



**Government of Puerto Rico
Department of Health
Medicaid Program**

**Attachment A: RFI Response Template
Medicaid Eligibility and Enrollment System
Request for Information**



Submitted on October 27, 2023

by



Contractor Address: 4250 US Highway 1, Suite 105
Monmouth Junction, New Jersey 08552
Contact Name: [REDACTED]
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3. Requested Information

Please provide responses in the below template, deleting the <response> notation, and including your narrative in the space provided.

Respondent Legal Entity Name: ESYSTEMS, INC.

Respondent Contact Person

Name: [REDACTED]

Title: National Sales Director

Mailing Address: 4250 US Highway 1, Suite 105, Monmouth Junction, New Jersey, 08552

Phone Number: [REDACTED]

Email: [REDACTED]

3.1 History of Medicaid Eligibility and Enrollment (E&E) Systems

- a. List the Respondent's current or previous contracts that showcase experience implementing or operating Medicaid E&E system(s) in states or territories, with particular emphasis on those of similar size to Puerto Rico.

Please provide the name of the state or territory in which the Respondent holds a contract, and the start and end dates for each contract described.

Additionally, please note if any of the listed contracts involve a Cúram system, and if the E&E system has been certified through the Centers for Medicare & Medicaid Services (CMS) certification process.

eSystems has been actively engaged in implementing and operating Medicaid Eligibility & Enrollment (E&E) and other Health & Human Services (HHS) projects, very similar to Puerto Rico since 2004. Over the past two decades, we have played a pivotal role in more than 26 significant HHS systems initiatives across the U.S. and Canada, 24 of which are based on the Merative Cúram Social Program Management Platform (SPMP), underlining our proficiency in this technology. Besides MAGI and Non-MAGI Medicaid, other programs that we have experience with include Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), General Assistance (GA), Child Welfare, Unemployment Insurance (UI), Workers' Compensation, Childcare, Child Support Enforcement and Low-Income Home Energy Assistance Program (LIHEAP).

Our commitment to excellence is further evident through our longstanding partnership with IBM Cúram, now Merative, and having achieved the Watson Health Gold Level IBM Business Partner status for Social Health Programs. With a partnership spanning over 19



[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

As evident from the experience listed in the above table, eSystems has a wealth of experience implementing and maintaining Health & Human Services (HHS) systems, particularly Medicaid Eligibility & Enrollment (E&E) Systems. We also have experience assisting Medicaid agencies in modernizing their E&E Systems, including transitioning from Cúram to an alternate technology platform. Additionally, we have provided support for the outgoing Cúram system during the modernization process.

For example, we have provided maintenance and support for the Cúram-based Arkansas Eligibility and Enrollment Framework (AR EEF) during a crucial phase when the State transitioned its Medicaid program to a different platform. Leveraging our extensive experience with Merative Cúram, we were awarded a contract by North Carolina to provide Cúram systems integration services. In this role, we are not only facilitating the migration of Cúram-based applications to the Cloud but also actively participating in the State's effort to modernize the Cúram application. This modernization includes the development of a more user-friendly front end, utilizing platforms like Salesforce.

We have one of the largest pools of Cúram experienced and certified resources in the industry, with more than 70% of our 200+ Cúram resources certified by IBM. Further, we invest heavily in our people, and our consistent annual growth over the past few years reflects our dedication to attracting the industry's best and brightest professionals.

By partnering with eSystems, Puerto Rico will gain an organization that not only understands your current requirements but is also well-equipped to support your future strategic initiatives, including modernization. We take great pride in our technical expertise, particularly in our ability to support projects of this nature. With our extensive experience in Medicaid E&E and deep understanding of the Merative Cúram SPMP, we are confident that we can assist the Territory in the modernization of your Medicaid Information Technology Initiative Third Generation (MEDITI3G) system, as well as its future management and operations. We will also be able to assist you in making the right technological choices in your modernization journey, including whether to continue with Cúram and choosing suitable alternatives.

By engaging us, Puerto Rico will have access to our extensive product knowledge, enabling you to harness the full potential of Cúram features, leading to improved program processes and outcomes. Our experience spans across several areas that are of interest to the Territory and is directly relevant to the services we offer. eSystems has a proven track record of successfully executing Cúram upgrades while providing ongoing maintenance and operations support services for our customers. Our decades of collaboration with Cúram, IBM, and now Merative for product support, including the resolution of product issues (PMRs), will extend the value of your existing investments. We bring substantial experience from various past projects providing maintenance and operations services and providing support across several Cúram projects across various health and human services



environments. Our dedicated Cúram Practice and Center of Excellence ensure that we deliver the high level of value-added support you are seeking. Furthermore, eSystems has established an internal Cúram training program to facilitate the continuous development and upskilling of our Cúram talent pool to ensure a steady availability of resources for your needs.

