



Department of Administration  
Purchasing Division  
2019 Washington Street East  
Post Office Box 50130  
Charleston, WV 25305-0130

# State of West Virginia Master Agreement

Order Date: 03-20-2023

CORRECT ORDER NUMBER MUST  
APPEAR ON ALL PACKAGES, INVOICES,  
AND SHIPPING PAPERS. QUESTIONS  
CONCERNING THIS ORDER SHOULD BE  
DIRECTED TO THE DEPARTMENT  
CONTACT.

Order Number:	CMA 0225 0225 PEI2300000002 1	Procurement Folder:	966930
Document Name:	BENEFITS ADMINISTRATION SYSTEM	Reason for Modification:	
Document Description:	BENEFITS ADMINISTRATION SYSTEM	Award of CRFP PEI2200000001	
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2023-04-01
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2028-03-31

VENDOR	DEPARTMENT CONTACT																				
Vendor Customer Code: VC0000093865 LIFEWORKS US LTD 115 PERIMETER CENTER PLACE  ATLANTA GA 30346 US Vendor Contact Phone: 000-000-0000 Extension:  Discount Details: <table><thead><tr><th></th><th>Discount Allowed</th><th>Discount Percentage</th><th>Discount Days</th></tr></thead><tbody><tr><td>#1</td><td>No</td><td>0.0000</td><td>0</td></tr><tr><td>#2</td><td>No</td><td></td><td></td></tr><tr><td>#3</td><td>No</td><td></td><td></td></tr><tr><td>#4</td><td>No</td><td></td><td></td></tr></tbody></table>		Discount Allowed	Discount Percentage	Discount Days	#1	No	0.0000	0	#2	No			#3	No			#4	No			Requestor Name: Jessica L Virtz Requestor Phone: (304) 558-7850 Requestor Email: jessica.l.virtz@wv.gov  <b>23</b> FILE LOCATION _____
	Discount Allowed	Discount Percentage	Discount Days																		
#1	No	0.0000	0																		
#2	No																				
#3	No																				
#4	No																				

INVOICE TO	SHIP TO
PUBLIC EMPLOYEES INSURANCE STE 2 601 57TH ST SE CHARLESTON WV 25304 US	PUBLIC EMPLOYEES INSURANCE STE 2 601 57TH ST, SE CHARLESTON WV 25304 US

Total Order Amount:

Open End

Purchasing Division's File Copy

ENTERED

PURCHASING DIVISION AUTHORIZATION

DATE: 04/03/23

ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM

DATE:

ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION

DATE:

ELECTRONIC SIGNATURE ON FILE

**Extended Description:**  
 Central Master Agreement  
 Open-End

The Vendor, LifeWorks Ltd. of Atlanta, GA agrees to enter into this Open-End contract with the West Virginia Public Employees Insurance Agency (hereinafter referred to as the "Agency" or "PEIA") to provide a fully integrated vendor hosted benefits administration system for health and insurance benefits per the bid requirements, specifications, terms and conditions Addendum No. 1 dated 03/25/2022, Addendum No. 2 dated 04/01/2022, Addendum No.3 dated 04/19/2022 and the Vendors submitted bid dated 05/25/2022 incorporated herein by reference and made a part hereof.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	81110000				0.000000
Service From		Service To		Service Contract Amount	
				5471140.00	

**Commodity Line Description:** Solution Implementation

**Extended Description:**

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
3	43230000			EA	528860.000000
Service From		Service To		Service Contract Amount	
				0.00	

**Commodity Line Description:** Third Party Software

**Extended Description:**

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
4	81110000				0.000000
	Service From	Service To	Service Contract Amount		
			0.00		

**Commodity Line Description:** Annual Fees - Hosting

**Extended Description:**  
 \$550,000.00 PER YEAR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
5	81112200				0.000000
	Service From	Service To		Service Contract Amount	
				0.00	

**Commodity Line Description:** Annual Fees - License/Maintenance (Vendor Software)

**Extended Description:**  
 \$857,752.00 PER YEAR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
6	81112200				0.000000
Service From		Service To		Service Contract Amount	
				0.00	

**Commodity Line Description:** Annual Fees - License/Maintenance (Third Party Software)

**Extended Description:**  
 \$92,428.00 PER YEAR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
9	81110000				0.000000
	<b>Service From</b>	<b>Service To</b>		<b>Service Contract Amount</b>	
				0.00	

**Commodity Line Description:** Additional Support - Additional Functional Requirements

**Extended Description:**  
\$300.00 PER HOUR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
10	81110000				0.000000
	<b>Service From</b>	<b>Service To</b>		<b>Service Contract Amount</b>	
				0.00	

**Commodity Line Description:** Additional Support - Support Ticket Consulting (Low)

**Extended Description:**  
\$300.00 PER HOUR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
11	81110000				0.000000
	<b>Service From</b>	<b>Service To</b>		<b>Service Contract Amount</b>	
				0.00	

**Commodity Line Description:** Additional Support - Support Ticket Consulting (Moderate)

**Extended Description:**  
\$300.00 PER HOUR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
12	81110000				0.000000
	<b>Service From</b>	<b>Service To</b>		<b>Service Contract Amount</b>	
				0.00	

**Commodity Line Description:** Additional Support - Support Ticket Consulting (High)

**Extended Description:**  
\$300.00 PER HOUR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
13	81110000				0.000000
	<b>Service From</b>	<b>Service To</b>		<b>Service Contract Amount</b>	
				0.00	

**Commodity Line Description:** Additional Support - Support Ticket Consulting (Critical)

**Extended Description:**  
\$300.00 PER HOUR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
14	81110000				0.000000
	<b>Service From</b>	<b>Service To</b>		<b>Service Contract Amount</b>	
				0.00	

**Commodity Line Description:** Additional Support - Additional Training

**Extended Description:**  
\$300.00 PER HOUR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
15	81110000				0.000000

Service From	Service To	Service Contract Amount
		0.00

Commodity Line Description: Additional Support - Additional Interfaces

Extended Description:  
\$300.00 PER HOUR

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
16	81110000				0.000000

Service From	Service To	Service Contract Amount
		0.00

Commodity Line Description: Additional Support - Additional Reporting

Extended Description:  
\$300.00 PER HOUR



## **GENERAL TERMS AND CONDITIONS:**

**1. CONTRACTUAL AGREEMENT:** Issuance of an Award Document signed by the Purchasing Division Director, or his designee, and approved as to form by the Attorney General's office constitutes acceptance by the State of this Contract made by and between the State of West Virginia and the Vendor. Vendor's signature on its bid, or on the Contract if the Contract is not the result of a bid solicitation, signifies Vendor's agreement to be bound by and accept the terms and conditions contained in this Contract.

**2. DEFINITIONS:** As used in this Solicitation/Contract, the following terms shall have the meanings attributed to them below. Additional definitions may be found in the specifications included with this Solicitation/Contract.

**2.1. "Agency" or "Agencies"** means the agency, board, commission, or other entity of the State of West Virginia that is identified on the first page of the Solicitation or any other public entity seeking to procure goods or services under this Contract.

**2.2. "Bid" or "Proposal"** means the vendors submitted response to this solicitation.

**2.3. "Contract"** means the binding agreement that is entered into between the State and the Vendor to provide the goods or services requested in the Solicitation.

**2.4. "Director"** means the Director of the West Virginia Department of Administration, Purchasing Division.

**2.5. "Purchasing Division"** means the West Virginia Department of Administration, Purchasing Division.

**2.6. "Award Document"** means the document signed by the Agency and the Purchasing Division, and approved as to form by the Attorney General, that identifies the Vendor as the contract holder.

**2.7. "Solicitation"** means the official notice of an opportunity to supply the State with goods or services that is published by the Purchasing Division.

**2.8. "State"** means the State of West Virginia and/or any of its agencies, commissions, boards, etc. as context requires.

**2.9. "Vendor" or "Vendors"** means any entity submitting a bid in response to the Solicitation, the entity that has been selected as the lowest responsible bidder, or the entity that has been awarded the Contract as context requires.

**3. CONTRACT TERM; RENEWAL; EXTENSION:** The term of this Contract shall be determined in accordance with the category that has been identified as applicable to this Contract below:

☒ **Term Contract**

**Initial Contract Term:** The Initial Contract Term will be for a period of FIVE (5) years from acceptance of system. The Initial Contract Term becomes effective on the effective start date listed on the first page of this Contract and the Initial Contract Term ends on the effective end date also shown on the first page of this Contract.

**Renewal Term:** This Contract may be renewed upon the mutual written consent of the Agency, and the Vendor, with approval of the Purchasing Division and the Attorney General's office (Attorney General approval is as to form only). Any request for renewal should be delivered to the Agency and then submitted to the Purchasing Division thirty (30) days prior to the expiration date of the initial contract term or appropriate renewal term. A Contract renewal shall be in accordance with the terms and conditions of the original contract. Unless otherwise specified below, renewal of this Contract is limited to THREE (3) successive one (1) year periods or multiple renewal periods of less than one year, provided that the multiple renewal periods do not exceed the total number of months available in all renewal years combined. Automatic renewal of this Contract is prohibited. Renewals must be approved by the Vendor, Agency, Purchasing Division and Attorney General's office (Attorney General approval is as to form only)

☐ **Alternate Renewal Term** – This contract may be renewed for \_\_\_\_\_ successive \_\_\_\_\_ year periods or shorter periods provided that they do not exceed the total number of months contained in all available renewals. Automatic renewal of this Contract is prohibited. Renewals must be approved by the Vendor, Agency, Purchasing Division and Attorney General's office (Attorney General approval is as to form only)

**Delivery Order Limitations:** In the event that this contract permits delivery orders, a delivery order may only be issued during the time this Contract is in effect. Any delivery order issued within one year of the expiration of this Contract shall be effective for one year from the date the delivery order is issued. No delivery order may be extended beyond one year after this Contract has expired.

☐ **Fixed Period Contract:** This Contract becomes effective upon Vendor's receipt of the notice to proceed and must be completed within \_\_\_\_\_ days.

☐ **Fixed Period Contract with Renewals:** This Contract becomes effective upon Vendor's receipt of the notice to proceed and part of the Contract more fully described in the attached specifications must be completed within \_\_\_\_\_ days. Upon completion of the work covered by the preceding sentence, the vendor agrees that maintenance, monitoring, or warranty services will be provided for \_\_\_\_\_ year(s) thereafter.

☐ **One-Time Purchase:** The term of this Contract shall run from the issuance of the Award Document until all of the goods contracted for have been delivered, but in no event will this Contract extend for more than one fiscal year.

☐ **Other:** Contract Term specified in \_\_\_\_\_

**4. AUTHORITY TO PROCEED:** Vendor is authorized to begin performance of this contract on the date of encumbrance listed on the front page of the Award Document unless either the box for "Fixed Period Contract" or "Fixed Period Contract with Renewals" has been checked in Section 3 above. If either "Fixed Period Contract" or "Fixed Period Contract with Renewals" has been checked, Vendor must not begin work until it receives a separate notice to proceed from the State. The notice to proceed will then be incorporated into the Contract via change order to memorialize the official date that work commenced.

**5. QUANTITIES:** The quantities required under this Contract shall be determined in accordance with the category that has been identified as applicable to this Contract below.

☒ **Open End Contract:** Quantities listed in this Solicitation/Award Document are approximations only, based on estimates supplied by the Agency. It is understood and agreed that the Contract shall cover the quantities actually ordered for delivery during the term of the Contract, whether more or less than the quantities shown.

☐ **Service:** The scope of the service to be provided will be more clearly defined in the specifications included herewith.

☒ **Combined Service and Goods:** The scope of the service and deliverable goods to be provided will be more clearly defined in the specifications included herewith.

☐ **One Time Purchase:** This Contract is for the purchase of a set quantity of goods that are identified in the specifications included herewith. Once those items have been delivered, no additional goods may be procured under this Contract without an appropriate change order approved by the Vendor, Agency, Purchasing Division, and Attorney General's office.

**6. EMERGENCY PURCHASES:** The Purchasing Division Director may authorize the Agency to purchase goods or services in the open market that Vendor would otherwise provide under this Contract if those goods or services are for immediate or expedited delivery in an emergency. Emergencies shall include, but are not limited to, delays in transportation or an unanticipated increase in the volume of work. An emergency purchase in the open market, approved by the Purchasing Division Director, shall not constitute a breach of this Contract and shall not entitle the Vendor to any form of compensation or damages. This provision does not excuse the State from fulfilling its obligations under a One Time Purchase contract.

**7. REQUIRED DOCUMENTS:** All of the items checked in this section must be provided to the Purchasing Division by the Vendor as specified:

☐ **BID BOND (Construction Only):** Pursuant to the requirements contained in W. Va. Code § 5-22-1(c), All Vendors submitting a bid on a construction project shall furnish a valid bid bond in the amount of five percent (5%) of the total amount of the bid protecting the State of West Virginia. The bid bond must be submitted with the bid.

☐ **PERFORMANCE BOND:** The apparent successful Vendor shall provide a performance bond in the amount of 100% of the contract. The performance bond must be received by the Purchasing Division prior to Contract award.

☐ **LABOR/MATERIAL PAYMENT BOND:** The apparent successful Vendor shall provide a labor/material payment bond in the amount of 100% of the Contract value. The labor/material payment bond must be delivered to the Purchasing Division prior to Contract award.

In lieu of the Bid Bond, Performance Bond, and Labor/Material Payment Bond, the Vendor may provide certified checks, cashier's checks, or irrevocable letters of credit. Any certified check, cashier's check, or irrevocable letter of credit provided in lieu of a bond must be of the same amount and delivered on the same schedule as the bond it replaces. A letter of credit submitted in lieu of a performance and labor/material payment bond will only be allowed for projects under \$100,000. Personal or business checks are not acceptable. Notwithstanding the foregoing, West Virginia Code § 5-22-1 (d) mandates that a vendor provide a performance and labor/material payment bond for construction projects. Accordingly, substitutions for the performance and labor/material payment bonds for construction projects is not permitted.

☐ **MAINTENANCE BOND:** The apparent successful Vendor shall provide a two (2) year maintenance bond covering the roofing system. The maintenance bond must be issued and delivered to the Purchasing Division prior to Contract award.

☐ **LICENSE(S) / CERTIFICATIONS / PERMITS:** In addition to anything required under the Section of the General Terms and Conditions entitled Licensing, the apparent successful Vendor shall furnish proof of the following licenses, certifications, and/or permits upon request and in a form acceptable to the State. The request may be prior to or after contract award at the State's sole discretion.

☐☐☐☐

The apparent successful Vendor shall also furnish proof of any additional licenses or certifications contained in the specifications regardless of whether or not that requirement is listed above.

**8. INSURANCE:** The apparent successful Vendor shall furnish proof of the insurance identified by a checkmark below and must include the State as an additional insured on each policy prior to Contract award. The insurance coverages identified below must be maintained throughout the life of this contract. Thirty (30) days prior to the expiration of the insurance policies, Vendor shall provide the Agency with proof that the insurance mandated herein has been continued. Vendor must also provide Agency with immediate notice of any changes in its insurance policies, including but not limited to, policy cancelation, policy reduction, or change in insurers. The apparent successful Vendor shall also furnish proof of any additional insurance requirements contained in the specifications prior to Contract award regardless of whether that insurance requirement is listed in this section.

Vendor must maintain:

☒ **Commercial General Liability Insurance** in at least an amount of: \$1,000,000.00 per occurrence.

☐ **Automobile Liability Insurance** in at least an amount of: \_\_\_\_\_ per occurrence.

☒ **Professional/Malpractice/Errors and Omission Insurance** in at least an amount of: \$1,000,000.00 per occurrence. Notwithstanding the forgoing, Vendor's are not required to list the State as an additional insured for this type of policy.

☐ **Commercial Crime and Third Party Fidelity Insurance** in an amount of: \_\_\_\_\_ per occurrence.

☒ **Cyber Liability Insurance** in an amount of: \$10,000,000.00 per occurrence.

☐ **Builders Risk Insurance** in an amount equal to 100% of the amount of the Contract.

☐ **Pollution Insurance** in an amount of: \_\_\_\_\_ per occurrence.

☐ **Aircraft Liability** in an amount of: \_\_\_\_\_ per occurrence.

☐☐☐☐

Notwithstanding anything contained in this section to the contrary, the Director of the Purchasing Division reserves the right to waive the requirement that the State be named as an additional insured on one or more of the Vendor's insurance policies if the Director finds that doing so is in the State's best interest.

**9. WORKERS' COMPENSATION INSURANCE:** Vendor shall comply with laws relating to workers compensation, shall maintain workers' compensation insurance when required, and shall furnish proof of workers' compensation insurance upon request.

**10. [Reserved]**

**11. LIQUIDATED DAMAGES:** This clause shall in no way be considered exclusive and shall not limit the State or Agency's right to pursue any other available remedy. Vendor shall pay liquidated damages in the amount specified below or as described in the specifications:

☐ \_\_\_\_\_ for \_\_\_\_\_.

☐ Liquidated Damages Contained in the Specifications.

☒ Liquidated Damages Are Not Included in this Contract.

**12. ACCEPTANCE:** Vendor's signature on its bid, or on the certification and signature page, constitutes an offer to the State that cannot be unilaterally withdrawn, signifies that the product or service proposed by vendor meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise indicated, and signifies acceptance of the terms and conditions contained in the Solicitation unless otherwise indicated.

**13. PRICING:** The pricing set forth herein is firm for the life of the Contract, unless specified elsewhere within this Solicitation/Contract by the State. A Vendor's inclusion of price adjustment provisions in its bid, without an express authorization from the State in the Solicitation to do so, may result in bid disqualification. Notwithstanding the foregoing, Vendor must extend any publicly advertised sale price to the State and invoice at the lower of the contract price or the publicly advertised sale price.

**14. PAYMENT IN ARREARS:** Payments for goods/services will be made in arrears only upon receipt of a proper invoice, detailing the goods/services provided or receipt of the goods/services, whichever is later. Notwithstanding the foregoing, payments for software maintenance, licenses, or subscriptions may be paid annually in advance.

**15. PAYMENT METHODS:** Vendor must accept payment by electronic funds transfer and P-Card. (The State of West Virginia's Purchasing Card program, administered under contract by a banking institution, processes payment for goods and services through state designated credit cards.)



**16. TAXES:** The Vendor shall pay any applicable sales, use, personal property or any other taxes arising out of this Contract and the transactions contemplated thereby. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.

**17. ADDITIONAL FEES:** Vendor is not permitted to charge additional fees or assess additional charges that were not either expressly provided for in the solicitation published by the State of West Virginia, included in the Contract, or included in the unit price or lump sum bid amount that Vendor is required by the solicitation to provide. Including such fees or charges as notes to the solicitation may result in rejection of vendor's bid. Requesting such fees or charges be paid after the contract has been awarded may result in cancellation of the contract.

**18. FUNDING:** This Contract shall continue for the term stated herein, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise made available, this Contract becomes void and of no effect beginning on July 1 of the fiscal year for which funding has not been appropriated or otherwise made available. If that occurs, the State may notify the Vendor that an alternative source of funding has been obtained and thereby avoid the automatic termination. Non-appropriation or non-funding shall not be considered an event of default.

**19. CANCELLATION:** The Purchasing Division Director reserves the right to cancel this Contract immediately upon written notice to the vendor if the materials or workmanship supplied do not conform to the specifications contained in the Contract. The Purchasing Division Director may also cancel any purchase or Contract upon 30 days written notice to the Vendor in accordance with West Virginia Code of State Rules § 148-1-5.2.b.

**20. TIME:** Time is of the essence regarding all matters of time and performance in this Contract.

**21. APPLICABLE LAW:** This Contract is governed by and interpreted under West Virginia law without giving effect to its choice of law principles. Any information provided in specification manuals, or any other source, verbal or written, which contradicts or violates the West Virginia Constitution, West Virginia Code, or West Virginia Code of State Rules is void and of no effect.

**22. COMPLIANCE WITH LAWS:** Vendor shall comply with all applicable federal, state, and local laws, regulations and ordinances. By submitting a bid, Vendor acknowledges that it has reviewed, understands, and will comply with all applicable laws, regulations, and ordinances.

**SUBCONTRACTOR COMPLIANCE:** Vendor shall notify all subcontractors providing commodities or services related to this Contract that as subcontractors, they too are required to comply with all applicable laws, regulations, and ordinances. Notification under this provision must occur prior to the performance of any work under the contract by the subcontractor.

**23. ARBITRATION:** Any references made to arbitration contained in this Contract, Vendor's bid, or in any American Institute of Architects documents pertaining to this Contract are hereby deleted, void, and of no effect.

**24. MODIFICATIONS:** This writing is the parties' final expression of intent. Notwithstanding anything contained in this Contract to the contrary no modification of this Contract shall be binding without mutual written consent of the Agency, and the Vendor, with approval of the Purchasing Division and the Attorney General's office (Attorney General approval is as to form only). Any change to existing contracts that adds work or changes contract cost, and were not included in the original contract, must be approved by the Purchasing Division and the Attorney General's Office (as to form) prior to the implementation of the change or commencement of work affected by the change.

**25. WAIVER:** The failure of either party to insist upon a strict performance of any of the terms or provision of this Contract, or to exercise any option, right, or remedy herein contained, shall not be construed as a waiver or a relinquishment for the future of such term, provision, option, right, or remedy, but the same shall continue in full force and effect. Any waiver must be expressly stated in writing and signed by the waiving party.

**26. SUBSEQUENT FORMS:** The terms and conditions contained in this Contract shall supersede any and all subsequent terms and conditions which may appear on any form documents submitted by Vendor to the Agency or Purchasing Division such as price lists, order forms, invoices, sales agreements, or maintenance agreements, and includes internet websites or other electronic documents. Acceptance or use of Vendor's forms does not constitute acceptance of the terms and conditions contained thereon.

**27. ASSIGNMENT:** Neither this Contract nor any monies due, or to become due hereunder, may be assigned by the Vendor without the express written consent of the Agency, the Purchasing Division, the Attorney General's office (as to form only), and any other government agency or office that may be required to approve such assignments.

**28. WARRANTY:** The Vendor expressly warrants that the goods and/or services covered by this Contract will: (a) conform to the specifications, drawings, samples, or other description furnished or specified by the Agency; (b) be merchantable and fit for the purpose intended; and (c) be free from defect in material and workmanship.

**29. STATE EMPLOYEES:** State employees are not permitted to utilize this Contract for personal use and the Vendor is prohibited from permitting or facilitating the same.

**30. PRIVACY, SECURITY, AND CONFIDENTIALITY:** The Vendor agrees that it 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 is made pursuant to the Agency's policies, procedures, and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in <http://www.state.wv.us/admin/purchase/privacy/default.html>.



**31. YOUR SUBMISSION IS A PUBLIC DOCUMENT:** Vendor's entire response to the Solicitation and the resulting Contract are public documents. As public documents, they will be disclosed to the public following the bid/proposal opening or award of the contract, as required by the competitive bidding laws of West Virginia Code §§ 5A-3-1 et seq., 5-22-1 et seq., and 5G-1-1 et seq. and the Freedom of Information Act West Virginia Code §§ 29B-1-1 et seq.

**DO NOT SUBMIT MATERIAL YOU CONSIDER TO BE CONFIDENTIAL, A TRADE SECRET, OR OTHERWISE NOT SUBJECT TO PUBLIC DISCLOSURE.**

Submission of any bid, proposal, or other document to the Purchasing Division constitutes your explicit consent to the subsequent public disclosure of the bid, proposal, or document. The Purchasing Division will disclose any document labeled "confidential," "proprietary," "trade secret," "private," or labeled with any other claim against public disclosure of the documents, to include any "trade secrets" as defined by West Virginia Code § 47-22-1 et seq. All submissions are subject to public disclosure without notice.

**32. LICENSING:** In accordance with West Virginia Code of State Rules § 148-1-6.1.e, Vendor must be licensed and in good standing in accordance with any and all state and local laws and requirements 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 Tax Department, West Virginia Insurance Commission, or any other state agency or political subdivision. Obligations related to political subdivisions may include, but are not limited to, business licensing, business and occupation taxes, inspection compliance, permitting, etc. Upon request, the Vendor must provide all necessary releases to obtain information to enable the Purchasing Division Director or the Agency to verify that the Vendor is licensed and in good standing with the above entities.

**SUBCONTRACTOR COMPLIANCE:** Vendor shall notify all subcontractors providing commodities or services related to this Contract that as subcontractors, they too are required to be licensed, in good standing, and up-to-date on all state and local obligations as described in this section. Obligations related to political subdivisions may include, but are not limited to, business licensing, business and occupation taxes, inspection compliance, permitting, etc. Notification under this provision must occur prior to the performance of any work under the contract by the subcontractor.

**33. ANTITRUST:** In submitting a bid to, signing a contract with, or accepting a Award Document from any agency of the State of West Virginia, the Vendor agrees to convey, sell, assign, or transfer to the State of West Virginia all rights, title, and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to Vendor.

**34. VENDOR CERTIFICATIONS:** By signing its bid or entering into this Contract, Vendor certifies (1) that its bid or offer was made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership, person or entity submitting a bid or offer for the same material, supplies, equipment or services; (2) that its bid or offer is in all respects fair and without collusion or fraud; (3) that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; and (4) that it has reviewed this Solicitation in its entirety; understands the requirements, terms and conditions, and other information contained herein.

Vendor's signature on its bid or offer also affirms that neither it nor its representatives have any interest, nor shall acquire any interest, direct or indirect, which would compromise the performance of its services hereunder. Any such interests shall be promptly presented in detail to the Agency. The individual signing this bid or offer on behalf of Vendor certifies that he or she is authorized by the Vendor to execute this bid or offer or any documents related thereto on Vendor's behalf; that he or she is authorized to bind the Vendor in a contractual relationship; and that, to the best of his or her knowledge, the Vendor has properly registered with any State agency that may require registration.

**35. VENDOR RELATIONSHIP:** The relationship of the Vendor to the State shall be that of an independent contractor and no principal-agent relationship or employer-employee relationship is contemplated or created by this Contract. The Vendor as an independent contractor is solely liable for the acts and omissions of its employees and agents. Vendor shall be responsible for selecting, supervising, and compensating any and all individuals employed pursuant to the terms of this Solicitation and resulting contract. Neither the Vendor, nor any employees or subcontractors of the Vendor, shall be deemed to be employees of the State for any purpose whatsoever. Vendor shall be exclusively responsible for payment of employees and contractors for all wages and salaries, taxes, withholding payments, penalties, fees, fringe benefits, professional liability insurance premiums, contributions to insurance and pension, or other deferred compensation plans, including but not limited to, Workers' Compensation and Social Security obligations, licensing fees, etc. and the filing of all necessary documents, forms, and returns pertinent to all of the foregoing.

Vendor shall hold harmless the State, and shall provide the State and Agency with a defense against any and all claims including, but not limited to, the foregoing payments, withholdings, contributions, taxes, Social Security taxes, and employer income tax returns.

**36. INDEMNIFICATION:** The Vendor agrees to indemnify, defend, and hold harmless the State and the Agency, their officers, and employees from and against: (1) Any claims or losses for services rendered by any subcontractor, person, or firm performing or supplying services, materials, or supplies in connection with the performance of the Contract; (2) Any claims or losses resulting to any person or entity injured or damaged by the Vendor, its officers, employees, or subcontractors by the publication, translation, reproduction, delivery, performance, use, or disposition of any data used under the Contract in a manner not authorized by the Contract, or by Federal or State statutes or regulations; and (3) Any failure of the Vendor, its officers, employees, or subcontractors to observe State and Federal laws including, but not limited to, labor and wage and hour laws.

**37. PURCHASING AFFIDAVIT:** In accordance with West Virginia Code §§ 5A-3-10a and 5-22-1(i), the State is prohibited from awarding a contract to any bidder that owes a debt to the State or a political subdivision of the State, Vendors are required to sign, notarize, and submit the Purchasing Affidavit to the Purchasing Division affirming under oath that it is not in default on any monetary obligation owed to the state or a political subdivision of the state.

**38. CONFLICT OF INTEREST:** Vendor, its officers or members or employees, shall not presently have or acquire an interest, direct or indirect, which would conflict with or compromise the performance of its obligations hereunder. Vendor shall periodically inquire of its officers, members and employees to ensure that a conflict of interest does not arise. Any conflict of interest discovered shall be promptly presented in detail to the Agency.

**39. REPORTS:** Vendor shall provide the Agency and/or the Purchasing Division with the following reports identified by a checked box below:

☒ Such reports as the Agency and/or the Purchasing Division may request. Requested reports may include, but are not limited to, quantities purchased, agencies utilizing the contract, total contract expenditures by agency, etc.

☐ Quarterly reports detailing the total quantity of purchases in units and dollars, along with a listing of purchases by agency. Quarterly reports should be delivered to the Purchasing Division via email at [purchasing.division@wv.gov](mailto:purchasing.division@wv.gov).

**40. BACKGROUND CHECK:** In accordance with W. Va. Code § 15-2D-3, the State reserves the right to prohibit a service provider's employees from accessing sensitive or critical information or to be present at the Capitol complex based upon results addressed from a criminal background check. Service providers should contact the West Virginia Division of Protective Services by phone at (304) 558-9911 for more information.

**41. PREFERENCE FOR USE OF DOMESTIC STEEL PRODUCTS:** Except when authorized by the Director of the Purchasing Division pursuant to W. Va. Code § 5A-3-56, no contractor may use or supply steel products for a State Contract Project other than those steel products made in the United States. A contractor who uses steel products in violation of this section may be subject to civil penalties pursuant to W. Va. Code § 5A-3-56. As used in this section:

- a. "State Contract Project" means any erection or construction of, or any addition to, alteration of or other improvement to any building or structure, including, but not limited to, roads or highways, or the installation of any heating or cooling or ventilating plants or other equipment, or the supply of and materials for such projects, pursuant to a contract with the State of West Virginia for which bids were solicited on or after June 6, 2001.
- b. "Steel Products" means products rolled, formed, shaped, drawn, extruded, forged, cast, fabricated or otherwise similarly processed, or processed by a combination of two or more or such operations, from steel made by the open heath, basic oxygen, electric furnace, Bessemer or other steel making process.
- c. The Purchasing Division Director may, in writing, authorize the use of foreign steel products if:

1. The cost for each contract item used does not exceed one tenth of one percent (.1%) of the total contract cost or two thousand five hundred dollars (\$2,500.00), whichever is greater. For the purposes of this section, the cost is the value of the steel product as delivered to the project; or
2. The Director of the Purchasing Division determines that specified steel materials are not produced in the United States in sufficient quantity or otherwise are not reasonably available to meet contract requirements.

**42. PREFERENCE FOR USE OF DOMESTIC ALUMINUM, GLASS, AND STEEL:** In Accordance with W. Va. Code § 5-19-1 et seq., and W. Va. CSR § 148-10-1 et seq., for every contract or subcontract, subject to the limitations contained herein, for the construction, reconstruction, alteration, repair, improvement or maintenance of public works or for the purchase of any item of machinery or equipment to be used at sites of public works, only domestic aluminum, glass or steel products shall be supplied unless the spending officer determines, in writing, after the receipt of offers or bids, (1) that the cost of domestic aluminum, glass or steel products is unreasonable or inconsistent with the public interest of the State of West Virginia, (2) that domestic aluminum, glass or steel products are not produced in sufficient quantities to meet the contract requirements, or (3) the available domestic aluminum, glass, or steel do not meet the contract specifications. This provision only applies to public works contracts awarded in an amount more than fifty thousand dollars (\$50,000) or public works contracts that require more than ten thousand pounds of steel products.

The cost of domestic aluminum, glass, or steel products may be unreasonable if the cost is more than twenty percent (20%) of the bid or offered price for foreign made aluminum, glass, or steel products. If the domestic aluminum, glass or steel products to be supplied or produced in a "substantial labor surplus area", as defined by the United States Department of Labor, the cost of domestic aluminum, glass, or steel products may be unreasonable if the cost is more than thirty percent (30%) of the bid or offered price for foreign made aluminum, glass, or steel products. This preference shall be applied to an item of machinery or equipment, as indicated above, when the item is a single unit of equipment or machinery manufactured primarily of aluminum, glass or steel, is part of a public works contract and has the sole purpose or of being a permanent part of a single public works project. This provision does not apply to equipment or machinery purchased by a spending unit for use by that spending unit and not as part of a single public works project.

All bids and offers including domestic aluminum, glass or steel products that exceed bid or offer prices including foreign aluminum, glass or steel products after application of the preferences provided in this provision may be reduced to a price equal to or lower than the lowest bid or offer price for foreign aluminum, glass or steel products plus the applicable preference. If the reduced bid or offer prices are made in writing and supersede the prior bid or offer prices, all bids or offers, including the reduced bid or offer prices, will be reevaluated in accordance with this rule.

**43. INTERESTED PARTY SUPPLEMENTAL DISCLOSURE:** W. Va. Code § 6D-1-2 requires that for contracts with an actual or estimated value of at least \$1 million, the vendor must submit to the Agency a supplemental disclosure of interested parties reflecting any new or differing interested parties to the contract, which were not included in the original pre-award interested party disclosure, within 30 days following the completion or termination of the contract. A copy of that form is included with this solicitation or can be obtained from the WV Ethics Commission. This requirement does not apply to publicly traded companies listed on a national or international stock exchange. A more detailed definition of interested parties can be obtained from the form referenced above.

**44. PROHIBITION AGAINST USED OR REFURBISHED:** Unless expressly permitted in the solicitation published by the State, Vendor must provide new, unused commodities, and is prohibited from supplying used or refurbished commodities, in fulfilling its responsibilities under this Contract.

**45. VOID CONTRACT CLAUSES** – This Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law.



# REQUEST FOR PROPOSAL

West Virginia Public Employees Insurance Agency  
CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

## SECTION 3: GENERAL TERMS AND CONDITIONS

**DESIGNATED CONTACT:** Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

Jim Kelly, Vice President U.S. Public Sector  
(Name, Title)  
Jim Kelly, Vice President U.S. Public Sector  
(Printed Name and Title)  
115 Perimeter Center Place NE, Suite 1050, Atlanta, GA 30346  
(Address)  
770-331-3989 / 770-399-6322  
(Phone Number)/ (Fax Number)  
jim.kelly@lifeworks.com  
(email address)

**CERTIFICATION AND SIGNATURE:** By signing below, or submitting documentation through wvOASIS, I certify that: I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

By signing below, I further certify, that I understand this Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law.

LifeWorks (US) Ltd.  
(Company)

  
(Authorized Signature) (Representative Name, Title)

Marc-André Longchamps, Senior Vice President  
(Printed Name and Title of Authorized Representative)

May 13, 2022  
(Date)

770-331-3989 / 770-399-6322  
(Phone Number) (Fax Number)

# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

### **SECTION 4: PROJECT SPECIFICATIONS**

#### **4.1. Background and Current Operating Environment:**

As part of an enterprise technology initiative, West Virginia's Public Employees Insurance Agency (PEIA) is seeking a vendor who can provide a commercial, off-the-shelf, benefit administration system and the consulting services to assist the agency in implementing that solution. The purpose of this RFP is to provide interested and qualified vendors with information that enables them to prepare and submit competitive proposals for a new, fully integrated, best-practices-based benefits administration system that meets PEIA's requirements. Any contract awarded, as a result of this solicitation, will be for at least the following solution components: an off-the-shelf vendor hosted solution, project management services, documentation, testing, implementation, integration, training, warranty, and support.

PEIA provides health and life insurance benefits for over 200,000 eligible public employees, retirees, and their dependents. Benefits are made available to the State of West Virginia's and various related State agencies and local governments' ("employers") eligible active employees, retirees, and their survivors and/or dependents.

Eligible employees and retired employees may elect health insurance coverage through a fully self-insured preferred provider benefit plan (PPB) or through external managed care organizations (MCO). Depending on eligibility rules, up to seven health insurance plans may be available to participants. Additionally, employees and retirees may elect to purchase additional life insurance.

Enrollment is required for both, health and life insurance coverage. Open enrollment typically occurs over six weeks starting the first business day in April, and coverage is effective July 1 through June 30 of the next year. Medical and Life insurance open enrollment for Medicare eligible participants is in the fall for coverage effective January 1. Mountaineer Flexible Benefits (dental, vision, hearing) open enrollment for eligible active employees and non-Medicare retired participants is in the spring. Special enrollment is available for qualifying events including, but not limited to, new employee enrollment, loss of other health insurance, moving out of coverage area, or life events such as marriage, divorce, childbirth, etc. Eligible employees may enroll using an online enrollment tool "Manage My Benefits" or manually, by filling out the required enrollment form(s) and submitting those to the PEIA employer's benefit coordinator.

Eligibility for health and life insurance benefits is determined by an employee's status, job type, and other member, retiree, or employer attributes. The following groups of individuals are eligible to enroll in the offered plans:

- Full-time employees of State Agencies, Colleges and Universities, Boards of Education and Non-State/Quasi-Governmental Agencies (working regularly at least 20 hours per week).
- Elected officials working full-time in the elected position.
- Members of the West Virginia Legislature (must pay 100% of the premium).
- Members of the West Virginia Board of Education (must pay 100% of the premium).

# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

- Permanent full-time substitute teachers working on a contract of 90-days or more per school year.
- Elected members of a county board of education (must pay 100% of the premium); or
- School service employees eligible under W.Va. Code, Chapter 18A.

Employee premiums are determined by the plan, elected coverage, employer type, and other member, retiree, or employer attributes. Eligible retirees hired prior to July 1, 2010 may be eligible for a premium subsidy.

PEIA serves as the point of contact for administrative, legal, legislative and procedural issues regarding the management of the health and life insurance plans.

Additional information about the plans and associated premiums can be found in the Shoppers Guide and Summary Plan Descriptions on the PEIA website.

In managing the health and life insurance benefits for the State of West Virginia, PEIA is responsible for two major business functions for West Virginia's public employees; Insurance Administration and Accounting Management. These business functions are currently supported by a custom-built IBM Db2 database as its Benefit Administration System (BAS) which is integrated with Microsoft Dynamics GP ("Great Plains") for finance and accounting functionally and Microsoft Dynamics CRM for customer relationship management functionality. In addition, there are two custom built Adobe ColdFusion web portals to support web-based billing and payment by employers and policyholder self-service. Additional information for the technical infrastructure is provided in the *PEIA's Current Technical Environment* section below. Some of the components of PEIA's core benefit administration systems are unsupported and obsolete, while others utilize dated and increasingly difficult-to-support technology. The overall solution no longer satisfies industry best practices for maintenance and operations and has led to decreased staff productivity and reduced quality of service provided to employers.



