page 3, Are vendors required to provide responses to each mandatory requirement of Section 2.3?</p>	<p>Submission of the Purchasing Affidavit (3.5) is preferred, but not required, with the submission of the Quotation. Yes, the respondent must address each mandatory line item request at the line item level.</p>
<p>4. 1.1, Purpose, Does the state wish to receive clinical data regarding laboratory and hospital visits that would be received from an HL7 capable solution, either from a hospital directly or from a connection to the State's HIE?</p>	<p>No.</p>
<p>5. 1.1, Purpose, Does the state wish to implement clinical rules to monitor and alert physicians and other users on missed clinical opportunities (HEDIS) or highlight patient chronic conditions?</p>	<p>No.</p>
<p>6. 1.1, Purpose, Is the state looking for a vendor to support, maintain and enhance the current WVeScript software, or are they looking to replace it with and equivalent solution?</p>	<p>The State is looking for a vendor to support, maintain and enhance the current WVeScript software.</p>
<p>7. 1.1, Purpose, Must the WVeScript solution display formulary information back to the provider at the point of care?</p>	<p>Yes.</p>
<p>8. 2.3.2.5, Mandatory Requirements, Do smart forms need</p>	<p>The forms currently being used have been created in</p>



West Virginia Department of Health and Human Resources
The Bureau for Medical Services
 BMS Request For Quotation MED12002

<p>to be created in a tool called LiveCycle?</p>	<p>LiveCycle.</p> <p>If the vendor is unable to support LiveCycle, forms will need to be created and furnished at no expense to the State.</p> <p>The State requires that any web portal solution be able to support utilization of smart forms.</p> <p>The PA's are only used for pharmacy requests.</p>
<p>9. 2.3.2.5, Mandatory Requirements, Will these PA's be used in the Medical/Dental and Pharmacy areas?</p> <p>10. 2.3.2.4, System Requirements, Would the state be willing to accept a security solution that does not use a PIN number, but instead uses role based security to limit e-prescribing access to only qualified physicians and clinicians who are legally capable of e-prescribing? Does the state have any allowances for physicians who wish their staff to execute verbal orders on their behalf? Is the state looking for a partial e-prescribing capability that allows nursing staff and administrative staff to write out verbal orders within the prescribing solution, but not execute them unless approved via login by a physician?</p>	<p>Yes, the State would be willing to accept a security solution that does not use a PIN number, but uses role based security to limit e-prescribing access.</p> <p>We do not wish to make allowances at this time for physicians who wish to their staff to execute verbal orders on their behalf.</p> <p>The State is not looking for partial e-prescribing capability.</p>
<p>11. 2.3.2.5, System Requirements, Must the vendor solution utilize LiveCycle forms or can it create/leverage forms with the same capabilities to transmit data to the PA provider help desk?</p>	<p>No, but the forms must have the same appearance as the current LiveCycle forms in use and have all of the same functionality, including expanding text fields.</p> <p>If the vendor is unable to support LiveCycle, forms will need to be created and furnished at no expense to the State.</p>
<p>12. 2.3.2.5, System Requirements, What is the technical</p>	<p>The forms are sent electronically to the Rational Drug</p>



West Virginia Department of Health and Human Resources
The Bureau for Medical Services
 BMS Request For Quotation MED12002

<p>mechanism of sending data from the prior authorization forms to the PA Vendor? Do the forms also require document upload to support the PA form? Is there a standard format for transporting the data to the PA vendor? Are medical PAs requested through the web site in addition to pharmacy-related PAs?</p>	<p>Therapy's electronic fax system.</p> <p>Yes, if clinical information is submitted, then it is to be uploaded as an attachment to the form.</p> <p>It is transmitted electronically through a secure connection with the Rational Drug Therapy Program.</p>
<p>13. 2.3.1.6.2, System Requirements, Must the vendor use First Data Bank drug-intervention rules or is another similar data source acceptable?</p>	<p>Only pharmacy PA's are requested through this website.</p> <p>Yes, First Data Bank prospective drug utilization review editing is required for WVeScript, no other source is acceptable.</p>
<p>14. Five - Contract Terms and Conditions/ 5.1 Contract Provisions, Contract Provisions: The RFQ and the Vendor's response will be incorporated into the contract by reference. The order of precedence shall be the contract, the RFQ and any addendum, and the Vendor's Quotation in response to the RFQ. "Will the contract include any additional terms and conditions that are not included in the RFQ? If so, will the State please provide those additional terms and conditions? Is it the intent of BMS to negotiate the final contract terms and conditions with the successful Vendors? "</p>	<p>No, there are no other terms and conditions that are not included in the RFQ.</p> <p>It is not the intent of BMS to negotiate final contract terms and conditions with the successful vendor.</p>
<p>15. Five - Contract Terms and Conditions/ 5.2.1 Risk of Disclosure, Risk of Disclosure: The only exemptions to disclosure of information are listed in West Virginia Code §29B-1-4. Any information considered a trade secret must be separated from the Vendor submission and</p>	<p>No, BMS cannot confirm that information labeled as trade secret will not be released.</p> <p>In the event of a FOIA request for such information BMS will take appropriate steps to notify you of this request so</p>