3.2 General Business Experience Taking Over or Replacing a Medicaid E&E System

a. For each E&E takeover project listed in Section 3.1, provide a narrative of the Respondent's experience, including a description of the following:

a. Recommended best practices and lessons learned in E&E takeover.

Assuming control of a Medicaid Eligibility and Enrollment (E&E) System is a complex and multifaceted endeavor, which requires adherence to best practices and the application of lessons learnt from past experiences. Drawing from our experience on more than 24 similar projects spanning the past two decades, we list below the best practices that we follow for a successful E&E takeover.

1. [Redacted]
2. [Redacted]
3. [Redacted]
4. [Redacted]
5. [Redacted]



6. [Redacted]

b. Challenges and/or risks

Taking over the operations of an existing Medicaid E&E system from another vendor can be a complex and challenging process. There are various challenges and risks involved, that eSystems is able to mitigate to a large extent due to our extensive experience in this field.

1. [Redacted]

2. [Redacted]

3. [Redacted]

4. [Redacted]

5. [Redacted]

6. [Redacted]

7. [Redacted]



[Redacted text block]

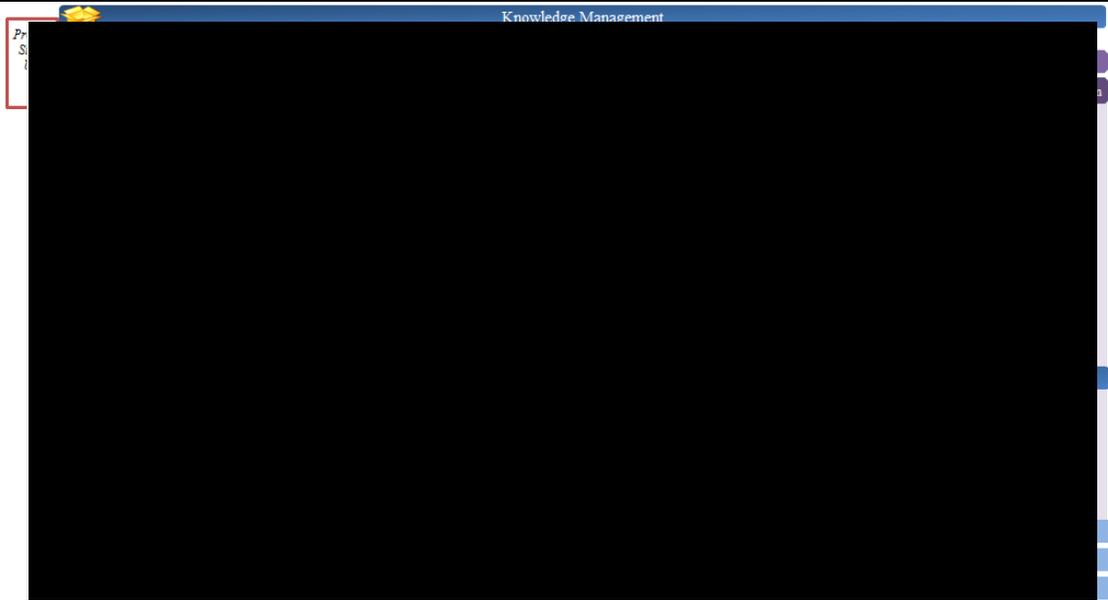
[Redacted text block]

c. Major milestones and success factors

eSystems has developed our own methodology for end-to-end transition of Medicaid E&E systems that it has perfected over the past two decades. Our transition methodology focuses on laying a solid foundation with robust planning to ensure the success of transition within planned timelines. Our methodology is adaptable and can be customized to align with the unique requirements of our customers, allowing for seamless integration with any specific methodology they may prefer to follow. The in-scope services are transitioned in a phase wise manner. The major milestones of our transition methodology are:

- [Redacted bullet point]
- [Redacted bullet point]
- [Redacted bullet point]
- [Redacted bullet point]

eSystems transition methodology is described in the diagram below.



Successful takeover of a Medicaid Eligibility and Enrollment System requires careful planning, strong collaboration, and a commitment to maintaining the continuity of critical services for Medicaid beneficiaries. Effective communication and a focus on data security, user training, and compliance are key to ensuring a successful transition.

3.3 Managing the Project Schedule for the Replacement or Takeover of a Medicaid E&E System

- a. Describe the expectations, roles, and responsibilities of the incumbent Maintenance and Operations (M&O) vendor and Puerto Rico Medicaid Program (PRMP) staff during the system replacement or takeover.

In order for a system replacement or takeover to be successful, the transition from the incumbent vendor to the new vendor is of extreme importance. There are specific expectations, roles, and responsibilities that eSystems would have for both the incumbent vendor and the PRMP staff that would directly impact the success of the transition activities. These roles and responsibilities are critical to ensuring a smooth transition and continued efficient operation of the Puerto Rico Medicaid program. Here's a breakdown of what each party is expected to do.