# REQUEST FOR PROPOSAL

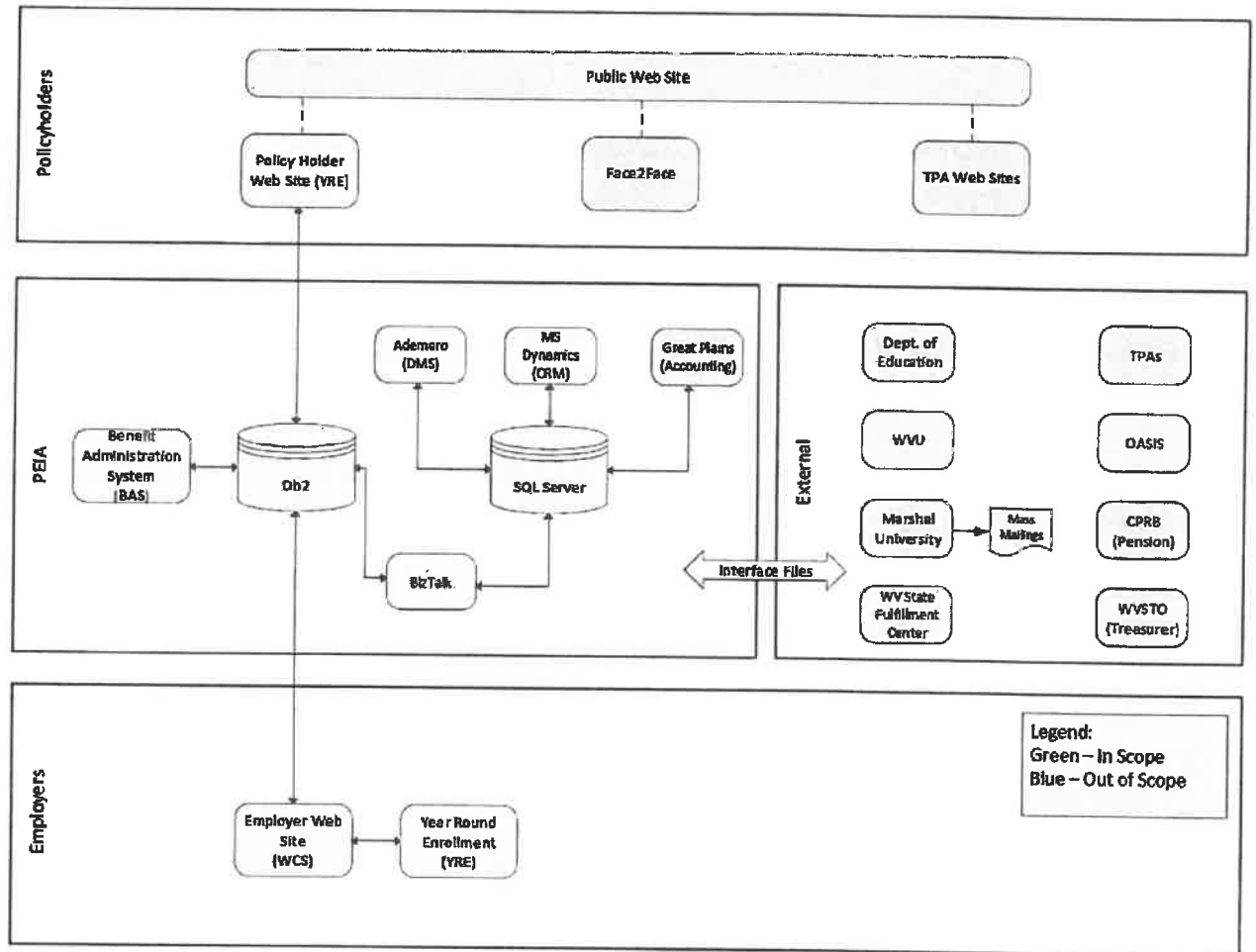
## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

### PEIA's Current Technical Environment:

System	Description
<b>BAS</b> "Benefit Administration System"	100% custom-developed Benefit Administration System written in COBOL & utilizing a Db2 database running on premise at the West Virginia Office of Technology (WV OT) on the State's mainframe. BAS was deployed in 2008. Db2 is currently one major version behind. Handles eligibility, enrollment, premium billing and invoicing.
<b>BizTalk</b>	A third-party middleware product used to synchronize data between the mainframe Db2 database and the various SQL/Server databases used by MMB WCS, MMB YRE and CRM. BizTalk is hosted on premise at WV OT and is at a supported version.
<b>Face2Face</b>	A third-party Policyholder web application. Handles Policyholder Wellness benefits.
<b>MMB WCS (WCS)</b> "Manage My Benefits" "Web Contribution System"	100% custom-developed <b>Employer web portal</b> written in ColdFusion and utilizing a SQL/Server database running on premise at WV OT. WCS was deployed in 2008. Handles Employer payments, reporting and data exchanges. The ColdFusion technology is currently unsupported by WV OT and has been marked by WV OT for replacement or complete technology refresh.
<b>MMB YRE (YRE)</b> "Manage My Benefits" "Year-round Enrollment"	100% custom-developed <b>Policyholder web portal</b> written in ColdFusion and utilizing a SQL/Server database running on premise at WV OT. YRE was deployed in 2008. Handles annual enrollment and life event changes. The ColdFusion technology is currently unsupported by WV OT and has been marked by WV OT for replacement or complete technology refresh.
<b>MS Dynamics CRM (CRM)</b>	A third-party <b>Customer Relationship Management system</b> . CRM is considered slightly customized. CRM was deployed in 2010 and is at supported version. CRM is hosted on premise at WV OT. Currently used for policyholder and employer contact logging and tracking.
<b>MS Dynamics GP (Great Plains)</b>	A third-party <b>Finance and Accounting system</b> . Great Plains is considered to be highly customized. It was deployed in 2008 and is at a supported version. Great Plains is hosted on premise at WV OT. Handles AR/AP tracking, financial reporting and financial data exchange with the WV State Treasurers Office, wvOASIS, WV State Auditor's Office and other large employers.
<b>Ademero</b>	A third-party <b>Document Management system</b> . Ademero Capture Point and Content Central are used for scanning and indexing documents.

# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM



# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

- 4.2. Project Goals and Mandatory Requirements:** Vendor should describe its approach and methodology to providing the service or solving the problem described by the goals/objectives identified below. Vendor's response should include any information about how the proposed approach is superior or inferior to other possible approaches.

### **4.2.1. Goals and Objectives –**

#### **4.2.1.1. System Goals:**

PEIA would like a fully integrated, vendor hosted, secure, off-the-shelf system that should include the following system functions for members, retirees, employers, and internal PEIA users.

- New member enrollment, open enrollment, special enrollment and processing of insurance coverage termination.
- Centralized eligibility and enrollment module to maintain and apply Agency rules, view and maintain eligibility and enrollment data, and import/export eligibility and/or enrollment data as necessary to carriers and other entities.
- Importation of employer payroll and demographic files.
- Centralized billing module to maintain current and historical premium rates, invoices, and payment records, calculate premium amounts, generate premium invoices, collect, apply, and reconcile invoice payments, and track open balances.
- Reconciliation of outstanding invoices with incoming payments.
- Management of coverage data.
- Integrated customer relationship management to track and record participant, policyholder and employer service requests (***PEIA prefers an integrated solution, but if not integrated within the offered package, then the solution must integrate with PEIA's existing customer relationship management software***).
- Integrated document management (***PEIA prefers an integrated solution, but if not integrated within the offered package, then the solution must integrate with PEIA's existing Imaging system***).
- Functions to support all required interfaces, including, but not limited to, interfaces between:
  - Supporting third party products such as Microsoft Great Plains.
  - Employers.
  - Other related agencies (e.g., wvOASIS); and
  - TPAs.
- Robust role-based administrative and security controls for all types and levels of system users.
- Workflow and Work Queue management.

# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

- Generation of Reports, Forms, and Letters, including ad-hoc reporting capabilities.
- Audit indicator capabilities such that a participant's account can be identified as to whether it has been audited, through what date, and by whom and that satisfies HIPAA Privacy and Security regulations.

### **4.2.1.2. Enrollment Platform:**

PEIA would like a web-based enrollment platform offering participants and policyholders relevant and understandable information about healthcare and insurance options to enable them in making an informed decision through an easy to use, guided interface. Participant's medical history data (i.e., claims or prescription data) may be used to guide participants by comparing health and prescription coverage and costs.

The member portal should allow participants and employer benefit coordinators to view, at a minimum, the following information: employment history, demographics (e.g., name, physical address, e-mail address, marital status, etc.), imaged documents, health and life insurance elections, health and life insurance premium deductions, PCP elections, dependent information, ACH/banking information, balance of premium payments/deductions including missed payments, and reference documentation (e.g., WV Statutes, PEIA policies, SPDs, FAQs).

The portal should allow members or employer benefit coordinators to complete, at a minimum, the actions outlined below:

- Enrollment and/or dis-enrollment in/from insurance elections
- Submit an application for retiree coverage
- Report a Qualifying Life event for insurance election changes
- Submit supporting documentation
- Modify demographics (e.g., name, physical address, e-mail address, marital status etc.)
- Enter existing or future claim or prescription data
- Designate beneficiaries
- Provide Coordination of Benefits information (if covered by other insurance)
- Send and receive messages to/from PEIA staff or employer benefit coordinator
- Download forms
- Initiate an appeal
- E-sign designated documents
- Access links to insurance coverage providers
- Submit communication and payment preferences and information
- Remit premium payments (for direct billed members)
- Initiate insurance premium reimbursements

### **4.2.1.3. Employer Billing Platform:**

# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

PEIA would like an employer billing platform that provides employers the ability to view, adjust and pay invoices.

The Employer Billing Platform should allow employers to view at a minimum the following information: Invoices, Employer memos and announcements, Member benefit and PCP elections, Member demographic information, Member dependent information, Member premium deductions, Employer premium contributions, Current status of initiated transactions, ACH/Banking information, Reference documentation (e.g., WV Statutes, PEIA policies, SPDs, FAQs)

The Employer Billing Platform should allow employers to complete at a minimum the actions outlined below:

- Exchange and upload files of member data for reconciliation against premium billing (e.g., Payroll or Enrollment)
- Report changes in employee employment status
- Recalculate an invoice
- Remit invoice payments or apply available credits to one or more invoices
- Export invoice data to OASIS to obtain an Internal Exchange Transaction ("IET")
- Import IET identification number and assign it to a particular invoice
- Access forms
- Complete e-signing of certain documentation
- Generate and schedule reports
- Maintain payment and communication preferences

### **4.2.1.4. Project Goals:**

In addition to the above-mentioned system objectives, the vendor should provide the following services:

- Full implementation of the new solution (including as-built documentation of system design, database models, system configurations, and customizations).
- Any and all necessary software customizations to meet business and functionality requirements.
- Support the execution of all processes required in accordance with legislation, governing board policies, etc.
- Thorough testing and quality assurance of the entire solution.
- Ongoing software support for the new system during the implementation and during the warranty period as provided herein.



# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

- Experienced-based expertise and consultation to the Agency SMEs on topics such as suggested changes in communications, business rules, policies and practices.
- Training for system users (including employers), and administrators (but not participants or retirees) – not only in application navigation and the use of screens and windows, but also in the use of the new solution to perform all their various job functions, processes, and sub-processes in the new environment.
- Agency-specific manuals and documentation for system users (including employers) and administrators, and developers; in addition to all baseline functionality, all such documentation must reflect the customized, as-built status of the solution; standard documentation reflecting only the Vendor's un-customized base solution will not be accepted.

Goals and objectives specific to the various phases of the project implementation are provided in the subsequent questions.

#### **4.2.1.5. Functional Requirements Confirmation:**

PEIA has documented in Appendix 1 the relevant functional requirements that a vendor's proposed benefits administration system should be able to accomplish. The Vendor should confirm which of the requirements that vendor's proposed system will accomplish and which it will not. Confirmation should be provided with Vendor's technical proposal submission.

**4.2.1.6. Implementation:** PEIA will rely on the Vendor to determine the most time- and cost-efficient method of implementing the system into the Agency's environment and staff operations. The Vendor should describe its overall approach to implementation in the Implementation Plan and provide a copy of the Implementation Plan as part of the Vendor's Technical Proposal. The Implementation Plan should reduce risk, minimize bridging with legacy systems, minimize the need to keep legacy databases synchronized with new Project databases, and minimize the time required to implement. The Vendor should develop a strategy for providing the necessary staff to ensure that the optimal level of implementation support is available. Meetings with PEIA staff will be scheduled in a manner that does not impact the Agency's operations.

The Implementation Plan should describe, at a minimum, the following:

- A list of objective criteria from which PEIA will determine the sequence of implementation.
- The Work Plan of installation activities, relating to system issues, data conversion, training, and testing of all software (including third-party software, if applicable).
- Implementation preparation tasks in detail, readiness to migrate the required data, security preparation, staff training, personnel assignments, and level of resources required for each area.
- Recommendations concerning third-party software needs, PEIA approval and timing of purchase by PEIA (if applicable).

# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

**4.2.1.7. Testing:** The Vendor should describe its testing regiment. PEIA prefers that Vendors utilize a rigorous testing methodology throughout the course of the project. Each module that is delivered to the Agency should be tested on converted or simulated data prior to being certified for release by the Vendor's test team. The Agency should receive written proof of certification for any release prior to being released to the Agency for its own user acceptance testing. At a minimum, the Vendor should perform the following types of testing during development prior to certification noted above and during the project on updates to the System:

- Unit
- System
- Stress (volume)
- Security / Penetration
- Load
- Regression

The Agency plans to conduct its own user acceptance testing on the system, in whole and in part, following certification noted above from the Vendor. The Vendor should prepare a Testing Plan and include a copy in the Vendor's technical proposal and provide the Agency with the test cases or scenarios used in the completed vendor testing.

The Vendor should be able to and plan to test certain processes in parallel, or parallel equivalent, with the legacy system.

**4.2.1.8. Training:** The Vendor should train the Agency staff at six (6) different levels:

- Participant/Retiree users
- Employer Benefit Coordinator users
- Regular users
- Power users
- Business Administrator
- Technical Administrator

The Vendor should prepare a Training Plan to be included in the technical proposal. All Training Deliverables should be developed in a highly collaborative process with the Agency to provide high quality products that meet the stated needs. The Vendor should prepare a Training Plan for training the Agency personnel and employers. All training should be role-based, modular and scalable in design. The Vendor should conduct train-the-trainer training for the Agency, while the Agency will be responsible for training its remaining staff, external stakeholders, and others who may use the System to perform daily and periodic job functions. The Vendor should provide on-line "getting started" or help videos to distribute to the Enrollment and Billing portal users.

# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

The Vendor should ensure that all procedures, training environment hardware and software configurations, classroom setup requirements, etc. reflect the most current information for the Agency training.

The business user training curricula and materials should cover, at a minimum, the following topics:

- System Overview including system benefits; data inputs, data outputs, and reports produced; major business functions; and User Manual contents and usage.
- System Usage including entering data and data validation; data correction and user help features; menu and System function navigation; problem recovery; report contents, report generation; search and inquiry features; and record update procedures.
- System Configuration including updating, adding or terminating business and calculation rules and rates; and
- System Operation including seeking technical help (Application and equipment assistance); all course instructors' and students' classroom materials (e.g., manuals, handouts, etc.)

**4.2.1.9. Implementation Approach:** The Agency will not dictate an implementation methodology for the Vendor. However, it is strongly preferred that the Vendor apply an iterative agile or agile hybrid approach. This method will provide the Agency project team members with access to early versions of the system for collaborative design and verification testing. The Vendor must describe its implementation methodology, such as how it defines and uses an iterative agile or agile hybrid approach.

**4.2.1.10. On-going Hosting and Support Services:** The Vendor must provide the following on-going annual and support services after the Implementation of the system and warranty periods:

- Annual vendor hosting services (including routine upgrades to all hardware and related IT infrastructure, installation of operating system and security patches, HIPAA security compliance, full encrypted application and database backups nightly, defends against data loss, fraud, ransomware and critical system failures, disaster recovery services).
- Support Services to implement additional functional requirements, interfaces or reporting as requested by the Agency.
- Support Ticket Consulting Services to analyze and resolve support tickets entered by the Agency and categorized as low to critical.
- Training services to supplement implementation training or train new Agency staff or other entities.



# **REQUEST FOR PROPOSAL**

West Virginia Public Employees Insurance Agency  
CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

**4.2.2. Mandatory Project Requirements** – The following mandatory requirements relate to the goals and objectives and must be met by the Vendor as a part of its submitted proposal. Vendor should describe how it will comply with the mandatory requirements and include any areas where its proposed solution exceeds the mandatory requirement. Failure to comply with mandatory requirements will lead to disqualification, but the approach/methodology that the vendor uses to comply, and areas where the mandatory requirements are exceeded, will be included in technical scores where appropriate. The mandatory project requirements are listed below.

**4.2.2.1. System Requirements:** The following system functionality must be included in your solution:

- New member enrollment, open enrollment, special enrollment, and processing of insurance coverage termination.
- Centralized eligibility and enrollment module to maintain and apply Agency rules, view and maintain eligibility and enrollment data, and import/export eligibility and/or enrollment data as necessary to carriers and other entities.
- Centralized billing module to maintain current and historical premium rates, invoices, and payment records, calculate premium amounts, generate premium invoices, collect, apply, and reconcile invoice payments, and track open balances.
- Functions to support all required interfaces with supporting internal systems and external parties.
- Generation of Reports, Forms, and Letters, including ad-hoc reporting capabilities.

**4.2.2.2. Project Implementation Requirements:** The Vendor must provide the following services as a part of their contract:

- Full implementation of the new solution (including as-built documentation of system design, database models, system configurations, and customizations).
- Any and all necessary software customizations to meet business and functionality requirements.
- Support the execution of all processes required in accordance with legislation, governing board policies, etc.
- Thorough testing and quality assurance of the entire solution.
- A warranty that starts with the rollout of the first functional capability and concludes, at a minimum, 12 months after the rollout of the final capability.
- Ongoing software support for the new system during the implementation and during the warranty period as provided herein.
- Training for system users (including employers), and administrators (but not participants or retirees).
- Agency-specific manuals and documentation for system users (including employers), administrators, and developers.

# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

**4.2.2.3. Security and Privacy Requirements:** The following security requirements must be included in your solution:

- Security and Audit capabilities that satisfy 2(c)(15) of the National Institute of Standards and Technology (NIST) Act and HIPAA EDI, Privacy and Security regulations as well as HITECH's Safe Harbor Provision.
- Controlled, role-based access and functionality.
- Full data audit trail including what, who, when (system timestamp) sufficient to satisfy HIPAA Privacy and Security regulations.
- Password management capabilities that encompass NIST password guidelines and best practices.
- Database encryption at rest and encrypted remote connection channels.
- All client data must be stored in the contiguous 48 United States.

**4.2.2.4. Required Deliverables:** The vendor must provide the Implementation Plan and Schedule as agreed upon by both parties at the beginning of the project.

The Implementation Plan and Schedule must have its own deliverable expectation document (DED), which is itself a deliverable. The Agency shall have the right as described in the contract to review and test, as applicable, the deliverable.

The Agency must have a minimum of eight (8) full business days to review the Implementation Plan and Schedule or updates to the document that require acceptance. The Agency will be granted extensions if the Vendor submits documents that the Agency deems as particularly lengthy.

**4.2.2.5. Data Conversion and Migration:** The Vendor must include the migration of necessary legacy data into the Vendor's benefits administration system database as part of this project. The data conversion will be a major collaborative effort between all parties; it is therefore important that the Vendor account for this critical sub-project in the Implementation Plan and allocate sufficient hours for this activity. The Vendor will work with the Agency to develop a data conversion strategy and plan to manage the data conversion activities. In addition, the Vendor will be responsible for participating in analysis of the legacy data to develop data maps for the new system and working with the Agency to migrate the legacy data to the target system and test the converted data.

**4.2.2.6. Agency Policies:** The Vendor agrees to adhere to all Agency standards, policies, and procedures while on-site at the Agency and in all work performed with and for the Agency. Any exceptions to this statement must be cleared, in writing, by the Agency. The signed Business Associate Agreement ("BAA") will supersede any of the vendor's existing policies and practices.

**4.2.2.7.** Vendor must sign the attached Data Management Addendum (Appendix 3) and the HIPAA Business Associate Addendum (Appendix 4) prior to contract award.

# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

- 4.3. Qualifications and Experience:** Vendor should provide information and documentation regarding its qualifications and experience in providing services or solving problems similar to those requested in this RFP. Information and documentation should include, but is not limited to, copies of any staff certifications or degrees applicable to this project, proposed staffing plans, descriptions of past projects completed (descriptions should include the location of the project, project manager name and contact information, type of project, and what the project goals and objectives were and how they were met.), references for prior projects, and any other information that vendor deems relevant to the items identified as desirable or mandatory below.

**4.3.1. Qualification and Experience Information:** Vendor should describe in its proposal how it meets the desirable qualification and experience requirements listed below.

**4.3.1.1.** Describe fully your organization's corporate or other business entity structure, including the state of incorporation or formation and list any controlling stockholders, officers, directors, general partners, members, managers, etc.

**4.3.1.2.** Attach an organizational chart showing principal officers, directors, general partners, members, managers and staff members who will be associated with providing services related to this RFP.

**4.3.1.3.** What year was your organization established? Is your organization a subsidiary or affiliate of another organization?

**4.3.1.4.** Describe any acquisitions and/or mergers or other material developments (e.g., changes in ownership, key personnel, etc.) pending now or that occurred in the past five (5) years with your organization. Disclose any potential mergers or acquisitions that have been recently discussed by senior officials and could potentially take place within three (3) years after the Contract starts.

**4.3.1.5.** List any relevant websites for your organization and its offerings.

**4.3.1.6.** Indicate the size of your organization's book of business.

Number of participants	Number of Clients in your organization's Book of Business
0-10,000	
10,001 to 100,000	
Over 100,000	

**4.3.1.7.** Provide detailed and specific information regarding all situations where your organization has been investigated, cited, or threatened with a citation or disciplinary action, by any state or federal regulatory agency within the last five (5) calendar years. Provide a detailed description of any litigation. The response must include all such situations including the date such action was initiated and how the matter was resolved.

# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

- 4.3.1.7.1.** Has your organization been subject to any litigation alleging breach of contract, fraud, breach of fiduciary duty, or other willful or negligent misconduct? If so, provide details including dates and outcomes.
- 4.3.1.7.2.** Provide certification that your organization has not been in bankruptcy and/or receivership within the last five (5) calendar years.
- 4.3.1.8.** Provide a statement as to the extent to which your organization can perform the proposed Services using only present staff and computer equipment/software/technology, and the extent to which additional resources will be needed and how that will be addressed.
- 4.3.1.9.** Submit information regarding your organization's past contract performance. Include specific detailed information regarding the following:
  - 4.3.1.9.1.** All situations where your organization has defaulted on a contract.
  - 4.3.1.9.2.** All litigation involving your organization regarding contracts.
  - 4.3.1.9.3.** All situations where a contract has been canceled or where a contract was not renewed due to alleged fault on the part of your organization.
- 4.3.1.10.** Describe in detail the computer and data processing facilities your organization currently uses (owned or otherwise used) and would make available. Include a description of any mainframe, network structures, vendor hosted or cloud solutions that you will use for providing the Services.
- 4.3.1.11.** What additional computer or other resources would your organization need to acquire in order to provide the Services, if any?
- 4.3.1.12.** Provide a copy of your organization's standard agreement concerning employee confidentiality and intellectual property rights. Does the Vendor agree that all work products developed by them as part of the Services described in this RFP (e.g., all written reports, drafts, presentations, data, and meeting materials, etc.) shall become the property of the Agency?
- 4.3.1.13.** Confirm that all employees who will work on the Agency's project will have signed your organization's confidentiality and intellectual property right agreement.
- 4.3.1.14.** Describe and provide examples of the training your organization's employees have received concerning handling of a client's confidential information and protected health information.

# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

**4.3.1.15.** Do your organizational privacy and security policies meet the Administrative Safeguards provisions of the HIPAA Security Rule (for reference:

<https://www.hhs.gov/hipaa/for-professionals/security/laws-regulations/index.html>)?

Provide copies of your policies.

**4.3.1.16.** Provide a copy of the organization's privacy policies and a copy of the organization's Breach Response Plan. Have you received external or independent certification regarding your HIPAA compliance?

**4.3.1.17.** Provide a copy of the organization's Notice of Privacy Practices, paper and electronic.

**4.3.1.18.** Provide a copy of the organization's Change Management policies and PHI workflows as required by the HIPAA Security Rule 45 CFR 164.308(a)(4)(ii)(C) "Access Establishment and Modification"; and 45 CFR 164.308(a)(7)(ii)(D) "Testing and Revisions Procedures".

**4.3.1.19.** Provide written confirmation that the organization's workforce completes annual privacy and security training.

**4.3.1.20.** Provide the name, contact information, and job description of the organization's Privacy officer(s) and Security officer(s).

**4.3.1.21.** Provide the following information regarding the organization's business partners:

**4.3.1.21.1.** List of business partner names specifically denoting the number of partners

**4.3.1.21.2.** Copy of the organization's business associate agreement

**4.3.1.21.3.** Provide the details of any privacy breach involving or caused by a business associate.

**4.3.1.22.** Provide the following information regarding privacy breaches or impermissible information disclosures:

**4.3.1.22.1.** Total number of privacy incidents reported in the last calendar year.  
Describe the type, cause and number of individual's affected for each event.

**4.3.1.22.2.** Total number of incidents that escalated to the level of a reportable privacy breach as outlined in the HIPAA Privacy Rule. Describe the type, cause and number of individual's affected for each event.



# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

- 4.3.1.22.3.** Has the organization ever experienced a privacy breach involving over 500 individuals? Provide detailed explanation including cause, scope, investigation process, and reporting to members, media, law enforcement and/or OCR.
- 4.3.1.22.4.** Has the organization ever been fined or sanctioned by a regulatory agency for a violation of information privacy practices, and if so, the reason, description of action taken, the amount or sanction, scope and outcome?
- 4.3.1.23.** Has the organization ever been fined or sanctioned for any other type of federal law or regulation (i.e., US DHHS OCR, Stark Law, or inclusion on the OIG Exclusion List (LEIE))? Provide details.
- 4.3.1.24.** Provide a copy of your organization's Code of Conduct, including but not limited to requirements for ethical and compliant business practices, and fraud, waste and abuse prevention activities.
- 4.3.1.25.** How frequently do you conduct an analysis of the risks and vulnerabilities to protected health information (PHI) in your system and networks? When was the last assessment?
- 4.3.1.26.** Does your system produce sufficient audit trails to satisfy the HIPAA Privacy and Security regulations?
- 4.3.1.27.** How is access security set up in the system between a client's different user roles? What are the different levels of security access or roles?
- 4.3.1.28.** Can your system produce reports for a specific user's system, screen, or data accesses or attempted accesses?
- 4.3.1.29.** Provide a list of formats in which data may be exported by the system (as required by the health information portability rules under HIPAA).
- 4.3.1.30.** Is your system's database encrypted in accordance with NIST 800-53 Rev 5 and 800-66 Rev 2 requirements as cited by the US DHHS for compliance with the HIPAA Security Rule(s)? Are data backups encrypted?
- 4.3.1.31.** Are all electronic transmissions of PHI, including eligibility files, authorizations, reports, etc., encrypted or sent via secure means? Which encryption methods do you support for e-mails and file attachments? Please describe.
- 4.3.1.32.** Explain how unauthorized attempts to access PEIA files will be monitored and controlled.

# **REQUEST FOR PROPOSAL**

**West Virginia Public Employees Insurance Agency  
CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

**4.3.1.33.** Do you have intrusion detection and monitoring tools, and are you conducting penetration testing and vulnerability scans? Please explain.

**4.3.1.34.** Do you have a dedicated team to assess and respond to security vulnerabilities reported in your IT systems?

**4.3.1.35.** Do you have an incident response plan for network intrusions and virus incidents?

**4.3.1.36.** Do you have a business continuity plan and a disaster recovery plan? If so, how frequently is it tested?

**4.3.1.37.** Provide a proposed staffing plan for the full length of the contract duration. The plan must include any and all subcontractors used. Also include the roles and responsibilities for your proposed staff along with the roles and responsibilities anticipated for PEIA.

**4.3.1.38.** Submit resumes (limited to 1 page each) of individuals who may perform the activities described in this RFP. Also identify a list of key personnel who will be dedicated full-time to this project.



# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

**4.3.2. Mandatory Qualification/Experience Requirements** – The following mandatory qualification/experience requirements must be met by the Vendor as a part of its submitted proposal. Vendor should describe how it meets the mandatory requirements and include any areas where it exceeds the mandatory requirements. Failure to comply with mandatory requirements will lead to disqualification, but areas where the mandatory requirements are exceeded will be included in technical scores where appropriate. The mandatory qualifications/experience requirements are listed below.

**4.3.2.1.** The Vendor must have itself, not as a sub-contractor, been in the benefits administration system solution delivery business for the past five (5) years. Please provide an overview of the number of years your company has been in business and the number of years you have provided a solution and performed associated services specified by this RFP.

**4.3.2.2.** Provide a list of the three (3) largest clients for which your organization implemented benefit administration services. Provide name and numbers for one or more points of contact for each client. Submission of a Proposal constitutes your organization's consent for PEIA and/or its agents to contact any or all of these points of contact to discuss their experience with your organization. Identify which client is in the warranty period or later.

Client/ Contact Name, Phone, and Email	Client's number of employees	Client's number of participants	Implementation Time – in months and year implemented	Number of years providing insurance enrollment	List all services provided to Client	Number of client's third-party administrators (and number of enrollment options – if different)	Multi- employer (yes or no) If Yes, number of employers

**4.3.2.3.** Vendor must have implemented insurance administration systems with two or more clients of similar size and scope as the project contemplated herein, at least one of which must be complete, i.e., the project is in the warranty period or later. These references must be for implementations that are no older than five (5) years. Submission of a Proposal constitutes your organization's consent for PEIA and/or its agents to contact any or all of these points of contact to discuss their experience with your organization.

# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

Client Name	Contact Name, Phone, and Email	Client's number of employees	Client's number of participants	Client's number of participating employers	Implementation Time – in months and years	List all services provided to Client	In the Warranty period or later?

**4.3.2.4.** The Project Manager shall be responsible for the day-to-day operations of the solution implementation, manage the activities of the Vendor's resources and work with the PEIA Project Director and Project Management Oversight vendor to lead the overall project. Project management responsibilities include but are not limited to:

- Periodic attendance and reporting at the PEIA Steering Committee, Board, and project team meetings during the project, as required by the Agency.
- Report project status to the project director at intervals during the project work, including findings and recommendations as follows:
  - Regular written reports which must include information on work completed, work planned for the following week, identified risks, and any issues to be addressed.
  - At scheduled deadline dates for the identified deliverables; and
  - At other times as needed at the discretion of the Agency.
- Develop Work Plan in coordination with the Agency for each major phase as defined in the Scope of Work.
- Provide weekly metrics against the Implementation Plan to measure the progress of the project.
- Assign resources and their effort for each project phase with the Agency and further understand that the Agency has the right to modify the amount of effort needed for each phase of the implementation process for project monitoring, quality assurance, and project management purposes.
- Provide minutes for meetings related to Vendor's services and deliver the minutes to the Agency within the time period as specified in the Project Charter. The minutes shall, at a minimum, list the attendees, summarize the major topics discussed, and include any action items and decision points; and
- Provide an overall Work Plan with key milestone dates within 21 days of contract execution.

**4.3.2.5.** The Vendor's proposed project manager must hold a current PMP certification and must have completed at least one (1) full implementation of the Vendor's proposed solution in the role of project manager.

# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

**4.3.2.6.** The Architect/Solution Manager is responsible for the overall design and configuration of the delivered benefit administration solution. The proposed Architect/Solution Manager must have completed at least two (2) full implementations of the Vendor's proposed solution.

**4.3.2.7.** The Lead Business Analyst is responsible for the overall requirements confirmation process and leading the team that will work with the Agency business stakeholders and subject matter experts to design and configure the benefit administration solution. The proposed Lead Business Analyst must have completed at least two (2) full implementations of the Vendor's proposed solution.

**4.3.2.8.** The Vendor must identify any sub-contractor who will be used and include the name of the company, telephone number, contact person, type of work subcontractor will perform, and the percentage of the contract value, time, and work hours that are anticipated to be performed or provided by the subcontractor.

**4.3.2.9.** Any change in the key project team members or subcontractors named in the proposal must be approved, in advance and in writing, by the project director or procurement officer. Personnel changes that are not approved by PEIA will be a material breach of the contract and may be grounds for PEIA to terminate the contract.

**4.3.2.10.** Any and/or all work performed by the vendor under this Agreement shall be performed on machines owned, operated, configured, and managed by the vendor. The use of personal devices owned by subcontractors or individual employees is strictly prohibited.

# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

- 4.4. Oral Presentations (Agency Option):** The Agency has the option of requiring oral presentations of all or selected Vendors participating in the RFP process. If this option is exercised, points will be allocated in Section 6.2 below at the time the RFP is issued, or via addendum prior to technical bid opening. During oral presentations, Vendors may not alter or add to their submitted proposal, but only clarify information. A description of the materials and information to be presented is provided below.

The Agency will reasonably attempt to schedule each oral presentation or demonstration at a time that is agreeable to the Vendor. Vendors may also be provided with scripted product demonstration scenarios on which to base their demonstrations in order to assure an objective comparison among all proposed solutions. The Agency may require Vendors to use actual Agency data. Also, time may be allotted for both, an open forum in which the Agency and the Vendor can discuss the vision of the project, as well as to allow the Vendor to demonstrate a limited amount of unique functionality or functionality that they believe differentiates their solution from other solutions.

The Agency prefers to see the key assigned project staff conduct the demonstrations and facilitate discussions. The Agency's objective is to ascertain the Vendor's proposed project staff's familiarity with the solution and their ability to explain, communicate, converse, and interact with Agency staff. While respecting the role of sales and marketing staff in the sales process, the Agency is most interested in interacting with key project members.

**Materials and Information Requested at Oral Presentation:**

- 4.4.1. Company Background and Staff Qualification**
- 4.4.2. Product Demonstration**
- 4.4.3. Project Implementation and Management Overview**
- 4.4.4. Q&A**

# **REQUEST FOR PROPOSAL**

West Virginia Public Employees Insurance Agency  
CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

## **SECTION 5: VENDOR PROPOSAL**

- 5.1. Economy of Preparation:** Proposals should be prepared simply and economically providing a concise description of the items requested in Section 4. Emphasis should be placed on completeness and clarity of the content.
- 5.2. Incurring Cost:** Neither the State nor any of its employees or officers shall be held liable for any expenses incurred by any Vendor responding to this RFP, including but not limited to preparation, delivery, or travel.
- 5.3. Proposal Format:** Vendors should provide responses in the format listed below:
- 5.3.1. Two-Part Submission:** Vendors must submit proposals in two distinct parts: technical and cost. Technical proposals must not contain any cost information relating to the project. Cost proposal must contain all cost information and must be sealed in a separate envelope from the technical proposal to facilitate a secondary cost proposal opening.
  - 5.3.2. Title Page:** State the RFP subject, number, Vendor's name, business address, telephone number, fax number, name of contact person, e-mail address, and Vendor signature and date.
  - 5.3.3. Table of Contents:** Clearly identify the material by section and page number.
  - 5.3.4. Response Reference:** Vendor's response should clearly reference how the information provided applies to the RFP request. For example, listing the RFP number and restating the RFP request as a header in the proposal would be considered a clear reference.
  - 5.3.5. Proposal Submission:** All proposals (both technical and cost) must be submitted to the Purchasing Division **prior** to the date and time listed in Section 2, Instructions to Vendors Submitting Bids as the bid opening date and time. In addition to the hard copies, vendors are also required to submit electronic copies of their Technical Proposal. Electronic responses must be sent using digital media (CD, flash drive, etc.) along with the hard copies to the same address provided for the hard copy submission. Vendors are required to submit two copies of the electronic submission (two CDs or two flash drives, etc.). All electronic Proposal files must be in Microsoft Word/Microsoft Excel, and/or Adobe Acrobat 9.0 (or above) format. All files should have the same pagination as Vendor's original hard copy Proposal. The State prefers that electronic media be provided with the vendors technical proposal but may request it prior to conducting the technical evaluation if it is found missing. Any conflict between the hard copy and the electronic media will be resolved in favor of the hard copy



# REQUEST FOR PROPOSAL

West Virginia Public Employees Insurance Agency  
CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

## SECTION 6: EVALUATION AND AWARD

- 6.1. Evaluation Process:** Proposals will be evaluated in two parts by a committee of three (3) or more individuals. The first evaluation will be of the technical proposal and the second is an evaluation of the cost proposal. The Vendor who demonstrates that it meets all of the mandatory specifications required, attains the minimum acceptable score and attains the highest overall point score of all Vendors shall be awarded the contract.
- 6.2. Evaluation Criteria:** Proposals will be evaluated based on criteria set forth in the solicitation and information contained in the proposals submitted in response to the solicitation. The technical evaluation will be based upon the point allocations designated below for a total of 70 of the 100 points. Cost represents 30 of the 100 total points.

### Evaluation Point Allocation:

#### Project Goals and Proposed Approach (§ 4.2)

- Approach & Methodology to Goals/Objectives (§ 4.2.1) 10 Points Possible
- Approach & Methodology to Compliance with  
Mandatory Project Requirements (§ 4.2.2) 5 Points Possible

#### Qualifications and experience (§ 4.3)

- Qualifications and Experience Generally (§ 4.3.1) 10 Points Possible
- Mandatory Qualification/Experience  
Requirements (§ 4.3.2) 5 Points Possible

Functional Requirements (Appendix 1) 30 Points Possible

Oral presentation (if applicable) (§ 4.4) 10 Points Possible

Total Technical Score: 70 Points Possible

Total Cost Score: 30 Points Possible

**Total Proposal Score: 100 Points Possible**



# **REQUEST FOR PROPOSAL**

## **West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM**

- 6.3. Technical Bid Opening:** At the technical bid opening, the Purchasing Division will open and announce the technical proposals received prior to the bid opening deadline. Once opened, the technical proposals will be provided to the Agency evaluation committee for technical evaluation.
- 6.4. Technical Evaluation:** The Agency evaluation committee will review the technical proposals, assign points where appropriate, and make a final written recommendation to the Purchasing Division.
- 6.5. Proposal Disqualification:**
- 6.5.1. Minimum Acceptable Score ("MAS"):** Vendors must score a minimum of 70% (49 points) of the total technical points possible in order to move past the technical evaluation and have their cost proposal evaluated. All vendor proposals not attaining the MAS will be disqualified.
  - 6.5.2. Failure to Meet Mandatory Requirement:** Vendors must meet or exceed all mandatory requirements in order to move past the technical evaluation and have their cost proposals evaluated. Proposals failing to meet one or more mandatory requirements of the RFP will be disqualified.
- 6.6. Cost Bid Opening:** The Purchasing Division will schedule a date and time to publicly open and announce cost proposals after technical evaluation has been completed and the Purchasing Division has approved the technical recommendation of the evaluation committee. All cost bids received will be opened. Cost bids for disqualified proposals will be opened for record keeping purposes only and will not be evaluated or considered. Once opened, the cost proposals will be provided to the Agency evaluation committee for cost evaluation.
- The Purchasing Division reserves the right to disqualify a proposal based upon deficiencies in the technical proposal even after the cost evaluation.
- 6.7. Cost Evaluation:** The Agency evaluation committee will review the cost proposals, assign points in accordance with the cost evaluation formula contained herein and make a final recommendation to the Purchasing Division.

**Cost Proposal Submission:** The Microsoft Excel file included with this RFP as Appendix 2 – Cost Proposal Workbook is the required Cost Proposal document all Vendors must submit. Instructions on how to complete the Cost Proposal are provided in the Instruction tab of Appendix 2 – Cost Proposal Workbook.

Vendors' Cost Proposal should reflect the solution features described in response to the requirements listed in Appendix 1 – Functional Requirements.

# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

In addition to a hard copy, all Cost Proposals must be submitted electronically. Electronic submissions must be done using digital media (CD, flash drive, etc.) and must be sent along with the hard copies to the same address provided for the hard copy submission. Vendors are required to submit two copies of the electronic submission (two CDs or two flash drives, etc.) The Cost Proposal Workbook must be returned to the Agency in its original Microsoft Excel format. The State prefers that electronic media be provided with the vendors technical proposal but may request it prior to conducting the technical evaluation if it is found missing. Any conflict between the hard copy and the electronic media will be resolved in favor of the hard copy.

Only dollar and number values will be accepted on the Cost Proposal. Any description other than number value such as, but not limited to: "no cost," "included," "see below," "-", "n/a", etc. will not be accepted. A cost value of \$0.00 shall indicate the deliverable is no cost to the Agency. If a cost is not provided in a cell, it will indicate the Vendor does not provide the specific service.

Vendors' entry into cell G/14 "TOTAL – Mandatory" of the "Proposal Summary" tab of Appendix 2 - Cost Proposal Workbook will be the number used to determine a Vendor's Cost Proposal score.

**Cost Evaluation Formula:** Each cost proposal will have points assigned using the following formula for all Vendors not disqualified during the technical evaluation. The lowest cost of all proposals is divided by the cost of the proposal being evaluated to generate a cost score percentage. That percentage is then multiplied by the points attributable to the cost proposal to determine the number of points allocated to the cost proposal being evaluated.

**Step 1:** Lowest Cost of All Proposals / Cost of Proposal Being Evaluated = Cost Score Percentage

**Step 2:** Cost Score Percentage X Points Allocated to Cost Proposal = **Total Cost Score**

Example:

Proposal 1 Cost is \$1,000,000

Proposal 2 Cost is \$1,100,000

Points Allocated to Cost Proposal is 30

Proposal 1: Step 1 –  $\$1,000,000 / \$1,000,000$  = Cost Score Percentage of 1 (100%)  
Step 2 –  $1 \times 30$  = Total Cost Score of 30

Proposal 2: Step 1 –  $\$1,000,000 / \$1,100,000$  = Cost Score Percentage of 0.909091 (90.9091%)  
Step 2 –  $0.909091 \times 30$  = Total Cost Score of 27.27273

# REQUEST FOR PROPOSAL

## West Virginia Public Employees Insurance Agency CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

- 6.8. Discussion and Final Offer:** The State anticipates that it may conduct discussions with and obtain best and final offers (BAFO) from, responsive and responsible bidders who submit proposals determined to be reasonably susceptible of being selected for award for the purpose of clarification to assure full understanding of, and responsiveness to, the solicitation requirements in accordance with West Virginia Code, §5A-3-11b. The State, at its sole discretion and as deemed to be in the best interest of the State, may provide clarification in the request for BAFO regarding the anticipated scope of the project as described in the RFP and instruct Vendors to adjust their technical proposal and cost proposal accordingly to reflect the clarification provided by the State. If deemed appropriate, the State reserves the right to adjust the point allocations for the BAFO Technical Proposal and Cost Proposal evaluation to reflect the scope clarification.

If requested, the best and final offers must be received at the address identified for proposal submission. If a best and final offer is not submitted, the previous submittal will be construed as the best and final offer. BAFO proposals must be prepared in the same number of copies and packaged and submitted according to the same instructions that apply to the initial proposal submission. Final ranking of responses and award of the contract will be made after the State reviews all bids and completes its evaluation, including the evaluation of best and final offers, if they are requested. An award will be made to the vendor with the highest scoring proposal.

- 6.9. Availability of Information:** Proposal submissions become public and are available for review immediately after opening pursuant to West Virginia Code §5A-3-11(h). All other information associated with the RFP, including but not limited to, technical scores and reasons for disqualification, will not be available until after the contract has been awarded pursuant to West Virginia Code of State Rules §148-1-6.3.d.

By signing below, I certify that I have reviewed this Request for Proposal in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that, to the best of my knowledge, the bidder has properly registered with any State agency that may require registration.