West Virginia Department of Health and Human Resources
The Bureau for Medical Services
 BMS Request For Quotation MED12002

<p>clearly labeled as such. Primarily, only trade secrets, as submitted by a bidder, are exempt from public disclosure. The submission of any information to the Bureau by a Vendor puts the risk of disclosure on the Vendor. The Bureau does not guarantee non-disclosure of any information to the public. "This requirement states that "The submission of any information to the Bureau by a Vendor puts the risk of disclosure on the Vendor. The Bureau does not guarantee non-disclosure of any information to the public." Will BMS please confirm that Vendor information that is separated from the non-trade secret information and clearly labeled as trade secret will not be released by the State/BMS?"</p>	<p>that you have an opportunity to obtain the appropriate court order to prevent the release of such information.</p> <p>However, per West Virginia State Code §29B-1-4 (2) In any suit filed under subsection one of this section, the court has jurisdiction to enjoin the custodian or public body from withholding records and to order the production of any records improperly withheld from the person seeking disclosure. The court shall determine the matter de novo and the burden is on the public body to sustain its action. The court, on its own motion, may view the documents in controversy in camera before reaching a decision.</p> <p>Any custodian of any public records of the public body found to be in noncompliance with the order of the court to produce the documents or disclose the information sought, may be punished as being in contempt of court.</p> <p>BMS will thoroughly investigate the cause of any situations that warrant the imposition of liquidated damages.</p>
<p>16. 5.10, Contract Terms and Conditions, Will liquidated damages be reviewed for situations that caused the deadlines or milestones not being met?</p> <p>17. Attachment B: Special Terms and Conditions, The Vendor must agree that BMS retains ownership of all data, procedures, programs, work papers and all materials gathered or developed under the contract with West Virginia. Please confirm that BMS' ownership rights do not include Vendor or third party proprietary and trade secret data, procedures, programs, work papers, material, source code, software or products.</p>	<p>This provision, which speaks for itself, applies only to the contract with West Virginia.</p>
<p>18. Is this product intended to need connectivity and to</p>	<p>No.</p>



West Virginia Department of Health and Human Resources
The Bureau for Medical Services
BMS Request For Quotation MED12002

share information with the WWHIN and the state
proposed Health Insurance Exchange?



Request for Quotation

State of West Virginia
 Department of Health & Human Resources
 Office of Purchasing
 One Davis Square, Suite 100
 Charleston, WV 25301

RFQ NUMBER
MED12002

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF
DONNA D. SMITH
304-957-0218

V E N D O R	Health Information Designs, Inc. 391 Industry Drive Auburn, AL 36832
----------------------------	--

S H I P T O	BUREAU FOR MEDICAL SERVICES 350 CAPITOL STREET, ROOM 251 CHARLESTON, WV 25301-3706
----------------------------	--

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FUND
--------------	---------------	----------	--------	------

BID OPENING DATE: 10/27/2011 BID OPENING TIME: 1:30 PM

LINE	QUANTITY	UOP	CAT.NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
				ADDENDUM NO. 2		
				1. TO ANSWER VENDOR QUESTIONS INADVERTENTLY OMITTED FROM ADDENDUM #1.		
				2. ADDENDUM ACKNOWLEDGEMENT IS ATTACHED. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN DISQUALIFICATION OF YOUR PROPOSAL.		
				REQUISITION NO.: MED12002		
				ADDENDUM ACKNOWLEDGEMENT		
				I HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING CHECKED ADDENDUM(S) AND HAVE MADE THE NECESSARY REVISIONS TO MY PROPOSAL, PLANS AND/OR SPECIFICATION, ETC.		
				ADDENDUM NO.'S"		
				NO. 1 <u> X </u>		
				NO. 2 <u> X </u>		
				NO. 3 _____		
				NO. 4 _____		
				NO. 5 _____		
				I UNDERSTAND THAT FAILURE TO CONFIRM THE RECEIPT OF THE ADDENDUM(S) MAY BE CAUSE FOR REJECTION OF PROPOSAL.		