Incumbent Maintenance and Operations (M&O) Vendor

1. [Redacted]
2. [Redacted]



3. [Redacted]

4. [Redacted]

5. [Redacted]

Puerto Rico Medicaid Program (PRMP) Staff

1. [Redacted]

2. [Redacted]

3. [Redacted]

4. [Redacted] S.

5. [Redacted]

6. [Redacted]

7. [Redacted]

Successful system replacement or takeover efforts require effective collaboration and communication between eSystems, the incumbent M&O vendor and PRMP staff. Clear roles and responsibilities, as well as a well-defined transition plan, are essential to ensure a seamless and secure transition while maintaining the program's operations.



- b. What is the typical minimum and maximum duration for the completion of a system replacement or takeover and why? Please include a breakdown of the time between System Development Lifecycle (SDLC) phases.

The duration of a system replacement or takeover depends on a number of factors. These include:

1. Overall complexity of the Medicaid E&E system.
2. Number of programs being handled by the system.
3. Number of external systems that the Medicaid E&E system is interfacing with.
4. Various technologies and frameworks used in building the system.
5. In case of use of a Commercial-Off-The-Shelf (COTS) framework like Cúram, the extent of the configurations and customizations and whether or not they have been performed as per the COTS manufacturer standards and guidelines.
6. Expertise and experience of the new vendor taking over the system in the Commercial-Off-The-Shelf (COTS) framework like Cúram.

[Redacted]

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

- c. Describe risks and challenges associated with vendor transition and possibility of service interruption during the transition period of the system replacement or takeover. What risk mitigation strategies do you recommend?

Transitioning to a new vendor, whether for system replacement or takeover can be a complex and challenging process with several risks and possibility of potential service interruptions. Here are some of the key risks and challenges associated with vendor transition, along with recommended risk mitigation strategies:

1. [Redacted]



2. [Redacted]

3. [Redacted]

4. [Redacted]

5. [Redacted]

3.4 Staffing Approach for a Medicaid E&E System

- a. Provide the ideal staffing approach for the design, development/configuration, implementation period. How do you approach staffing shortages when state/territory resources or SMEs are limited?

eSystems staffing approach for the design, development / configuration, implementation period of a Medicaid E&E System is directly dependent on the complexity of the functional features to be implemented and effort required to implement them.

[Redacted]

eSystems would typically staff a Medicaid E&E implementation project in the following organization structure.



14. [REDACTED]

b. List the ideal staffing model for the M&O period of the replacement or takeover. Name the type and number of resources estimated for this project.

The staffing model for Maintenance and Operations (M&O) period of a Medicaid Eligibility and Enrollment (E&E) system will typically draw from the roles listed below. The roles required on a particular project and the number of resources for each role can vary depending on the system's size, complexity, and the volume of users and transactions. Smaller systems may require fewer resources, while larger, more complex systems serving a larger population may need additional staffing. Additionally, the staffing model may evolve over time as the system matures and requirements change. System stability, including the number of open production defects and their severity is another important factor governing staffing levels.

- [REDACTED]

It is essential to conduct a comprehensive assessment of the specific needs and budget constraints for Maintenance and Operations (M&O) of the Puerto Rico Medicaid Information Technology Initiative Third Generation (MEDIT13G) system to determine the exact staffing model and team size.

c. Describe the approach to training state/territory staff and regional caseworkers. Provide any suggestions for improving system adoption, through training, regional outreach, stakeholder engagement, or otherwise.



Effective Organization Change Management (OCM) and Training are key to successful adoption of a newly rolled out Medicaid Eligibility and Enrollment (E&E) System or even for major enhancements to an existing system.

[Redacted text block]

[Redacted text block]

[Redacted text block]

To conduct the training, we use a variety of training methods, including in-person, virtual, and self-paced e-learning modules. We have found that different people learn in different ways, so offering multiple options can be more effective. We conduct regular assessments or quizzes to evaluate knowledge retention and identify areas where additional training may be needed.

In addition to following the training approach laid out above, provided below are some additional suggestions for improving system adoption.

[Redacted text block]



[Redacted content]

3.5 Cost Estimates and Models for the Replacement or Takeover of a Medicaid E&E System

- a. Provide the typical price range for the replacement or takeover of a Medicaid E&E System and elaborate on key considerations, drivers, and components for pricing.