\_\_\_\_\_  
(Company)

\_\_\_\_\_  
(Representative Name, Title)

\_\_\_\_\_  
(Contact Phone/Fax Number)

\_\_\_\_\_  
(Date)

# REQUEST FOR PROPOSAL

West Virginia Public Employees Insurance Agency  
CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

## SECTION 6: EVALUATION AND AWARD

By signing below, I certify that I have reviewed this Request for Proposal in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that, to the best of my knowledge, the bidder has properly registered with any State agency that may require registration.



\_\_\_\_\_  
(Authorized Signature)

\_\_\_\_\_  
LifeWorks (US) Ltd.

(Company)

\_\_\_\_\_  
Marc-André Longchamps, Senior Vice President

(Representative Name, Title)

\_\_\_\_\_  
770-331-3989 / 770-399-6322

(Contact Phone/Fax Number)

\_\_\_\_\_  
May 13, 2022

(Date)

# **REQUEST FOR PROPOSAL**

West Virginia Public Employees Insurance Agency  
CRFP PEI2200000001 - BENEFITS ADMINISTRATION SYSTEM

## **Attachment A: Cost Sheet**

## Appendix A

**Name of Associate:** Life Works  
hereafter known as the PEIA Eligibility Management Systems Vendor

**Name of Covered Entity Agency(ies):** The West Virginia Public Employees Insurance Agency (PEIA)

Describe the PHI. If not applicable please indicate the same.

Per 45 CFR, Part 160.103

Health information means any information, whether oral or recorded in any form or medium, that:

- (1) Is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and
- (2) Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual.

Individually identifiable health information is information that is a subset of health information, including demographic information collected from an individual, and:

- (1) Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and
- (2) Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and
  - (i) That identifies the individual; or
  - (ii) With respect to which there is a reasonable basis to believe the information can be used to identify the individual.

Protected health information means individually identifiable health information:

- (1) Except as provided in paragraph (2) of this definition, that is:
  - (i) Transmitted by electronic media;
  - (ii) Maintained in electronic media; or
  - (iii) Transmitted or maintained in any other form or medium.



The information provided to the Associate, pursuant to the Agreement for the purpose(s) of providing data warehouse services; data analysis; and healthcare claims management services will include the minimum necessary to perform the services thereunder and will specifically include, but may not be limited to the following definitions, terms, and/or conditions:

- a) PEIA member individually identifiable health information or protected health information, including but not necessarily limited to, name(s), names of dependent(s), specific identifying information, e.g. address(es), date(s) of birth, social security number(s), policy number(s), medical and/or pharmaceutical claim(s) information, claims payment information, PEIA system(s), etc. necessary for use by the Associate in designing and developing a searchable/reportable data system, data management and storage system and/or backup, capable of collating data in both an identifiable format(s) and in de-identified format(s), filing necessary legal and/or administrative documents and/or filings, handling appeals, coordinating benefits, and/or performing other administrative functions on behalf of the Covered Entity(ies) with regard to the operation of the Plan(s).
- b) PII/PHI of members and dependents of the Covered Entity(ies) for use in assessing and/or determining eligibility, enrollment, disenrollment/termination, as required by Title II of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) under the Administrative Simplifications provisions.
- c) The PII/PHI referenced in section (a) of this Appendix A may include, but not be limited to PII/PHI provided to the Covered Entity(ies) by their benefits administrator(s) and/or managers such as those who handle and/or manage health benefits, pharmacy benefits, dental and vision benefits, retiree health benefits, or other health and wellness benefits provided by the Covered Entity(ies).
- d) PEIA member individually identifiable health information or protected health information necessary to allow the Covered Entity(ies) and the Associate to perform their statutory business function(s) in accordance with the service agreement(s) and/or State and/or Federal law(s).
- e) PEIA member individually identifiable health information protected health information used in relation to the collection(s) of benefits, fees, overpayment(s), and/or fee(s) paid on behalf of member(s) and/or dependents by the Covered Entity(ies) and/or the Associate not the responsibility of the Covered Entity(ies) and/or the Associate.
- f) PEIA member protected health information needed by and/or for the Associate in the provision of their health care operational services to the Covered Entity(ies) that involves access to protected health information.
- g) PEIA member individually identifiable health information protected health information used in relation to claims work from data analysis to claims identification, investigation and resolution including claims adjudication and enrollment design, development, and implementation.
- h) In performing the scope of work under this agreement, the Associate shall take every reasonable step to ensure that only the minimum necessary information is released and/or disclosed for purposes of performing its duties and obligations under this contract and Addendum.
- i) The Associate, including any and/or all subcontractors utilized by the Associate in the performance of this contract, agrees to comply with any and/or all applicable provisions of the Health Information Technology for Economic and Clinical Health (HITECH) Act enacted as part of the American Recovery and Reinvestment Act (ARRA) of 2009, including the Omnibus Rule Provisions that went in force in 2013. Such provisions include, but are not limited to:
  - a. Adherence to NIST Standard(s) 800-53 and 800-66.
  - b. All WV PEIA data at rest shall be encrypted

- c. Any and/or all PII/PHI data transfers performed under the scope of this contract shall occur in a secure format agreed upon by both parties.
- d. The Covered Entities reserve the right to conduct audits of the Associate to assess compliance with HIPAA/HITECH and the Omnibus Rules. The terms and/or conditions of such audits shall be mutually agreed upon by the Associate and the Covered Entity(ies).
- e. The Associate shall provide vendor assurance(s) that the terms and conditions of this Business Associate Agreement have been conveyed to any and/or all subcontractors who may perform work on this contract or that may have access to the PII/PHI of the Covered Entity(ies)
- j) Any and/or all PII/PHI data stored by the Associate and any and/or all subcontractors to this agreement shall be stored on servers located within the continental United States.

## WV STATE GOVERNMENT

### HIPAA BUSINESS ASSOCIATE ADDENDUM

This Health Insurance Portability and Accountability Act of 1996 (hereafter, HIPAA) Business Associate Addendum ("Addendum") is made a part of the Agreement ("Agreement") by and between the State of West Virginia ("Agency"), and Business Associate ("Associate"), and is effective as of the date of execution of the Addendum.

The Associate performs certain services on behalf of or for the Agency pursuant to the underlying Agreement that requires the exchange of information including protected health information protected by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), as amended by the American Recovery and Reinvestment Act of 2009 (Pub. L. No. 111-5) (the "HITECH Act"), any associated regulations and the federal regulations published at 45 CFR parts 160 and 164 (sometimes collectively referred to as "HIPAA"). The Agency is a "Covered Entity" as that term is defined in HIPAA, and the parties to the underlying Agreement are entering into this Addendum to establish the responsibilities of both parties regarding HIPAA-covered information and to bring the underlying Agreement into compliance with HIPAA.

Whereas it is desirable, in order to further the continued efficient operations of Agency to disclose to its Associate certain information which may contain confidential individually identifiable health information (hereafter, Protected Health Information or PHI); and

Whereas, it is the desire of both parties that the confidentiality of the PHI disclosed hereunder be maintained and treated in accordance with all applicable laws relating to confidentiality, including the Privacy and Security Rules, the HITECH Act and its associated regulations, and the parties do agree to at all times treat the PHI and interpret this Addendum consistent with that desire.

NOW THEREFORE: the parties agree that in consideration of the mutual promises herein, in the Agreement, and of the exchange of PHI hereunder that:

1. **Definitions.** Terms used, but not otherwise defined, in this Addendum shall have the same meaning as those terms in the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and Part 164.

- a. **Agency Procurement Officer** shall mean the appropriate Agency individual listed at: <http://www.state.wv.us/admin/purchase/vrc/agencyli.html>.
- b. **Agent** shall mean those person(s) who are agent(s) of the Business Associate, in accordance with the Federal common law of agency, as referenced in 45 CFR § 160.402(c).
- c. **Breach** shall mean the acquisition, access, use or disclosure of protected health information which compromises the security or privacy of such information, except as excluded in the definition of Breach in 45 CFR § 164.402.
- d. **Business Associate** shall have the meaning given to such term in 45 CFR § 160.103.
- e. **HITECH Act** shall mean the Health Information Technology for Economic and Clinical Health Act. Public Law No. 111-05. 111<sup>th</sup> Congress (2009).

- f. **Privacy Rule** means the Standards for Privacy of Individually Identifiable Health Information found at 45 CFR Parts 160 and 164.
- g. **Protected Health Information or PHI** shall have the meaning given to such term in 45 CFR § 160.103, limited to the information created or received by Associate from or on behalf of Agency.
- h. **Security Incident** means any known successful or unsuccessful attempt by an authorized or unauthorized individual to inappropriately use, disclose, modify, access, or destroy any information or interference with system operations in an information system.
- i. **Security Rule** means the Security Standards for the Protection of Electronic Protected Health Information found at 45 CFR Parts 160 and 164.
- j. **Subcontractor** means a person to whom a business associate delegates a function, activity, or service, other than in the capacity of a member of the workforce of such business associate.

## 2. Permitted Uses and Disclosures.

- a. **PHI Described.** This means PHI created, received, maintained or transmitted on behalf of the Agency by the Associate. This PHI is governed by this Addendum and is limited to the minimum necessary, to complete the tasks or to provide the services associated with the terms of the original Agreement, and is described in Appendix A.
- b. **Purposes.** Except as otherwise limited in this Addendum, Associate may use or disclose the PHI on behalf of, or to provide services to, Agency for the purposes necessary to complete the tasks, or provide the services, associated with, and required by the terms of the original Agreement, or as required by law, if such use or disclosure of the PHI would not violate the Privacy or Security Rules or applicable state law if done by Agency or Associate, or violate the minimum necessary and related Privacy and Security policies and procedures of the Agency. The Associate is directly liable under HIPAA for impermissible uses and disclosures of the PHI it handles on behalf of Agency.
- c. **Further Uses and Disclosures.** Except as otherwise limited in this Addendum, the Associate may disclose PHI to third parties for the purpose of its own proper management and administration, or as required by law, provided that (i) the disclosure is required by law, or (ii) the Associate has obtained from the third party reasonable assurances that the PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party by the Associate; and, (iii) an agreement to notify the Associate and Agency of any instances of which it (the third party) is aware in which the confidentiality of the information has been breached. To the extent practical, the information should be in a limited data set or the minimum necessary information pursuant to 45 CFR § 164.502, or take other measures as necessary to satisfy the Agency's obligations under 45 CFR § 164.502.

### 3. Obligations of Associate.

- a. **Stated Purposes Only.** The PHI may not be used by the Associate for any purpose other than as stated in this Addendum or as required or permitted by law.
- b. **Limited Disclosure.** The PHI is confidential and will not be disclosed by the Associate other than as stated in this Addendum or as required or permitted by law. Associate is prohibited from directly or indirectly receiving any remuneration in exchange for an individual's PHI unless Agency gives written approval and the individual provides a valid authorization. Associate will refrain from marketing activities that would violate HIPAA, including specifically Section 13406 of the HITECH Act. Associate will report to Agency any use or disclosure of the PHI, including any Security Incident not provided for by this Agreement of which it becomes aware.
- c. **Safeguards.** The Associate will use appropriate safeguards, and comply with Subpart C of 45 CFR Part 164 with respect to electronic protected health information, to prevent use or disclosure of the PHI, except as provided for in this Addendum. This shall include, but not be limited to:
  - i. Limitation of the groups of its workforce and agents, to whom the PHI is disclosed to those reasonably required to accomplish the purposes stated in this Addendum, and the use and disclosure of the minimum PHI necessary or a Limited Data Set;
  - ii. Appropriate notification and training of its workforce and agents in order to protect the PHI from unauthorized use and disclosure;
  - iii. Maintenance of a comprehensive, reasonable and appropriate written PHI privacy and security program that includes administrative, technical and physical safeguards appropriate to the size, nature, scope and complexity of the Associate's operations, in compliance with the Security Rule;
  - iv. In accordance with 45 CFR §§ 164.502(e)(1)(ii) and 164.308(b)(2), if applicable, ensure that any subcontractors that create, receive, maintain, or transmit protected health information on behalf of the business associate agree to the same restrictions, conditions, and requirements that apply to the business associate with respect to such information.
- d. **Compliance With Law.** The Associate will not use or disclose the PHI in a manner in violation of existing law and specifically not in violation of laws relating to confidentiality of PHI, including but not limited to, the Privacy and Security Rules.
- e. **Mitigation.** Associate agrees to mitigate, to the extent practicable, any harmful effect that is known to Associate of a use or disclosure of the PHI by Associate in violation of the requirements of this Addendum, and report its mitigation activity back to the Agency.



**f. Support of Individual Rights.**

- i. **Access to PHI.** Associate shall make the PHI maintained by Associate or its agents or subcontractors in Designated Record Sets available to Agency for inspection and copying, and in electronic format, if requested, within ten (10) days of a request by Agency to enable Agency to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 CFR § 164.524 and consistent with Section 13405 of the HITECH Act.
- ii. **Amendment of PHI.** Within ten (10) days of receipt of a request from Agency for an amendment of the PHI or a record about an individual contained in a Designated Record Set, Associate or its agents or subcontractors shall make such PHI available to Agency for amendment and incorporate any such amendment to enable Agency to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 CFR § 164.526.
- iii. **Accounting Rights.** Within ten (10) days of notice of a request for an accounting of disclosures of the PHI, Associate and its agents or subcontractors shall make available to Agency the documentation required to provide an accounting of disclosures to enable Agency to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 CFR § 164.528 and consistent with Section 13405 of the HITECH Act. Associate agrees to document disclosures of the PHI and information related to such disclosures as would be required for Agency to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR § 164.528. This should include a process that allows for an accounting to be collected and maintained by Associate and its agents or subcontractors for at least six (6) years from the date of disclosure, or longer if required by state law. At a minimum, such documentation shall include:
  - the date of disclosure;
  - the name of the entity or person who received the PHI, and if known, the address of the entity or person;
  - a brief description of the PHI disclosed; and
  - a brief statement of purposes of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure.
- iv. **Request for Restriction.** Under the direction of the Agency, abide by any individual's request to restrict the disclosure of PHI, consistent with the requirements of Section 13405 of the HITECH Act and 45 CFR § 164.522, when the Agency determines to do so (except as required by law) and if the disclosure is to a health plan for payment or health care operations and it pertains to a health care item or service for which the health care provider was paid in full "out-of-pocket."
- v. **Immediate Discontinuance of Use or Disclosure.** The Associate will immediately discontinue use or disclosure of Agency PHI pertaining to any individual when so requested by Agency. This includes, but is not limited to, cases in which an individual has withdrawn or modified an authorization to use or disclose PHI.



- g. **Retention of PHI.** Notwithstanding section 4.a. of this Addendum, Associate and its subcontractors or agents shall retain all PHI pursuant to state and federal law and shall continue to maintain the PHI required under Section 3.f. of this Addendum for a period of six (6) years after termination of the Agreement, or longer if required under state law.
- h. **Agent's, Subcontractor's Compliance.** The Associate shall notify the Agency of all subcontracts and agreements relating to the Agreement, where the subcontractor or agent receives PHI as described in section 2.a. of this Addendum. Such notification shall occur within 30 (thirty) calendar days of the execution of the subcontract and shall be delivered to the Agency Procurement Officer. The Associate will ensure that any of its subcontractors, to whom it provides any of the PHI it receives hereunder, or to whom it provides any PHI which the Associate creates or receives on behalf of the Agency, agree to the restrictions and conditions which apply to the Associate hereunder. The Agency may request copies of downstream subcontracts and agreements to determine whether all restrictions, terms and conditions have been flowed down. Failure to ensure that downstream contracts, subcontracts and agreements contain the required restrictions, terms and conditions may result in termination of the Agreement.
- j. **Federal and Agency Access.** The Associate shall make its internal practices, books, and records relating to the use and disclosure of PHI, as well as the PHI, received from, or created or received by the Associate on behalf of the Agency available to the U.S. Secretary of Health and Human Services consistent with 45 CFR § 164.504. The Associate shall also make these records available to Agency, or Agency's contractor, for periodic audit of Associate's compliance with the Privacy and Security Rules. Upon Agency's request, the Associate shall provide proof of compliance with HIPAA and HITECH data privacy/protection guidelines, certification of a secure network and other assurance relative to compliance with the Privacy and Security Rules. This section shall also apply to Associate's subcontractors, if any.
- k. **Security.** The Associate shall take all steps necessary to ensure the continuous security of all PHI and data systems containing PHI. In addition, compliance with 74 FR 19006 Guidance Specifying the Technologies and Methodologies That Render PHI Unusable, Unreadable, or Indecipherable to Unauthorized Individuals for Purposes of the Breach Notification Requirements under Section 13402 of Title XIII is required, to the extent practicable. If Associate chooses not to adopt such methodologies as defined in 74 FR 19006 to secure the PHI governed by this Addendum, it must submit such written rationale, including its Security Risk Analysis, to the Agency Procurement Officer for review prior to the execution of the Addendum. This review may take up to ten (10) days.
- l. **Notification of Breach.** During the term of this Addendum, the Associate shall notify the Agency and, unless otherwise directed by the Agency in writing, the WV Office of Technology immediately by e-mail or web form upon the discovery of any Breach of unsecured PHI; or within 24 hours by e-mail or web form of any suspected Security Incident, intrusion or unauthorized use or disclosure of PHI in violation of this Agreement and this Addendum, or potential loss of confidential data affecting this Agreement. Notification shall be provided to the Agency Procurement Officer at [www.state.wv.us/admin/purchase/vrc/agencyli.htm](http://www.state.wv.us/admin/purchase/vrc/agencyli.htm) and,

unless otherwise directed by the Agency in writing, the Office of Technology at [incident@wv.gov](mailto:incident@wv.gov) or <https://apps.wv.gov/ot/ir/Default.aspx>.

The Associate shall immediately investigate such Security Incident, Breach, or unauthorized use or disclosure of PHI or confidential data. Within 72 hours of the discovery, the Associate shall notify the Agency Procurement Officer, and, unless otherwise directed by the Agency in writing, the Office of Technology of: (a) Date of discovery; (b) What data elements were involved and the extent of the data involved in the Breach; (c) A description of the unauthorized persons known or reasonably believed to have improperly used or disclosed PHI or confidential data; (d) A description of where the PHI or confidential data is believed to have been improperly transmitted, sent, or utilized; (e) A description of the probable causes of the improper use or disclosure; and (f) Whether any federal or state laws requiring individual notifications of Breaches are triggered.

Agency will coordinate with Associate to determine additional specific actions that will be required of the Associate for mitigation of the Breach, which may include notification to the individual or other authorities.

All associated costs shall be borne by the Associate. This may include, but not be limited to costs associated with notifying affected individuals.

If the Associate enters into a subcontract relating to the Agreement where the subcontractor or agent receives PHI as described in section 2.a. of this Addendum, all such subcontracts or downstream agreements shall contain the same incident notification requirements as contained herein, with reporting directly to the Agency Procurement Officer. Failure to include such requirement in any subcontract or agreement may result in the Agency's termination of the Agreement.

- m. **Assistance in Litigation or Administrative Proceedings.** The Associate shall make itself and any subcontractors, workforce or agents assisting Associate in the performance of its obligations under this Agreement, available to the Agency at no cost to the Agency to testify as witnesses, or otherwise, in the event of litigation or administrative proceedings being commenced against the Agency, its officers or employees based upon claimed violations of HIPAA, the HIPAA regulations or other laws relating to security and privacy, which involves inaction or actions by the Associate, except where Associate or its subcontractor, workforce or agent is named as an adverse party.

#### 4. Addendum Administration.

- a. **Term.** This Addendum shall terminate on termination of the underlying Agreement or on the date the Agency terminates for cause as authorized in paragraph (c) of this Section, whichever is sooner.
- b. **Duties at Termination.** Upon any termination of the underlying Agreement, the Associate shall return or destroy, at the Agency's option, all PHI received from, or created or received by the Associate on behalf of the Agency that the Associate still maintains in any form and retain no copies of such PHI or, if such return or destruction is not feasible, the Associate shall extend the protections of this Addendum to the PHI and limit further uses and disclosures to the purposes that make the return or destruction of the PHI infeasible. This shall also apply to all agents and subcontractors of Associate. The duty of the Associate and its agents

and subcontractors to assist the Agency with any HIPAA required accounting of disclosures survives the termination of the underlying Agreement.

- c. **Termination for Cause.** Associate authorizes termination of this Agreement by Agency, if Agency determines Associate has violated a material term of the Agreement. Agency may, at its sole discretion, allow Associate a reasonable period of time to cure the material breach before termination.
- d. **Judicial or Administrative Proceedings.** The Agency may terminate this Agreement if the Associate is found guilty of a criminal violation of HIPAA. The Agency may terminate this Agreement if a finding or stipulation that the Associate has violated any standard or requirement of HIPAA/HITECH, or other security or privacy laws is made in any administrative or civil proceeding in which the Associate is a party or has been joined. Associate shall be subject to prosecution by the Department of Justice for violations of HIPAA/HITECH and shall be responsible for any and all costs associated with prosecution.
- e. **Survival.** The respective rights and obligations of Associate under this Addendum shall survive the termination of the underlying Agreement.

#### 5. General Provisions/Ownership of PHI.

- a. **Retention of Ownership.** Ownership of the PHI resides with the Agency and is to be returned on demand or destroyed at the Agency's option, at any time, and subject to the restrictions found within section 4.b. above.
- b. **Secondary PHI.** Any data or PHI generated from the PHI disclosed hereunder which would permit identification of an individual must be held confidential and is also the property of Agency.
- c. **Electronic Transmission.** Except as permitted by law or this Addendum, the PHI or any data generated from the PHI which would permit identification of an individual must not be transmitted to another party by electronic or other means for additional uses or disclosures not authorized by this Addendum or to another contractor, or allied agency, or affiliate without prior written approval of Agency.
- d. **No Sales.** Reports or data containing the PHI may not be sold without Agency's or the affected individual's written consent.
- e. **No Third-Party Beneficiaries.** Nothing express or implied in this Addendum is intended to confer, nor shall anything herein confer, upon any person other than Agency, Associate and their respective successors or assigns, any rights, remedies, obligations or liabilities whatsoever.
- f. **Interpretation.** The provisions of this Addendum shall prevail over any provisions in the Agreement that may conflict or appear inconsistent with any provisions in this Addendum. The interpretation of this Addendum shall be made under the laws of the state of West Virginia.
- g. **Amendment.** The parties agree that to the extent necessary to comply with applicable law they will agree to further amend this Addendum.
- h. **Additional Terms and Conditions.** Additional discretionary terms may be included in the release order or change order process.

AGREED:

Name of Agency: PEIA

Signature: [Signature]

Title: General Counsel

Date: 3/16/23

Name of Associate: Pierre Chamberland

Signature: [Signature]

Title: Managing Director, Retirement and Benefits Solutions

Date: March 8, 2023

Form - WVBA-012004  
Amended 08.26.2013

APPROVED AS TO FORM THIS  
DAY OF Jan 20 17

[Signature]  
Patrick Morrisey  
Attorney General

BY [Signature]

## **Data Exchange – Data Management Addendum**

### **1. Definitions:**

Acceptable alternative data center location means a country that is identified as providing equivalent or stronger data protection than the United States, in terms of both regulation and enforcement. DLA Piper's Privacy Heatmap shall be utilized for this analysis and may be found at <https://www.dlapiperdataprotection.com/index.html?t=world-map&c=US&c2=IN>.

Authorized Persons means the service provider's employees, contractors, subcontractors or other agents who have responsibility in protecting or have access to the public jurisdiction's personal data and non-public data to enable the service provider to perform the services required.

Data Breach means the unauthorized access and acquisition of unencrypted and unredacted personal data that compromises the security or confidentiality of a public jurisdiction's personal information and that causes the service provider or public jurisdiction to reasonably believe that the data breach has caused or will cause identity theft or other fraud.

Individually Identifiable Health Information means information that is a subset of health information, including demographic information collected from an individual, and (1) is created or received by a health care provider, health plan, employer or health care clearinghouse; and (2) relates to the past, present or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (a) that identifies the individual; or (b) with respect to which there is a reasonable basis to believe the information can be used to identify the individual.

Non-Public Data means data, other than personal data, that is not subject to distribution to the public as public information. It is deemed to be sensitive and confidential by the public jurisdiction because it contains information that is exempt by statute, ordinance or administrative rule from access by the general public as public information.

Personal Data means data that includes information relating to a person that identifies the person by first name or first initial, and last name, and has any of the following personally identifiable information (PII): government-issued identification numbers (e.g., Social Security, driver's license, state identification card); financial account information, including account number, credit or debit card numbers; or protected health information (PHI).

Protected Health Information (PHI) means individually identifiable health information transmitted by electronic media, maintained in electronic media, or transmitted or maintained in any other form or medium. PHI excludes education records covered by the Family Educational Rights and Privacy Act (FERPA), as amended, 20 U.S.C. 1232g, records described at 20 U.S.C. 1232g(a)(4)(B)(iv) and employment records held by a covered entity in its role as employer.



Public Jurisdiction means any government or government agency that uses these terms and conditions. The term is a placeholder for the government or government agency.

Public Jurisdiction Data means all data created or in any way originating with the public jurisdiction, and all data that is the output of computer processing or other electronic manipulation of any data that was created by or in any way originated with the public jurisdiction, whether such data or output is stored on the public jurisdiction's hardware, the service provider's hardware or exists in any system owned, maintained or otherwise controlled by the public jurisdiction or by the service provider.

Public Jurisdiction Identified Contact means the person or persons designated in writing by the public jurisdiction to receive security incident or breach notification.

Restricted data means personal data and non-public data.

Security Incident means the actual unauthorized access to personal data or non-public data the service provider believes could reasonably result in the use, disclosure or theft of a public jurisdiction's unencrypted personal data or non-public data within the possession or control of the service provider. A security incident may or may not turn into a data breach.

Service Provider means the contractor and its employees, subcontractors, agents and affiliates who are providing the services agreed to under the contract.

Software-as-a-Service (SaaS) means the capability provided to the consumer to use the provider's applications running on a cloud infrastructure. The applications are accessible from various client devices through a thin-client interface such as a Web browser (e.g., Web-based email) or a program interface. The consumer does not manage or control the underlying cloud infrastructure including network, servers, operating systems, storage or even individual application capabilities, with the possible exception of limited user-specific application configuration settings.

**2. Data Ownership:** The public jurisdiction will own all right, title and interest in its data that is related to the services provided by this contract. The service provider shall not access public jurisdiction user accounts or public jurisdiction data, except (1) in the course of data center operations, (2) in response to service or technical issues, (3) as required by the express terms of this contract or (4) at the public jurisdiction's written request.

**3. Data Protection and Privacy:** Protection of personal privacy and data shall be an integral part of the business activities of the service provider to ensure there is no inappropriate or unauthorized use of public jurisdiction information at any time. To this end, the service provider shall safeguard the confidentiality, integrity and availability of public jurisdiction information and comply with the following conditions:

- a) The service provider shall implement and maintain appropriate administrative, technical and physical security measures to safeguard against unauthorized access, disclosure or theft of personal data and non-public data. In Appendix A,



the public jurisdiction shall indicate whether restricted information will be processed by the service provider. Such security measures shall be in accordance with recognized industry practice and not less stringent than the measures the service provider applies to its own personal data and non-public data of similar kind. The service provider shall ensure that all such measures, including the manner in which personal data and non-public data are collected, accessed, used, stored, processed, disposed of and disclosed, comply with applicable data protection and privacy laws, as well as the terms and conditions of this Addendum and shall survive termination of the underlying contract.

- b) The service provider represents and warrants that its collection, access, use, storage, disposal and disclosure of personal data and non-public data do and will comply with all applicable federal and state privacy and data protection laws, as well as all other applicable regulations, policies and directives.
- c) The service provider shall support third-party multi-factor authentication integration with the public jurisdiction third-party identity provider to safeguard personal data and non-public data.
- d) If, in the course of its engagement by the public jurisdiction, the service provider has access to or will collect, access, use, store, process, dispose of or disclose credit, debit or other payment cardholder information, the service provider shall at all times remain in compliance with the Payment Card Industry Data Security Standard ("PCI DSS") requirements, including remaining aware at all times of changes to the PCI DSS and promptly implementing all procedures and practices as may be necessary to remain in compliance with the PCI DSS, in each case, at the service provider's sole cost and expense. All data obtained by the service provider in the performance of this contract shall become and remain the property of the public jurisdiction.
- e) All personal data shall be encrypted at rest and in transit with controlled access. Unless otherwise stipulated, the service provider is responsible for encryption of the personal data.
- f) Unless otherwise stipulated, the service provider shall encrypt all non-public data at rest and in transit, in accordance with recognized industry practice. The public jurisdiction shall identify data it deems as non-public data to the service provider.
- g) At no time shall any data or process – that either belong to or are intended for the use of a public jurisdiction or its officers, agents or employees — be copied, disclosed or retained by the service provider or any party related to the service provider for subsequent use in any transaction that does not include the public jurisdiction.
- h) The service provider shall not use or disclose any information collected in connection with the service issued from this proposal for any purpose other than fulfilling the service.
- i) Data Location. For non-public data and personal data, the service provider shall provide its data center services to the public jurisdiction and its end users solely from data centers in the U.S. Storage of public jurisdiction data at rest shall be located solely in data centers in the U.S. The service provider shall not allow its personnel or contractors to store public jurisdiction data on portable devices, including personal computers, except for devices that are used and kept only at its

U.S. data centers. With agreement from the public jurisdiction, this term may be met by the service provider providing its services from an acceptable alternative data center location, which agreement shall be stated in Appendix A. The Service Provider may also request permission to utilize an acceptable alternative data center location during a procurement's question and answer period by submitting a question to that effect. The service provider shall permit its personnel and contractors to access public jurisdiction data remotely only as required to provide technical support.

**4. Security Incident or Data Breach Notification:** The service provider shall inform the public jurisdiction of any confirmed security incident or data breach.

- a) **Incident Response:** The service provider may need to communicate with outside parties regarding a security incident, which may include contacting law enforcement, fielding media inquiries and seeking external expertise as defined by law or contained in the contract. Discussing security incidents with the public jurisdiction shall be handled on an urgent as-needed basis, as part of service provider communication and mitigation processes defined by law or contained in the contract.
- b) **Security Incident Reporting Requirements:** The service provider shall report a confirmed Security Incident as soon as practicable, but no later than twenty-four (24) hours after the service provider becomes aware of it, to: (1) the department privacy officer, by email, with a read receipt, identified in Appendix A; and, (2) unless otherwise directed by the public jurisdiction in the underlying contract, the WVOT Online Computer Security and Privacy Incident Reporting System at <https://apps.wv.gov/ot/ir/Default.aspx>, and (3) the public jurisdiction point of contact for general contract oversight/administration. The following information shall be shared with the public jurisdiction: (1) incident phase (detection and analysis; containment, eradication and recovery; or post-incident activity), (2) projected business impact, and, (3) attack source information.
- c) **Breach Reporting Requirements:** Upon the discovery of a data breach or unauthorized access to non-public data, the service provider shall immediately report to: (1) the department privacy officer, by email, with a read receipt, identified in Appendix A; and, (2) unless otherwise directed by the public jurisdiction in the underlying contract, the WVOT Online Computer Security and Privacy Incident Reporting System at <https://apps.wv.gov/ot/ir/Default.aspx>, and the public jurisdiction point of contact for general contract oversight/administration.

**5. Breach Responsibilities:** This section only applies when a data breach occurs with respect to personal data within the possession or control of the service provider.

- a) Immediately after being awarded a contract, the service provider shall provide the public jurisdiction with the name and contact information for an employee of service provider who shall serve as the public jurisdiction's primary security contact and shall be available to assist the public jurisdiction twenty-four (24) hours per day, seven (7) days per week as a contact in resolving obligations associated with a data breach. The service provider may provide this information in Appendix A.

- b) Immediately following the service provider's notification to the public jurisdiction of a data breach, the parties shall coordinate cooperate with each other to investigate the data breach. The service provider agrees to fully cooperate with the public jurisdiction in the public jurisdiction's handling of the matter, including, without limitation, at the public jurisdiction's request, making available all relevant records, logs, files, data reporting and other materials required to comply with applicable law and regulation.
- c) Within 72 hours of the discovery, the service provider shall notify the parties listed in 4(c) above, to the extent known: (1) date of discovery; (2) list of data elements and the number of individual records; (3) description of the unauthorized persons known or reasonably believed to have improperly used or disclosed the personal data; (4) description of where the personal data is believed to have been improperly transmitted, sent, or utilized; and, (5) description of the probable causes of the improper use or disclosure.
- d) The service provider shall (1) cooperate with the public jurisdiction as reasonably requested by the public jurisdiction to investigate and resolve the data breach, (2) promptly implement necessary remedial measures, if necessary, and prevent any further data breach at the service provider's expense in accordance with applicable privacy rights, laws and regulations and (3) document responsive actions taken related to the data breach, including any post-incident review of events and actions taken to make changes in business practices in providing the services, if necessary.
- e) If a data breach is a direct result of the service provider's breach of its contract obligation to encrypt personal data or otherwise prevent its release, the service provider shall bear the costs associated with (1) the investigation and resolution of the data breach; (2) notifications to individuals, regulators or others required by state or federal law; (3) a credit monitoring service (4) a website or a toll-free number and call center for affected individuals required by state law — all not to exceed the average per record per person cost calculated for data breaches in the United States in the most recent Cost of Data Breach Study: Global Analysis published by the Ponemon Institute at the time of the data breach (or other similar publication if the named publication has not issued an updated average per record per cost in the last 5 years at the time of the data breach); and (5) complete all corrective actions as reasonably determined by service provider based on root cause. The service provider agrees that it shall not inform any third party of any data breach without first obtaining the public jurisdiction's prior written consent, other than to inform a complainant that the matter has been forwarded to the public jurisdiction's legal counsel and/or engage a third party with appropriate expertise and confidentiality protections for any reason connected to the data breach. Except with respect to where the service provider has an independent legal obligation to report a data breach, the service provider agrees that the public jurisdiction shall have the sole right to determine: (1) whether notice of the data breach is to be provided to any individuals, regulators, law enforcement agencies, consumer reporting agencies or others, as required by law or regulation, or otherwise in the public jurisdiction's discretion; and (2) the contents of such notice, whether any

type of remediation may be offered to affected persons, and the nature and extent of any such remediation. The service provider retains the right to report activity to law enforcement.

**6. Notification of Legal Requests:** The service provider shall contact the public jurisdiction upon receipt of any electronic discovery, litigation holds, discovery searches and expert testimonies related to the public jurisdiction's data under this contract, or which in any way might reasonably require access to the data of the public jurisdiction. The service provider shall not respond to subpoenas, service of process and other legal requests related to the public jurisdiction without first notifying the public jurisdiction, unless prohibited by law from providing such notice.

**7. Termination and Suspension of Service:**

- a) In the event of a termination of the contract, the service provider shall implement an orderly return of public jurisdiction data within the time period and format specified in the contract (or in the absence of a specified time and format, a mutually agreeable time and format) and after the data has been successfully returned, securely and permanently dispose of public jurisdiction data.
- b) During any period of service suspension, the service provider shall not take any action to intentionally erase any public jurisdiction data.
- c) In the event the contract does not specify a time or format for return of the public jurisdiction's data and an agreement has not been reached, in the event of termination of any services or agreement in entirety, the service provider shall not take any action to intentionally erase any public jurisdiction data for a period of:
  - 10 days after the effective date of termination, if the termination is in accordance with the contract period
  - 30 days after the effective date of termination, if the termination is for convenience
  - 60 days after the effective date of termination, if the termination is for cause

After such period, the service provider shall have no obligation to maintain or provide any public jurisdiction data and shall thereafter, unless legally prohibited, delete all public jurisdiction data in its systems or otherwise in its possession or under its control.

- d) The public jurisdiction shall be entitled to any post-termination assistance generally made available with respect to the services, unless a unique data retrieval arrangement has been established as part of the Contract.
- e) The service provider shall securely dispose of all requested data in all of its forms, such as disk, CD/ DVD, backup tape and paper, when requested by the public jurisdiction. Data shall be permanently deleted and shall not be recoverable, according to National Institute of Standards and Technology (NIST)-approved methods. Certificates of destruction shall be provided to the public jurisdiction.

**8. Background Checks:** The service provider shall conduct criminal background checks in compliance with W.Va. Code §15-2D-3 and not utilize any staff to fulfill the obligations



of the contract, including subcontractors, who have been convicted of any crime of dishonesty, including but not limited to criminal fraud, or otherwise convicted of any felony or misdemeanor offense for which incarceration for up to 1 year is an authorized penalty. The service provider shall promote and maintain an awareness of the importance of securing the public jurisdiction's information among the service provider's employees and agents.

**9. Oversight of Authorized Persons:** During the term of each authorized person's employment or engagement by service provider, service provider shall at all times cause such persons to abide strictly by service provider's obligations under this Agreement and service provider's standard policies and procedures. The service provider further agrees that it shall maintain a disciplinary process to address any unauthorized access, use or disclosure of personal data by any of service provider's officers, partners, principals, employees, agents or contractors.

**10. Access to Security Logs and Reports:** The service provider shall provide reports to the public jurisdiction in CSV format agreed to by both the service provider and the public jurisdiction. Reports shall include user access (successful and failed attempts), user access IP address, user access history and security logs for all public jurisdiction files and accounts related to this contract.

**11. Data Protection Self-Assessment:** The service provider shall perform a Cloud Security Alliance STAR Self-Assessment by completing and submitting the "Consensus Assessments Initiative Questionnaire" to the Public Jurisdiction Identified Contact. The service provider shall submit its self-assessment to the public jurisdiction prior to contract award and, upon request, annually thereafter, on the anniversary of the date of contract execution. Any deficiencies identified in the assessment will entitle the public jurisdiction to disqualify the bid or terminate the contract for cause.

**12. Data Center Audit:** The service provider shall perform an audit of its data center(s) at least annually at its expense and provide a redacted version of the audit report upon request. The service provider may remove its proprietary information from the redacted version. A Service Organization Control (SOC) 2 audit report or approved equivalent sets the minimum level of a third-party audit. Any deficiencies identified in the report or approved equivalent will entitle the public jurisdiction to disqualify the bid or terminate the contract for cause.

**13. Change Control and Advance Notice:** The service provider shall give 30 days, advance notice (to the public jurisdiction of any upgrades (e.g., major upgrades, minor upgrades, system changes) that may impact service availability and performance. A major upgrade is a replacement of hardware, software or firmware with a newer or better version in order to bring the system up to date or to improve its characteristics.

**14. Security:**

- a) At a minimum, the service provider's safeguards for the protection of data shall include: (1) securing business facilities, data centers, paper files, servers, back-up

systems and computing equipment, including, but not limited to, all mobile devices and other equipment with information storage capability; (2) implementing network, device application, database and platform security; 3) securing information transmission, storage and disposal; (4) implementing authentication and access controls within media, applications, operating systems and equipment; (5) implementing appropriate personnel security and integrity procedures and practices, including, but not limited to, conducting background checks consistent with applicable law; and (6) providing appropriate privacy and information security training to service provider's employees.

- b) The service provider shall execute well-defined recurring action steps that identify and monitor vulnerabilities and provide remediation or corrective measures. Where the service provider's technology or the public jurisdiction's required dependence on a third-party application to interface with the technology creates a critical or high risk, the service provider shall remediate the vulnerability as soon as possible. The service provider must ensure that applications used to interface with the service provider's technology remain operationally compatible with software updates.
- c) Upon the public jurisdiction's written request, the service provider shall provide a high-level network diagram with respect to connectivity to the public jurisdiction's network that illustrates the service provider's information technology network infrastructure.

**15. Non-disclosure and Separation of Duties:** The service provider shall enforce separation of job duties, require commercially reasonable non-disclosure agreements, and limit staff knowledge of public jurisdiction data to that which is absolutely necessary to perform job duties.

**16. Import and Export of Data:** The public jurisdiction shall have the ability to securely import, export or dispose of data in standard format in piecemeal or in entirety at its discretion without interference from the service provider. This includes the ability for the public jurisdiction to import or export data to/from other service providers identified in the contract (or in the absence of an identified format, a mutually agreeable format).

**17. Responsibilities:** The service provider shall be responsible for the acquisition and operation of all hardware, software and network support related to the cloud services being provided. The technical and professional activities required for establishing, managing and maintaining the environments are the responsibilities of the service provider.

**18. Subcontractor Compliance:** The service provider shall ensure that any of its subcontractors to whom it provides any of the personal data or non-public data it receives hereunder, or to whom it provides any personal data or non-public data which the service provider creates or receives on behalf of the public jurisdiction, agree to the restrictions, terms and conditions which apply to the service provider hereunder.

**19. Right to Remove Individuals:** The public jurisdiction shall have the right at any time to require that the service provider remove from interaction with public jurisdiction any



service provider representative who the public jurisdiction believes is detrimental to its working relationship with the service provider. The public jurisdiction shall provide the service provider with notice of its determination, and the reasons it requests the removal. If the public jurisdiction signifies that a potential security violation exists with respect to the request, the service provider shall immediately remove such individual. The service provider shall not assign the person to any aspect of the contract without the public jurisdiction's consent.

**20. Business Continuity and Disaster Recovery:** The service provider shall provide a business continuity and disaster recovery plan executive summary upon request. Lack of a plan will entitle the public jurisdiction to terminate this contract for cause.

**21. Compliance with Accessibility Standards:** The service provider shall comply with and adhere to Accessibility Standards of Section 508 Amendment to the Rehabilitation Act of 1973.

**22. Web Services:** The service provider shall use web services exclusively to interface with the public jurisdiction's data in near real time when possible.