SEE REVERSE FOR TERMS AND CONDITIONS

SIGNATURE <i>[Signature]</i>	TELEPHONE 334-466-3086	DATE 10/19/2011
TITLE President & CEO	FEIN 59-1676558	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFP, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED "VENDOR"



Request for Quotation

State of West Virginia
 Department of Health & Human Resources
 Office of Purchasing
 One Davis Square, Suite 100
 Charleston, WV 25301

RFQ NUMBER
MED12002

PAGE
2

ADDRESS CORRESPONDENCE TO ATTENTION OF
DONNA D. SMITH
304-957-0218

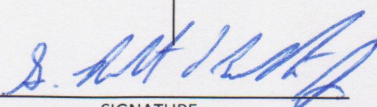
V E N D O R	Health Information Designs, Inc. 391 Industry Drive Auburn, AL 36832
----------------------------	--

S H I P T O	BUREAU FOR MEDICAL SERVICES 350 CAPITOL STREET, ROOM 251 CHARLESTON, WV 25301-3706
----------------------------	--

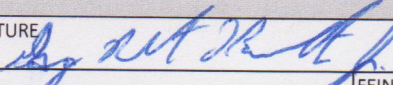
DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FUND

BID OPENING DATE: 10/27/11

BID OPENING TIME: 1:30 PM

LINE	QUANTITY	UOP	CAT.NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>VENDOR MUST CLEARLY UNDERSTAND THAT ANY VERBAL REPRESENTATION MADE OR ASSUMED TO BE MADE DURING ANY ORAL DISCUSSION HELD BETWEEN VENDOR'S REPRESENTATIVES AND ANY STATE PERSONNEL IS NOT BINDING. ONLY THE INFORMATION ISSUED IN WRITING AND ADDED TO THE SPECIFICATIONS BY AN OFFICIAL ADDENDUM IS BINDING.</p>						
 SIGNATURE						
Health Information Designs, Inc. COMPANY						
10/19/2011 DATE						
END OF ADDENDUM NO. 3						

SEE REVERSE FOR TERMS AND CONDITIONS

SIGNATURE 	TELEPHONE 334-466-3086	DATE 10/19/2011
TITLE President & CEO	FEIN 59-1676558	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFP, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED "VENDOR"

**GENERAL TERMS & CONDITIONS
PURCHASE ORDER/CONTRACT**

- 1. ACCEPTANCE:** Seller shall be bound by this order and its terms and conditions upon receipt of this order.
- 2. APPLICABLE LAW:** The laws of the State of West Virginia and the BMS Purchasing Manual shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.
- 3. NON-FUNDING:** All services performed or goods delivered under BMS Purchase Orders/Contracts are to be continued for the terms of the Purchase Order/Contract, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, the Purchase Order/Contract becomes void and of no effect after June 30.
- 4. COMPLIANCE:** Seller shall comply with all federal, state and local laws, regulations and ordinance including, but not limited to, the prevailing wage rates of the WV Division of Labor.
- 5. MODIFICATIONS:** This writing is the parties' final expression of intent. No modification of this order shall be binding unless agreed to in writing by the Buyer.
- 6. ASSIGNMENT:** Neither this Order or any monies due, or to become due hereunder may be assigned by the Seller without the Buyer's consent.
- 7. WARRANTY:** The Seller expressly warrants that the goods and/or services covered by this order will: {a} conform to the specifications, drawings, samples or other description furnished or specified by the BUYER; {b} be merchantable and fit for the purpose intended; and/or {c} be free from defect in material and workmanship.
- 8. CANCELLATION:** The director of the DHHR Office of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 9. SHIPPING, BILLING & PRICES:** Prices are those stated in this order. No price increase will be accepted without written authority from the Buyer. All goods or services shall be shipped on or before the date specified in the Order.
- 10. LATE PAYMENTS:** Payment may only be made after the delivery of goods or services. Interest may be paid on late payments in accordance with the *West Virginia Code*.
- 11. TAXES:** The State of West Virginia is exempt from the federal and state taxes and will not pay or reimburse such taxes.
- 12. RENEWAL:** Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon contract null and void, and terminate such contract without further order.
- 13. BANKRUPTCY:** In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
- 14. HIPAA BUSINESS ASSOCIATE ADDENDUM:** The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.htm and is hereby made part of the agreement provided that the Agency meets the definition of a Cover Entity (45 CFR § 160.103) and will be disclosing Protected Health Information (45 CFR § 160.103) to the vendor.
- 15. CONFIDENTIALITY:** The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedure, and rules.
- 16. LICENSING:** Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirement by any state or local agency of West Virginia, including but not limited to, the West Virginia Secretary of State's Officer, the West Virginia Insurance Commission, or any other state agency or political subdivision. Furthermore, the vendor must provide all necessary releases to obtain information to enable the Director or spending unit to verify that the vendor is licensed and in good standing with the above entities.