The typical cost range for replacing or taking over a Medicaid Eligibility and Enrollment (E&E) System can vary significantly due to numerous factors, such as the size and complexity of the system, the scope and duration of the contract, the technologies used, the level of federal funding available, the geographical location, and the experience and expertise of the implementing vendor. [Redacted]

[Redacted]

Some of the key considerations, drivers, and components for pricing are:

- [Redacted]



- [Redacted]

- [Redacted]

- [Redacted]

- [Redacted]

b. For the projects you have mentioned in this RFI response, what were your implementation and operational costs? What are the main cost drivers?

[Redacted]

Our main cost drivers have been the following.

- [Redacted]

- [Redacted]

- [Redacted]



- [Redacted]

c. Describe how system enhancements are typically managed. What recommendations do you have for controlling enhancements costs?

Managing system enhancements for a Medicaid Eligibility and Enrollment (E&E) system is a critical aspect of maintaining system effectiveness and ensuring that it continues to meet evolving requirements.

We typically collaborate with the Client and implement a formal Project Change Control Process to manage system enhancements. This process includes a mechanism for requesting, reviewing, approving, and tracking enhancements. Project dashboards can serve as valuable tools for providing insights into requested enhancements and their status or disposition.

To manage enhancement costs effectively, it is crucial to maintain control over both scope and schedule of enhancements. It is essential for all enhancements to undergo a rigorous approval process as part of Project Change Control. We start by prioritizing all enhancement requests based on their impact, urgency, and alignment with the overall goals of the program. We establish and use a clear criterion for prioritization. This is followed by a Cost-Benefit Analysis for each enhancement request. We conduct cost-benefit analyses for each enhancement to evaluate whether the expected benefits justify the cost and effort. This analysis helps our clients make informed decisions and control overall enhancements costs.

[Redacted]

[Redacted]

3.6 Documentation

a. List and describe documentation that is essential to plan and execute a replacement or takeover (before, during, and after).

Planning and executing a Medicaid Eligibility & Enrollment (E&E) System replacement or takeover is a complex process that requires extensive documentation to ensure the project's success. Here is a list of essential documentation needed before, during, and after the replacement or takeover:



- **Before Implementation**

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

- **During Implementation**

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]



- [Redacted]

- **After Implementation**

- [Redacted]

b. What documentation is not essential, but may be desirable?

While the documentation listed above is critical for the planning, execution, and management of a Medicaid Eligibility & Enrollment (E&E) System replacement or takeover, there are other documents that may be desirable, depending on the specific circumstances and project goals. These documents can provide additional context, improve communication, and enhance project efficiency. Here are some examples of desirable but non-essential documentation.

- [Redacted]

- [Redacted]



[Redacted]

- [Redacted]
- [Redacted]
- [Redacted]

The inclusion of the above documents should be determined based on the specific goals, complexities, and stakeholder requirements of the Medicaid E&E system replacement or takeover project. While not essential, they can add value to the project by providing additional information and context for decision-making and project management.

c. What documentation would be helpful to include in a future “bidders’ library” to assist offerors?

All documents provided in our response to 3.6 (a) above and any additional material from the list in response to 3.6 (b) will be helpful to include in a future bidders’ library.

d. When there is limited written information, how do you address gaps/what alternate ways do you use to estimate level of effort or project risk?

When faced with limited written information, addressing gaps and estimating the level of effort or project risk requires a combination of alternative approaches and proactive measures to gather relevant information. Based on our experience on over 24 similar project implementations, we recommend the following strategies in such cases.

1. [Redacted]
- [Redacted]
- [Redacted]



4. [REDACTED]
- [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]

3.7 Alternative Approaches

- a. The current Puerto Rico E&E System is a CMS Certified system, running on a Cúram platform. What do you recommend as PRMP considers options for modernizing and enhancing their solution? Please provide any additional information regarding alternative approaches that may be beneficial for PRMP to consider ahead of a potential future procurement.

We would like to thank Puerto Rico Medicaid Program (PRMP) for answering our questions

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]



1.	[Redacted]
■	[Redacted]



[REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]

[REDACTED]

b. Considering the layouts of the existing solution depicted in Section 2 of the RFI, do any modules lend themselves well to enhancements or modernization?

Based on the layouts of the existing solution depicted in Section 2 of the RFI, we believe that [REDACTED]

[REDACTED] We also believe that the existing solution will greatly benefit from the system improvements that we have suggested in our response to Section 3.7(a) above.

c. Is the Respondent willing to provide an E&E system demo or provide additional information upon PRMPs request?

✓ Yes



No

3.8 Anticipated Engagement and Potential Barriers

- a. Should PRMP release an E&E takeover or replacement RFP over the next several months, what limiting factors or constraints might prevent your organization from participating?

eSystems is committed to actively engage with the Eligibility and Enrollment (E&E) takeover or replacement Request for Proposal (RFP) should Puerto Rico Medicaid Program (PRMP) decide to release one. [REDACTED]

However, some of the factors that could potentially prevent us from participating in the procurement process include:

1. [REDACTED]