**23. Encryption of Data at Rest:** The service provider shall ensure hard drive encryption consistent with validated cryptography standards as referenced in FIPS 140-2, Security Requirements for Cryptographic Modules for all personal data.

**24. Subscription Terms:** Service provider grants to a public jurisdiction a license to:

- a. Access and use the service for its business purposes;
- b. For SaaS, use underlying software as embodied or used in the service; and
- c. View, copy, upload, download (where applicable), and use service provider's documentation.

**25. Equitable Relief:** Service provider acknowledges that any breach of its covenants or obligations set forth in Addendum may cause the public jurisdiction irreparable harm for which monetary damages would not be adequate compensation and agrees that, in the event of such breach or threatened breach, the public jurisdiction is entitled to seek equitable relief, including a restraining order, injunctive relief, specific performance and any other relief that may be available from any court, in addition to any other remedy to which the public jurisdiction may be entitled at law or in equity. Such remedies shall not be deemed to be exclusive but shall be in addition to all other remedies available at law or in equity, subject to any express exclusions or limitations in this Addendum to the contrary.

AGREED:

Name of Agency: PEIA

Signature: [Handwritten Signature]

Title: General Counsel

Date: 3/16/23

Name of Vendor: Pierre Chamberland

Signature: [Handwritten Signature]

Title: Managing Director, Retirement and Benefits Solutions

Date: March 8, 2023

## Appendix A

(To be completed by the Agency's Procurement Officer prior to the execution of the Addendum, and shall be made a part of the Addendum. Required information not identified prior to execution of the Addendum may only be added by amending Appendix A and the Addendum, via Change Order.)

Name of Service Provider/Vendor: Life Works

Name of Agency: West Virginia Public Employees Insurance Agency

### Agency/public jurisdiction's required information:

1. Will restricted information be processed by the service provider?  
Yes ☒  
No ☐
2. If yes to #1, does the restricted information include personal data?  
Yes ☒  
No ☐
3. If yes to #1, does the restricted information include non-public data?  
Yes ☒  
No ☐
4. If yes to #1, may the service provider store public jurisdiction data in a data center in an acceptable alternative data center location, which is a country that is not the U.S.?  
Yes ☐  
No ☒
5. Provide name and email address for the Department privacy officer:  
Name: Thomas Miller  
Email address: thomas.d.miller@wv.gov

### Vendor/Service Provider's required information:

6. Provide name and contact information for vendor's employee who shall serve as the public jurisdiction's primary security contact:  
Name: Pierre Chamberland or Designee  
Email address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**WV PEIA Benefits Administration System**  
**Appendix 2**  
**Cost Proposal Workbook Instructions**

Only dollar and number values will be accepted on the Cost Proposal with the exception of the entry of "Description", "Manufacturer" and "Model" entries or the description of an "Other" fee. Any description other than number value such as, but not limited to: "no cost," "included," "see below," "-", "n/a," etc. will not be accepted. A cost value of \$0.00 shall indicate the deliverable is no cost to the Agency. Costs should only appear in this workbook and not be included in any section of your written proposal.

Fields that are GREYED out should not be used for data entry on the cost schedules.

**Schedule 1 - Implementation and Annual Cost**

Fill in the vendor name. Hardware and Third Party Software costs will be automatically populated based on the vendor entries in Schedules 2 and 3.

This schedule consists of the fixed, total costs to implement the Project Goals and Mandatory Requirements of the proposed solution and yearly costs thereafter.

- Solution Implementation cost must include all costs during the implementation period associated to requirements analysis, software modifications development & testing, hosting environment, third party hardware and software installation and configuration, data conversion, integration(s) with other systems, training, documentation, project management and any other services required to fully implement the proposed solution as noted in section 4.2 of the RFP, Project Goals and Mandatory Requirements.
- Annual Fees must include all recurring fees charged after the implementation is complete and the system is operating in a live, production environment. These fees include the hosting fee, software license and maintenance fees, third party software license and maintenance fees, and support fees. Add a row and a description of the fee for any other recurring fees not specifically listed. Refer to section 4.2.1.10. in the RFP.
- Add the hourly cost per hour for Additional Support Services that may be requested by the Agency after the implementation is complete such as adding additional functional requirements, support ticket consulting services, and additional training, interfaces and reporting. Refer to section 4.2.1.10. in the RFP. Note: All hourly rates quoted must be fully "loaded" to capture all direct and overhead expenses, travel, per diem, and any other travel-related expenses.

**Schedule 2 - Hardware**

This section should only include supplemental hardware required to supplement a vendor hosted solution. PEIA recognizes that not all vendor solutions have all of the required components integrated into the core product and that some items may in fact be 3rd party integrated add-ons. For vendors utilizing 3rd party add-on components, PEIA requests itemized pricing for these components. Enter all hardware components required to effect the mandatory portion of the proposed solution. For each required item, provide the manufacturer, model, a description, the quantity, and the unit cost. Cost extensions and totals will be computed automatically.

**Schedule 3 - Third Party Software**

This section should only include supplemental software required to supplement a vendor hosted solution. PEIA recognizes that not all vendor solutions have all of the required components integrated into the core product and that some items may in fact be 3rd party integrated add-ons. For vendors utilizing 3rd party add-on components, PEIA requests itemized pricing for these components. Enter all third party software products required to effect the mandatory portion of the proposed solution. Include all required products such as operating systems, network software, database management software, software tools, and office suite software. For each required item, provide the manufacturer, model, a description, the number of copies required, and the unit cost. Cost extensions and totals will be computed automatically.