West Virginia Department of Health and Human Resources
The Bureau for Medical Services
 BMS Request For Quotation MED12002

<p>1. What is the anticipated award and subsequent "go-live" date?</p>	<p>December 26, 2011 and January 1, 2012.</p>
<p>2. 2.3.2.1-2.3.2.2, What are the data sources from which the Bureau anticipates the source data for the portal information?</p>	<p>The data source is the Bureau's Medicaid Management Information System (MMIS), operated by Molina Medicaid Solutions.</p>
<p>3. 2.3.2.2, What types of data components does the Bureau anticipate having in the portal for x-ray files?</p>	<p>None. Laboratory data can be scanned and attached to a PA request, but the Bureau does not anticipate providing components for transmitting x-ray files through the portal.</p>
<p>4. 2.3.2.2, What is meant by "...and automatically edit diagnosis/procedure codes for Medicaid members."? What types of editing would be done to existing claims data for display in a portal?</p>	<p>If the naming convention for the ICD codes were to change (e.g. ICD-9 to ICD-10) or more codes added, it is expected that the text would be added or edited, if necessary, to make them user friendly.</p>
<p>5. 2.3.2.5, Are the web-based PA's only Pharmacy based or Medical as well?</p>	<p>The PA's are for pharmacy claims only.</p>
<p>6. 2.3.2.5, Is it the Bureau's intent to merely accept the data from LiveCycle PA forms that are hosted by another system and another vendor?</p>	<p>The forms must be housed in the web portal and available for use by Medicaid prescribers. Once completed by the prescriber, they are to be transmitted electronically to the Rational Drug Therapy Program for review. Data from these forms is not collected by the Bureau electronically. These forms are used as a means to expedite the PA process and provide a paperless method for prescribers to use when seeking prior authorization for a drug.</p>
<p>7. 2.3.2.5, If the vendor is to host the forms, is it the Bureau's intent for the vendor to use LiveCycle for forms only, or for workflow and processing as well?</p>	<p>LiveCycle is to be used for forms only.</p>
<p>8. 2.3.2.6, Is it the intent of the Bureau for the vendor to completely take over the WVeScript solution or functions and provide a new one, or is the intent that the vendor link the existing WVeScripts application to their portal,</p>	<p>It is the intent of the Bureau for the Vendor to support the WVeScript e-prescribing application and for it to be housed in the Vendor's web portal and made available to prescribers there. WVeScript must be kept in compliance</p>



West Virginia Department of Health and Human Resources
The Bureau for Medical Services
BMS Request For Quotation MED12002

<p>and keep the underlying WVeScript data up to date?</p>	<p>with Surescripts standards for certification and updated with the most current updates for prospective drug utilization review from First Data Bank.</p>
<p>9. 2.3.5, What is the anticipated number of hours and types of qualifications that could be required annually for these "optional services?"</p>	<p>Anticipated hours – 40 per year. Additional services may include, but not be limited to, services necessary for the development of web portal enrollment forms and HIPAA compliant procedures for ancillary staff (such as case managers from other state agencies, etc.) who may need to use the web portal and communications with the healthcare provider community.</p>