Appendix 1 - Functional Requirements							Yes/No
ReqID	Open	Process	Sub-Process	Requirement Detail	Links		
1		Eligibility and Enrollment	Foundational	Centralized eligibility and enrollment module to maintain and apply Agency rules, view and maintain eligibility and enrollment data, and import/export eligibility and/or enrollment data as necessary to carriers and other entities.			Yes
2		Premium Management	Foundational	Centralized billing module to maintain current and historical premium rates, invoices, and payment records, calculate premium amounts, generate premium invoices, collect, apply, and reconcile invoice payments, and track open			Yes
3		Premium Management	Foundational	Reconciliation of outstanding invoices with incoming payments.			Yes
4		System	Foundational	Management of coverage data.			Yes
5		System	Foundational	Functions to support all required interfaces, including, but not limited to, interfaces between: •Supporting third party products such as Microsoft Great Plains. •Employers. •Other related agencies (e.g., wvOASIS); and •TPAs.			Yes
6		System	Reports, Forms, Letters, & E-communications	The system includes the capability to create templates/formats and generate reports, forms, and letters, including ad-hoc reporting capabilities.			Yes
7		System	Reports, Forms, Letters, & E-communications	Provides an established library of forms, reports and letters that can be copied, modified and saved as a PEIA template.			Yes
8		System	Reports, Forms, Letters, & E-communications	The system is capable of selecting groups of entities based on criteria(s) as defined by PEIA (i.e. based on plan enrollment specifics, employer type, employment status, user type, workflow triggers, etc.) and sending mass communications via email and SMS messaging. The system is also capable of updating the email or SMS message in the billing or enrollment portals "message center" to keep communications consistent across all channels.			Yes
9		System	Foundational	The system should have the capability of interfacing with internal and external parties to exchange data at defined or ad-hoc frequency(ies). This includes the interface to exchange all data with PEIA's internal data warehouse at a frequency determined by PEIA.			Yes
10		Cash Receipts	Accounting	The system should automatically reconcile electronic cash receipt types to billing invoices/amounts due where receipt amounts have been verified as having cleared with the financial institution.			Yes
11		Cash Receipts	Accounting	The system should have the ability to accept miscellaneous revenue, deposit monies, and trigger appropriate workflows (ex. forfeitures, legal settlements, and old insurance contracts).			Yes
12		Cash Receipts	Accounting	The system should have the ability to apply one payment to multiple AR and, or GL accounts.			Yes
13		Cash Receipts	Accounting	The system should have the ability to support inter-fund accounting based on but not limited to, the employer, transaction type and insurance type for which a payment is made.			Yes
14		Cash Receipts	Accounting	The system should have the ability to assign a status to a deposit (reconciled, pending, etc.).			Yes
15		Cash Receipts	Accounting	The system should provide the ability for authorized PEIA staff to cancel or reverse invoices, including updating sub-ledger entries, while retaining all modifications in the account history.			Yes
16		Cash Receipts	Accounting	The system should provide the ability to abate or reverse interest or fees.			Yes
17		Cash Receipts	Accounting	The system should provide the ability to reverse payments submitted to PEIA (ex. bad check, Non-sufficient Funds, etc.) and re-set the invoice and invoice detail status.			Yes
18		Cash Receipts	Employer Data	The system should have the ability to set a default payment type for employers and Individual insurance subscribers.			Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
19		Cash Receipts	Interfaces	The system should be able to download and process an electronic, validated deposit file from the bank, making an image immediately available to designated authorized internal PEIA users and management.		Yes
20		Cash Receipts	Interfaces	The system should provide the ability to transmit check images to PEIA bank accounts electronically in an automated deposit.		No
21		Cash Receipts	Interfaces	The system should receive transactional data from financial institutions containing deposits regardless of method (ex. teller, ACH, wire transfer), check statuses (ex. cleared, suspended, open) and account balances.		Yes
22		Cash Receipts	Invoices	The system should calculate interest for delinquent payment submissions by employers per PEIA business rules.		Yes
23		Cash Receipts	Payment	The system should provide authorized internal PEIA users the ability to schedule and execute daily (or more frequent) electronic deposit processes.		Yes
24		Cash Receipts	Reports, Forms, Letters, & E-communications	The system should automatically electronically notify the retiree when a direct bill payment is received on an invoice (partial or full).		Yes
25		Cash Receipts	Reports, Forms, Letters, & E-communications	The system should create detailed and summary deposit reports by payment method and AR subledger account for daily deposits to PEIA bank accounts for reconciliation purposes.		Yes
26		Cash Receipts	Reports, Forms, Letters, & E-communications	The system should notify employers, and direct bill retirees and PEIA of payments due, overdue balances, overpayments and credits.		Yes
27		Cash Receipts	Reports, Forms, Letters, & E-communications	The system should notify the retiree when payment amount received is less than the expected amount.		Yes
28		Cash Receipts	Reports, Forms, Letters, & E-communications	The system should produce barcoded or MICR remittance documents to accompany premiums and other payment submissions.		Yes
29		Cash Receipts	Reports, Forms, Letters, & E-communications	The system should provide a means of accounting and reporting for aging unallocated cash receipts.		Yes
30		Cash Receipts	Reports, Forms, Letters, & E-communications	The system should provide a view of employer reporting entities whose payments are delinquent, including an aging of delinquencies.		Yes
31		Cash Receipts	Reports, Forms, Letters, & E-communications	The system should provide extensive reporting and analysis capabilities on all key data elements within the cash receipts process.		Yes
32		Cash Receipts	Self-Service	The system should allow employers and members to select specific receivables or benefits to which to apply online payments and input partial payment amounts.		Yes
33		Cash Receipts	Self-Service	The system should allow portal users to enter financial/banking information and payment frequency (auto-pay, one-time payment, etc.). The system should have the ability to store bank information, but should not store credit card information. Credit card information is passed directly to the financial institution used by PEIA.		Yes
34		Cash Receipts	Usability	The system should allow authorized PEIA staff to search records against a number of demographic and payment data elements - such as member name, SSN, address, check routing number, account number, payment amount and payment date range.		Yes
35		Cash Receipts	Usability	The system should enable all automated processes to be performed manually by designated internal PEIA users when necessary.		Yes
36		Cash Receipts	Validation	The system should have the ability to limit automatic drafts for individuals, if the draft is over a certain amount. Where the amount is a system parameter that can be maintained by internal PEIA users.		Yes
37		Cash Receipts	Validation	The system should have the ability to reject payments based on the status of the member (terminated, separated, etc.).		Yes
38		Cash Receipts	Validation	The system should prevent employers from creating and/or submitting the same deposit form more than once.		Yes
39		Cash Receipts	Validation	The system should warn employers or members when they attempt to make out-of-sequence payments.		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
40		Cash Receipts	Workflow & Case Management	The system should automatically trigger workflow every "x" (days or weeks) when reimbursement is due to an annuitant retiree for an overpayment due to death or an erroneous premium billed amount.		Yes
41		Refunds	Interfaces	Refund transaction data should be automatically processed in a batch mode and sent to wvOasis as part of the reimbursement workflow for annuitant retirees.		Yes
42		Cash Receipts	Workflow & Case Management	The system should initiate a workflow for unidentified receipts to facilitate research, credit the appropriate accounts and notify the payer.		Yes
43		Cash Receipts	Workflow & Case Management	The system should initiate a workflow if a receipt has not been received within a defined period of time (ex. forfeiture, insurance premium payments, contributions). Where the defined period of time is a system parameter that can be maintained by internal PEIA users.		Yes
44		Cash Receipts	Workflow & Case Management	The system should initiate a workflow when a receipt is returned to create an accounts receivable and change the status of the account's payment type.		Yes
45		Cash Receipts	Workflow & Case Management	The system should initiate workflows for electronic payments.		Yes
46		Cash Receipts	Workflow & Case Management	The system should initiate workflows for physical payments that are front end imaged and route to the appropriate internal PEIA users.		Yes
47		Customer Service	Interfaces	The system should enable integration with existing IVR (Interactive Voice Response) and supporting computer telephony integration (CTI) application that automatically displays all of the relevant caller and account information on a Customer Service Agent's screen during a call.		Yes
48		Customer Service	Interfaces	The system should enable integration with the existing IVR system to obtain participant request for form mailings.		Yes
49		Customer Service	Interfaces	The system should enable integration with a third party document management system to retrieve documents stored by participant or employer or other entity (assuming the system does not have it's own DMS functionality).		Yes
50		Customer Service	Interfaces	The system should enable integration with other customer service tools and applications.		Yes
51		Customer Service	Person Data	The system should be able to intake data relating to a subscriber's and their dependents' or survivor's eligibility, enrollment, other information including communications via phone, email, chat, mail or other.		Yes
52		Customer Service	Relationship Management	PEIA users can categorize communications by intake type (phone, email, etc.), category (i.e. eligibility, enrollment, billing, etc.), date and time in order to efficiently access specific records and report on specific intake data.		Yes
53		Customer Service	Relationship Management	The system should allow for an unlimited character field for tasks or notes.		Yes
54		Customer Service	Relationship Management	The system should allow files or pictures to be attached or inserted to tasks or notes.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Units	
55		Customer Service	Relationship Management	The system should be able to produce reports and dashboards showing a history of all intake data, contacts, notes, workflows, and cases.		Yes
56		Customer Service	Relationship Management	The system should provide the ability to track a case (request or issue) from initial request to resolution. Tracking data includes the assigned user, entry date/time of information updates, status of issue (entered, assigned, in progress, resolved).		Yes
57		Customer Service	Reports, Forms, Letters, & E-communications	The system should have ad-hoc query capabilities to select groups of participants and/or employers for mass mailings.		Yes
58		Customer Service	Reports, Forms, Letters, & E-communications	The system has the capability of printing identifying information as a barcode on statements or letters to be used for document management purposes.		Yes
59		Customer Service	Reports, Forms, Letters, & E-communications	The system should record all outgoing and incoming mail to the participant's record.		Yes
60		Customer Service	Reports, Forms, Letters, & E-communications	The system has the capability of printing addresses on mass mailings as necessary to avoid label generation.		Yes
61		Customer Service	Reports, Forms, Letters, & E-communications	The system should be able to read IVR data and requests, update the system accordingly and send requested forms to the participant.		Yes
62		Customer Service	Reports, Forms, Letters, & E-communications	The system should provide Customer Service Representatives with a method of quickly and easily requesting various documents for a participant and route the requests to the mailroom where they can process the requests in batches or as individual requests.		Yes
63		Customer Service	Reports, Forms, Letters, & E-communications	The system should be able to produce frequently requested letters (certificate of creditable coverage, premium verification, etc.).		Yes
64		Customer Service	Reports, Forms, Letters, & E-communications	The system should provide the ability to link a document to a subscriber or employer contact record and/or case.		Yes
65		Customer Service	Reports, Forms, Letters, & E-communications	The system should provide the ability to replicate any notification.		Yes
66		Customer Service	Reports, Forms, Letters, & E-communications	The system should provide the functionality for alerts when requests for documents go unanswered.		Yes
67		Customer Service	Reports, Forms, Letters, & E-communications	The system should provide reports on pending or "open" enrollments where enrollment has not been finalized. Reports can be run for a reason (i.e. documentation not received, approval not provided, etc.), by age, by enrollment type (retiree, dependent, Medicare, etc.) or other values or by combination of values.		Yes
68		Customer Service	Security	The system should provide the capability to display key information for the participant or employer based on the user's role.		Yes
69		Customer Service	Set Up and Maintenance	Entities other than participants and employers (i.e. vendors, TPAs, etc.) and their contact information can be configured within the CRM system to track tasks and cases.		Yes
70		Customer Service	System Data	The system should house a knowledge management database with answers to typical questions, policies, and procedures that can be accessed by all employees.		Yes
71		Customer Service	Usability	The system should provide a direct link from the customer service display for internal PEIA users to view the subscriber or employer information.		Yes
72		Customer Service	Validation	The system should apply all business rules when processing customer service transactions.		Yes
73		Customer Service	Workflow & Case Management	The system should be able to age a case or task and set up reminders to move cases into current day or other designated work queue.		Yes
74		Death Notification and Processing	Benefit Payments & Refunds	The system should automatically terminate health and insurance coverage for the deceased and dependents when a death is confirmed, and trigger the survivor enrollment process if eligible.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
75		Death Notification and Processing	Benefit Payments & Refunds	The system should calculate and issue refunds for overpayment of insurance benefits premiums per PEIA business rules.		Yes
76		Death Notification and Processing	Benefit Payments & Refunds	The system should provide the ability to reverse a death entered in error and to reinstate a retirement and/or insurance benefit for the member if applicable. The system should be able to automatically compute amount due for the period of time the account was terminated or suspended.		Yes
77		Death Notification and Processing	Benefit Payments & Refunds	The system should track overpayments by identifying payments processed after the death of a payee as ineligible payments.		Yes
78		Death Notification and Processing	Death Notification and Processing	The system should have the ability to receive and standardize death notifications and key data elements from multiple sources and automatically initiate appropriate workflow process based on member status.		Yes
79		Death Notification and Processing	Foundational	The system should allow employers to report all necessary information for a death notification through the employer portal.		Yes
80		Death Notification and Processing	Foundational	The system should provide the capability to record the initial source through which PEIA was notified of the death and the date of notification.		Yes
81		Death Notification and Processing	Person Data	The system should provide the ability for internal PEIA users to edit or remove any death notification.		Yes
82		Death Notification and Processing	Person Data	The system should provide the capability to mark a member as deceased.		Yes
83		Death Notification and Processing	Person Data	The system should provide the capability to record the deceased date of death.		Yes
84		Death Notification and Processing	Reports, Forms, Letters, & E-communications	The system should notify dependents of health and insurance benefits eligibility benefits available.		Yes
85		Death Notification and Processing	Reports, Forms, Letters, & E-communications	The system should notify as necessary to provide information to the applicable third-party administrator or insurance provider to process life insurance claims and provide the ability to view and download required forms.		Yes
86		Death Notification and Processing	Workflow & Case Management	The system should be able to assign a status and initiate appropriate workflows for death notifications per PEIA business rules.		Yes
87		Eligibility	Foundational	The system should provide the capability to flag a Member's account as having terminated employment.		Yes
88		Eligibility	Person Data	The system should provide the capability to capture required subscriber eligibility and enrollment attributes during the set-up process for a new participating employer.		Yes
89		Eligibility	QDRO Processing	The system should provide for recording the receipt of a Qualified Domestic Relations Order (QDRO) and relate the QDRO to a specific Subscriber.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
90		Eligibility	Rules	All rules should be effective date based where the rule should be applied inclusive of the effective date and end inclusive of the expiration date.		Yes
91		Eligibility	Rules	If a member enrolls for life insurance after initial enrollment, coverage should become effective the first day of the calendar month following approval from the life insurance carrier.		Yes
92		Eligibility	Rules	The comprehensive rules engine should be accessible to PEIA (with appropriate security) to view, or to make rule additions or changes. All rule additions or edits should be documented with the username, date, time and a description of the addition/edit.		Yes
93		Eligibility	Rules	The system should allow life insurance enrollment (basic, optional or dependent life insurance) for members or retirees at any time.		Yes
94		Eligibility	Rules	The system should allow multiple health subscribers to cover the same dependents, but not for the same benefit. It should trigger a warning message and prevent the data from saving if a subscriber enters a dependent currently covered for the benefit.		Yes
95		Eligibility	Rules	The system should apply eligibility rules and provide the appropriate choices for health and insurance enrollment during all applicable enrollment periods.		Yes
96		Eligibility	Rules	The system should apply other eligibility rules for benefit options available to those members who are 65 or older, but do not qualify for Medicare.		Yes
97		Eligibility	Rules	The system should automatically change health coverage to the Medicare Supplement when a retiree, survivor or their covered dependent gains Medicare due to disability.		Yes
98		Eligibility	Rules	The system should automatically change health coverage to the Medicare Supplement when a retiree, survivor or their covered dependent turns 65 and is Medicare eligible.		Yes
99		Eligibility	Rules	The system should automatically change health coverage to the Medicare Supplement, when appropriate, for a retiree or survivor when the Centers for Medicare and Medicaid Services (CMS) file reports the gain of Medicare for the member or covered dependents.		Yes
100		Eligibility	Rules	The system should automatically terminate coverage for a dependent when they are no longer eligible based on age.		Yes
101		Eligibility	Rules	The system should automatically terminate coverages when no longer eligible or a benefit is no longer available.		Yes
102		Eligibility	Rules	The system should automatically update the subscriber or covered dependent's Medicare information (HICN, MBI, reason, effective dates) when they gain Medicare.		Yes
103		Eligibility	Rules	The system should calculate eligibility for a benefit based on multiple factors including but not limited to: employer, member hire date, member address, PEIA status (active, retiree), job type (Deputy Sheriffs, elected official, etc.), job status, death, divorce, employment history (hire, termination), special event (birth, loss of other coverage), termination, years of service, etc. as documented in the PEIA Plan Documents and Summary Plan Descriptions noted below: SPD (link in column E): Page 11 - PPB Plan D WV only plan, Page 38 - Post 2010 employees ineligible for subsidized retiree health and life insurance Page 39 - Pre 1997 Retirees, Post 1997 Retirees, Surviving Dependents Page 40 - Employer Paid Retiree Insurance, pre and post 1988 hire dates Page 42 - Retiree Premium Assistance	<a href="https://peia.wv.gov/Forms-Downloads/Documents/summary_plan_descriptions/SummaryPlanDescription_ABD2022-web.pdf">https://peia.wv.gov/Forms-Downloads/Documents/summary_plan_descriptions/SummaryPlanDescription_ABD2022-web.pdf</a>	Yes
104		Eligibility	Rules	The system should capture information on employee transfers and dual employments and provide enrollment opportunities for the benefits the member is eligible for per PEIA business rules (Employee/Employee Spouse Family Policy Tier) as documented in the PEIA Plan Documents and Summary Plan Descriptions noted below: SPD (link in column E): Page 22 - Family with Employee Spouse	<a href="https://peia.wv.gov/Forms-Downloads/Documents/summary_plan_descriptions/SummaryPlanDescription_ABD2022-web.pdf">https://peia.wv.gov/Forms-Downloads/Documents/summary_plan_descriptions/SummaryPlanDescription_ABD2022-web.pdf</a>	Yes
105		Eligibility	Rules	The system should distinguish between different eligibilities of children (ex. temporary incapacitated, permanent incapacitated, child under 26, National Medical Support Notice).		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Link	
106		Eligibility	Rules	The system should enroll temporarily and permanently incapacitated children as dependents and trigger workflow for review by an internal PEIA user at intervals defined per PEIA business rules. The review process should include automated correspondence and follow-up until a response is received.		Yes
107		Eligibility	Rules	The system should generate a report of policyholders affected by the rule edit in test or production mode.		Yes
108		Eligibility	Rules	The system should have parameters on all plans or benefits that can be used to qualify those eligible to enroll based on specific criteria in the rules engine.		Yes
109		Eligibility	Rules	The system should have the ability for the spouse to be of the same sex as the member.		Yes
110		Eligibility	Rules	The system should not provide coverage in any plan unless the employee is enrolled. There is no default plan.		Yes
111		Eligibility	Rules	The system should notify the member when coverage is terminated.		Yes
112		Eligibility	Rules	The system should only allow health insurance enrollment for a qualifying event for a member and their dependents during the month in which the qualifying event occurred and the following two calendar months. After this "event enrollment period", the employee and existing dependents are no longer eligible for health insurance enrollment until the open enrollment period or if the member has another qualifying event.		Yes
113		Eligibility	Rules	The system should only allow initial health insurance enrollment for a member and their dependents during the month in which the employee is hired and the following two calendar months. After this "initial enrollment period", the employee and existing dependents are no longer eligible for health insurance enrollment until the open enrollment period or if the member is within the month of or two subsequent months of a qualifying event.		Yes
114		Eligibility	Rules	The system should provide a comprehensive rules engine for benefit administration, eligibility and termination determination and maintenance of all active and retiree health benefit and insurance program options.		Yes
115		Eligibility	Rules	The system should provide the ability for a Medicare Primary eligible subscriber or dependent to independently elect or opt out of the plan and trigger workflow to an internal PEIA user to complete the process.		Yes
116		Eligibility	Rules	The system should provide the capability to automatically notify a survivor of applicable insurance benefits based on PEIA business rules.		Yes
117		Eligibility	Rules	The system should provide the capability to update enrollment eligibility requirements through configuration, without the need for programming updates.		Yes
118		Eligibility	Rules	The system should provide the option to copy a rule addition or edit that is in test mode to production.		Yes
119		Eligibility	Rules	The system should provide the option to execute a rule edit(s) in a test mode prior to promoting a rule change to production. Any rule edits or additions that were not promoted to production may be deleted by users with appropriate security.		Yes
120		Eligibility	Rules	The system should use the Centers for Medicare and Medicaid Services (CMS) match file to automatically terminate COBRA benefits per PEIA business rules.		Yes
121		Eligibility	Rules	When initial enrollment (new employee) is received, health and basic life insurance coverage should become effective the first day of the calendar month following the date of enrollment. If a member enrolls on the first day of employment or enrolls prior to the hire date, coverage should not be effective until the first day of the calendar month following the hire date. Optional additional life insurance coverage above the General Issuance Amount should be effective the first day of the calendar month after the insurance carrier provides approval. Optional life insurance up to the General Issuance amount can be added during the initial hire date without underwriting approval.		Yes
122		Employer Reporting	Accounting	The system should automatically create debit/credit transactions to the general ledger for corrections in reported data with appropriate audit trail.		Yes
123		Employer Reporting	Accounting	Upon acceptance and posting, the system should have the capability to automatically create appropriate general ledger transactions associated with employer remittances, penalties, services and interest charges including invoices for delinquent payments.		Yes
124		Employer Reporting	Audit	The system should provide capability to audit or track rollback or reversal of payroll file.		Yes
125		Employer Reporting	Audit	The system should provide capability to create and maintain an audit trail that should record any adjustment, cancellation or manual posting or other reporting data to a member or employer's record.		Yes
126		Employer Reporting	Employer Data	The system should provide the capability to capture comments/notes regarding specific employer delinquencies or other employer-related information.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
127	Open	Employer Reporting	Interfaces	The system should provide capability to process direct interface file records for certain reporting entities, such as OASIS and RHBT, when a remittance advice has been submitted and an IET payment type is selected. The interface file should contain all fields required to create the IET at the receiving entity.		Yes
128		Employer Reporting	Invoices	The system should automatically calculate and electronically notify employers of penalties, service charges and interest charges relating to late reports/remittances per PEIA business rules.		Yes
129		Employer Reporting	Invoices	The system should have the capability to create Debit/Credit invoices for employer penalties, service charges and interest charges relating to late reports/remittances.		Yes
130		Employer Reporting	Invoices	The system should have the capability to issue credit and/or debit invoices to employers for contributions remitted in error.		Yes
131		Employer Reporting	Reports, Forms, Letters, & E-communications	The system should allow internal PEIA users to view employer report progress and produce reports about which employer reports have been received, late, delinquent, and view what patterns in reporting exist, etc. Employers should be automatically notified of late reports and non-compliant employers should be flagged per PEIA business rules.		Yes
132		Employer Reporting	Reports, Forms, Letters, & E-communications	The system should have the ability to generate a reconciliation report based on the insurance premium data received on the employer report and what was previously billed to the employer. This report should be available on the employer portal and to internal PEIA users.		Yes
133		Employer Reporting	Reports, Forms, Letters, & E-communications	The system should provide a summary report on any contribution transmittal file, including, for example, the following information: - Batch Number - Pay Period Begin Date - Pay Period End Date - Pay Date - Total Contribution Amount - Insurance Premium Amount - Number of Members Reported		Yes
134		Employer Reporting	Reports, Forms, Letters, & E-communications	The system should provide employers the ability to produce pre-defined reports for their reporting population via the employer portal, such as variance reports (% or \$), exception reports, Member historical contribution transaction reports and an employer account history.		Yes
135		Employer Reporting	Reports, Forms, Letters, & E-communications	The system should provide the ability for employers and internal PEIA users to query and report on financial information by employer or member to include all appropriate financial data, (ex. amounts paid, amounts outstanding, interest adjustments, etc.).		Yes
136	Open	Employer Reporting	Reports, Forms, Letters, & E-communications	The system should provide the ability to produce annual statements for PEIA and for employers (ex. finances, PEIA membership information, etc.) for ACFR, PAFR, GASB or CEM Benchmark reporting.		Yes
137		Employer Reporting	Reports, Forms, Letters, & E-communications	The system should provide the ability to produce on demand a report indicating one or more Members' names, Social Security Numbers, benefit elections, benefit amounts, subsidy amounts and service credit for any given period of time.		Yes
138		Employer Reporting	Reports, Forms, Letters, & E-communications	The system should provide the capability for detailed reporting on those records that have not passed validation and have been written to the exceptions table. The following information must be reported: - Plan - Pay Period / Transmittal Number - Name - Employee or other ID Number - Validation rule violation description - Payment Imbalance Amount (if applicable)		Yes
139		Employer Reporting	Reports, Forms, Letters, & E-communications	The system should provide the capability to generate electronic notifications to employer and employee with details on any adjustment made by internal PEIA users to salary, payments, and/or service.		Yes
140		Employer Reporting	Self-Service	The system should allow employers to log on to the portal and view a dashboard of open invoices including an current invoice or past invoice indicator, the invoice period, the invoiced amount, the amount remaining due, a grand total amount due, a "Pre-March 2008 Balance (if applicable - and not included in the total amount due) and any unapplied payments (credit amounts). Internal PEIA users should have access to view an employer's dashboard as well.		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
141		Employer Reporting	Service Data	The system should automatically post service credit upon receipt of data or reports from the retirement agency.		Yes
142		Employer Reporting	Service Data	The system should have a set of effective dated configurable categories of pay types to accommodate non-standard compensation earnable pay elements. These pay types can be included on the employer payroll report, flagged based on business rules for review, and the detailed pay breakdown should be captured in the system. These non-standard pay types can include furlough supplements, special monthly contributions, supplemental postings, overtime, bonuses, etc.		Yes
143		Employer Reporting	Service Data	The system should have configurable business rules to support service credit adjustments that have no change to earnings associated with them and may change for future or historical payroll periods based on legislation		Yes
144		Employer Reporting	Service Data	The system should have the ability to capture employer payroll data elements for all pay types, (ex. regular pay, mandatory overtime pay, non-mandatory overtime pay, special pay, etc.), including but not limited to pay cycle/frequency, wage information, contributions remitted for each pay type, pay for annual leave and/or sick leave if permitted, contributions on leave pay, retiree wage indicator and employee class.		Yes
145		Employer Reporting	Service Data	The system should import and store employer reporting data for non-members, for use in future purchase of service should the employee become a Member.		Yes
146		Employer Reporting	Set Up and Maintenance	The system should provide automation tools to create an employer's member population using a file upload.		Yes
147		Employer Reporting	Set Up and Maintenance	The system should provide automation tools to globally terminate or transfer an employer's member population for the applicable health and insurance benefits per PEIA business rules (ex. Local subdivision leaves coverage, one or more employers merge into a new employer).		Yes
148		Employer Reporting	Usability	The system should provide the capability to display all transmittal exceptions on a user interface screen and with the ability to update the transaction data prior to posting of the report.		Yes
149		Employer Reporting	Validation	The system should automatically cap service credit for each plan upon receipt of reports and contributions per PEIA business rules and with the ability for an authorized internal PEIA user to review and override exceptions.		Yes
150		Employer Reporting	Validation	The system should notify the employer that a Member is not included on the employer's payroll report if PEIA data indicates that an employee status is active for a particular employer. The employer should be responsible for providing these corrections through the employer portal.		Yes
151		Employer Reporting	Validation	The system should provide an authorized internal PEIA user the ability to reverse, or roll back the transmittal import process if the transmittal file is discovered to be invalid. No residual records or data of any sort should remain with regard to Member or employer records such as premium payments. In other words, the records should be reversed so that they are not posted.		No
152		Employer Reporting	Validation	The system should provide capability for an internal PEIA user to select an exception and post it to the Member record once corrective action has been taken.		Yes
153		Employer Reporting	Validation	The system should provide capability to prevent updates to committing to the system when fatal errors exist.		Yes
154	Open	Employer Reporting	Validation	The system should provide capability to store/archive historical employer reporting exception errors (messages) for reporting purposes, even after the exception has been "cleared" and "posted" to the Member's record.		Yes
155		Employer Reporting	Validation	The system should provide exceptions via pop-up messages to employers who enter Member payroll data (member-by-member) via the employer portal. Employers who upload a payroll file should receive an email with a link directing them to the employer portal to view their exceptions and audit trail reports.		Yes
156		Employer Reporting	Validation	The system should provide real-time validations to the reporting data that automatically balance/reconcile insurance premiums on a detailed member-by-member basis and at a summary report level per PEIA business rules. Upon validation, internal PEIA users can determine discrepancies and initiate workflow for required employer error correction.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Link	
157		Employer Reporting	Validation	The system should provide the ability to process partial reports, allowing for the processing of acceptable records and suspending other transactions for correction/documentation by the employer, and to hold approved reports in a pending status until payment is received from the employer.		Yes
158	Open	Employer Reporting	Validation	The system should provide the capability for authorized PEIA internal users to flag Members as "auto-exception" for employer reporting purposes if they have known issues that should prompt continual messages or exceptions on future reports.		Yes
159		Employer Reporting	Validation	The system should provide the capability for internal PEIA users to correct employer reported data by manual entry and make corrections to historical reporting periods, providing an audit trail for all transactions. These adjustments must be able to be displayed at the summary and detail level in the employer portal and internally to authorized PEIA staff.		Yes
160		Employer Reporting	Validation	The system should provide the capability to collect certain demographic data to validate Members during the processing of employer reports. In the case of mismatches, error messages should be generated and correction by the employer should be required before the data can be posted to the Member account.		Yes
161		Employer Reporting	Validation	The system should validate data based on PEIA business rules and defined report tolerances prior to accepting a submitted file (valid pay period, file layout, file format, batch ID, balanced dollar totals, balanced Member count totals, blank fields, and duplicate Member records) and generate error messages to the employer through the employer portal to investigate, correct, and resubmit transactions as needed.		Yes
162		Employer Reporting	Workflow & Case Management	The system should provide the ability to classify data validation exceptions by severity and trigger workflow to the appropriate internal PEIA users prior to posting based on criteria such as severity of the error or time lapse for the employer to successfully submit a report.		Yes
163		Employer Self Service	Accounting	The system should allow Benefit Coordinators or employer users to submit and maintain electronic payment(s) and payment methods.		Yes
164		Employer Self Service	Accounting	The system should provide users with applicable GASB reporting requirements through the employer portal.		Yes
165		Employer Self Service	Foundational	The system should provide portal content specific to external partners (ex. Benefit coordinators, payroll vendors, member, retirees, survivors) that need to access the system to complete functions such as viewing employee insurance coverage data, initiating enrollment transactions, or providing employer reporting data.		Yes
166		Employer Self Service	Foundational	The system should provide the ability for users to perform multiple benefit changes related to one event per PEIA business rules.		Yes
167		Employer Self Service	Invoices	The system should provide the capability for employers, retirees and PEIA staff to view, retrieve, and print billing statements through the portal.		Yes
168		Employer Self Service	Person Data	The system should provide the ability for an authorized contact at each employer to elect a default communication method for all users of that employer, such that they can receive notifications, certain mailings, forms and documents, etc.		Yes
169		Employer Self Service	Person Data	The system should provide the ability for each user of an employer to elect and maintain their own individual communication method preference, such that they can receive notifications, certain mailings, forms and documents, etc.		Yes
170		Employer Self Service	Person Data	The system should provide the capability for employers to maintain employer and user contact information and store information for multiple employer contacts and role types.		Yes
171		Employer Self Service	Person Data	The system should display the applicable employer Benefit Coordinator and their contact information as well as the PEIA Eligibility Representative and their contact information within one location.		Yes
172		Employer Self Service	Premiums	When a Benefit Coordinator makes a coverage or benefit change, the system should display the expected premium cost change based on of the effective date of the change.		Yes
173		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should automatically generate notifications to employers when action is needed to process a member transaction (ex. required document needed, enrollment not complete, etc. ).		Yes
174		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should automatically notify users to inform them that they have a message waiting on the portal.		Yes
175		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should automatically send confirmation to users and employer contacts based on their communication preference for events where they requested PEIA participation. Confirmations should include the names, contact information and pictures of Employer Services staff who are assigned to present/attend.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
176		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should automatically send electronic reminders at configurable intervals to users and PEIA Employer Services staff who are registered to attend a seminar/event.		Yes
177		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should provide a message center through the portal (for employer users, members or retirees) that allows users to submit and receive secure messages, receive notification of new messages and mark messages as read/unread.		Yes
178		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should provide action items on the user's dashboard that contains time sensitive alerts or reminders (ex. enrollment deadline approaching, delinquencies, awaiting documentation, etc.).		Yes
179		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should provide inquiry access for users to view effective-dated information such as employer contributions, key member data, historical and pending billing, retiree statements, transactional data and statuses.		Yes
180		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should provide reporting metrics on the usage of the employer portal (ex. number of logins, most commonly requested information, identify low utilization employers, counts of hits v. confirmed transactions by application type, how long employers spent on the site and within application type, the different browsers utilized, IP addresses, etc.).		Yes
181		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should provide the ability for users to complete alerts or reminders and to remove from their action item(s).		Yes
182		Employer Self Service	Reports, Forms, Letters, & E-communications	The system should provide the capability for employers to create/submit/download any required forms from the employer portal (ex. adjustment forms, employment forms, etc.).		Yes
183		Employer Self Service	Security	The system should allow Benefit Coordinators the ability to access a member's information to view or make corrections to their account for the period in which they were working for them. Only certain information is viewable depending on if the member is a current or past employee with the employer.		Yes
184		Employer Self Service	Security	The system should have the capability for employers to maintain Benefit Coordinator portal user logins and contact information and store information for multiple employer contacts and role types.		Yes
185		Employer Self Service	Self-Service	The employer dashboard should indicate the last update date and time.		Yes
186		Employer Self Service	Self-Service	The system should allow an employer user to adjust employee employment information which may or may not affect a historical or current invoice.		Yes
187		Employer Self Service	Self-Service	The system should provide the capability for employers to view insurance coverage for a transferring member through the employer portal once the transfer process is initiated.		Yes
188		Employer Self Service	Usability	The employer portal should use agency standards for the look and feel (branding) of the site.		Yes
189		Employer Self Service	Usability	The system should allow users to personalize and maintain their employer portal view (ex. arrange dashboard to a view that appeals to them and fits their needs, with PEIA event registration links, recently visited or most popular screens).		Yes
190		Employer Self Service	Usability	The system should generate random sample employer surveys to capture feedback on an employer's portal experience.		Yes
191		Employer Self Service	Usability	The system should include access through the employer portal to interactive online help features including FAQ's, secure messaging, online chat or video conferencing for the employers to communicate with internal PEIA users regarding more in-depth data and member-specific discussions for resolution.		No
192		Employer Self Service	Usability	The system should provide dynamic, targeted banners or messages, embedded audio or video through the employer portal to inform employers of available benefits and programs (ex. Wellness programs, announcements, etc.).		Yes
193		Employer Self Service	Usability	The system should provide the ability for users to report any usability issues or suggestions for improvements through the employer portal which should be routed to internal PEIA users for review.		Yes
194		Employer Self Service	Usability	The system should provide the ability to link to any section of PEIA's web site from the employer portal (ex. to access forms, agency publications, resources, etc.).		Yes
195		Employer Self Service	Usability	The system should provide the capability for internal PEIA users to view the same screen and data being entered that the employer portal user is seeing to adequately help/troubleshoot with questions. The system should keep a log of any screen-sharing that is done by an internal PEIA user.		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
196		Employer Self Service	Usability	The system should provide the capability for payment status tracking through the employer portal (ex. Member and employer premiums, credits, fees, etc.).		Yes
197		Employer Self Service	Usability	The system should provide the capability for users to select the date the payment should be withdrawn from their account through the employer portal.		Yes
198		Employer Self Service	Usability	The system should provide the capability to make available and display the employer portal screens and functionality appropriately through the use of a mobile device.		Yes
199		Employer Self Service	Validation	The system should allow users to input retroactive member transactions through the employer portal, per PEIA business rules (ex. transfers, special eligibility situations during insurance open enrollment, etc.).		Yes
200		Employer Self Service	Validation	The system should provide an option for employers to include or exclude retroactive billings as an "as of date" in order to assist in reconciling invoices.		Yes
201		Employer Self Service	Validation	The system should provide employer portal support tools including transaction wizards that apply appropriate edits, messages, and guided step-by-step questions when submitting data (ex. interactive options provided during open enrollment to help employers assist members; new hires electing retirement plan; new retirees choosing benefit options).		Yes
202		Employer Self Service	Validation	The system should provide the capability to capture all required fields for different employee types through the employer portal and prevent saving the transactions if the required fields are not complete. (ex. new employees, current employees, terminated employees, transferring employees, return to work retirees, dual employment employees, other health insurance information, etc.).		Yes
203		Employer Self Service	Validation	The system should provide, for the employer portal, the capability to perform 'real-time' validations and provide on screen context-sensitive error, warnings, and help messages where applicable based on configurable business rules. Where appropriate, these business rules should allow for direct posting of data to the system (ex. validated employer reporting data posting directly to the Member account).		Yes
204		Employer Self Service	Workflow & Case Management	The system should allow users to submit transactions and be able to view, save, update, retrieve, and check status.		Yes
205		Employer Self Service	Workflow & Case Management	The system should initiate a workflow for the member or appropriate internal PEIA user when an action item or task is completed by a user through the employer portal. The workflow should automatically integrate with an interactive checklist module to prioritize items needed in preparation for the respective task.		Yes
206		Employer Self Service	Workflow & Case Management	The system should provide the capability for supporting documentation submitted through the employer portal to be indexed according to document type and associated to an open transaction if applicable.		Yes
207		Employer Self Service	Workflow & Case Management	The system should provide the capability for users to check the status of transactions or requests submitted to PEIA through the employer portal (ex. Request for Reviews, etc.).		Yes
208		Employer Self Service	Workflow & Case Management	The system should provide the capability for users to submit a request to PEIA Employer Services staff to attend/present at employer events through the employer portal.		Yes
209		Employer Self Service	Workflow & Case Management	The system should provide the capability for users to upload supporting documentation directly through the employer portal to fulfill requests from PEIA.		Yes
210		Employer Self Service	Workflow & Case Management	The system should provide the capability for users to view and provide a printable version of the imaged documents directly through the employer portal per PEIA business rules.		Yes
211		Employer Self Service	Workflow & Case Management	The system should provide the capability to display an individual workflow-driven action item to the employer initiated by PEIA, employer or member.		Yes
212		Employer Self Service	Workflow & Case Management	The system should support the receipt and processing of documents signed using electronic signatures through the employer portal per PEIA business rules.		Yes
213		Employer Set Up and Maintenance	Employer Data	The system should allow for an employer's insurance participation options to be edited, added or deleted independently by an internal PEIA administrator user.		Yes
214		Employer Set Up and Maintenance	Employer Data	The system should have the ability to assign an employer ID.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
215		Employer Set Up and Maintenance	Employer Data	The system should keep and make viewable to employers and internal PEIA users a history of all Insurance Benefit plans and options eligible under an employer.		Yes
216		Employer Set Up and Maintenance	Employer Data	The system should provide the capability for internal PEIA users to update employer demographic information and complete employer mergers or separations with an effective dated history of the changes.		Yes
217		Employer Set Up and Maintenance	Employer Data	The system should provide the capability to capture employer attributes with effective dates including, but not limited to Retirement benefit participation		Yes
218		Employer Set Up and Maintenance	Reports, Forms, Letters, & E-communications	The system should have the ability to mass generate recertification notifications electronically, track self-service responses, and send follow up requests.		Yes
219		Employer Set Up and Maintenance	Reports, Forms, Letters, & E-communications	The system should notify employers of their employee and employer insurance premium rates upon enrollment or when there is a change.		Yes
220		Employer Set Up and Maintenance	Reports, Forms, Letters, & E-communications	The system should provide the ability for employers to select their preferred method of communication (i.e. paper, electronic)		Yes
221		Employer Set Up and Maintenance	Reports, Forms, Letters, & E-communications	The system should provide the capability to generate an automated welcome packet for new employers electronically or by paper based on the employer's correspondence preference.		Yes
222		Employer Set Up and Maintenance	Reports, Forms, Letters, & E-communications	The system should retain a history of communications, including correspondence and case notes, with employers in compliance with applicable data retention policies.		Yes
223		Employer Set Up and Maintenance	Usability	The system should include interactive online help features including FAQ's, secure messaging, online chat or video conferencing for employers to communicate with internal PEIA users regarding more in-depth data and member-specific discussions for resolution.		Yes
224		Employer Set Up and Maintenance	Usability	The system should provide transaction wizards that apply appropriate validations, messages, and guided step-by-step questions when submitting data through web employer self-service (ex. Explanation of Unapplied Credits using a tool tip or link, message regarding the payment due date of the current remittance, etc.).		Yes
225		Employer Set Up and Maintenance	Workflow & Case Management	The system should generate workflow upon an employer's request to withdraw from insurance benefits and route the request for review and follow up to the appropriate department.		Yes
226		Employer Set Up and Maintenance	Workflow & Case Management	The system should provide the capability to hold an employer termination in a 'pending' state until all termination requirements have been met, including balances owed.		Yes
227		Enrollment	Foundational	Ability to place alerts on accounts. Includes the ability to categorize the alert (i.e. security/suspicious account, ADA requirements, Difficult, etc.		Yes
228		Enrollment	Foundational	PEIA should have the ability to update informational site content.		Yes
229		Enrollment	Foundational	The system must use agency standards for the look and feel (branding) of the site.		Yes
230		Enrollment	Foundational	The system should allow authorized PEIA staff to lock or unlock a member's user account, as necessary.		Yes
231		Enrollment	Foundational	The system should allow for internal PEIA users and employers to enroll members and their dependents, elect health and life insurance and other special benefits or programs and submit pension applications. When registration or enrollment is complete, notification should be sent to internally to PEIA, to the Benefit Coordinator of the employer for whom the employee works and the employee.		Yes
232		Enrollment	Foundational	The system should allow for enrollment of benefits in any order unless an order is necessary based on PEIA rules (i.e. basic life is required to elect optional life).		Yes
233		Enrollment	Foundational	The system should allow for members to elect health and life insurance and other special benefits or programs and submit pension applications through the member portal after the member is registered with PEIA. When a member registration is complete, a notification should be triggered to the member to complete the enrollment process.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
234		Enrollment	Foundational	The system should allow for multiple methods of registering a member with PEIA. An employer benefit coordinator may enter the new member information or send the enrollment form to PEIA for entry. The method of registration may be different by employer.		Yes
235		Enrollment	Foundational	The system should allow internal PEIA users with appropriate permissions to set and/or change the start and end date for the open enrollment period(s) (for active/retiree, Medicare and Mountaineer) per PEIA business rules.		Yes
236		Enrollment	Foundational	The system should allow retirees to elect health and life insurance and other special benefits or programs through the portal after receiving their retirement application approval from PEIA. When the application approval from PEIA is received, a notification should be triggered to prompt the retiree to complete the enrollment process.		Yes
237		Enrollment	Foundational	The system should be available and display appropriately through the use of a mobile device.		Yes
238		Enrollment	Foundational	The system should have a configurable portal to allow for new benefits to be made available and terminating benefits to no longer be available on the portal per PEIA business rules. Effective dating should be used and all history should be maintained at both the benefit program level and the individual participant level.		Yes
239		Enrollment	Foundational	The system should have the capability to display PEIA-issued communications and provide enrollment-related information (ex. welcome communications, instructions, new/retired benefit options, etc.).		Yes
240		Enrollment	Foundational	The system should have the capability to properly store and track multiple hire dates and termination dates with one or more employers to record breaks in benefit eligibility with a history.		Yes
241		Enrollment	Foundational	The system should make available for enrollment or update through the portal, only those options for which a subscriber (and their dependent(s)) is eligible.		Yes
242		Enrollment	Foundational	The system should merge two accounts into one with a history of prior accounts when needed (SSN keyed/reported incorrectly and has account under both correct and incorrect SSN).		Yes
243		Enrollment	Foundational	The system should process all enrollments independently, as soon as all required information has been received for an individual benefit enrollment, even if information is still pending for a different family member's benefit enrollment. The system should allow for partial processing of a transaction when verification for some dependents is received, but not others.		Yes
244		Enrollment	Foundational	The system should provide a comprehensive portal for registration, enrollment and maintenance of all employee health benefit and insurance program options as well as an option to submit an application for retiree benefits.		Yes
245		Enrollment	Foundational	The system should provide a subscriber with the appropriate on-line enrollment capabilities based on configurable business rules such as open enrollment for a defined period of time, qualifying life event at the individual level, special enrollment or options available to change/enroll at any time according to PEIA business rules.		Yes
246		Enrollment	Foundational	The system should provide an employer with the appropriate on-line enrollment capabilities based on configurable business rules to enroll or update employee enrollment, employment and informational data.		Yes
247		Enrollment	Foundational	The system should provide dynamic, targeted banners, messages, embedded audio/video or other communications to specific members or employers based on data requirements (i.e. delinquency notice for employers with an open balance "x" days old, smoking cessation benefits to members to smoke, wellness benefits to a specific age population, etc.).		Yes
248		Enrollment	Foundational	The system should provide portal access content specific to members, retirees, employers and internal PEIA users based on user roles.		Yes
249		Enrollment	Foundational	The system should provide the ability for enrollment transactions to be manually keyed or corrected by designated PEIA or employer staff.		Yes
250		Enrollment	Foundational	The system should serve as a single point of entry for enrollment regardless of whether the individual involved is a new subscriber enrollment or an existing account.		Yes
251		Enrollment	Foundational	The system should store all data elements of enrollment transactions, including member demographic information, with effective dates, including the ability to set a future effective date for addresses. All historical data should be maintained through the use of effective dating.		Yes
252		Enrollment	Interfaces	The system should automatically generate an electronic notification or data file to each employer advising of their employees insurance enrollment elections on a scheduled basis as determined by PEIA.		Yes
253		Enrollment	Interfaces	The system should be able to use health and insurance enrollment data to create billings.		Yes
254		Enrollment	Interfaces	The system should be able to interface with external PEIA wellness and disease management system to exchange data and permit eligibility determination.		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
255		Enrollment	Interfaces	The system should import a periodic file from the Centers for Medicare and Medicaid Services (CMS) containing Medicare entitlement information (CMS match file) for those individuals in a Group Health Plan (GHP) that can be identified as Medicare beneficiaries.		Yes
256		Enrollment	Interfaces	The system should provide enrollment data including all member and dependent demographics to all agencies and vendors that need demographic information for non-834 transactions through a data file. Refer to the Interfaces tab for a list of vendors/organizations with whom PEIA interfaces.	<a href="#">Interfaces</a>	Yes
257		Enrollment	Interfaces	The system should provide links on the portal to external program vendors' registration pages. The links provided should be determined by the eligibility of the member.		Yes
258		Enrollment	Interfaces	The system should provide the capability to generate a daily file to the administrators of benefit, special benefit(s) or program(s) containing data a "full" file of all employees or a "change" file of employees who have changed/elected the benefit/program since the last file was generated. All data enrollment data collected should be available for export.		Yes
259		Enrollment	Interfaces	The system should support PEIA's participation in the Medicare Voluntary Data Sharing Agreement program by generating a quarterly data extract to submit group health plan (GHP) entitlement information about employees and dependents to the Centers for Medicare and Medicaid Services (CMS) Benefits Coordination & Recovery Center.		Yes
260		Enrollment	Interfaces	The system should use automated workflow and PEIA business rules to send a subscriber's optional life, dependent life spouse and/or dependent life child coverage data to the life insurance vendor to trigger action by that vendor to contact the member regarding continuation/conversion options of the life insurance upon termination.		Yes
261		Enrollment	Reports, Forms, Letters, & E-communications	The system should generate aging reports to identify transactions that are "x" days old that are not completed or resolved.		Yes
262		Enrollment	Reports, Forms, Letters, & E-communications	The system should generate production level reports for PEIA users that show the number of tasks assigned, completed and in-progress for a given time period.		Yes
263		Enrollment	Reports, Forms, Letters, & E-communications	The system should generate random sample member surveys to capture feedback on a member's system experience.		Yes
264		Enrollment	Reports, Forms, Letters, & E-communications	The system should have the ability to solicit and capture feedback from employees on reason for refusal of all optional benefits offered by PEIA and create system generated reports on the feedback.		Yes
265		Enrollment	Reports, Forms, Letters, & E-communications	The system should provide reporting metrics on the usage of the portal (ex. number of logins, most commonly requested information, identify low utilization employees, counts of hits v. confirmed transactions by application type, how long subscribers spent on the site and within application type, the different browsers utilized, IP addresses, etc.).		Yes
266		Enrollment	Rules	The system should apply enrollment rules and provide the appropriate choices for health and insurance enrollment during all applicable enrollment periods.		Yes
267		Enrollment	Rules	The system should build individual member enrollment content based on configurable enrollment rules using member and employer data attributes for each plan or benefit. The enrollment rules should contain effective and expiration dates and be accessible to PEIA to add, change or expire. For example, (1) effective 1/1/2018, a member who lives outside of a coverage area for Plan A, should not have Plan A as an enrollment choice, (2) effective 6/1/2010, allow members to elect coverage for dependents up to the age of 26.		Yes
268		Enrollment	Security	The system should provide access based on role-based security with multiple layers of user types and user permissions. Ability to secure users to no access, view only, add, update and/or delete functionality within a given area or process.		Yes
269		Enrollment	Security	The system should provide internal PEIA staff with the appropriate on-line capabilities based on a user security roll or profile to enroll or update employee enrollment, employment and informational data, or approve or deny enrollment. Ability to view, update and approve/deny data and transactions is determined by the security role assigned to each PEIA staff member.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Units	
270		Employer Set-up and Maintenance	Security	The system should provide employer users with the appropriate on-line capabilities based on a user security roll or profile to enroll or update employee enrollment employment and informational data, or approve or deny enrollment. Ability to view, update and approve/deny data and transactions is determined by the security role assigned to each employer user.		Yes
271		Enrollment	Self Service	Ability to configure automated member reminders based on events or other actions (i.e. Remind employees that have not submitted their elections that there are only two days left to enroll. Notify employees of a new benefit or a discontinued benefit.)		Yes
272		Enrollment	Self Service	Based on the account type and status (retirees, active, QDRO, COBRA, Alternate Payee, etc.) the system should allow members, employers and internal PEIA staff to view and update their personal information per PEIA business rules, to include but not limited to: - Name (pending for approval of uploaded documentation) - Contact Information (Address, Telephone, Email) - Direct Debit Information - Dependent information (Address, Telephone, Email) - Beneficiary(ies) and beneficiary information (Address, Telephone, Email)  Updates should be available in audit trails, confirmation emails should be sent, and IP should be authenticated based on PEIA defined business rules.		Yes
273		Enrollment	Self Service	Employers have an option to search for a member or dependent by SSN, alternate ID, or name. Search results for employers should only contain those members (and their dependents) that currently or have previously worked for the searching employer. Because a previous employee may still be active, working for another employer, the data viewed by the employer should be limited (i.e. currently salary should not be available).		Yes
274		Enrollment	Self Service	If desired, after entering coverage elections (single, family, etc.) a subscriber can enter maintenance drugs, or other known upcoming health expenses (i.e. orthodontia) and the system should provide estimated cost comparisons across eligible plans. The cost comparison is only available when eligible for a plan change.		Yes
275		Enrollment	Self Service	In addition to the wizard interface or enrollment guidance, employees should have access to a shopping tool to assist them with their benefit plan decisions for all types of enrollments (open, special, initial).		Yes
276		Enrollment	Self Service	PEIA staff users, with appropriate user security, have an option to search for a subscriber or dependent by SSN, alternate ID, name or employer that exist in the PEIA database whether active, retiree or inactive/terminated/deceased.		Yes
277		Enrollment	Self Service	Provide a summary to the member of all elected items, accumulated total benefit cost and open actions at the end of the enrollment guidance or when enrollment is saved. During open enrollment, if a future salary is maintained in the participant's record, the future salary should be used in the benefit cost calculation and display.		Yes
278		Enrollment	Self Service	Provides the ability for a subscriber to request an ID card or a request a Creditable Coverage certificate. Member may immediately print the requested document.		Yes
279		Enrollment	Self Service	The system displays the subscriber's current medical and RX benefit deductible amounts (with effective date/time) and coinsurance indicator.		Yes
280		Enrollment	Self Service	The system should allow a member to review and update their demographic, contact information and preferred contact method during the benefit enrollment process. Allowed demographic updates are subject to PEIA business rules. Contact information updates are allowed at any time.		Yes
281		Enrollment	Self Service	The system should allow a subscriber (or employer on behalf of the subscriber) to designate and enter information for a current spouse or dependents for insurance coverage.		Yes
282		Enrollment	Self Service	The system should allow for beneficiary and covered dependent changes electronically through the portal per PEIA business rules.		Yes
283		Enrollment	Self Service	The system should allow for Refusal of Coverage by a member or Benefit Coordinator. All refusals should be recorded and maintained in the member record.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
284		Enrollment	Self Service	The system should allow members to elect and maintain their communication method preference, such that they can receive notifications, certain mailings, forms and documents, etc.		Yes
285		Enrollment	Self Service	The system should allow members to submit transactions and be able to view, save, update, retrieve, and check status (ex. enrollment, special enrollment, payment refunds, retiree insurance applications, etc.).		Yes
286		Enrollment	Self Service	The system should allow National Medical Support Notice (NMSN) dependents or their legal guardians to log into the system using their own credentials to update their demographic information, per PEIA business rules.		Yes
287		Enrollment	Self Service	The system should allow retirees to elect a payment method, maintain payment information (i.e. bank account information) and manage (ex. cancel, update, etc.) electronic payment(s) and payment methods for health and insurance payments. Payment methods include ACH, check, and for retirees only, deduction from retirement distribution and credit card. Credit card transactional data must be transferred to the Treasurer for processing.		Yes
288		Enrollment	Self Service	The system should allow subscribers, internal PEIA users and employers to select a care provider for each subscriber and dependent(s) when enrolled in specific plans.		Yes
289		Enrollment	Self Service	The system should allow subscriber, employers and internal PEIA staff to view their personal information, to include but not limited to: - Personal demographic, beneficiary(ies), dependent(s) information - Insurance coverage, plans and premiums (PEIA staff and subscribers can view current and historical data. Data is only available to employers for the time in which they were the subscriber's employer).		Yes
290		Enrollment	Self Service	The system should be able to support electronic signatures.		Yes
291		Enrollment	Self Service	The system should display an individual premium cost per selection and an accumulated total premium cost as the subscriber selects plans while completing the enrollment process.		Yes
292		Enrollment	Self Service	The system should distinguish between different spouse and child relationship types (ex. lawful spouse, former spouse, natural child, adopted child, temporary child pending adoption, stepchild, foster child, other child).		Yes
293		Enrollment	Self Service	The system should enable enrollment of referencing individuals (dependents and beneficiaries) who do not have a SSN assigned (ex. Children under the age of 1 year or foreign nationals) using a common ID.		Yes
294		Enrollment	Self Service	The system should have the ability to capture and modify when a subscriber or dependent has other health insurance coverage within the data available to PEIA, for the purpose of coordination of benefits, and store that data.		Yes
295		Enrollment	Self Service	The system should have the ability to display the subscriber account in both a summary and detailed view.		Yes
296		Enrollment	Self Service	The system should have the ability to limit information displayed to a member or retiree, per PEIA business rules.		Yes
297		Document Management	Achieving and Indexing	The system should have the capability for supporting documentation to be indexed according to document type, identifier and other identifying data for efficient search and retrieval.		Yes
298		Enrollment	Self Service	The system should have the capability to automatically notify member at career/life event milestones (ex. disability, early and normal retirement age, newborn, marriage, attaining Medicare age, etc.).		Yes
299		Enrollment	Self Service	The system should include interactive online help features including FAQ's, secure messaging or online chat for the members to communicate with authorized PEIA staff regarding more in-depth data and member-specific discussions for resolution/counseling.		Yes
300		Enrollment	Self Service	The system should notify the member to inform them they have a message waiting on the system.		Yes
301		Enrollment	Self Service	The system should provide a message center that allows members to submit and receive secure messages, receive notification of new messages and allow member to mark as read/unread.		Yes
302		Enrollment	Self Service	The system should provide action items on the member's dashboard that contains time sensitive alerts or reminders (ex. enrollment deadline approaching, rejections, awaiting documentation, etc.).		Yes
303		Enrollment	Self Service	The system should provide fillable forms that are applicable to the subscriber status. This should allow the member to either complete the form online, or print the empty form and complete it by hand. (Forms that are not particular to the subscribers' account are available on <a href="https://peia.wv.gov/find-a-form-or-document/Pages/default.aspx">https://peia.wv.gov/find-a-form-or-document/Pages/default.aspx</a> )		Yes
304		Enrollment	Self Service	The system should provide members the ability to view a confirmation of completed transactions.		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
305		Enrollment	Self Service	The system should provide reporting metrics on the usage of the member system (ex. number of logins, most commonly requested information, identify low utilization employers, counts of hits v. confirmed transactions by application type, how long employers spent on the site and within application type, the different browsers utilized, IP addresses, etc.).		Yes
306		Enrollment	Self Service	The system should provide self-service capabilities to members, retirees and employers that include but not be limited to: - view information about their PEIA benefits - update demographic and dependent information - initiate a defined set of available processes per a Business Rules Engine including: (1) enroll in health and insurance benefits during open enrollment period, (2) enroll in health and insurance benefits due to an eligible event, (3) make changes to existing enrollment information when and as applicable based on PEIA business rules - request ID cards and other documents - update beneficiary information - set-up recurring payment information for benefit payments (retirees only) - communicate with PEIA staff via a secure messaging system, including uploading/downloading documents.		Yes
307		Enrollment	Self Service	The system should provide survivors with access to the system and allow account creation after documentation required for processing a death claim has been received, per PEIA business rules.		Yes
308		Enrollment	Self Service	The system should provide the ability for members to report any usability issues or suggestions for improvements through the system which should be routed to the appropriate PEIA staff.		Yes
309		Enrollment	Self Service	The system should provide the ability for members to view and provide a printable version of imaged documents, per PEIA business rules.		Yes
310		Enrollment	Self Service	The system should provide the ability for members, Benefit Coordinators and PEIA to upload documents and other digital files as deemed appropriate. Supporting documentation should be submitted for internal review and processing.		Yes
311		Enrollment	Self Service	The system should provide the ability to elect multiple life insurance beneficiaries by level (primary, secondary, etc.) and by percentage of total amount.		Yes
312		Enrollment	Self Service	The system should provide the ability to identify special conditions within a Member's account (ex. active account, inactive account, approved QDRO, previously retired, judge, law enforcement, special plans, etc.), as it relates to eligibility and the cost of benefits.		Yes
313		Enrollment	Self Service	The system should provide the ability to link to any section of PEIA's web site (ex. to access forms, agency publications, resources, etc.).		Yes
314		Enrollment	Self Service	The system should provide the ability to notify the member through their preferred method of communication of any changes made to their account.		Yes
315		Enrollment	Self Service	The system should provide the ability to select a dependent(s) as a beneficiary and auto-copy the necessary information to the beneficiary record (i.e. name, address, phone, birthdate).		Yes
316		Enrollment	Self Service	The system should provide the ability to view the status of payments issued to and from the member.		Yes
317		Enrollment	Self Service	The system should provide the capability for authorized PEIA staff to view the same screen and data being entered that the web self-service user is seeing to adequately help/troubleshoot with questions. The system should also keep a log of any screen-sharing that was done by a PEIA staff member.		Yes
318		Enrollment	Self Service	The system should provide the members with the ability to view the status of pending enrollments and the estimated time of completion.		Yes
319		Enrollment	Self Service	The system should use categories for members for use in the application of health and insurance business rules. These categories should describe employment parameters and coverage types (ex. employer, permanent full time, full time non permanent, salary, position type, etc.). These categories should be able to be changed due to life and employment situations.		Yes
320		Enrollment	Usability	A participant may be viewed upon set up in the system. The system should provide multiple search capabilities such as SSN, alternate ID (multiple), dependent SSN, name, entry date, effective date, etc.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
321		Enrollment	Usability	If a member's previously elected plan is no longer available, highlight the closest "substitute" plan.		Yes
322		Enrollment	Usability	Online application(s) must have intuitive, guiding navigation and prevent members from making unintentional errors such as adding dependents without selecting the appropriate coverage. The application allows members to easily save or discard selections while at the same time, notifying users when an action could result in unwanted changes.		Yes
323		Enrollment	Usability	The system should allow for different menu options by type of user (PEIA, Benefit Coordinator or employee).		Yes
324		Enrollment	Usability	The system should allow for different wizard interfaces (or enrollment guidance) by employer group or by member group (such as retirees) and by user (PEIA, Benefit Coordinator or employee).		Yes
325		Enrollment	Usability	The system should generate random sample subscriber surveys to capture feedback on an employer's portal experience.		Yes
326		Enrollment	Usability	The system should have the ability to display dynamic messages on communications (ex. letters, forms, correspondence, etc.) based upon specified parameters being fulfilled as well as any open activities associated with member.		Yes
327		Enrollment	Usability	The system should include access through the portal to interactive online help features including FAQ's, secure messaging, online chat or video conferencing for the subscribers to communicate with internal PEIA users regarding more in-depth data and member-specific discussions for resolution.		Yes
328		Enrollment	Usability	The system should include transaction wizards that apply appropriate edits, messages, and guided step-by-step questions when submitting data through web self-service.		Yes
329		Enrollment	Usability	The system should minimize the need for members to enter redundant data when enrolling in both health and life insurance and submitting retirement applications. The system should also allow for independent enrollment in either health or life insurance.		Yes
330		Enrollment	Usability	The system should provide a personal, wizard interface (or enrollment guidance) for employee enrollment that walks the user through the enrollment options and steps based on eligibility rules.		Yes
331		Enrollment	Usability	The system should provide messaging during the wizard interface and benefit selection that explains the member's eligibility or ineligibility for Plans and/or Programs.		Yes
332		Enrollment	Validation	The system should prevent all invalid entries and provide feedback in real time and edit/validate real time corrections.		Yes
333		Enrollment	Validation	The system should provide the ability to associate insurance coverage for spouses when both are participating in PEIA insurance benefits for the purpose of shared deductibles, employee/employee spouse coverage tier and trigger a notification to each spouse to confirm before finalizing the change. The system should provide the ability to remove the association as needed.		Yes
334		Enrollment	Validation	The system should run edits on all enrollment transactions initiated through the member portal to validate data and generate real-time messages for invalid entries to guide the user to make valid elections before committing the transaction.		Yes
335		Enrollment	Workflow & Case Management	Ability to execute a different workflow task to PEIA users or Benefit Coordinators based on the event or change (i.e. If an employee enrolls themselves (no dependents), the approval is required from the benefit coordinator only. However, if the employee has dependents, the benefit coordinator must "approve" the member's enrollment record and then send to PEIA where the record is approved. Retirement application requires employer approval, then PEIA approval.)		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
336		Enrollment	Workflow & Case Management	The status of a workflow or change is visible when the transaction is viewed and an indicator of an "open item" is viewable from any location in a participant's record.		Yes
337		Enrollment	Workflow & Case Management	The system provides a dashboard for employers and PEIA staff that contains a task list of assigned transactions, any timed or scheduled tasks and reminders or notifications of recent employer or member mailings.		Yes
338		Enrollment	Workflow & Case Management	The system provides a dashboard for supervisors showing all tasks assigned to all users with an indicator that highlights late or dated transactions.		Yes
339		Enrollment	Workflow & Case Management	The system provides the capability for supervisors to reassign tasks to other users, mark a user as unavailable for a period of time (for vacations, time off, etc.) and provide a "substitute" inbox where tasks should be routed.		Yes
340		Enrollment	Workflow & Case Management	The system supports configurable workflow rules based on the user role, type of transaction, employer type and other variables as defined by PEIA. Workflow configurations may be added, removed or changed as work processes change over time.		Yes
341		Enrollment	Workflow & Case Management	The system should allow members to enter retroactive life event enrollment transactions (ex. newborn, marriage, enrollments) through the portal within 90 days of the event, and should initiate a workflow for review.		Yes
342		Enrollment	Workflow & Case Management	The system should generate and route workflow to the appropriate internal PEIA user (or employer if desired) when an age-eligible dependent has been added by a subscriber or employer but has not enrolled or when all required documentation has not been received to complete enrollment.		Yes
343		Enrollment	Workflow & Case Management	The system should have the ability for the employer to register an employee electronically and for an enrollment notification to be sent to the employee for completion through their preferred contact method.		Yes
344		Enrollment	Workflow & Case Management	The system should import and use the Centers for Medicare and Medicaid Services (CMS) match file to trigger appropriate workflow tasks associated with benefit program enrollment according to PEIA business rules.		Yes
345		Enrollment	Workflow & Case Management	The system should initiate a workflow for the employer or appropriate PEIA staff when an action item or task is completed by the member, employer or internal PEIA staff. The workflow should automatically integrate with an interactive checklist module to prioritize items needed in preparation for the respective task.		Yes
346		Enrollment	Workflow & Case Management	The system should allow a retiree with a future retirement date to enroll for health benefits in a pending status until the retirement date is reached. When the retirement date is reached, the system should automatically un-pend the enrollment record and continue with the normal workflow for the retiree health enrollment.		Yes
347		Enrollment	Workflow & Case Management	The system should initiate appropriate workflows when PEIA is notified a retiree returns to work for a covered employer.		Yes
348		Enrollment	Workflow & Case Management	The system should provide the capability to input, modify, store and delete a return to work date for any retiree and create appropriate enrollment or re-enrollment workflows per PEIA business rules, while maintaining all record change history with effective dates.		Yes
349		Enrollment	Workflow & Case Management	The system should provide work management tools to appropriate PEIA staff for use in workload balancing and case management.		Yes
350		Enrollment	Workflow & Case Management	The system should route enrollments to PEIA staff based on the users role, user availability as well as member or employer specific elements (i.e. assign SSN range to user, assign employer ID to a user.)		Yes
351		Enrollment	Workflow & Case Management	The system should send an automated confirmation to the member using the member's preferred contact method when PEIA defined actions, such as enrollment is approved and/or when payment is received, are completed.		Yes
352		Enrollment	Workflow & Case Management	The system should set incomplete individual enrollment transactions to pending until all required information / documentation is received and then automatically update the transaction status to complete upon the receipt and confirmation of the required information.		Yes
353		Enrollment	Workflow & Case Management	The system should track enrollments and produce reports showing a history of workflows and statuses.		Yes
354		Enrollment	Workflow & Case Management	The system should trigger workflow task queue items to internal PEIA users when required documentation to support enrollment is received to allow the documents to be reviewed for approval or additional follow up.		Yes
355		Enrollment	Workflow & Case Management	The system should use workflow and task queues to route enrollment transactions requiring special review per PEIA business rules.		Yes
356		Enrollment	Workflow & Case Management	When applicable, the system should provide the capability to generate and route workflow to the appropriate internal PEIA user for approval when an enrollment is submitted by a Benefit Coordinator.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
357		Enrollment	Workflow & Case Management	When applicable, the system should provide the capability to generate and route workflow to the appropriate internal PEIA user when a request for coverage is initiated by a surviving spouse to review eligibility and enroll in benefits when applicable.		Yes
358		Enrollment	Workflow & Case Management	When applicable, the system should provide the capability to generate and route workflow to the employer's Benefit Coordinator for approval when an enrollment is submitted by an employee.		Yes
359		Member Self-Service	Self Service	The system should present only the appropriate information and workflow initiation relative to a person's membership status (ex. active members should only see information and workflow relevant for them).		Yes
360		Periodic Processes	Batch Processing	For employers that designate PEIA as their Designated Government Entity (DGE), the system should generate 1095 B files for printing and to make the forms available on the employer portal.		Yes
361		Periodic Processes	Batch Processing	For employers that did not designate PEIA as their Designated Government Entity (DGE), the system should generate 1095 extract files to be loaded to the employer portal for employer use.		Yes
362		Periodic Processes	Batch Processing	The system should have the ability to extract 1095 B/C data based on the health care coverage history maintained in the system.		Yes
363		Premium Management	Accounting	The system should enable authorized PEIA staff to move balances and credits carried forward for employers whose identities are changed or who merge with other entities.		Yes
364		Premium Management	Accounting	The system should move balances and credits carried forward for Members who move from one employer/status to another.		Yes
365		Premium Management	Billing	The system should allow for the definition of premium due based on configurable business rules and effective and expiration dates. For example, any changes in tobacco status should be effective the following month of the change; changes in salary index codes should be effective the following month of the salary effective date. In 2020 the member portion of the premium amount is based on the member's salary level. In 2021, the salary levels change for active enrollment. As a result, the 2020 rule is copied to the 2021 rule, the effective date for the 2021 rule is 7/1/2021 and the 2020 rule is expired on 6/30/2021.		Yes
366		Premium Management	Billing	The system should allow for the designation of population types or member attributes that qualify for the various bill payment discount or subsidy options.		Yes
367		Premium Management	Billing	The system should allow for the establishment of a configurable cap (i.e. percentage of premium amount to monthly benefit amount), beyond which EFT payments should not be drawn from an retiree's account. Workflow should be triggered to manage these cases according to PEIA business rules.		Yes
368		Premium Management	Billing	The system should allow Retirees with delinquent balances to pay online through the portal, as long as coverage has not been terminated.		Yes
369		Premium Management	Billing	The system should apply employer and employee partial payments or overpayments according to PEIA business rules.		Yes
370		Premium Management	Billing	The system should automatically generate a direct pay mailer (DPM) if a Retiree's or employer's EFT debit for insurance premiums is rejected by the bank for insufficient funds. The system should continue to generate EFT charges for one additional billing cycle. After the second rejection, the system should apply the setting in the Retiree record to prevent future EFT debit transactions and only issue direct pay mailer (DPM). The system should allow the preference to be reset back to EFT debit by authorized PEIA staff.		Yes
371		Premium Management	Billing	The system should automatically revert the retiree's insurance premium to be directly billed to the employer upon suspension of a re-hired Member's retirement payment.		Yes
372		Premium Management	Billing	The system should enable authorized PEIA staff to modify the number of times after which an EFT payment type is automatically changed to direct pay mailer (DPM) due to EFT rejection by the bank. An authorized user may change a Subscriber or employer's payment type at any time.		Yes
373		Premium Management	Billing	The system should enable loading of premium rate schemes via file upload or direct entry, and assigning those rate schemes to specific employer numbers or types and/or subscriber type (member, retiree, survivor) as defined by authorized PEIA staff.		Yes
374		Premium Management	Billing	If an annuitant has their premium withheld from their pension benefit and a refund is due, the system should generate a refund check for overpaid premium.		Yes
375		Premium Management	Billing	The system should generate EFT files to pull funds from designated bank accounts in the amount of the current accounts receivables for the designated accounts.		Yes
376		Premium Management	Billing	The system should have the ability to designate by employer or employer type, how associated Subscribers' premiums should be billed per PEIA business rules (ex. some retirees should be automatically set up for retiree benefits deduction and some should have premiums billed to the employer. Some agencies are billed a flat amount, others are billed based on salary.)		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
377		Premium Management	Billing	The system should have the ability to designate by retiree, how associated retiree premiums should be billed per PEIA business rules. A Retiree whose retirement benefit is less than the premium amount should be billed, an automatic payment deduction should not be allowed.		Yes
378		Premium Management	Billing	The system should maintain and apply an operational schedule by which critical processing deadlines are applied, for example premium due dates and EFT processing dates.		Yes
379		Premium Management	Billing	The system should process insurance premium refunds (according to PEIA rules) in the same manner in which the payment was made. For example, if payment was made by EFT, a crediting EFT should be issued.		Yes
380		Premium Management	Billing	The system should provide a setting in the Retiree's account to designate the Retiree's payment option election. PEIA staff may override the election, such as removing a Retiree's ability to participate in the EFT debit option.		Yes
381		Premium Management	Billing	The system should provide a setting in the Subscriber record that should prevent EFT debit when a Subscriber no longer qualifies.		Yes
382		Premium Management	Billing	The system should provide the ability to designate and assign fees at the employer level based on PEIA business rules. Fees, late charges and other miscellaneous charges should have an associated type to distinguish the fee for accounting purposes. The type should appear on the invoice with the associated fee/charge.		Yes
383		Premium Management	Billing	The system should provide the configurable order by which payments are applied, as stated by PEIA rules.		Yes
384		Premium Management	Billing	The system should refund insurance premium collected after a Subscriber's death to beneficiaries on file per PEIA business rules.		Yes
385		Premium Management	Billing	The system should reinstate coverage upon approval of appeal and payment of all outstanding premium due.		Yes
386		Premium Management	Billing	The system should set the Subscriber payment option to direct pay mailer (DPM) if an EFT debit is rejected due to bank account closure or a stop payment order by the account owner.		Yes
387		Premium Management	Billing	The system should use effective dating to allow for the input of future coverage for which billing should not be issued until the applicable billing cycle.		Yes
388		Premium Management	Billing	The system should use PEIA business rules to determine and apply funding of retiree premium. The retiree may be responsible for paying all or a portion of the premium, based on factors such as years of service, employer, initial date of hire, and employer discretion.		Yes
389		Premium Management	Billing	The system should waive premiums for designated Subscriber types or by manual indicator set by authorized PEIA staff.		Yes
390		Premium Management	Billing	The system is capable of producing PEIA self-billed invoices based on their enrollment data to certain vendors.		Yes
391		Premium Management	Employer Data	The system should capture employee demographic data changes (ex. name, gender, date of birth, date of death, address, marital status, salary info, etc.) through the employer reporting process and trigger workflow for review. Changes requiring verifying documentation should not be committed to the system until documentation is received.		Yes
392		Premium Management	Employer Data	The system should capture the following from reported employer payroll data: information concerning an employee's status including termination date, date last paid, leave without pay information, salary info, suspensions and date returned to work (for working retirees). Data should include both beginning and ending dates for status changes.		Yes
393		Premium Management	Employer Data	The system should provide the capability to automatically update the employer ID for each impacted employee if a change is made to the employer record due to agency reorganization, such as a merger or split.		Yes
394		Premium Management	Employer Data	The system should provide the capability to collect employee salary information via the employer report and automatically update this information in the system annually to support insurance processing.		Yes
395		Premium Management	Foundational	The system should be capable of determining the type of employer and applying different billing and payment workflows based on the employer's type. Examples of employer types are state agency, non-state agency, Board of Education, etc.)		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
396		Premium Management	Foundational	The system should calculate and apply all premiums and any applicable fees due according to PEIA eligibility and enrollment business rules. These premiums due should be recorded in the person records as a receivable amount, to be credited when payment is posted through one of the following means: A. Electronic Funds Transfer by EFT from the individual retiree's account B. Electronic Funds Transfer by EFT from the employer reconciled to payroll transmittal C. Money order or personal check from the employer or retiree, posted by user or through workflow D. Credit card transaction, transacted through the member portal by a retiree E. OASIS IET transfer from the employer, reconciled to billing F. Through pension benefit payment deduction for a retiree		Yes
397		Premium Management	Foundational	The system should calculate and apply any premium credits according to effective date premium rules.		Yes
398		Premium Management	Foundational	The system should calculate and apply any retro-active billing according to effective date premium rules.		Yes
399		Premium Management	Foundational	The system should calculate premiums, apply subsidies and any applicable fees due from all enrollment transactions on a Subscriber level basis, and apply the appropriate transactions as follows: A. Generate a combined monthly billing to active member employers and subdivisions B. Generate individual monthly billings for all individual Subscribers (a detailed level of A above). C. Apply retiree premiums due as monthly benefit deductions D. Generate individual retiree monthly direct pay billings to any retiree or associated payee for whom the total pension benefit is not sufficient to cover the cost of premiums due.		Yes
400		Premium Management	Foundational	The system should have the ability to assign one unique identifier to an employer and grant access to certain employer portal functions based on employer type.		Yes
401		Premium Management	Foundational	The system should identify all add, change and delete transactions as well as ongoing, active billing amounts at the individual program subscriber level. Any applicable retro-active transactions should also be identified. Transactions should be applied when approved by PEIA according to business rules. For active employees and associated Subscribers, the premium amounts should be provided with both summary and detailed information and a bill generated to the appropriate employer and available for view or download.		Yes
402		Premium Management	Foundational	The system should only display through the employer portal the member's or retiree's data and documents for the benefits that employer offers. In the case of dual employment, only the benefits the member is enrolled in should be viewable for the corresponding employer.		Yes
403		Premium Management	Foundational	The system should provide capability to process invoices, payments and other reporting data at PEIA-defined frequencies.		Yes
404		Premium Management	Foundational	The system should provide fully integrated functionality to manage premium billing and associated accounting for all programs and all qualified, participating active employees and their associated Subscribers, at the individual level and should generate employer billing for monthly premiums.		Yes
405		Premium Management	Foundational	The system should provide fully integrated functionality to manage premium billing and associated accounting for all programs and for all qualified, participating retired members and their associated Subscribers at the individual level and should generate billing for monthly premiums.		Yes
406		Premium Management	Foundational	The system should provide functionality by which an employer's participation in benefits programs may be added or terminated, and their Subscribers by association. This functionality should be limited to PEIA users with appropriate security.		Yes
407		Premium Management	Foundational	The system should provide functionality to define an unlimited number of benefit plans and programs for employees', retirees' and associated Subscribers' participation. These plans should include eligibility logic, rate structures that maintain history and effective dates, and an interface through which revisions and updates can be easily made by a user. Rate structures may be plan and participant-based, service formula, salary or based on a calculated percentage of salary, based on participation in other programs, etc. Programs may result in receivables, such as health and life insurance premiums, both employee owed and employer owed.		Yes
408		Premium Management	Foundational	The system should provide the capability to capture required employer reporting, eligibility and enrollment attributes during the set-up process for a new participating employer.		Yes
409		Premium Management	Foundational	The system should provide the capability to update effective dates (including retroactive dates) for terminated and deceased Members.		Yes
410		Premium Management	Interfaces	The system should have the ability to integrate with State Treasurer for processing credit card payments (acting as WV PEIA bank).		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Units	
411		Premium Management	Interfaces	The system should produce a file for printing and sending monthly direct pay mailers.		Yes
412		Premium Management	Interfaces	The system should provide integration with SAP general ledger systems, for the purpose of generating Accounts Receivable and Accounts Payable summary journal entries, and to manage the allocation of cash receipts at the member and employer level.		Yes
413		Premium Management	Foundational	The system should provide the ability to age premium account billings for receivables management; provide aging reports, utilize aging logic to allow for dunning per PEIA business rules.		Yes
414		Premium Management	Invoices	The system should allow an option to export the detail to Excel. If this option is selected, the member ID should not be available in the exported data.		Yes
415		Premium Management	Invoices	The system should apply appropriate benefit payroll deductions and credits, including automatically calculated retroactive adjustments, beginning with the first benefit payment issued after the coverage effective date.		Yes
416		Premium Management	Invoices	The system should automatically deduct insurance premiums from the Member's monthly benefit payment when authorized. If a Member's benefit amount is not sufficient to cover the insurance premium amount, the amount available should be deducted. The system insurance premium status should be switched to 'Direct Pay' for that Subscriber and an invoice should be generated for the remaining premium amount.		Yes
417		Premium Management	Invoices	The system should capture and automatically populate appropriate employee and employer contribution rates for the applicable insurance premiums, load factors and other fees once employer demographic information is entered.		Yes
418		Premium Management	Invoices	The system should enable authorized internal PEIA users to manually adjust billing amounts for subscribers or employers, as required. Any manual adjustment must maintain a full audit record.		Yes
419		Premium Management	Invoices	The system should enable designated PEIA employees to execute premium billing trial batch runs and produce associated validation and reconciliation reports used to verify billing statements/feeds prior to committing to the Employer and retiree records, and generation and publication of retiree and employer bills. The system should allow trial batches to be re-run as many times as needed, each with a unique batch number such that corrections can be made to retiree or employer records and a batch then reconciled prior to posting. Unposted batches should not appear in a retiree or employer record, and may be cleared according to PEIA business rules.		Yes
420		Premium Management	Invoices	The system should generate uniquely identifiable invoices, making it possible to automatically allocate payments to those invoices (ex. barcoded, include an ID number, etc.).		Yes
421		Premium Management	Invoices	The system should provide a method of accessing the detail for each invoice (whether open or closed).		Yes
422		Premium Management	Invoices	The system should provide batch run capability for premium billing to Retirees, in the form of direct pay mailers for those who do not have payment deducted from their monthly retirement benefit. The system should provide the ability to generate a billing for a single, multiple or all retirees.		Yes
423		Premium Management	Invoices	The system should provide batch run capability for premium billing, whereby the internal PEIA user is able to select one, multiple or all employers for whom to generate electronic monthly premium bills.		Yes
424		Premium Management	Invoices	The system should provide the ability for employer Benefit Coordinators and authorized PEIA staff to apply outstanding credits to outstanding balances.		Yes
425		Premium Management	Invoices	The system should provide the ability for employers and retirees to submit payments (insurance premium payments, contributions, service purchase payments, etc.) using electronic payment methods (online portals, inter-departmental transfers), and apply those payments to outstanding accounts receivables or amounts due.		Yes
426		Premium Management	Invoices	The system should provide the capability to capture current and historical employer contribution rates, insurance premiums and surcharge, load factors, and admin fees in effective dated tables.		Yes
427		Premium Management	Invoices	The system should provide the following invoice detail: employee ID, employee name (alpha format), insurance benefit description (i.e. Basic Life, Employee Health Premium, Employer Health Premium, Optional Life, etc.) and insurance benefit cost.		Yes
428		Premium Management	Invoices	The system should publish employer billing statements to the employer's account.		Yes
429		Premium Management	Invoices	The system should publish retiree billing statements to the retiree's account.		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
430		Premium Management	Invoices	The system should recalculate health and insurance eligibility and the appropriate invoice when an employment change is made. The recalculation should be automatic and immediate upon the employer submitting the employment change. The invoice should be immediately refreshed for the employer user.		Yes
431		Premium Management	Invoices	The system should track credits due to overpayment, and allow employers to apply these amounts to subsequent billings, creating new bills that include line-items reflecting credit amounts applied.		Yes
432		Premium Management	Invoices	The system should track receivables and apply delinquent amounts to subsequent billings, creating new bills that include detailed line-items for past-due receivables.		Yes
433		Premium Management	Invoices	The system should use date parameters to specify the effective and termination dates of Insurance premiums and other deduction types at both an employer level and Subscriber level. For example, insurance plans could be assigned to Subscribers in advance of their being effective for a future date.		Yes
434		Premium Management	Payment	A user can "confirm" the summary payment transaction or cancel and navigate to other pages.		Yes
435		Premium Management	Payment	Historical remittance advices are assessable to the employer as is all historical employee payroll information		Yes
436		Premium Management	Payment	The system should have the capability to add/store/modify banking institutions and corresponding routing number information and to track all payments of any sort.		Yes
437		Premium Management	Payment	The system should allow entry of a payment comment.		Yes
438		Premium Management	Payment	The system should allow for selection of an unapplied credit amount to apply to an open invoice(s).		Yes
439		Premium Management	Payment	The system should allow for selection of multiple open invoices for which to pay.		Yes
440		Premium Management	Payment	The system should automatically post deductions for insurance premiums at the individual benefit level with the ability to view total premiums paid at the employer (group) level and subscriber level.		Yes
441		Premium Management	Payment	The system should generate and display a payment summary when all payment details are complete. The payment summary should contain the Billing Agency name, Invoiced Agency Name, Coverage Period, Benefit Item Description (i.e. Basic Life, Dependent Optional Life, Health Premium Member, Health Premium Employer, etc.), the Payment Amount for each Benefit Item, the total Payment Amount of all Benefit Items, Unapplied Credits used (negative amount), the Grand Total Payment, the payment type and a system generated transaction ID.		Yes
442		Premium Management	Payment	The system should provide a drop down list of available payment types (ACH, IET, Lockbox).		Yes
443		Premium Management	Payment	The system should provide a method of accessing the detail for any unapplied payments (credits).		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
444		Premium Management	Payment	The system should provide employers the ability to select a default payment type (to eliminate the need of selecting a payment type for each payment.		Yes
445		Premium Management	Payment	When the user indicates the summary payment transaction is confirmed, a remittance advice is generated. The remittance advice format may be different depending on the payment type and/or employer type. The employer must access the remittance advice from the portal. The remittance advice can then be printed, emailed or saved by the employer.		Yes
446		Premium Management	Payment Reconciliation	The system should provide an automated reconciliation process to match ACH payment types with the payment(s) contained in the bank's ACH deposit advice file. The system should finalize all payments reconciled and notify PEIA of mismatches or items containing errors for manual review.		Yes
447		Premium Management	Payment Reconciliation	The system should provide an automated reconciliation process to match IET payment types with the payment(s) contained in the payment file that comes from the state system (OASIS). The system should finalize all payments reconciled and notify PEIA of mismatches or items containing errors for manual review.		Yes
448		Premium Management	Payment Reconciliation	The system should provide a means of searching for a transaction to match a check payment received through the lock box that could not be matched by the Treasurer's office. Search capability includes by check number, employer/member name, check amount, check date, etc.		Yes
449		Premium Management	Payroll	The system should be capable of supporting multiple employer payroll reporting methods including, but not limited to: - Text files (.txt) - Excel spreadsheet files - CSV files (.csv) - Manual input		Yes
450		Premium Management	Payroll	The system should provide a compare tool that should compare the deductions on the payroll file to the billing amount for each individual member, for each individual benefit on the file. The comparison tool should highlight differences in the deduction(s) and calculated premium amount(s) due.		Yes
451		Premium Management	Payroll	The system should provide a file mapping tool to identify the required upload data in an employer's payroll file and map to the system's required fields for upload.		Yes
452		Premium Management	Payroll	The system should provide capability for employers to submit an electronic data file at PEIA-defined frequencies through the employer portal that contains information to support insurance processing, including member demographic and job data, contribution data, and deductions for insurance premiums.		Yes
453		Premium Management	Refunds and Chargebacks	The system should allow for internal PEIA users to view refund payment details based on payment instructions on file. Payment details should be dynamic based on payments, interest calculations, payment instructions, etc.		Yes
454		Premium Management	Refunds and Chargebacks	The system should automatically reset the retiree's account balance when payments are refunded or a chargeback is incurred in system and create the associated accounting entries.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
455		Premium Management	Refunds and Chargebacks	The system should provide authorized users the ability to generate premium refund checks for overpayments, according to PEIA business rules. The system should notify employers or Subscribers when an insurance overpayment refund is processed.		Yes
456		Premium Management	Refunds and Chargebacks	The system should provide the capability to identify overpayments per PEIA business rules, initiate a workflow to request a recoupment and follow up until the refund payment is received. This process should integrate with receivables functionality to track the total payment owed and any payments applied.		Yes
457		Premium Management	Refunds and Chargebacks	The system should provide the capability to issue a refund as either a paper check or electronically per PEIA business rules.		Yes
458		Premium Management	Refunds and Chargebacks	The system should provide the capability to maintain payment history with check numbers for all refunds or transaction numbers for chargebacks.		Yes
459		Premium Management	Refunds and Chargebacks	When a chargeback is requested, the system should recognize the type of transaction, identify the original payment transaction and create an adjusting transaction for every invoice paid with the original payment. The paying entity (employer or participant) and the PEIA employer representative should be notified of the chargeback.		Yes
460		Premium Management	Reports, Forms, Letters, & E-communications	The system should automatically issue notifications with important information (such as delinquencies, credits, modifications, etc.) to Members or employers using the method of communication designated as the Member or employer's preferred communication method.		Yes
461		Premium Management	Reports, Forms, Letters, & E-communications	The system should generate enrollment reports for all programs and make them available in the required formats, including electronic vendor proprietary report formats. The system should also generate Adds/Changes/Terminations reports for all programs and make them available in various formats including PDF, CSV and electronic formats.		Yes
462		Premium Management	Reports, Forms, Letters, & E-communications	The system should produce billing documentation once the bill is created including: the ability to print paper bills for employers without online access, electronic billing statements for employers with online access, electronic subscriber rosters, reconciliation and balance forward reports, and the ability to produce and print retroactive balance letters.		Yes
463		Premium Management	Reports, Forms, Letters, & E-communications	The system should produce reports for PEIA employers showing required adjustments to employee records.		Yes
464		Premium Management	Reports, Forms, Letters, & E-communications	The system should provide all annual reports necessary to determine revenue and expense balance for all benefit programs.		Yes
465		Premium Management	Reports, Forms, Letters, & E-communications	The system should provide reporting tools to enable internal PEIA users to create flexible, ad-hoc reports on premium billing parameters, configurable according to the user's needs.		Yes
466		Premium Management	Reports, Forms, Letters, & E-communications	The system should provide reports, summary and detail, that should be used to manage transfers between funds within PEIA and with State funds.		Yes
467		Premium Management	Reports, Forms, Letters, & E-communications	The system should provide carrier reports to verify against carrier billings received by PEIA.		Yes
468		Premium Management	Rules	The system should apply premium rate rules and provide the appropriate premium amount for individual health and insurance benefits.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
469		Premium Management	Rules	<p>The system should have parameters on all plans or benefits that can be used to determine an individual health or insurance benefit premium based on specific criteria in the rules engine. Example of benefit rules can be found in PEIA's SPD and Shopper's Guide.</p> <p>SPD:</p> <ul style="list-style-type: none"> <li>- Page 37 - Tobacco Free Discount</li> <li>- Page 38 - Salary based employee premium for State Fund active employees and no employee premium for Non State Fund employees, Post 2010 employees ineligible for subsidized retiree health and life insurance</li> <li>- Page 39 - Pre 1997 Retirees, Post 1997 Retirees, Surviving Dependents</li> <li>- Page 40 - Employer Paid Retiree Insurance, pre and post 1988 hire dates</li> <li>- Page 42 - Retiree Premium Assistance</li> </ul> <p>Shopper's Guide:</p> <ul style="list-style-type: none"> <li>- Page 32 - Salary based premium rate tables</li> <li>- Page 36 - Non State premium rate table (no employee share)</li> <li>- Page 38 - Years of Service premium rate tables</li> </ul>	<a href="https://peia.wv.gov/Forms-Downloads/Documents/summary_plan_descriptions/SummaryPlanDescription_A802022-web.pdf">https://peia.wv.gov/Forms-Downloads/Documents/summary_plan_descriptions/SummaryPlanDescription_A802022-web.pdf</a>  <a href="https://peia.wv.gov/Forms-Downloads/Doc">https://peia.wv.gov/Forms-Downloads/Doc</a>	Yes
470		Premium Management	Rules	The system should provide configurable premium rate rules which may be updated, created or terminated by PEIA staff when applicable.		Yes
471		Premium Management	Rules	The system should provide premium rate schemes which may be updated, created or terminated by PEIA staff when applicable.		Yes
472		Premium Management	Self-Service	The system should provide the following invoice information: Invoice period, number of members, total cost by insurance benefit, total cost overall and detailed member premium information by product (health, life, dependent life, etc.).		Yes
473		Premium Management	System Data	The system should retain all billing records according to the records retentions policy in place at the time of system implementation.		Yes
474		Premium Management	Validation	The system should have the ability to run a test bill (trial batch run) for selected groups for validation.		Yes
475		Premium Management	Validation	The system should provide automation tools and reconciliation reports necessary to verify all premium billing transactions are correct prior to the insurance premium bill finalization. Validations and reconciliations should be available at the individual and employer levels, for both active and retired Members and associated Subscribers.		Yes
476		Premium Management	Validation	The system should provide the ability to reconcile calculated insurance premiums with the enrollment transactions that correspond with that period.		Yes
477		Premium Management	Workflow & Case Management	The system should allow for the definition of transactional thresholds at which senior-level authorization is required, using workflow to route the case to the appropriate approver.		Yes
478		Premium Management	Workflow & Case Management	The system should provide configurable Premium Management workflow and case management functionality that should route cases to supervisors or other designated senior staff when case specific scenarios dictate. An example of this functionality is the required supervisor approval when transactions terminating coverage retroactively outside of the current billing cycle are entered into the system.		Yes
479		Premium Management	Workflow & Case Management	The system should provide the capability for employers to approve enrollment transactions through the employer portal and to also provide a secondary approval level by PEIA for dependents and members according to PEIA rules.		Yes
480		Premium Management	Workflow & Case Management	The system should provide workflow and case management functionality to facilitate the appeals process available to Subscribers for whom insurance coverage has been cancelled. This workflow should model all key deadlines and generate associated correspondence.		Yes
481		Premium Management	Workflow & Case Management	The system should provide workflow functionality in support of Premium Billing, to manage past-due premium, under-payments and over-payments at the individual Subscriber level and at the employer level. This workflow should have the ability to generate automated correspondence, suspend the workflow case for follow-up and terminate coverage according to PEIA business rules and timelines.		Yes
482		Premium Management	Workflow & Case Management	The system should terminate coverage due to non-payment according to PEIA's business rules, using case management and workflow to manage the insurance coverage termination and appeals process. Workflow should reflect all critical deadlines and generate appropriate correspondence.		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
483		Refunds	Payment	The system should provide the capability to make changes to the financial institution after the payment has initially been set up without having to cancel or terminate the actual setup of the payment, even if the payment record has already been generated, so long as the payment has not been posted in the system.		Yes
484		Refunds	Reports, Forms, Letters, & E-communications	The system should automatically generate an electronic notification to the payee with the total refund amount and expected disbursement date at a defined point in the workflow.		Yes
485		Refunds	Reports, Forms, Letters, & E-communications	The system should automatically provide notifications to the Member or Retiree when the request is initiated on eligibility and/or status based on PEIA business rules. The notifications should include information such as Member/Retiree ineligible for refund, review by PEIA needed to proceed, additional documentation needed, or ready for processing.		Yes
486		Refunds	Reports, Forms, Letters, & E-communications	The system should electronically notify a retiree applying for refund if there is an impact to insurance benefits when the refund request is initiated.		Yes
487		Refunds	Self-Service	The system should provide the capability for a Member to initiate a request for a refund of contributions through the member portal.		Yes
488		Refunds	Self-Service	The system should provide the capability for a Member to view, modify, or cancel a refund request through the member portal per PEIA business rules.		Yes
489		Refunds	Self-Service	The system should provide the capability for Members and employers to upload supporting documents via the employer or member portal per PEIA business rules.		Yes
490		Refunds	Validation	The system should provide the capability to automatically cancel a request and notify the Member per PEIA business rules (ex. an enrollment transaction is received that disqualifies a refund of contributions, etc.).		Yes
491		Refunds	Validation	The system should provide the capability to provide a warning when processing refunds for a Member who has applied for service retirement or disability.  A Member who is in the process of applying for a disability may not elect a refund without invalidating the Member's application, as it severs his or her membership.		Yes
492		Refunds	Workflow & Case Management	The system should allow for internal PEIA users to add, modify, close, or reopen refund requests per PEIA business rules.		Yes
493		Refunds	Workflow & Case Management	The system should allow internal users to initiate a workflow to process a refund.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Link	
494		Refunds	Workflow & Case Management	The system should automatically alert internal PEIA users when the refund request is initiated that there is a special condition with the Member's account (ex. legal hold, QDRO, garnishment, levy, etc.).		Yes
495		Refunds	Workflow & Case Management	The system should automatically assign and update the status of a refund request based on completion of tasks and receipt of required documentation defined in the refund workflow.		Yes
496		Refunds	Workflow & Case Management	The system should automatically cancel a refund after a configurable period of time if the required information to process the payment is not received per PEIA business rules. An internal PEIA user should also have the capability to cancel a refund request.		Yes
497		Refunds	Workflow & Case Management	The system should automatically generate an electronic request for required information to recent employers per PEIA business rules (ex. termination, final contributions, leave payout, etc.) and generate follow up requests if the required documents are not received. The system should provide the capability to modify the request for additional/different employers or delete the request.		Yes
498		Refunds	Workflow & Case Management	The system should provide a set of required review, reconciliation and quality assurance checks as part of the refunds workflow. Per PEIA business rules, some refund disbursements may be only require one level of review prior to payment.		Yes
499	Open	Refunds	Workflow & Case Management	The system should provide the capability to create an alert or warning when address or payee name is altered.		Yes
500		Self-Service	Compliance	The system should determine the type of user - subscriber, employer, PEIA staff - and present the appropriate website policies.		Yes
501		Self-Service	Compliance	The system should provide the ability to display PEIA website policies such as Terms of Use, Privacy Policy, Acceptable Use, Disclaimer, etc.		Yes
502		Self-Service	Compliance	Upon initial log in and upon a change to the website policies, a user must agree to the Terms of Use. The agreement of the Terms of Use must be stored in the user's authentication history along with the date and time.		Yes
503		Self-Service	Compliance	The system should, at a frequency set by the PEIA, request renewal of the Confidentiality agreement, terms of use and portal user recertification. If a confidentiality agreement, terms of use or other security or legal document is changed, an automatic recertification is employed.		Yes
504		Self-Service	Security	The system should allow the authorized contact at each employer the ability to register and manage their Benefit Coordinator user accounts, once the authorized contact has been set up by PEIA (ex. modify user permission, lock/unlock accounts, etc.).		Yes
505		Set-Up and Maintenance	Security	The system should allow authorized internal PEIA users to register and manage user accounts, as necessary (ex. modify user permission, lock/unlock accounts, etc.).		Yes
506		Set-Up and Maintenance	Security	The system should automatically revoke employer access to PEIA portals for the authorized employer contacts upon their terminated participation in Health and Insurance Benefits, per PEIA business rules.		Yes
507		Set-Up and Maintenance	Security	The system should be configurable to allow only certain employer contact types to be automatically updated by the employer through the employer portal. Other employer contact updates should require review by an internal PEIA user before the update is finalized.		Yes
508		Set-Up and Maintenance	Security	The system should be configurable to allow updates to certain employer or member attributes to only be completed internally by an internal PEIA user.		Yes
509		Set-Up and Maintenance	Security	The system should have the ability to limit information displayed to a member or employer, per PEIA business rules.		Yes
510		Set-Up and Maintenance	Security	The system should have the ability to limit information displayed to an employer Benefit Coordinator per PEIA business rules.		Yes
511		Set-Up and Maintenance	Security	The system should have the capability for an internal PEIA administrative user to add, modify, or revoke access for an employer or member.		Yes
512		Set-Up and Maintenance	Security	The system should have the capability for an internal PEIA administrative user to unlock a non-PEIA user account (member or Benefit Coordinator) and reset the log in credentials.		Yes
513		Set-Up and Maintenance	Security	The system should have the capability for an internal PEIA user to add, modify, or revoke access for an employer contact, including required contact types.		Yes
514		Set-Up and Maintenance	Security	The system should display only the members' data and documents only for the benefits that employer offers. In the case of dual employment, only the benefits the member is enrolled in should be viewable for the corresponding employer.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
515		System	Foundational	The system should also provide seamless and secure integrations with any necessary external third party systems (i.e. OASIS, third party health administrator, etc. ) with which data exchange whether constant, scheduled or manually requested data exchange is required. This integration should support functionality such as receiving participant deductible amounts, initiating the creation of an IET on OASIS, receiving an IET number from OASIS, providing the insurance carriers with enrollment data, etc..		Yes
516		System	Foundational	The system should provide a comprehensive, single source portal with functionality for all users - members, employer Benefit Coordinators and PEIA staff.		Yes
517		System	Foundational	The system should provide appropriate access to the different components of the system - billing, enrollment, eligibility, CRM and case management - depending on user role and security levels. The system should also provide seamless integration with any necessary internal third party systems (i.e. Document Management System and MS Great Plains) with which a constant connection is required. This integration should support functionality such as direct database access to documents and payment information, the ability to initiate requests for pre-filled forms and publications, and transmit transactions into PEIA work queues.		Yes
518		System	Foundational	The system should provide data export functionality for any data including eligibility and enrollment data in standard or proprietary formats as required by PEIA.		Yes
519		System	Foundational	The system should allow data import functionality from third parties (such as Medicare) as required by PEIA.		Yes
520		System	Audit	Audit indicator capabilities such that a participant's account can be identified as to whether it has been audited, through what date, and by whom and that satisfies HIPAA Privacy and Security regulations.		Yes
521		System	Audit	Full data audit trail including what, who, when (system timestamp) sufficient to satisfy HIPAA Privacy and Security regulations		Yes
522		System	Security	Use of recognized security practices developed under section 2(c)(15) of the National Institute of Standards and Technology (NIST) Act		Yes
523		System	Security	The system should have two factor authentication for each user.		Yes
524		System	Security	The system should conform to NIST standard for username and password requirements.		Yes
525		System	Security	The system should require mandatory employer contact types to be set by the employer at time of enrollment.		Yes
526		System	Security	The system should detect mass data exports/movement or suspicious activity indicative of malware or hacker activity.		Yes
527		System	Security	The system should provide timeout and log off configurations consistent with NIST standards.		Yes
528		System	Security	Database encryption at rest and encrypted remote connection channels.		Yes
529		System	Security	Back-up and restore process in support of overall disaster recovery and business resumption plans.		Yes
530		System	Security	Fail-safe shutdown/recovery processes.		Yes
531		System	Security	Maintains full HIPAA EDI, Privacy and Security compliance.		Yes
532		System	Security	Meets HITECH's Safe Harbor Provision(s).		Yes
533		System	Set Up and Maintenance	PEIA expects different system experiences for different statuses (such as active, retired, survivor) and different employer types (state, non-state, EDU, etc.).		Yes
534		System	Set Up and Maintenance	The system should provide a "forgot password" function for an authenticated user that meets NIST standards.		Yes
535		System	Set Up and Maintenance	If a user tries to log off of the system with unsaved data changes, the system should message the user to continue logging off and lose changes or return and save changes.		Yes
536		Enrollment	Person Data	The system should allow for selection of gender as male, female and other.		Yes
537		System	Set Up and Maintenance	The system should provide a hierarchical structure of accounts which indicates the entity's reason for plan access. Entities include employers, employees, retirees, cobra participants, survivors, and dependents. The hierarchy may change over time and therefore the system should provide the ability to revise or add to the structure.		Yes
538		System	System Data	The system should be capable of querying and exporting any data element(s) calculated or collected through the system using standard file formats (.csv, .txt, .xml, etc.) in the requested layout(s) for consumption of legislative, legal, and regulatory initiatives.		Yes
539		Document Management	Archiving and Indexing	The system should provide the ability to store images, email, voicemail, or messages in industry-accepted formats.		Yes
540		Document Management	Search	The system should provide the ability to search for and view stored items by multiple keywords or indexed values (such as document type, PEIA ID, employer number, etc.).		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Units	
541		Document Management	Archiving and Indexing	The system should provide the ability to capture annotations on stored items. Ability to add annotations to images to include but not be limited to highlighter, sticky notes, redact, digital stamp, watermark, date stamping, and shapes.		Yes
542		Document Management	Archiving and Indexing	Ability to apply security to the input, editing and deletion of annotations with an appropriate audit trail.		Yes
543		Document Management	Security	The system should inhibit any alterations to stored images including overwriting or re-indexing.		Yes
544		Document Management	Foundational	The system should utilize optical or magnetic storage technologies. Optical Write Once Read Many (WORM) solution is preferred.		Yes
545		Document Management	Security	The system should provide security controls at document, document type, group and user levels.		Yes
546	Open	Document Management	Archiving and Indexing	The system should allow for de-duplication functionality where one document can be tagged or linked to multiple folders.		Yes
547		Document Management	Foundational	The system should allow conversion of records from the current document management system. Includes the ability to import records using the record's original indexed value(s). Also, includes the ability to apply new document types or index values using a cross-walk of old to new values.		Yes
548	Open	Document Management	Audit	The system should allow for identification of user scans and indexes for auditing purposes.		Yes
549		Document Management	Audit	The system should provide a history of document interactions including additions, updates, deletions and retrievals.		Yes
550		Document Management	Security	The system should limit accessibility to authorized users by role and/or by document type.		Yes
551		Document Management	Reporting	The system should provide the ability to report statistics on the records stored by document type, date stored, employer and other criteria as specified by PEIA.		Yes
552		Document Management	Archiving and Indexing	The system should provide the ability to track, archive and manage all in- and out-bound communication channels as electronic correspondence.		Yes
553		Document Management	Archiving and Indexing	The system should provide the ability to archive and index all auto-generated correspondence along with the method of distribution at the same time that it is generated and distributed.		Yes
554	Open	Document Management	Verification and Workflow	The system should provide the ability to preview, verify and edit indexed documents prior to the committal and/or update to the imaging system.		Yes
555		Document Management	Verification and Workflow	The system should provide the ability to automatically route and send unknown or illegible document types to an investigation queue for resolution.		Yes
556		Document Management	Archiving and Indexing	The system should provide the ability to read Bar Codes and perform optical character recognition of the Bar Code to assist in validation and verification.		Yes
557		Document Management	Archiving and Indexing	The system should provide the ability to perform optical character recognition on standard forms to assist in validation and verification of indexing.		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Links	
558		Document Management	Records	The system should provide the ability to create an electronic, skeleton member record for individuals upon the first receipt of a document, especially when there may not be a member in the system yet.		
559	Open	Document Management	Records	The system should provide the ability to merge two individuals' imaged member folders into a single consolidated folder with full auditing.		Yes
560	Open	Document Management	Archiving and Indexing	The system should provide the ability to re-index all items in a member folder with full auditing.		Yes
561	Open	Document Management	Format	The system should provide the ability to format the data entered from internet Self-Service into a PEIA defined standard template so that it can be stored as an image in the imaging system for historical reference.		Yes
562		Document Management	Archiving and Indexing	The system should provide the ability to index a single page, a single document, or a set of documents.		Yes
563	Open	Document Management	Archiving and Indexing	The system should provide the ability to do full-text indexing of documents to support later retrieval via full text searches.		Yes
564		Document Management	Search	The system should provide the ability to assist the indexer when the only data available from an imaged document may not uniquely determine the member to whom the document belongs. Assistance to include but not be limited to popping up a list of all members with the indicated last name and allowing the indexer to select one by DOB, by address, Member ID or by SSN.		Yes
565		Document Management	Archiving and Indexing	The system should provide the ability to change index attributes for an entire set of documents.		Yes
566		Document Management	Archiving and Indexing	The system should provide the ability to automatically assign a scanned document to the correct member's electronic folder based on various data combinations to include but not be limited to a unique member identifier, the member name, the member DOB, and the member SSN or other data identified by PEIA.		Yes
567		Document Management	Archiving and Indexing	The system should provide the ability to group like documents into batches for scanning based on document properties to include but not be limited to document size, document type, color, and orientation; or to group documents into like batches based on member or Pensioner and/or pensioner properties to include but not be limited to SSN and Member ID..		Yes
568		Document Management	Scanning	The system should provide the ability to automatically identify and eliminate blank pages within the batch during document scanning and indexing.		Yes
569	Open	Document Management	Scanning	The system should allow the insertion of single pages when scanning and indexing.		Yes
570		Document Management	Scanning	The system should provide the ability to manage scanning simultaneously with multiple industry-standard scanners.		Yes
571		Document Management	Verification and Workflow	The system should provide the ability to integrate image processing with the electronic workflow processing such that the release of an image to the image archive initiates the appropriate workflow process(es) for each document.		Yes
572		Document Management	Audit	The system should provide the ability to record receipt of documents when they are received, scanned and indexed.		Yes
573		Document Management	Scanning	The system should provide the ability to scan different sizes and/or orientation of documents to include but not be limited to portrait, landscape, A4, executive and legal.		Yes
574		Document Management	Scanning	The system should provide the ability to represent a multi-page document as a single document within the imaging archive.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Linker	
575		Document Management	Scanning	The system should provide the ability to scan both single-sided and double-sided documents.		Yes
576	Open	Document Management	Scanning	The system should provide the ability to scan color paper and save as a white document with black text.		Yes
577		Document Management	Archiving and Indexing	The system should provide the ability to perform index validation through an automatic look-up in the Benefit Administration database during the Index process.		Yes
578		Document Management	Scanning	The system should provide the ability to scan documents in duplex mode		Yes
579	Open	Document Management	Archiving and Indexing	The system should provide the ability to do full-text indexing of documents to support later retrieval via full text searches.		Yes
580		Document Management	Exporting and Printing	The system should provide the ability to export images into multiple standard image formats.		Yes
581		Document Management	Exporting and Printing	The system should provide the ability to extract and/or print a page, a selection or an entire imaged document.		Yes
582	Open	Document Management	Exporting and Printing	The system should provide the ability to print annotations superimposed on image as well as to print without annotations.		Yes
583	Open	Document Management	Exporting and Printing	The system should provide the ability to route output from the imaging system to any printer on the PEIA network or a local PC printer.		Yes
584	Open	Document Management	Exporting and Printing	The system should provide the ability to redact specific portions of retrieved correspondence and forms when sending copies of that material to other recipients.		Yes
585		Document Management	Security	The system should provide the ability to manage PEIA defined user security features that control whether a given user can print documents.		Yes
586		Document Management	Security	The system should provide the ability to track all access within the image archive and to generate reports of that access.		Yes
587		Document Management	Viewing	The system should provide the ability to browse through image pages without returning back to a menu or list.		Yes
588	Open	Document Management	Viewing	The system should provide the ability to compare two documents side by side.		Yes
589	Open	Document Management	Search	The system should provide the ability to display a list of the members matching the search criteria entered, if the member ID, or other unique identifier, does not uniquely identify a member upon performing a retrieval from within the Benefit Administration application. The list should include names, dates of birth, and Social Security numbers so that the user can select the specific member being queried.		Yes
590		Document Management	Viewing	The system should provide the ability to allow a document to be viewed by more than one user concurrently.		Yes
591		Document Management	Viewing	The system should provide the ability to retrieve a member or employers documents (when a the record is open on the screen) with a single operation, such as clicking on an Imaging Folder link.		Yes
592		Document Management	Verification and Workflow	The system should provide the ability to accommodate returned mail as one of the imaging document types and to trigger a returned mail workflow process based on PEIA defined parameters.		Yes
593		Document Management	Viewing	The system should provide the ability to open multiple documents in separate windows.		Yes
594		Document Management	Viewing	The system should provide the ability to pan, size and zoom images.		Yes
595		Document Management	Search	The system should provide the ability for the system to query based on standard criteria.		Yes
596	Open	Document Management	Search	The system should provide the ability to apply further search criteria to the results of a search.		Yes
597	Open	Document Management	Search	The system should provide the ability to create and distribute pre-defined search templates for multiple users.		Yes
598	Open	Document Management	Search	The system should provide the ability to inform the user that a search is being processed by displaying the percentage of completion.		Yes

ReqID	Open	Process	Sub-Process	Requirement Detail	Linker	
599	Open	Document Management	Search	The system should provide the ability to combine words and phrases using the words AND, OR and NOT to limit, widen, or define a search.		Yes
600	Open	Document Management	Search	The system should provide the ability to perform range searches for indexed dates.		Yes
601	Open	Document Management	Viewing	The system should provide the ability to perform full page browsing through a member or employer document, a set of a member or employer documents, or all of a member or employer documents from any starting point.		Yes
602	Open	Document Management	Viewing	The system should provide the ability to allow the viewing of documents at "fit-to-page" as the default.		Yes
603		Document Management	Viewing	The system should provide the ability to view various document and/or image formats to include but not be limited to ASCII, BMP, GIF, HTML, JPEG, PDF, RTF, TIFF, XML and Microsoft Office documents.		Yes
604		Document Management	Viewing	The system should provide the ability to simultaneously view thumbnail sketches of multiple documents and multiple pages in a single document allowing users to browse rapidly through pages.		Yes
605		Document Management	Archiving and Indexing	The system should provide the ability to support the upload of employee or employer-scanned documents in PDF (or other) format through member or employer self-service.		Yes
606		Document Management	Verification and Workflow	The system should provide the ability to manage the uploaded documents in the same way (indexing, workflow routing) that a faxed or mailed and scanned document would be processed.		Yes
607		Document Management	Exporting and Printing	The system should provide the ability to ensure that any electronic form completed on the Internet can be immediately archived, viewed and printed by the user or submitted and later recalled for viewing or printing from the archive and when printed or viewed looks substantially like the paper version of the same form (including details such as the form number)		Yes
608		Implementation	Deliverables	The vendor should provide a Project Charter that contains the project's objectives, scope, roles and responsibilities of the individuals involved in the project, and risks and constraints.		Yes
609		Implementation	Deliverables	The vendor should provide a Statement of Work that contains the activities, deliverables and timetable for the project as well as defines the terms and conditions agreed upon between the vendor and PEIA.		Yes
610		Implementation	Deliverables	The vendor should provide an Implementation Plan and Schedule to implement the project according to the Project Charter and Statement of Work.		Yes
611		Implementation	Deliverables	The vendor should provide a Work Plan that identifies each objective and the timeline, resources, resource responsibilities and strategy to achieve the objective.		Yes
612		Implementation	Deliverables	The vendor should provide a Project Communication Plan that defines the guidelines on how project information will be shared, who is responsible for communicating and to whom.		Yes
613		Implementation	Deliverables	The vendor should provide a Change Control Plan describing the methodology used to manage any change requests that impact the project scope.		Yes
614		Implementation	Deliverables	The vendor should provide a Requirements Traceability Matrix which traces system testing to the user requirements.		Yes
615		Implementation	Deliverables	The vendor should provide a project Integration Plan which shows the process in which other systems or sub-systems talk to each other or exchange data and ensure they all work together.		Yes
616		Implementation	Deliverables	The vendor should provide a Test Strategy and Plan describing the scope, objectives, approach and timing of the software testing tasks.		Yes
617		Implementation	Deliverables	The vendor should provide test cases describing what should be tested (process(es), calculation(s), workflow(s), etc.), the preconditions, inputs, actions and expected results.		Yes
618		Implementation	Deliverables	The vendor should provide a Test Progress showing the number of test cases tested, the number of test cases tested and passed/failed, the number of test cases remaining to test, % of test cases tested, % of test cases remaining, % of test cases passed/failed by subject matter and/or category and/or testing resource.		Yes
619		Implementation	Deliverables	The vendor should provide a Defect Tracking Report that tracks defect reported, their disposition and expected correction delivery date.		Yes
620		Implementation	Deliverables	The vendor should provide Regular Status Reports indicating the overall status of the project to project stakeholders as defined in the Project Communication Plan.		Yes
621		Implementation	Deliverables	The vendor should provide Design Documents for significant design decisions or specifications or configurations that provide details for how the software should be configured or built.		Yes



ReqID	Open	Process	Sub-Process	Requirement Detail	Units	
622		Implementation	Deliverables	The vendor should provide a Data Migration Strategy and Plan describing the tasks to migrate historical and current data including plans to find and mitigate data issues and the tools require for query, cleanup and migration.		Yes
623		Implementation	Deliverables	The vendor should provide a Release and Deployment Management Plan which describes the process for building, testing, scheduling, pushing and deploying a software release to PEIA's testing environment and then moving the tested software to the production environment.		Yes
624		Implementation	Deliverables	The vendor should provide a Production Cutover Plan that describes the steps and tasks required when PEIA is ready to go-live with the new system.		Yes
625		Implementation	Deliverables	The vendor should provide a Release Readiness and Validation Report that provides a list of tasks and validations to ensure the project has followed the defined software development and release process and that the project team has identified any system interdependencies and risks that may have an impact on the software and/or system deployment.		Yes
626		Implementation	Deliverables	The vendor should provide a Training Plan that outlines the training strategies, organizational change management process(es), activities and deliverables used to train the targeted audience. The vendor should also provide training materials outlined in the training strategy.		Yes
627		Implementation	Deliverables	The vendor should provide a Security Plan which describes the security controls in place or planned for the implementation to provide levels of security appropriate for the information processed and/or accessed users or groups of users.		Yes
628		Implementation	Deliverables	The vendor should describe their Problem Incident Reporting methodology which includes a set of procedures and actions taken to respond to critical incidents.		Yes
629		Implementation	Deliverables	The vendor should describe their Risk Management and Reporting Methodology		Yes
630		Implementation	Deliverables	The vendor should provide a sample of Software Release Content Documentation, the documentation provided when software is released indication what is included in the release and the impacts of the changes.		Yes
631		Implementation	Deliverables	The vendor should provide a description of their Implementation Methodology		Yes
632		Implementation	Deliverables	The vendor should describe their system and solution, including but not limited to all software, equipment, converted data and hosting services.		Yes



Integration/Interface	From	To	Servers Involved	Frequency	ftp folder	MF Program Name	Layout
BB&T ARbox file	BB&T	PEIA	Mainframe, Biztalk, GP	M-F	isc_bbandt	E18BTFTP	Finance
CPRB Active Previous Month Not Next Month file	CPRB	PEIA	Mainframe	monthly	CPRB Files	E1CPR8FL	Complex Elig
CPRB Retirement Interface	CPRB	PEIA	Mainframe	Mondays	CPRB Files	E1CPR8J	Complex Elig
CPRB Payment File	CPRB	PEIA	Mainframe/BizTalk/GP	Monthly - 25th	CPRB Files	E1CPR8	Finance
CPRB Deceased File	PEIA	CPRB	Mainframe	Monday	CPRB Files	E1WEEK	Simple
CVS Recon file	CVS	PEIA	Mainframe	10th & 25th	ISC CVS Health Eligibility	E1CVSRCN	Complex Elig
BOE Salary file	Dept. of Ed	PEIA	Mainframe	End of Month	isc_fars 2017 boards of educat	E1UPDSAL	Simple
						BOESQL BOEPROC BOECHK1 BOECHK2 BOECHK3 BOECHK4	
BOE State Aid	Dept. of Ed	PEIA	SQL Server, GP, & MF	Once a month	isc_peia_rpts	BOECHK4	Simple
BOE Payroll files	Dept. of Ed	PEIA - file put on mainframe	Mainframe	Every day	N/A	E1BOEPAY	Payroll
DHHR Death file	DHHR	PEIA - file put on mainframe	Mainframe	Tuesday's	N/A	E1DTHRPO	Simple
DHHR Divorce file	DHHR	PEIA - file put on mainframe	Mainframe	Tuesday's	N/A	E1DIVRPO	Simple
HICN updates file	Humana	PEIA	Mainframe	Thursday's	ISC_Humana	E150029J	Simple
Address Updates	Humana	PEIA	Mainframe	Thursday's	ISC_Humana	E150030H	Simple
CMS Name/Date of Birth Changes	Humana	PEIA	Mainframe	Thursday's	ISC_Humana	E150083H	Simple
Humana Name Changes	Humana	PEIA	Mainframe	Thursday's	ISC_Humana	E1HJMNAM	
Humana Capitation file	PEIA	Humana	Mainframe	15th of Month	ISC_Humana	E1MONTH	
Dikenrollments file	Humana	PEIA	Mainframe	Thursdays	ISC_Humana	E150022H	Simple
Marshall Salary file	Marshall	PEIA	Mainframe	End of Month	isc_marshall hr finance	E1UPDSAL	Simple
Marshall Payment Contributions file	Marshall	PEIA	Mainframe	Around monthend	isc_marshall hr finance	E1MRLCON	Payroll
Salary file (Secondary Schools Activities Commission)	SSAC	PEIA	Mainframe	End of Month	ISC_WVSSAC	E1UPDSAL	Simple
SSDC 29M Master file	SSDC	PEIA	Mainframe	Manually around 15th	isc_ssdc_vds	E150029M	Complex Elig
Treasurer Agency Lockbox file	WVSTO	PEIA	GP	M-F	retrieves from Treasure ftp site and puts on PEIA ftp site for	E1DPFTP	Finance
Treasurer Retiree Lockbox file	WVSTO	PEIA	GP	M-F	Biztalk to pick up	E1DPFTP	Finance
Treasurer Credit Card file	WVSTO	PEIA	GP	Daily	retrieves from Treasure ftp site and puts on PEIA ftp site for	E1DPFTPC	Finance
ARS Direct Draft (web service)	WVSTO	PEIA	Biztalk, GP	7th & 22nd	web service		Finance
COBRA file	UMR	PEIA	Mainframe	M-F	isc_tallen	E1COBRAJ	Complex Elig
Provider Directory	UMR	PEIA	Mainframe	1st each month	isc_umr	E150113J	Simple
Salary file (WV Job Investment Trust Board)	WVJITB	PEIA	Mainframe	Monthend	ISC_WVJITB	E1UPDSAL	Simple
WVOASIS 1.246 Cash	WVOASIS	PEIA	SQL Server	Tue - Sat	ftp.wvoasis.gov	SSIS	Finance
WVOASIS 1.249 payment file	WVOASIS	PEIA	GP	4-6 times a month	ftp.wvoasis.gov		Finance
WVOASIS 1.248 file	WVOASIS	PEIA	Mainframe	every 2 weeks	ftp.wvoasis.gov	E1248GET, E150248J	Complex Elig
WVU address file	WVU	PEIA	Mainframe	Monthly 1st week	education/wvu	E1WVUADJ	Simple
WVU Salary file	WVU	PEIA	Mainframe	End of Month	education/wvu	E1UPDSAL	Simple
WVU Escrow	WVU	PEIA	SQL Server & MF	Once a year		N/A	Simple
CVS Weekly Claims to Data Warehouse	CVS	Mike Madalena		once a week		N/A	
BOE Eligibility files:	PEIA	BOE's (#1 55 counties)	Mainframe	once a month	education/"county name"	E1MONTH2 & 3	Complex Elig
Rec04 file (Continuing Care Actuarial)	PEIA	Continuing Care Actuarial	Mainframe	once a month	isc_jason ccc		Complex Elig
Employer Participation change file (CPRB) - Monthly	PEIA	CPRB		1st each month	cprb files	E1CPR8ER	Complex Elig
CVS Eligibility file	PEIA	CVS	Mainframe	1st each month	isc_cvs_health_eligibility	E150115J	Complex Elig
Health Plan Eligibility file - Monthly and Weekly files	PEIA	Health Plan	Mainframe	Monthly full file	healthplan_monthlyfile	E1MONTH2 & 3	Complex Elig
Health Plan Capitation	PEIA	Health Plan	Mainframe	9th each month	healthplan_monthlyfile	E1BAS.TEMP(CARRIER)	Simple
Benefit Assistance Group Members (Humana) - send Nov. and Dec.	PEIA	Humana	Mainframe	Dec	ISC_Humana	E1BAGMBR	Complex Elig
Terms and Adds file (Humana) - send end of Oct., Nov., Dec.	PEIA	Humana	Mainframe	Oct, Nov and Dec month	ISC_Humana	E1HTRMAD	Complex Elig
Humana Age-In file	PEIA	Humana	Mainframe	8/1, 9/1, 10/1	ISC_Humana	E1MSWP65	Simple
Humana Eligibility file (runs per PEIAMAPD calendar)	PEIA	Humana	Mainframe	MAPD ctm calendar	ISC_Humana	E150105H	Complex Elig
Surviving Dependent file (Humana)	PEIA	Humana	Mainframe	Monday's	isc_tallen	E150105S	Simple
ACA 1094B and 1095B	PEIA	IRS	SQL Server	once a year	isc_irs	N/A	
Marshall University Eligibility file - monthly interface	PEIA	Marshall	Mainframe	once a month	education/marshall	E1MONTH2 & 3	Simple
		Mike Madalena (Internal Data Warehouse)					
PEIA Interface files (11 files)	PEIA	Minneapolis Life/Securian Decision file	Mainframe	once a month	madalena_tallen	E1MONTH2 & 3	Data Warehouse
Minnesota Life/Securian Decision file	PEIA/Minneapolis Life	Minneapolis Life/PEIA	Mainframe	Friday's	isc_minlife	E1MLFTP	Simple
Minnesota Life Beneficiary file	Minneapolis Life	PEIA	Mainframe	March-May varies	isc_minlife	E150071J	Simple
Minnesota Life Census file	PEIA	Minneapolis Life	Mainframe	Jan5th / July 5th	isc_minlife	E1MLCENJ	Complex Elig
SSDC eligibility file	PEIA	SSDC	Mainframe	1st of each month	isc_ssdc_vds	E1SSDCFL	Complex Elig
ARB Direct Draft (web service)	PEIA	WVSTO		5th and 20th			Finance
Disease Management file (UMR)	PEIA	UMR	Mainframe	Tuesday's	isc_tallen	E1DSMATT	Simple
UMR Attribute file	PEIA	UMR	Mainframe	Tuesday and Friday	isc_umr	E1UMRATR	Simple
UMR Eligibility file	PEIA	UMR	Mainframe	Tuesday and Friday	isc_umr	E1UMRATR	Complex Elig
UMR Recon	UMR	PEIA	Mainframe	20th	isc_umr	E1UMRRCN	
WVOASIS 1.247 deduction file	PEIA	WVOASIS	Mainframe	Control-M calendar	ftp.wvoasis.gov	E150205J, E150247F	Finance
WVOASIS 1.247R deduction file for recent retirees	PEIA	WVOASIS	Mainframe	Control-M calendar	ftp.wvoasis.gov	E150205J, E150247F	Finance
WVOASIS Blank member id file 1.247	WVOASIS / PEIA	PEIA / WVOASIS	Mainframe	Control-M calendar	ftp.wvoasis.gov	E150247F, E150247R and E150247S	Simple
WVOASIS Reject file 1.247	WVOASIS	PEIA	Mainframe	Control-M calendar	ftp.wvoasis.gov	E150247R, E150247S	Simple
WVOASIS Success file 1.247	WVOASIS	PEIA	Mainframe	Control-M calendar	ftp.wvoasis.gov	E150247R, E150247S	Simple

WVU ESPS	PEIA	WVU	Mainframe	once each month	education\wvu	EIBILL & EIBILSPL	Finance
WVU Eligibility file - monthly interface	PEIA	WVU	Mainframe	once a month	education\wvu	EIMONTH2 & 3	Simple
UMR Weekly Claims to Data Warehouse	UMR	Mike Medalea		once a week			
Direct Draft/DirectPay Billing file	PEIA	WVSTO	SQL Server	Monthly	sfx.wvsto.com	SSIS	Finance
CPRB Billing File	PEIA	WVSTO	SQL Server	Monthly	g/x.wvsto.com	SSIS	Finance
Death/Divorce File for FBMC	PEIA	FBMC	Mainframe	Every Monday	fbmc_tallen	EIFBMC	Simple
UMR Dropped Records file	UMR	PEIA	Mainframe	Tues/Friday	isc_umr	EIUMRCVG	Simple
CVS No Part B Waiver file	PEIA	CVS	Mainframe	Mondays	isc_cvs_health_eligibility	EIWEEK	Simple

# Exhibits

## WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
0		WV PEIA HW RFP- Ariel EAS Implementation Work Plan	733.4 days	Fri 7/1/22	Tue 3/18/25	
1	1	<b>Phase 1: Project Initiation and Planning</b>	22 days	Fri 7/1/22	Fri 7/29/22	
2	1.1	Project official start	0 days	Fri 7/1/22	Fri 7/1/22	
3	1.2	<b>Project initiation</b>	5.2 days	Fri 7/1/22	Thu 7/7/22	
4	1.2.1	Prepare project initiation material	5 days	Fri 7/1/22	Thu 7/7/22	LifeWorks
5	1.2.2	Hold project initiation meetings	0.2 days	Thu 7/7/22	Thu 7/7/22	LifeWorks,WV PEIA
6	1.3	<b>Project plan (detail project plan) &amp; project charter</b>	13 days	Fri 7/1/22	Tue 7/19/22	
7	1.3.1	Draft & review	5 days	Fri 7/1/22	Thu 7/7/22	LifeWorks
8	1.3.2	Update & review	5 days	Thu 7/7/22	Thu 7/14/22	LifeWorks,WV PEIA
9	1.3.3	Finalize baseline & review	3 days	Thu 7/14/22	Tue 7/19/22	LifeWorks
10	1.4	<b>Planning</b>	22 days	Fri 7/1/22	Fri 7/29/22	
11	1.4.1	<b>Phase 2 workshop planning</b>	10 days	Mon 7/18/22	Fri 7/29/22	
12	1.4.1.1	Functional & data workshops	5 days	Mon 7/18/22	Mon 7/25/22	LifeWorks,WV PEIA
13	1.4.1.2	Technical workshops	5 days	Mon 7/25/22	Fri 7/29/22	LifeWorks,WV PEIA
14	1.4.2	<b>Demo environment</b>	20 days	Fri 7/1/22	Wed 7/27/22	
15	1.4.2.1	Set up demo environment	20 days	Fri 7/1/22	Wed 7/27/22	LifeWorks
16	1.4.3	<b>Requirement traceability matrix (RTM) review</b>	13.5 days	Thu 7/7/22	Tue 7/26/22	
17	1.4.3.1	Plan RTM review workshops	10 days	Thu 7/7/22	Thu 7/21/22	LifeWorks,WV PEIA
18	1.4.3.2	Review RTM and alignment	2.5 days	Fri 7/22/22	Tue 7/26/22	LifeWorks,WV PEIA
19	1.4.4	<b>Testing Strategy</b>	15 days	Thu 7/7/22	Wed 7/27/22	
20	1.4.4.1	Prepare and review testing strategy	15 days	Thu 7/7/22	Wed 7/27/22	LifeWorks
21	1.4.5	Steering Committee meetings (recurring monthly throughout project)	1 hr	Fri 7/1/22	Fri 7/1/22	LifeWorks,WV PEIA
22						
23	2	<b>Phase 2: Fit Gap Activities</b>	68.5 days	Mon 8/1/22	Fri 10/28/22	
24	2.1	Phase 2 start	0 days	Mon 8/1/22	Mon 8/1/22	
25	2.2	<b>Workshops</b>	50.5 days	Tue 8/16/22	Thu 10/20/22	
26	2.2.1	<b>Functional workshops</b>	50.5 days	Tue 8/16/22	Thu 10/20/22	
27	2.2.1.1	Workshop 01	2.5 days	Tue 8/16/22	Thu 8/18/22	LifeWorks,WV PEIA
28	2.2.1.2	RTM approval	5 days	Thu 8/18/22	Thu 8/25/22	WV PEIA
29	2.2.1.3	Workshop 02	2.75 days	Tue 8/30/22	Thu 9/1/22	LifeWorks,WV PEIA
30	2.2.1.4	RTM approval	5 days	Thu 9/1/22	Thu 9/8/22	WV PEIA
31	2.2.1.5	Workshop 03	2.75 days	Tue 9/13/22	Thu 9/15/22	LifeWorks,WV PEIA
32	2.2.1.6	RTM approval	5 days	Thu 9/15/22	Thu 9/22/22	WV PEIA
33	2.2.1.7	Workshop 04	2.75 days	Tue 9/27/22	Thu 9/29/22	LifeWorks,WV PEIA
34	2.2.1.8	RTM approval	5 days	Thu 9/29/22	Thu 10/6/22	WV PEIA



Exhibit A - Implementation plan



WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
35	2.2.1.9	Workshop 05	2.75 days	Tue 10/11/22	Thu 10/13/22	LifeWorks,WV PEIA
36	2.2.1.10	RTM approval	5 days	Thu 10/13/22	Thu 10/20/22	WV PEIA
37	2.3	<b>Data conversion workshops and data extraction &amp; load validation</b>	<b>57.5 days</b>	<b>Fri 8/5/22</b>	<b>Thu 10/20/22</b>	
38	2.3.1	<b>Data conversion &amp; data quality assurance strategy</b>	<b>5.25 days</b>	<b>Fri 8/5/22</b>	<b>Fri 8/12/22</b>	
39	2.3.1.1	Review data conversion & data QA strategy	0.25 days	Fri 8/5/22	Fri 8/5/22	LifeWorks,WV PEIA
40	2.3.1.2	Approve data conversion & data QA strategy	5 days	Fri 8/5/22	Fri 8/12/22	WV PEIA
41	2.3.2	<b>Data conversion environment</b>	<b>10 days</b>	<b>Fri 8/12/22</b>	<b>Thu 8/25/22</b>	
42	2.3.2.1	Confirm servers for data conversion	5 days	Fri 8/12/22	Fri 8/19/22	LifeWorks
43	2.3.2.2	Confirm SFTP connection for client access to load	10 days	Fri 8/12/22	Thu 8/25/22	LifeWorks
44	2.3.3	<b>Data conversion workshops</b>	<b>52.25 days</b>	<b>Fri 8/12/22</b>	<b>Thu 10/20/22</b>	
45	2.3.3.1	<b>Workshop 1</b>	<b>10.5 days</b>	<b>Fri 8/12/22</b>	<b>Fri 8/26/22</b>	
46	2.3.3.1.1	LW preparation for workshop	10 days	Fri 8/12/22	Thu 8/25/22	LifeWorks
47	2.3.3.1.2	Workshop 1	2.5 days	Wed 8/17/22	Fri 8/19/22	LifeWorks,WV PEIA
48	2.3.3.1.3	Follow- up activities	5 days	Fri 8/19/22	Fri 8/26/22	LifeWorks,WV PEIA
49	2.3.3.2	<b>Workshop 2</b>	<b>20.75 days</b>	<b>Fri 8/26/22</b>	<b>Thu 9/22/22</b>	
50	2.3.3.2.1	LW preparation for workshop	10 days	Fri 8/26/22	Thu 9/8/22	LifeWorks
51	2.3.3.2.2	Workshop 2	2.75 days	Tue 9/13/22	Thu 9/15/22	LifeWorks,WV PEIA
52	2.3.3.2.3	Follow- up activities	5 days	Thu 9/15/22	Thu 9/22/22	LifeWorks,WV PEIA
53	2.3.3.3	<b>Workshop 3</b>	<b>21 days</b>	<b>Thu 9/22/22</b>	<b>Thu 10/20/22</b>	
54	2.3.3.3.1	LW preparation for workshop	10 days	Thu 9/22/22	Thu 10/6/22	LifeWorks
55	2.3.3.3.2	Workshop 3	3 days	Mon 10/10/22	Thu 10/13/22	LifeWorks,WV PEIA
56	2.3.3.3.3	Follow- up activities	5 days	Thu 10/13/22	Thu 10/20/22	LifeWorks,WV PEIA
57	2.3.4	<b>ETL - Extract transform load to stage area - incremental</b>	<b>30 days</b>	<b>Fri 8/19/22</b>	<b>Wed 9/28/22</b>	
58	2.3.4.1	<b>Iteration 1 - Incremental</b>	<b>20 days</b>	<b>Fri 8/19/22</b>	<b>Thu 9/15/22</b>	
59	2.3.4.1.1	Data discovery, landing, mapping and load to stage area	10 days	Fri 8/19/22	Thu 9/1/22	LifeWorks,WV PEIA
60	2.3.4.1.2	Loaded database delivery	0 days	Thu 9/1/22	Thu 9/1/22	LifeWorks,WV PEIA
61	2.3.4.1.3	Run data integrity & quality related reports (based on agreed quality data QA strategy)	10 days	Thu 9/1/22	Thu 9/15/22	LifeWorks,WV PEIA
62	2.3.4.2	<b>Iteration 2 - Incremental</b>	<b>20 days</b>	<b>Thu 9/1/22</b>	<b>Wed 9/28/22</b>	
63	2.3.4.2.1	Data discovery, landing, mapping and load to stage area (CDR)	10 days	Thu 9/1/22	Thu 9/15/22	LifeWorks,WV PEIA
64	2.3.4.2.2	Loaded CDR database delivery	0 days	Thu 9/15/22	Thu 9/15/22	LifeWorks,WV PEIA
65	2.3.4.2.3	Run data integrity & quality related reports (based on agreed quality data QA strategy)	10 days	Thu 9/15/22	Wed 9/28/22	LifeWorks,WV PEIA
66	2.4	<b>Subsequent phase planning</b>	<b>68.5 days</b>	<b>Mon 8/1/22</b>	<b>Fri 10/28/22</b>	

WV PEIA HW RFP- Ariel EAS Implementation Work Plan						
ID	WBS	Task Name	Duration	Start	Finish	Resource Group
67	2.4.1	<b>Joint checkpoints on planning</b>	<b>65.5 days</b>	<b>Mon 8/1/22</b>	<b>Wed 10/26/22</b>	
68	2.4.1.1	<b>Checkpoint on phase 2</b>	<b>65.5 days</b>	<b>Mon 8/1/22</b>	<b>Wed 10/26/22</b>	
69	2.4.1.1.1	Updates to phase 2: final scope and timeline	2.5 mons	Mon 8/1/22	Wed 10/5/22	LifeWorks
70	2.4.1.1.2	Checkpoint on phase 2: final scope and timeline	0.25 days	Wed 10/5/22	Wed 10/5/22	LifeWorks, WV PEIA
71	2.4.1.1.3	Final updates to phase 2: final scope and timeline	4 days	Thu 10/20/22	Wed 10/26/22	LifeWorks
72	2.4.2	<b>Go/no go meeting for Phase 4</b>	<b>5 days</b>	<b>Mon 10/10/22</b>	<b>Fri 10/14/22</b>	
73	2.4.2.1	Preparation leading to go/no go meeting	5 days	Mon 10/10/22	Fri 10/14/22	LifeWorks
74	2.4.3	<b>Final functional planning</b>	<b>5 days</b>	<b>Fri 10/21/22</b>	<b>Thu 10/27/22</b>	
75	2.4.3.1	Segment planning & detailed segment 1 planning	5 days	Fri 10/21/22	Thu 10/27/22	LifeWorks
76	2.4.4	<b>Final phase 2 deliverables</b>	<b>0 days</b>	<b>Fri 10/28/22</b>	<b>Fri 10/28/22</b>	
77	2.4.4.1	Final RTM approved	0 days	Fri 10/28/22	Fri 10/28/22	WV PEIA
78	2.4.4.2	Final gap documentation approved, if applicable	0 days	Fri 10/28/22	Fri 10/28/22	WV PEIA
79	2.4.4.3	Final project plan for next phases	0 days	Fri 10/28/22	Fri 10/28/22	LifeWorks
80						
81	3	<b>Phase 3: Acquisition and Installation</b>	<b>414.4 days</b>	<b>Fri 7/1/22</b>	<b>Wed 1/24/24</b>	
82	3.1	<b>Integration workshops</b>	<b>222.75 days</b>	<b>Tue 8/16/22</b>	<b>Fri 6/16/23</b>	
83	3.1.1	<b>Architecture design workshops</b>	<b>26 days</b>	<b>Tue 8/16/22</b>	<b>Mon 9/19/22</b>	
84	3.1.1.1	<b>Workshop #1</b>	<b>5 days</b>	<b>Tue 8/16/22</b>	<b>Mon 8/22/22</b>	
85	3.1.1.1.1	LW preparation for workshop	2 days	Tue 8/16/22	Wed 8/17/22	LifeWorks
86	3.1.1.1.2	Joint workshop	1 day	Wed 8/17/22	Thu 8/18/22	LifeWorks, WV PEIA
87	3.1.1.1.3	Summary and next steps	2 days	Thu 8/18/22	Mon 8/22/22	LifeWorks
88	3.1.1.2	<b>Workshop #2</b>	<b>21 days</b>	<b>Mon 8/22/22</b>	<b>Mon 9/19/22</b>	
89	3.1.1.2.1	LW preparation for workshop	2 wks	Mon 8/22/22	Mon 9/5/22	LifeWorks
90	3.1.1.2.2	Joint workshop	1 day	Mon 9/5/22	Mon 9/5/22	LifeWorks, WV PEIA
91	3.1.1.2.3	Finalize architecture design	2 wks	Tue 9/6/22	Mon 9/19/22	LifeWorks
92	3.1.2	<b>Monthly touchpoints</b>	<b>181.75 days</b>	<b>Fri 10/7/22</b>	<b>Fri 6/16/23</b>	
93	3.1.2.1	Joint discussions and progress review	0.25 days	Fri 10/7/22	Fri 10/7/22	LifeWorks, WV PEIA
94	3.1.2.2	Joint discussions and progress review	0.25 days	Fri 11/4/22	Fri 11/4/22	LifeWorks, WV PEIA
95	3.1.2.3	Joint discussions and progress review	0.25 days	Fri 12/2/22	Fri 12/2/22	LifeWorks, WV PEIA
96	3.1.2.4	Joint discussions and progress review	0.25 days	Fri 1/20/23	Fri 1/20/23	LifeWorks, WV PEIA
97	3.1.2.5	Joint discussions and progress review	0.25 days	Fri 2/17/23	Fri 2/17/23	LifeWorks, WV PEIA
98	3.1.2.6	Joint discussions and progress review	0.25 days	Fri 3/17/23	Fri 3/17/23	LifeWorks, WV PEIA
99	3.1.2.7	Joint discussions and progress review	0.25 days	Fri 4/21/23	Fri 4/21/23	LifeWorks, WV PEIA
100	3.1.2.8	Joint discussions and progress review	0.25 days	Fri 5/19/23	Fri 5/19/23	LifeWorks, WV PEIA
101	3.1.2.9	Joint discussions and progress review	0.25 days	Fri 6/16/23	Fri 6/16/23	LifeWorks, WV PEIA
102	3.2	<b>Environment builds</b>	<b>414.4 days</b>	<b>Fri 7/1/22</b>	<b>Wed 1/24/24</b>	

## WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
103	3.2.1	<b>Development Environment</b>	<b>35 days</b>	<b>Fri 7/1/22</b>	<b>Tue 8/16/22</b>	
104	3.2.1.1	Confirm environment specifications	10 days	Fri 7/1/22	Thu 7/14/22	LifeWorks
105	3.2.1.2	Confirm dataset to be applied	5 days	Thu 7/14/22	Thu 7/21/22	LifeWorks
106	3.2.1.3	Build infrastructure	10 days	Thu 7/21/22	Wed 8/3/22	LifeWorks
107	3.2.1.4	Deploy applicable release	5 days	Wed 8/3/22	Wed 8/10/22	LifeWorks
108	3.2.1.5	Validate environment build	5 days	Wed 8/10/22	Tue 8/16/22	LifeWorks
109	3.2.2	<b>Testing Environment</b>	<b>35 days</b>	<b>Fri 7/1/22</b>	<b>Tue 8/16/22</b>	
110	3.2.2.1	Confirm environment specifications	10 days	Fri 7/1/22	Thu 7/14/22	LifeWorks
111	3.2.2.2	Confirm dataset to be applied	5 days	Thu 7/14/22	Thu 7/21/22	LifeWorks
112	3.2.2.3	Build infrastructure	10 days	Thu 7/21/22	Wed 8/3/22	LifeWorks
113	3.2.2.4	Deploy applicable release	5 days	Wed 8/3/22	Wed 8/10/22	LifeWorks
114	3.2.2.5	Validate environment build	5 days	Wed 8/10/22	Tue 8/16/22	LifeWorks
115	3.2.3	<b>UAT environment</b>	<b>40 days</b>	<b>Thu 10/20/22</b>	<b>Tue 12/13/22</b>	
116	3.2.3.1	Confirm environment specifications	10 days	Thu 10/20/22	Thu 11/3/22	LifeWorks
117	3.2.3.2	Confirm dataset to be applied	5 days	Thu 11/3/22	Wed 11/9/22	LifeWorks
118	3.2.3.3	Build infrastructure	10 days	Wed 11/16/22	Tue 11/29/22	LifeWorks
119	3.2.3.4	Deploy applicable release	5 days	Tue 11/29/22	Tue 12/6/22	LifeWorks
120	3.2.3.5	Validate environment build	5 days	Tue 12/6/22	Tue 12/13/22	LifeWorks
121	3.2.5	<b>Pre-Production Environment</b>	<b>47 days</b>	<b>Mon 8/7/23</b>	<b>Fri 10/6/23</b>	
122	3.2.5.1	Confirm environment specifications	10 days	Mon 8/7/23	Fri 8/18/23	LifeWorks
123	3.2.5.2	Confirm dataset to be applied	5 days	Fri 8/18/23	Fri 8/25/23	LifeWorks
124	3.2.5.3	Build infrastructure	10 days	Mon 9/11/23	Fri 9/22/23	LifeWorks
125	3.2.5.4	Deploy applicable release	5 days	Fri 9/22/23	Fri 9/29/23	LifeWorks
126	3.2.5.5	Validate environment build	5 days	Fri 9/29/23	Fri 10/6/23	LifeWorks
127	3.2.6	<b>Production Environment</b>	<b>40 days</b>	<b>Mon 11/20/23</b>	<b>Wed 1/24/24</b>	
128	3.2.6.6	Confirm environment specifications	10 days	Mon 11/20/23	Fri 12/1/23	LifeWorks
129	3.2.6.7	Confirm dataset to be applied	5 days	Fri 12/1/23	Fri 12/8/23	LifeWorks
130	3.2.6.8	Build infrastructure	10 days	Thu 12/14/23	Thu 1/11/24	LifeWorks
131	3.2.6.9	Deploy applicable release	5 days	Thu 1/11/24	Wed 1/17/24	LifeWorks
132	3.2.6.10	Validate environment build	5 days	Wed 1/17/24	Wed 1/24/24	LifeWorks
133						
134						
135	4	<b>Phase 4: Solution Delivery</b>	<b>340.3 days</b>	<b>Mon 10/31/22</b>	<b>Fri 2/16/24</b>	
136	4.1	Phase 4.1 Start	0 days	Mon 10/31/22	Mon 10/31/22	
137	4.2	<b>Project management</b>	<b>340 days</b>	<b>Mon 10/31/22</b>	<b>Fri 2/16/24</b>	
138	4.2.1	Ongoing management	340 days	Mon 10/31/22	Fri 2/16/24	LifeWorks

## WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
139	4.2.2	Steering Committee meetings (recurring monthly)	340 days	Mon 10/31/22	Fri 2/16/24	LifeWorks,WV PEIA
140	4.3	Segments	340.3 days	Mon 10/31/22	Fri 2/16/24	
141	4.3.1	Segment 1	169.65 days	Mon 10/31/22	Fri 6/23/23	
142	4.3.1.1	Segment 1 start	0 days	Mon 10/31/22	Mon 10/31/22	
143	4.3.1.2	Provide segment 1 content and mapped requirements	0 days	Mon 10/31/22	Mon 10/31/22	
144	4.3.1.3	Interval 1	29.75 days	Mon 10/31/22	Thu 12/8/22	
145	4.3.1.3.1	Planning	1 wk	Mon 10/31/22	Mon 11/7/22	LifeWorks,WV PEIA
146	4.3.1.3.2	Execution	4 wks	Mon 11/7/22	Fri 12/2/22	LifeWorks
147	4.3.1.3.3	Verification/demo	2 days	Tue 12/6/22	Thu 12/8/22	LifeWorks,WV PEIA
148	4.3.1.3.4	LW internal prioritization	2 days	Tue 12/6/22	Thu 12/8/22	LifeWorks
149	4.3.1.3.5	Prioritization & share results	0.25 days	Thu 12/8/22	Thu 12/8/22	LifeWorks,WV PEIA
150	4.3.1.3.6	Milestone: Segment 1 interval 1 verification completed	0 days	Thu 12/8/22	Thu 12/8/22	
151	4.3.1.4	Interval 2	30.25 days	Mon 12/12/22	Thu 2/2/23	
152	4.3.1.4.1	Planning	1 wk	Mon 12/12/22	Mon 12/19/22	LifeWorks,WV PEIA
153	4.3.1.4.2	Execution	4 wks	Mon 12/19/22	Fri 1/27/23	LifeWorks
154	4.3.1.4.3	Verification/demo	2 days	Tue 1/31/23	Thu 2/2/23	LifeWorks,WV PEIA
155	4.3.1.4.4	LW internal prioritization	2 days	Tue 1/31/23	Thu 2/2/23	LifeWorks
156	4.3.1.4.5	Prioritization & share results	0.25 days	Thu 2/2/23	Thu 2/2/23	LifeWorks,WV PEIA
157	4.3.1.4.6	Milestone: Segment 1 interval 2 verification completed	0 days	Thu 2/2/23	Thu 2/2/23	
158	4.3.1.9	Interval 3	29.25 days	Mon 2/6/23	Thu 3/16/23	
159	4.3.1.9.7	Planning	1 wk	Mon 2/6/23	Mon 2/13/23	LifeWorks,WV PEIA
160	4.3.1.9.8	Execution	4 wks	Mon 2/13/23	Fri 3/10/23	LifeWorks
161	4.3.1.9.9	Verification/demo	2 days	Tue 3/14/23	Thu 3/16/23	LifeWorks,WV PEIA
162	4.3.1.9.10	LW internal prioritization	2 days	Tue 3/14/23	Thu 3/16/23	LifeWorks
163	4.3.1.9.11	Prioritization & share results	0.25 days	Thu 3/16/23	Thu 3/16/23	LifeWorks,WV PEIA
164	4.3.1.9.12	Milestone: Segment 1 interval 3 verification completed	0 days	Thu 3/16/23	Thu 3/16/23	
165	4.3.1.5	Interval 4	29.25 days	Mon 3/20/23	Thu 4/27/23	
166	4.3.1.5.1	Planning	1 wk	Mon 3/20/23	Mon 3/27/23	LifeWorks,WV PEIA
167	4.3.1.5.2	Execution	4 wks	Mon 3/27/23	Fri 4/21/23	LifeWorks
168	4.3.1.5.3	Verification/demo	2 days	Tue 4/25/23	Thu 4/27/23	LifeWorks,WV PEIA
169	4.3.1.5.4	LW internal prioritization	2 days	Tue 4/25/23	Thu 4/27/23	LifeWorks
170	4.3.1.5.5	Prioritization & share results	0.25 days	Thu 4/27/23	Thu 4/27/23	LifeWorks,WV PEIA
171	4.3.1.5.6	Milestone: Segment 1 interval 4 verification completed	0 days	Thu 4/27/23	Thu 4/27/23	
172	4.3.1.10	Black out for UAT stabilization/LW regression testing	2 wks	Mon 5/1/23	Fri 5/12/23	LifeWorks
173	4.3.1.7	Data Conversion	155.65 days	Mon 10/31/22	Tue 6/6/23	
174	4.3.1.7.1	Interval 1	11.5 days	Mon 10/31/22	Tue 11/15/22	



## WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
175	4.3.1.7.1.1	WV PEIA to provide CDR, regression results and total controls	0 days	Mon 10/31/22	Mon 10/31/22	WV PEIA
176	4.3.1.7.1.2	The initial data load is validated to identify errors and system rejects (CDR to Target Control Total)	0 days	Thu 11/3/22	Thu 11/3/22	LifeWorks,WV PEIA
177	4.3.1.7.1.3	LW deadline to submit tickets to WV PEIA for next CDR	0 days	Tue 11/15/22	Tue 11/15/22	LifeWorks
178	4.3.1.7.2	<b>Interval 2</b>	<b>17.25 days</b>	<b>Mon 12/5/22</b>	<b>Tue 1/10/23</b>	
179	4.3.1.7.2.1	WV PEIA to provide CDR, regression results and total controls	0 days	Mon 12/5/22	Mon 12/5/22	WV PEIA
180	4.3.1.7.2.2	The initial data load is validated to identify errors and system rejects (CDR to Target Control Total)	0 days	Thu 12/8/22	Thu 12/8/22	LifeWorks,WV PEIA
181	4.3.1.7.2.3	LW deadline to submit tickets to WV PEIA for next CDR	0 days	Tue 1/10/23	Tue 1/10/23	LifeWorks
182	4.3.1.7.3	<b>Interval 3</b>	<b>34.25 days</b>	<b>Mon 1/30/23</b>	<b>Thu 3/16/23</b>	
183	4.3.1.7.3.1	WV PEIA to provide CDR	0 days	Mon 1/30/23	Mon 1/30/23	WV PEIA
184	4.3.1.7.3.2	The initial data load is validated to identify errors and system rejects (CDR to Target Control Total)	0 days	Thu 2/2/23	Thu 2/2/23	LifeWorks,WV PEIA
185	4.3.1.7.3.3	LW deadline to submit tickets to WV PEIA for next CDR	0 days	Thu 3/16/23	Thu 3/16/23	LifeWorks
186	4.3.1.7.4	<b>For UAT Purposes</b>	<b>47.65 days</b>	<b>Wed 4/5/23</b>	<b>Tue 6/6/23</b>	
187	4.3.1.7.4.1	WV PEIA to provide CDR	0 days	Wed 4/5/23	Wed 4/5/23	WV PEIA
188	4.3.1.7.4.2	The initial data load is validated to identify errors and system rejects (CDR to Target Control Total)	0 days	Tue 4/11/23	Tue 4/11/23	LifeWorks,WV PEIA
189	4.3.1.7.4.3	LW deadline to submit tickets to WV PEIA for next CDR	0 days	Tue 6/6/23	Tue 6/6/23	LifeWorks
190	4.3.1.8	<b>UAT preparation &amp; execution</b>	<b>169.65 days</b>	<b>Mon 10/31/22</b>	<b>Fri 6/23/23</b>	
191	4.3.1.8.1	<b>UAT strategy &amp; preparation to UAT execution</b>	<b>14 days</b>	<b>Thu 1/12/23</b>	<b>Tue 1/31/23</b>	
192	4.3.1.8.1.1	Review UAT strategy	5 days	Thu 1/12/23	Wed 1/18/23	LifeWorks,WV PEIA
193	4.3.1.8.1.2	Approve UAT strategy	2 days	Thu 1/19/23	Mon 1/23/23	WV PEIA
194	4.3.1.8.1.3	Review and update UAT test schedule	5 days	Tue 1/24/23	Tue 1/31/23	LifeWorks
195	4.3.1.8.2	<b>UAT test cases</b>	<b>97.5 days</b>	<b>Tue 11/29/22</b>	<b>Thu 4/20/23</b>	
196	4.3.1.8.2.1	Interval 1 - Deliver to WV PEIA	0 days	Tue 11/29/22	Tue 11/29/22	LifeWorks
197	4.3.1.8.2.2	Interval 1 - WV PEIA to approve	2 days	Tue 11/29/22	Thu 12/1/22	WV PEIA
198	4.3.1.8.2.3	Interval 2 - Deliver to WV PEIA	0 days	Wed 1/25/23	Wed 1/25/23	LifeWorks
199	4.3.1.8.2.4	Interval 2 - WV PEIA to approve	2 days	Wed 1/25/23	Fri 1/27/23	WV PEIA
200	4.3.1.8.2.10	Interval 3 - Deliver to WV PEIA	0 days	Tue 3/7/23	Tue 3/7/23	LifeWorks
201	4.3.1.8.2.11	Interval 3 - WV PEIA to approve	2 days	Tue 3/7/23	Thu 3/9/23	WV PEIA
202	4.3.1.8.2.5	Interval 4 - Deliver to WV PEIA	0 days	Tue 4/18/23	Tue 4/18/23	LifeWorks
203	4.3.1.8.2.6	Interval 4 - WV PEIA to approve	2 days	Tue 4/18/23	Thu 4/20/23	WV PEIA
204	4.3.1.8.3	<b>Version stabilization &amp; delivery</b>	<b>135.65 days</b>	<b>Mon 10/31/22</b>	<b>Thu 5/11/23</b>	

## WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
205	4.3.1.8.3.1	<b>Candidate release</b>	<b>30 days</b>	<b>Mon 10/31/22</b>	<b>Thu 12/8/22</b>	
206	4.3.1.8.3.1.1	Identify test package to deploy	0 days	Mon 10/31/22	Mon 10/31/22	LifeWorks
207	4.3.1.8.3.1.2	Identify subset of test scenarios to test deployment	10 days	Mon 10/31/22	Mon 11/14/22	LifeWorks
208	4.3.1.8.3.1.3	Deploy test package	10 days	Fri 11/25/22	Thu 12/8/22	LifeWorks
209	4.3.1.8.3.1.4	Run selected test scenarios & troubleshooting	10 days	Fri 11/25/22	Thu 12/8/22	LifeWorks
210	4.3.1.8.3.2	<b>Official release</b>	<b>2.65 days</b>	<b>Mon 5/8/23</b>	<b>Thu 5/11/23</b>	
211	4.3.1.8.3.2.1	Full LW deployment in UAT environment	0.15 days	Mon 5/8/23	Mon 5/8/23	LifeWorks
212	4.3.1.8.3.2.2	Contingency for issues	2.5 days	Mon 5/8/23	Thu 5/11/23	LifeWorks
213	4.3.1.8.3.2.3	Deliverable: Deployment packaging completed	0 days	Thu 5/11/23	Thu 5/11/23	LifeWorks
214	4.3.1.8.3.2.4	UAT readiness documentation delivered to WV PEIA	0 days	Thu 5/11/23	Thu 5/11/23	LifeWorks
215	4.3.1.8.4	UAT preparation	5 days	Mon 3/27/23	Mon 4/3/23	LifeWorks
216	4.3.1.8.5	Training	5 days	Mon 5/15/23	Mon 5/22/23	
217	4.3.1.8.5.1	Provide UAT training to WV PEIA testers	5 days	Mon 5/15/23	Mon 5/22/23	LifeWorks, WV PEIA
218	4.3.1.8.5.2	Milestone: Segment 1 training completed	0 days	Mon 5/22/23	Mon 5/22/23	
219	4.3.1.8.6	UAT execution	4 wks	Mon 5/22/23	Fri 6/16/23	WV PEIA
220	4.3.1.8.7	UAT wrap up & defect scheduling	1 wk	Mon 6/19/23	Fri 6/23/23	LifeWorks, WV PEIA
221	4.3.1.8.8	Milestone: Segment 1 UAT completed	0 days	Fri 6/23/23	Fri 6/23/23	
222	4.3.1.8.9	Sign off on configuration documents after UAT	0 days	Fri 6/23/23	Fri 6/23/23	WV PEIA
223	4.3.1.8.10	UAT closure report provided	0 days	Fri 6/23/23	Fri 6/23/23	LifeWorks
224	4.3.1.8.11	<b>Transition</b>	<b>5 days</b>	<b>Thu 1/12/23</b>	<b>Wed 1/18/23</b>	
225	4.3.1.8.11.1	Review training strategy	5 days	Thu 1/12/23	Wed 1/18/23	LifeWorks, WV PEIA
226	4.3.2	<b>Segment 2</b>	<b>169.65 days</b>	<b>Mon 6/26/23</b>	<b>Fri 2/16/24</b>	
227	4.3.2.1	Segment 2 start	0 days	Mon 6/26/23	Mon 6/26/23	
228	4.3.2.2	Provide segment 2 content and mapped requirements	5 days	Mon 6/26/23	Mon 7/3/23	
229	4.3.2.3	<b>Interval 1</b>	<b>29.25 days</b>	<b>Mon 6/26/23</b>	<b>Thu 8/3/23</b>	
230	4.3.2.3.1	Planning	1 wk	Mon 6/26/23	Mon 7/3/23	LifeWorks, WV PEIA
231	4.3.2.3.2	Execution	4 wks	Mon 7/3/23	Fri 7/28/23	LifeWorks
232	4.3.2.3.3	Verification/demo	2 days	Tue 8/1/23	Thu 8/3/23	LifeWorks, WV PEIA
233	4.3.2.3.4	LW internal prioritization	2 days	Tue 8/1/23	Thu 8/3/23	LifeWorks
234	4.3.2.3.5	Prioritization & share results	0.25 days	Thu 8/3/23	Thu 8/3/23	LifeWorks, WV PEIA
235	4.3.2.3.6	Milestone: Segment 2 interval 1 verification completed	0 days	Thu 8/3/23	Thu 8/3/23	
236	4.3.2.4	<b>Interval 2</b>	<b>29.25 days</b>	<b>Mon 8/7/23</b>	<b>Thu 9/14/23</b>	
237	4.3.2.4.1	Planning	1 wk	Mon 8/7/23	Mon 8/14/23	LifeWorks, WV PEIA
238	4.3.2.4.2	Execution	4 wks	Mon 8/14/23	Fri 9/8/23	LifeWorks
239	4.3.2.4.3	Verification/demo	2 days	Tue 9/12/23	Thu 9/14/23	LifeWorks, WV PEIA
240	4.3.2.4.4	LW internal prioritization	2 days	Tue 9/12/23	Thu 9/14/23	LifeWorks

## WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
241	4.3.2.4.5	Prioritization & share results	0.25 days	Thu 9/14/23	Thu 9/14/23	LifeWorks,WV PEIA
242	4.3.2.4.6	Milestone: Segment 2 interval 2 verification completed	0 days	Thu 9/14/23	Thu 9/14/23	
243	4.3.2.10	<b>Interval 3</b>	<b>29.25 days</b>	<b>Mon 9/18/23</b>	<b>Thu 10/26/23</b>	
244	4.3.2.10.7	Planning	1 wk	Mon 9/18/23	Mon 9/25/23	LifeWorks,WV PEIA
245	4.3.2.10.8	Execution	4 wks	Mon 9/25/23	Fri 10/20/23	LifeWorks
246	4.3.2.10.9	Verification/demo	2 days	Tue 10/24/23	Thu 10/26/23	LifeWorks,WV PEIA
247	4.3.2.10.10	LW internal prioritization	2 days	Tue 10/24/23	Thu 10/26/23	LifeWorks
248	4.3.2.10.11	Prioritization & share results	0.25 days	Thu 10/26/23	Thu 10/26/23	LifeWorks,WV PEIA
249	4.3.2.10.12	Milestone: Segment 2 interval 3 verification completed	0 days	Thu 10/26/23	Thu 10/26/23	
250	4.3.2.5	<b>Interval 4</b>	<b>31 days</b>	<b>Mon 10/30/23</b>	<b>Fri 12/8/23</b>	
251	4.3.2.5.1	Planning	1 wk	Mon 10/30/23	Mon 11/6/23	LifeWorks,WV PEIA
252	4.3.2.5.2	Execution	4 wks	Mon 11/6/23	Fri 12/1/23	LifeWorks
253	4.3.2.5.3	Verification/demo	2 days	Tue 12/5/23	Thu 12/7/23	LifeWorks,WV PEIA
254	4.3.2.5.4	LW Internal prioritization	2 days	Tue 12/5/23	Thu 12/7/23	LifeWorks
255	4.3.2.5.5	Prioritization & share results	2 days	Thu 12/7/23	Fri 12/8/23	LifeWorks,WV PEIA
256	4.3.2.5.6	Milestone: Segment 2 Interval 4 verification completed	0 days	Thu 12/7/23	Thu 12/7/23	
257	4.3.2.11	Black out for UAT stabilization/LW regression testing	9 days	Mon 12/11/23	Fri 12/22/23	LifeWorks
258	4.3.2.7	<b>Data Conversion</b>	<b>113 days</b>	<b>Mon 6/26/23</b>	<b>Tue 11/21/23</b>	
259	4.3.2.7.1	<b>Interval 5</b>	<b>11 days</b>	<b>Mon 6/26/23</b>	<b>Tue 7/11/23</b>	
260	4.3.2.7.1.1	WV PEIA to provide CDR, regression results and total controls	0 days	Mon 6/26/23	Mon 6/26/23	WV PEIA
261	4.3.2.7.1.2	The initial data load is validated to identify errors and system rejects (CDR to Target Control Total)	0 days	Thu 6/29/23	Thu 6/29/23	LifeWorks,WV PEIA
262	4.3.2.7.1.3	LW deadline to submit tickets to WV PEIA for next CDR	0 days	Tue 7/11/23	Tue 7/11/23	LifeWorks
263	4.3.2.7.2	<b>Interval 6</b>	<b>17 days</b>	<b>Mon 7/31/23</b>	<b>Tue 8/22/23</b>	
264	4.3.2.7.2.1	WV PEIA to provide CDR, regression results and total controls	0 days	Mon 7/31/23	Mon 7/31/23	WV PEIA
265	4.3.2.7.2.2	The initial data load is validated to identify errors and system rejects (CDR to Target Control Total)	0 days	Wed 8/2/23	Wed 8/2/23	LifeWorks,WV PEIA
266	4.3.2.7.2.3	LW deadline to submit tickets to WV PEIA for next CDR	0 days	Tue 8/22/23	Tue 8/22/23	LifeWorks
267	4.3.2.7.3	<b>Interval 7</b>	<b>35 days</b>	<b>Mon 9/11/23</b>	<b>Thu 10/26/23</b>	
268	4.3.2.7.3.1	WV PEIA to provide CDR	0 days	Mon 9/11/23	Mon 9/11/23	WV PEIA
269	4.3.2.7.3.2	The initial data load is validated to identify errors and system rejects (CDR to Target Control Total)	0 days	Wed 9/13/23	Wed 9/13/23	LifeWorks,WV PEIA
270	4.3.2.7.3.3	LW deadline to submit tickets to WV PEIA for next CDR	0 days	Thu 10/26/23	Thu 10/26/23	LifeWorks
271	4.3.2.7.4	<b>For UAT Purposes</b>	<b>5 days</b>	<b>Wed 11/15/23</b>	<b>Tue 11/21/23</b>	

## WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
272	4.3.2.7.4.1	WV PEIA to provide CDR	0 days	Wed 11/15/23	Wed 11/15/23	WV PEIA
273	4.3.2.7.4.2	The initial data load is validated to identify errors and system rejects (CDR to Target Control Total)	0 days	Tue 11/21/23	Tue 11/21/23	LifeWorks, WV PEIA
274	4.3.2.8	<b>UAT preparation &amp; execution</b>	<b>169.65 days</b>	<b>Mon 6/26/23</b>	<b>Fri 2/16/24</b>	<b>LifeWorks</b>
275	4.3.2.8.1	<b>UAT strategy &amp; preparation to UAT execution</b>	<b>14 days</b>	<b>Thu 8/24/23</b>	<b>Tue 9/12/23</b>	
276	4.3.2.8.1.1	Review UAT strategy	5 days	Thu 8/24/23	Wed 8/30/23	LifeWorks, WV PEIA
277	4.3.2.8.1.2	Approve UAT strategy	2 days	Thu 8/31/23	Mon 9/4/23	WV PEIA
278	4.3.2.8.1.3	Review and update UAT test schedule	5 days	Tue 9/5/23	Tue 9/12/23	LifeWorks
279	4.3.2.8.2	<b>UAT test cases</b>	<b>98 days</b>	<b>Tue 7/25/23</b>	<b>Thu 11/30/23</b>	
280	4.3.2.8.2.1	Interval 1 - Deliver to WV PEIA	0 days	Tue 7/25/23	Tue 7/25/23	LifeWorks
281	4.3.2.8.2.2	Interval 1 - WV PEIA to approve	2 days	Tue 7/25/23	Thu 7/27/23	WV PEIA
282	4.3.2.8.2.3	Interval 2 - Deliver to WV PEIA	0 days	Tue 9/5/23	Tue 9/5/23	LifeWorks
283	4.3.2.8.2.4	Interval 2 - WV PEIA to approve	2 days	Tue 9/5/23	Thu 9/7/23	WV PEIA
284	4.3.2.8.2.10	Interval 3 - Deliver to WV PEIA	0 days	Tue 10/17/23	Tue 10/17/23	LifeWorks
285	4.3.2.8.2.11	Interval 3 - WV PEIA to approve	2 days	Tue 10/17/23	Thu 10/19/23	WV PEIA
286	4.3.2.8.2.5	Interval 4 - Deliver to WV PEIA	0 days	Tue 11/28/23	Tue 11/28/23	LifeWorks
287	4.3.2.8.2.6	Interval 4 - WV PEIA to approve	2 days	Tue 11/28/23	Thu 11/30/23	WV PEIA
288	4.3.2.8.3	<b>Version stabilization &amp; delivery</b>	<b>135.65 days</b>	<b>Mon 6/26/23</b>	<b>Wed 12/20/23</b>	
289	4.3.2.8.3.1	<b>Candidate release</b>	<b>30 days</b>	<b>Mon 6/26/23</b>	<b>Thu 8/3/23</b>	
290	4.3.2.8.3.1.1	Identify test package to deploy	0 days	Mon 6/26/23	Mon 6/26/23	LifeWorks
291	4.3.2.8.3.1.2	Identify subset of test scenarios to test deployment	10 days	Mon 6/26/23	Mon 7/10/23	LifeWorks
292	4.3.2.8.3.1.3	Deploy test package	10 days	Fri 7/21/23	Thu 8/3/23	LifeWorks
293	4.3.2.8.3.1.4	Run selected test scenarios & troubleshooting	10 days	Fri 7/21/23	Thu 8/3/23	LifeWorks
294	4.3.2.8.3.2	<b>Official release</b>	<b>2.65 days</b>	<b>Mon 12/18/23</b>	<b>Wed 12/20/23</b>	
295	4.3.2.8.3.2.1	Full LW deployment in UAT environment	0.15 days	Mon 12/18/23	Mon 12/18/23	LifeWorks
296	4.3.2.8.3.2.2	Contingency for issues	2.5 days	Mon 12/18/23	Wed 12/20/23	LifeWorks
297	4.3.2.8.3.2.3	Deliverable: Deployment packaging completed	0 days	Wed 12/20/23	Wed 12/20/23	LifeWorks
298	4.3.2.8.3.2.4	UAT readiness documentation delivered to WV PEIA	0 days	Wed 12/20/23	Wed 12/20/23	LifeWorks
299	4.3.2.8.4	<b>UAT preparation</b>	<b>5 days</b>	<b>Mon 11/6/23</b>	<b>Mon 11/13/23</b>	<b>LifeWorks</b>
300	4.3.2.8.5	<b>Training</b>	<b>5 days</b>	<b>Mon 1/8/24</b>	<b>Mon 1/15/24</b>	
301	4.3.2.8.5.1	Provide UAT training to WV PEIA testers	5 days	Mon 1/8/24	Mon 1/15/24	LifeWorks, WV PEIA
302	4.3.2.8.5.2	Milestone: Segment 2 training completed	0 days	Mon 1/15/24	Mon 1/15/24	
303	4.3.2.8.6	<b>UAT execution</b>	<b>4 wks</b>	<b>Mon 1/15/24</b>	<b>Fri 2/9/24</b>	<b>WV PEIA</b>
304	4.3.2.8.7	UAT wrap up & defect scheduling	1 wk	Mon 2/12/24	Fri 2/16/24	LifeWorks, WV PEIA
305	4.3.2.8.8	Milestone: Segment 2 UAT completed	0 days	Fri 2/16/24	Fri 2/16/24	
306	4.3.2.8.9	Sign off on configuration documents after UAT	0 days	Fri 2/16/24	Fri 2/16/24	WV PEIA



## WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
307	4.3.2.8.10	UAT closure report provided	0 days	Fri 2/16/24	Fri 2/16/24	LifeWorks
308	4.3.2.9	<b>System testing (performance and load testing)</b>	105 days	Mon 6/26/23	Fri 11/10/23	LifeWorks
309	4.3.2.9.1	Determine environment requirements	30 days	Mon 6/26/23	Thu 8/3/23	LifeWorks
310	4.3.2.9.2	Identify test scenarios, test cases & acceptance criteria	10 days	Thu 8/3/23	Thu 8/17/23	LifeWorks
311	4.3.2.9.3	Prepare test execution	30 days	Thu 8/17/23	Tue 9/26/23	LifeWorks
312	4.3.2.9.4	LW to execute performance testing	30 days	Tue 10/3/23	Fri 11/10/23	LifeWorks
313	4.3.2.9.5	Analyze results & identify any corrective action required	30 days	Tue 10/3/23	Fri 11/10/23	LifeWorks
314	4.3.2.9.6	Milestone: System testing (LW) completed	0 days	Fri 11/10/23	Fri 11/10/23	LifeWorks
315	4.3.3	<b>Transition</b>	190 days	Mon 4/24/23	Thu 1/11/24	LifeWorks
316	4.3.3.1	<b>Transition</b>	70 days	Thu 8/17/23	Thu 11/16/23	LifeWorks
317	4.3.3.1.1	Review training strategy	10 days	Thu 8/17/23	Wed 8/30/23	LifeWorks, WV PEIA
318	4.3.3.1.2	Transition - LW Support to WV PEIA	60 days	Wed 8/30/23	Thu 11/16/23	LifeWorks, WV PEIA
319	4.3.3.2	<b>Transition preparation topics</b>	100 days	Fri 8/18/23	Thu 1/11/24	LifeWorks
320	4.3.3.2.1	High level system cutover (environment deployment, data conversion and validation)	40 days	Fri 8/18/23	Tue 10/10/23	LifeWorks
321	4.3.3.2.2	LW to prepare draft transition documents (cutover plan, system cutover, business cutover, detailed cutover plan)	40 days	Fri 8/18/23	Tue 10/10/23	LifeWorks
322	4.3.3.2.3	Joint workshop to review draft transition documents	1 mon	Wed 10/11/23	Mon 11/6/23	LifeWorks, WV PEIA
323	4.3.3.2.4	LW and WV PEIA to complete transition documents	40 days	Mon 11/6/23	Thu 1/11/24	LifeWorks, WV PEIA
324	4.3.3.3	<b>Operational support</b>	185 days	Mon 4/24/23	Thu 12/21/23	LifeWorks
325	4.3.3.3.1	LW to prepare draft transition documents (support section)	1.5 mons	Mon 4/24/23	Thu 6/1/23	LifeWorks
326	4.3.3.3.2	Joint workshop to review draft transition documents (support section)	3 wks	Wed 6/28/23	Tue 7/18/23	LifeWorks, WV PEIA
327	4.3.3.3.3	LW and WV PEIA to complete transition documents (support section)	1.5 mons	Tue 7/18/23	Fri 8/25/23	LifeWorks, WV PEIA
328	4.3.3.3.4	LW and WV PEIA - set up support model	4.5 mons	Fri 8/25/23	Thu 12/21/23	LifeWorks, WV PEIA
329	4.3.3.4	<b>Maintenance</b>	100 days	Thu 5/18/23	Wed 9/27/23	LifeWorks
330	4.3.3.4.1	LW to prepare draft transition documents (maintenance section)	5 mons	Thu 5/18/23	Wed 9/27/23	LifeWorks
331	4.3.3.4.2	Joint workshop to review draft transition documents (maintenance section)	3 wks	Tue 7/11/23	Mon 7/31/23	LifeWorks, WV PEIA
332	4.3.3.4.3	LW and WV PEIA to complete transition documents (maintenance section)	1.5 mons	Mon 7/31/23	Thu 9/7/23	LifeWorks, WV PEIA
333						
334	5	<b>Phase 5: Production Implementation</b>	373 days	Wed 11/1/23	Tue 3/18/25	

## WV PEIA HW RFP- Ariel EAS Implementation Work Plan

ID	WBS	Task Name	Duration	Start	Finish	Resource Group
335	5.1	<b>Transition execution</b>	<b>89 days</b>	<b>Wed 11/1/23</b>	<b>Mon 3/11/24</b>	
336	5.1.1	<b>Training</b>	<b>25 days</b>	<b>Wed 2/7/24</b>	<b>Mon 3/11/24</b>	
337	5.1.1.1	LW to deliver end user training	5 wks	Wed 2/7/24	Mon 3/11/24	LifeWorks, WV PEIA
338	5.1.1.2	WV PEIA to deliver trainings to employers	5 wks	Wed 2/7/24	Mon 3/11/24	WV PEIA
339	5.1.1.3	All training delivered	0 days	Mon 3/11/24	Mon 3/11/24	
340	5.1.2	<b>Go/no go meetings</b>	<b>88 days</b>	<b>Wed 11/1/23</b>	<b>Fri 3/8/24</b>	
341	5.1.2.1	Prepare status report and acceptance criteria	1.5 mons	Wed 11/1/23	Mon 12/11/23	LifeWorks
342	5.1.2.2	Milestone: 90 day go/no go meeting	0 days	Fri 12/15/23	Fri 12/15/23	LifeWorks, WV PEIA
343	5.1.2.3	Milestone: 60 day go/no go meeting	0 days	Fri 1/26/24	Fri 1/26/24	LifeWorks, WV PEIA
344	5.1.2.4	Milestone: 30 day go/no go meeting	0 days	Fri 2/16/24	Fri 2/16/24	LifeWorks, WV PEIA
345	5.1.2.5	Milestone: Final go/no go meeting	0 days	Fri 3/8/24	Fri 3/8/24	LifeWorks, WV PEIA
346	5.2	<b>Production version stabilization &amp; delivery</b>	<b>54 days</b>	<b>Thu 12/21/23</b>	<b>Thu 3/14/24</b>	
347	5.2.1	<b>Candidate release</b>	<b>13 days</b>	<b>Thu 12/21/23</b>	<b>Mon 1/22/24</b>	
348	5.2.1.1	Identify test package to deploy	1 day	Thu 12/21/23	Thu 12/21/23	LifeWorks
349	5.2.1.2	Identify subset of test scenarios to test deployment	2 days	Thu 12/21/23	Mon 1/8/24	LifeWorks
350	5.2.1.3	Deploy test package	4 days	Mon 1/8/24	Fri 1/12/24	LifeWorks
351	5.2.1.4	Run selected test scenarios and troubleshooting	10 days	Mon 1/8/24	Mon 1/22/24	LifeWorks
352	5.2.2	<b>Official release</b>	<b>19 days</b>	<b>Mon 2/19/24</b>	<b>Thu 3/14/24</b>	
353	5.2.2.1	Full LW deployment	1 day	Mon 2/19/24	Tue 2/20/24	LifeWorks
354	5.2.2.2	LW business and regression testing	10 days	Wed 2/21/24	Wed 3/6/24	LifeWorks
355	5.2.2.3	Buffer for issues	5 days	Wed 3/6/24	Tue 3/12/24	LifeWorks
356	5.2.2.4	Deliverable: Deployment packaging completed	1 day	Tue 3/12/24	Wed 3/13/24	LifeWorks
357	5.2.2.5	Milestone: Final deployment	0 days	Thu 3/14/24	Thu 3/14/24	
358						
359	5.3	<b>Milestone: Go-live</b>	<b>0 days</b>	<b>Mon 3/18/24</b>	<b>Mon 3/18/24</b>	
360						
361	5.4	<b>Post implementation</b>	<b>279 days</b>	<b>Mon 3/18/24</b>	<b>Tue 3/18/25</b>	
362	5.4.1	<b>Post implementation support</b>	<b>279 days</b>	<b>Mon 3/18/24</b>	<b>Tue 3/18/25</b>	
363	5.4.1.1	Warranty period (12 months)	279 days	Mon 3/18/24	Tue 3/18/25	LifeWorks



115 Perimeter Center Place NE, Suite 1050,  
Atlanta, GA 30346

Melissa Pettrey  
Senior Buyer  
State of West Virginia  
Department of Administration  
Purchasing Division  
2019 Washington Street  
East Charleston, WV 25305

**Re: State of West Virginia Centralized Request for Proposals Info Technology –  
Solicitation No CRFP 0225 PEI2200000001**

To Whom it May Concern:

As a director and the corporate secretary of LifeWorks (US) Ltd., I hereby certify that LifeWorks (US) Ltd. has not been in bankruptcy and/or receivership within the last five (5) calendar years.

Sincerely,

A handwritten signature in cursive script that reads 'S. Marsh'.

Susan Marsh

Director & Corporate Secretary



Department of Administration  
Purchasing Division  
2019 Washington Street East  
Post Office Box 50130  
Charleston, WV 25305-0130

State of West Virginia  
Centralized Request for Proposals  
Info Technology

Proc Folder: 966930

Doc Description: Addendum No. 3  
BENEFITS ADMINISTRATION SYSTEM

Reason for Modification:

Addendum No. 3

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2022-04-19	2022-05-25 13:30	CRFP 0225 PEI2200000001	4

**BID RECEIVING LOCATION**

BID CLERK  
DEPARTMENT OF ADMINISTRATION  
PURCHASING DIVISION  
2019 WASHINGTON ST E  
CHARLESTON WV 25305  
US

**VENDOR**

Vendor Customer Code:

Vendor Name :

Address :

Street :

City :

State :

Country :

Zip :

Principal Contact :

Vendor Contact Phone:

Extension:

**FOR INFORMATION CONTACT THE BUYER**

Melissa Pettrey  
(304) 558-0094  
melissa.k.pettrey@wv.gov

Vendor  
Signature X

FEIN#

DATE

All offers subject to all terms and conditions contained in this solicitation



**SOLICITATION NUMBER: PEI2200000001**  
**Addendum Number: 3**

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The purpose of this addendum is to modify the solicitation identified as ("Solicitation") to reflect the change(s) identified and described below.

**Applicable Addendum Category:**

- ☐ Modify bid opening date and time
- ☐ Modify specifications of product or service being sought
- ☒ Attachment of vendor questions and responses
- ☐ Attachment of pre-bid sign-in sheet
- ☐ Correction of error
- ☐ Other

**Description of Modification to Solicitation:**

- 1. To publish Vendor questions and Agency responses.**
- 2. The bid opening date and time remain 05/25/2022 @ 1:30 PM**

**No other changes.**

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

**Terms and Conditions:**

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

1. **“Appendix 1 – Functional Requirements”** on the tab **“Requirements”** in column E **“Links”** have pre-populated items for the vendor to select from. Do you mind double checking if this is accurate and is PEIA’s intention for this response? The pre-populated answer options do not seem to correlate directly to the question. As a vendor, we are uncertain how to best answer using these pre-populated items. Is there any clarity you can offer?

Column E is part of the information for vendors in the system, not a column for vendors to provide an answer. This column provides links, where relevant, where vendors may find additional information relating to that specific functional requirement. Vendors should use a separate column for their own response indicating whether they offer that functional requirement in their proposed solution (**“Included”** or blank).

2. We are gathering information to submit our list clarifying questions for **Benefits Administration System RFP – Solicitation NO CRFP 0225 PEI2200000001**

There is one initial item of clarification that I hope you can help us with.

Document **CRFQPEI22-01** states the following for submittal requirements:

6. BID SUBMISSION: All bids must be submitted electronically through wvOASIS or signed and delivered by the Vendor to the Purchasing Division at the address listed below on or before the date and time of the bid opening. Any bid received by the Purchasing Division staff is considered to be in possession of the Purchasing Division and will not be returned for any reason. The Purchasing Division will not accept bids, modification of bids, or addendum acknowledgement forms via e-mail. Acceptable delivery methods include electronic submission via wvOASIS, hand delivery, delivery by courier, or facsimile.

However, under the solicitation instructions tab the message states that online submissions are prohibited.

#### Additional Instructions

Request for Proposal The West Virginia Department of Administration, Purchasing Division (hereinafter referred to as the “Purchasing Division”) is issuing this solicitation as a request for proposal (“RFP”), as authorized by W. Va. Code 5A-3-10b, for the West Virginia Public Employees Insurance Agency (hereinafter referred to as the “Agency” or “PEIA”) to provide a fully integrated vendor hosted benefits administration system for health and insurance benefits per the bid requirements, specifications, terms and conditions as attached hereto. **\*\*ONLINE SUBMISSIONS ARE PROHIBITED\*\***.

Can you confirm your requirement for submittal of our proposal?

The continuation of Section 6 states:

*The Purchasing Division may prohibit the submission of bids electronically through wvOASIS at its sole discretion. Such a prohibition will be contained and communicated in the wvOASIS system resulting in the Vendor's inability to submit bids through wvOASIS. Submission of a response to a Request for Proposal is not permitted in wvOASIS.*

*For Request for Proposal ("RFP") Responses Only: In the event that Vendor is responding to a request for proposal, the Vendor shall submit one original technical and one original cost proposal prior to the bid opening date and time identified in Section 7 below, plus convenience copies of each to the Purchasing Division at the address shown above. Additionally, the Vendor should clearly identify and segregate the cost proposal from the technical proposal in a separately*

*Acceptable delivery methods include ~~electronic submission via wvOASIS~~, hand delivery, or delivery by courier. ~~or facsimile~~. Electronic proposals must be on a physical digital media (CD's, flash drives, etc.).*

Per Section 5.3.5

*In addition to the hard copies, vendors are also required to submit electronic copies of their Technical Proposal. Electronic responses must be sent using digital media (CD, flash drive, etc) along with the hard copies to the same address provided for the hard copy submission. Vendors are required to submit two copies of the electronic submission (two CDs or two flash drives, etc.). All electronic Proposal files must be in Microsoft Word/Microsoft Excel, and/or Adobe Acrobat 9.0 (or above) format. All files should have the same pagination as Vendor's original hard copy Proposal. The State prefers that electronic media be provided with the vendors technical proposal but may request it prior to conducting the technical evaluation if it is found missing. Any conflict between the hard copy and the electronic media will be resolved in favor of the hard copy.*

Bids submissions for an RFP are not permitted through the wvOASIS portal.  
Electronic proposals must be on physical digital media (CD's, flash drives, etc.).

3. Can offshore/global resources be utilized for back-office/technical services (i.e., excluding participant interactions) as long as all data physically resides in the U.S.?

No, offshore/global resources cannot be utilized. By law, all data for PEIA must stay within the contiguous 48 states, and the potential for a breach when any offshore/global resources are connected to the production environment for testing or updating, while minimal, still exists.

4. How many agencies do you have?

There is one Agency, "West Virginia Public Employees Insurance Agency", seeking to procure goods or services under this Solicitation/Contract. The benefits offered by the West Virginia Public Employees Insurance Agency are made available to the employees, retirees

**and their survivors and/or dependents of various state related agencies and local governments' (known as "employers" or "participating agencies").**

5. If possible can you breakdown the number of agencies between state agencies and non-state agencies?

**As of June 2021, PEIA provided coverage to 120 State agencies, 55 county boards of education, 631 local government entities, and 22 college and university entities.**

6. Will you allow all retirees to have a 1/1 plan year and actives/inactive employees to have a 7/1 plan year?

**As noted in the provided Active and Medicare Summary Plan Descriptions, retirees who are not Medicare eligible are covered under plans with a July 1 - June 30 plan year. Retirees who are Medicare eligible are covered under plans with a January 1 - December 31 plan year.**

7. How many different HRIS files will you be sending to Alight?

**Please refer to the Interfaces tab in Appendix 1. Rows listed with "PEIA" in the "To" column are accepted by the current PEIA benefit administration system and are expected to be accepted by the new benefit administration system. The Interfaces tab in Appendix 1 was recreated at a "point in time" and should not be considered an absolute list.**

8. How frequently will you send the HRIS file?

**Please refer to the Interfaces tab in Appendix 1. Rows listed with "PEIA" in the "To" column are accepted by the current PEIA benefit administration system and are expected to be accepted by the new benefit administration system. The "Occurrence" column contains the frequency.**

9. Number of HRIS systems and the current provider?

**The current benefit administration system was developed and is maintained by PEIA.**

10. How many payroll files back to PEIA will there be?

**One of the goals of the new benefit administration system is to allow the import of any employers' payroll and demographic files. See the RFP, 4.2.1.1. System Goals. PEIA does not have an estimate for how many files this may be.**

11. How many different pay schedules do you have? (e.g. weekly, bi-weekly, monthly, paying for 12 months of benefits via 7 months of payroll)

**All invoices are generated for a monthly period. State of West Virginia payroll integrations take place bi-weekly, and any other payments are initiated manually. One of the goals of the new benefit administration system is to allow the import of any employers' payroll files if they choose to use this feature. PEIA does not have an estimate for how many different**



pay schedules this could be. However, PEIA doesn't anticipate accommodating multiple layouts. PEIA would attempt to implement a single layout for all employers to use if they choose to utilize this feature.

12. Number of:

- a. benefits-eligible active employees vs. number of enrolled

**PEIA does not maintain information on eligible participants who are not enrolled. Employers are responsible for being familiar with PEIA eligibility requirements and signing employees up appropriately.**

- b. benefits-eligible part-time employees vs. number of enrolled

**PEIA does not maintain information on eligible participants who are not enrolled. Employers are responsible for being familiar with PEIA eligibility requirements and signing employees up appropriately.**

- c. direct billed unpaid participants (ex. unpaid leave, LTD, and retirees) and current administrator

**PEIA has approximately 6,800 direct pay retirees. Active employees are never direct billed.**

- d. COBRA enrollees

**Typically, between 200-250 members per month, but it may be lower or higher on atypical months. PEIA does not administer the COBRA benefits; these members are managed by our third-party administrator. However, PEIA does maintain the COBRA enrollment information in the eligibility system.**

13. Number of participants with the following reimbursement accounts:

- a. HCFSA

**PEIA does not track FSA/HSA accounts. These are managed through our flexible benefits administrator, which is not being replaced with this contract.**

- b. DCFSA

**PEIA does not track FSA/HSA accounts. These are managed through our flexible benefits administrator, which is not being replaced with this contract.**

- c. HSA

**PEIA does not track FSA/HSA accounts. These are managed through our flexible benefits administrator, which is not being replaced with this contract.**

14. Does PEIA use the look-back safe harbor hours measurement for any population to determine full-time eligibility?

**No, the look-back safe harbor hours measurement is not used for any population to determine full-time eligibility.**

15. Number of EINs?

**PEIA provides 1095B forms for all members who are not paid through wvOASIS payroll. This includes 631 non-state agencies, 55 county boards of education, and 2 colleges, for a total of 688 FEIN's.**

16. Number of 1095s generated in 2021?

**59,924 1095B's were generated in 2021**

17. Number of pre-65 retirees who are benefits eligible (either enrolled in one or more retiree plans currently or have a right to come back into the plan)?

**There are approximately 6,500-7,000 non-Medicare retirees enrolled in medical coverage. This number has not fluctuated significantly and there is no expectation of a large increase. PEIA does not maintain demographic information on individuals who may be eligible but are not enrolled in the plan.**

18. Number of post-65 retirees who are benefits eligible (either enrolled in one or more retiree plans currently or have a right to come back into the plan)?

**As of June 30, 2021, there were approximately 36,500 post-65 retiree policyholders enrolled in one or more plans. This number has not fluctuated significantly and there is no expectation of a large increase. PEIA does not maintain demographic information on individuals who may be eligible but are not enrolled in the plan.**

19. Do you offer Medicare Part B or D reimbursements? If so, please describe how this is currently calculated and administered?

**No, PEIA does not offer Medicare Part B or D reimbursements.**

20. Are there any retirees who are eligible for just retiree life insurance? If so, can you provide this volume?

**No, any retiree who is eligible to receive benefits through PEIA is eligible for both health insurance and life insurance.**

21. Who is PEIA's current pension provider?

**PEIA's current pension provider is the West Virginia Consolidated Public Retirement Board ("CPRB").**

22. Does/can PEIA send an indicator on the HRIS file to indicate an employee is married to another state employee? (This is in relation to the Family + Employee Spouse rate.)

Yes

23. Number of dependents enrolled in medical coverage?

As of the June 30, 2021 financial audit, PEIA had approximately 102,500 dependents covered by medical or dependent life insurance benefits.

24. How many benefits advisors do you have on staff?

Benefit coordinators are employed through their own employers. There are approximately 1,400 benefit coordinators throughout the participating employers to which PEIA provides coverage.

25. Please provide us with some history of your expected annual audit support needs.

The benefits eligibility system needs to produce all manner of documentation, back to the origin of an account, to support the history of eligibility changes since inception.

26. Is a bid bond or a performance bond required as part of this RFP? (There is a reference to a performance bond on page 22)?

No, there is no bid bond or performance bond required as part of this RFP. The General Terms and Conditions are pro forma, and a bid or performance bond would only be required if one of those two options had been selected.

27. In questions asking confidential and proprietary information such as litigation and references (4.3.1.7 & 4.3.2.2) in which we cannot share, please advise how you would like us to respond.

Per Section 2.21

***YOUR SUBMISSION IS A PUBLIC DOCUMENT: Vendor's entire response to the Solicitation and the resulting Contract are public documents. As public documents, they will be disclosed to the public following the bid/proposal opening or award of the contract, as required by the competitive bidding laws of West Virginia Code §§ 5A-3-1., 5-22-1 et seq., and 5G-1-1 et seq. And the Freedom of Information Act West Virginia Code §§ 29B-1-1 et seq.***

As noted in the Agency and Purchasing Master Terms and Conditions, a vendor's entire response to a solicitation and the resulting contract are public documents that will be disclosed in their entirety without notice. This is true even if the vendor attempts to avoid disclosure by marking the proposal as exempt from disclosure. Two examples include listing the proposal as "confidential" or "proprietary".

Vendor must provide information on all Mandatory Requirements, detailed in section 4.2.2. Qualifications and Experience asked for in 4.3 are not Mandatory Requirements but are scorable items and missing or incomplete items may affect the Vendor's technical score.

28. We plan to submit our form contract with our bid response. The contract is balanced and designed specifically for the nature of the services we intend to provide to State of West Virginia. Will this approach be deemed non-responsive and result in disqualification?

Per Section 3.26

*SUBSEQUENT FORMS: The terms and conditions contained in this Contract shall supersede any and all subsequent terms and conditions which may appear on any form documents submitted by the Vendor to the Agency or Purchasing Division such as price lists, order forms, invoices, sales agreements, or maintenance agreements, and includes internet websites or other electronic documents. Acceptance or use of Vendor's form does not constitute acceptance of the terms and conditions contained thereon.*

Per Section 3.45

*VOID CONTRACT CLAUSES - This Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law.*

Vendors may submit any documents they deem relevant to their proposal, including a proposed form contract. However, there are some contractual terms and conditions that the State cannot or will not accept. If the winning Vendor has submitted their own form contract and the State has agreed to sign, the Vendor may be required to sign additional paperwork which would supersede the contract acknowledging those terms and conditions which are non-negotiable for the State of West Virginia.

29. Regarding submittal, the instructions make reference to Oasis, hard copy, and electronic copy. Please confirm how the bid should be submitted.

See Question 2.

Bids submissions for an RFP are not permitted through the wvOASIS portal. Electronic proposals must be on physical digital media (CD's, flash drives, etc.).

30. What is the earliest delivery your office can accept/sign for? (First AM, before 8 AM)

8:00 AM is the earliest that deliveries can be accepted at our location.

31. Is there any chance to go with cloud-based implementation?

Yes, a cloud-based solution will be considered.



32. As of now you are using lots of applications (Face2Face, MMB WCS, MMB YRE, MS Dynamics GP, Adamero), so can we propose you a single solution which will replace all the above mentioned applications?

**Yes, you may propose a single solution to replace all mentioned applications.**

33. **4.2.1.1 System Goals:**

Importation of employer payroll and demographic files

- a. Where is the data currently located or from which tool we need to import?  
**PEIA currently accepts multiple files with varying data, please see the list of interfaces in the RFP. From WVU, MU, Board of Educations/WV Department of Education, PEIA accepts salary files. PEIA accepts a full payroll deduction file from the State's wvOASIS HRM system.**
- b. Do you want to pull/import the data into proposed PEIA's CRM system?  
**If deemed feasible and necessary, yes. However, the primary purpose of the payroll and demographic files is to allow the employer to import existing data from their system, to accommodate reconciliations between PEIA's billing and the employer's payroll to accommodate premium payment.**

Centralized billing module to maintain current and historical premium rates, invoices, and payment records, calculate premium amounts, generate premium invoices, collect, apply, and reconcile invoice payments, and track open balances

- c. Do you want to manage the billing process with Dynamics Great Plains or want to change to any other module which we will propose? Proposed module single handedly will take care of most of the requirements against integrations.

**Dynamics GP doesn't perform the billing currently; the billing function is performed in BAS. It is then imported into the Dynamics GP ledger system to administer the receivable ledgers. Therefore, PEIA requires a billing system with the vendor's proposed solution.**

Reconciliation of outstanding invoices with incoming payments

- d. What were your previous methods of recording the incoming payments and do you want online reconciliations of the premiums/payment received?

**Payments are received in the following manner:**

**Participating employers currently log into the BAS Web Contribution System to view their insurance billing. They may make modifications to their billing by terminating coverage, changing remittance amounts by coverage and downloading**

the billing into Excel. (It is a relatively interactive and functional invoice/billing management website with flexibility to accommodate different employer types in PEIA.)

Once the employer is ready to make a payment, they create a remittance advice known as the Payment Coupon to submit with their payment. This payment coupon has a number that acts as an integration key that permits a link for the payment, the payment coupon, and the billing information.

Non-State employers may choose to pay with a check or ACH. Upon payment receipt from the WVSTO ACH process or check with matching payment amounts, the system's integration process applies the payment details by policyholder to the invoices to relieve the receivables in Dynamics GP with no manual intervention. If the amounts do not match, a PEIA employee must modify the payment coupon to permit the posting and application of the payment process to occur.

The majority of state agency employer payments are made through a payroll deduction interface file from the wvOASIS HRM system that processes similar payment application integration processes. However, there are some invoices for which the payments cannot be made through payroll deductions. These would be retiree leave conversion coverages that are paid by the employer, employees on a non-paid leave of absence, or administration fees.

For these invoices, the state agency participating employer must pay using a wvOASIS IET (internal payment transaction.) The state agency will perform the same steps as the Non-State employers but will choose to pay with an IET. The payment coupon must then be uploaded into wvOASIS to create the IET, then the employer must return to the BAS web contribution system to upload the IET number to submit the payment coupon. PEIA would like to reduce this multiple step process into a one-step payment process.

Yes, PEIA does want the employer to have the ability to reconcile their billing and payment process online.

e. What were the shortcomings earlier?

1. The multistep IET payment process for State Agencies.
2. If the payment coupon amount and payment don't match it must be manually applied. Would prefer a system that permits the payment to apply with the differences communicated to the participating employer to manage.
3. A more user-friendly payroll file integration process for non-state agencies that wish to upload their files for payment reconciliation purposes.

4. **The BAS employs real-time billing throughout the month. Large employers complain that by the time they finish their billing reconciliation to create a payment coupon, the monthly invoice amount would change. They have requested a billing 'freeze' option to prevent this.**

34. 4.2.1.2. Enrollment Platform

Report changes in employee employment status

- a. Please explain the asked employment status, e.g., Resignation, Termination, etc.  
**Benefit coordinators should be able to use the portal to report employee resignations, terminations, and retirements, etc. Benefit coordinators should also be able to indicate, in the case of a separation, whether the employee qualifies for the three-month post-employment coverage.**

Maintain payment and communication preferences

- b. What mode of communication is required; SMS/E-Mail/Mail any third-party tool?

**It is expected that the selected vendor will be capable of sending communication via current standard technologies (SMS, e-mail, postal mail, etc.). A third-party tool may be used to send/receive communications. However, the third-party tool must adhere to the RFP security requirements and associated costs must be included in the Cost Proposal Workbook.**

35. In comparing the scope of work within the RFP it doesn't coincide with the functional requirements spreadsheet. There are several items within the functional spreadsheet (cash receipts & refunds, etc.). That would apply to more of a financial system versus a benefits administration system. Is PEIA/West Virginia looking for the ben admin system to also service as a financial system? Does that make sense? The scope within the RFP strictly outlines a benefits administration system.

**The RFP contains system goals (4.2.1.1.) regarding billing and payment collection as noted below:**

- **Centralized billing module to maintain current and historical premium rates, invoices, and payment records, calculate premium amounts, generate premium invoices, collect, apply, and reconcile invoice payments, and track open Balances.**
- **Reconciliation of outstanding invoices with incoming payments. PEIA would like the BAS to provide the payment to invoice reconciliation and create transactions that indicate a refund was issued to maintain an employer's accurate account balance. The actual payment of refunds and overall cash receipts accounting can be managed by PEIA's accounting software, Dynamics GP, but one comprehensive premium billing and payment system would be ideal.**

**It is PEIA's intention to implement a system with the fewest necessary internal system integrations. If the proposed solution's billing system has the functionality to also manage the respective receivable accounts, thus reducing the necessary integration with Dynamics GP, it will be considered accordingly.**

36. How would you like the functional requirement spreadsheet completed? Under the link column do you want just a simple yes or no, etc.? Because this is a lengthy document, we are beginning to work on it so we want to ensure we are completing properly?

**In Column F - please state whether your system meets the requirement (Y/N).**

37. What was the previous spent on the contract?

**This is a new project for PEIA, and as such there is no prior contract information to provide.**

38. Who is the current incumbent on this contract and how long have they been serving?

**This is a new project for PEIA, and as such there is no prior contract information to provide.**

39. What is the current budget on the contract?

**We are prohibited from releasing budget or spend information.**

40. Is it multiple award?

**No**

41. What is the anticipated award date?

**The Bid Opening date is extended to May 25, 2022.**

**PEIA does not have an anticipated award date. After the bid closing date, vendors should expect several weeks for PEIA to schedule and hold the demonstrations, evaluate the technical and cost proposals, and for the vendor to work with Purchasing to ensure all proper paperwork and State requirements have been met. After the contract is finalized, PEIA and the selected vendor will discuss the timeline for beginning implementation.**

42. Does the WVDOA intend to stay in Hybrid mode or move entirely to a cloud solution? If Hybrid mode, does the WVDOA have plans for lift-n-Shift of existing applications?

**The decision to stay in Hybrid mode or move entirely to a cloud solution is dependent on the vendor's capabilities. If a hybrid mode is required, an analysis of the current integration points will be required.**

43. What mainframe system does the WVDOA currently use?

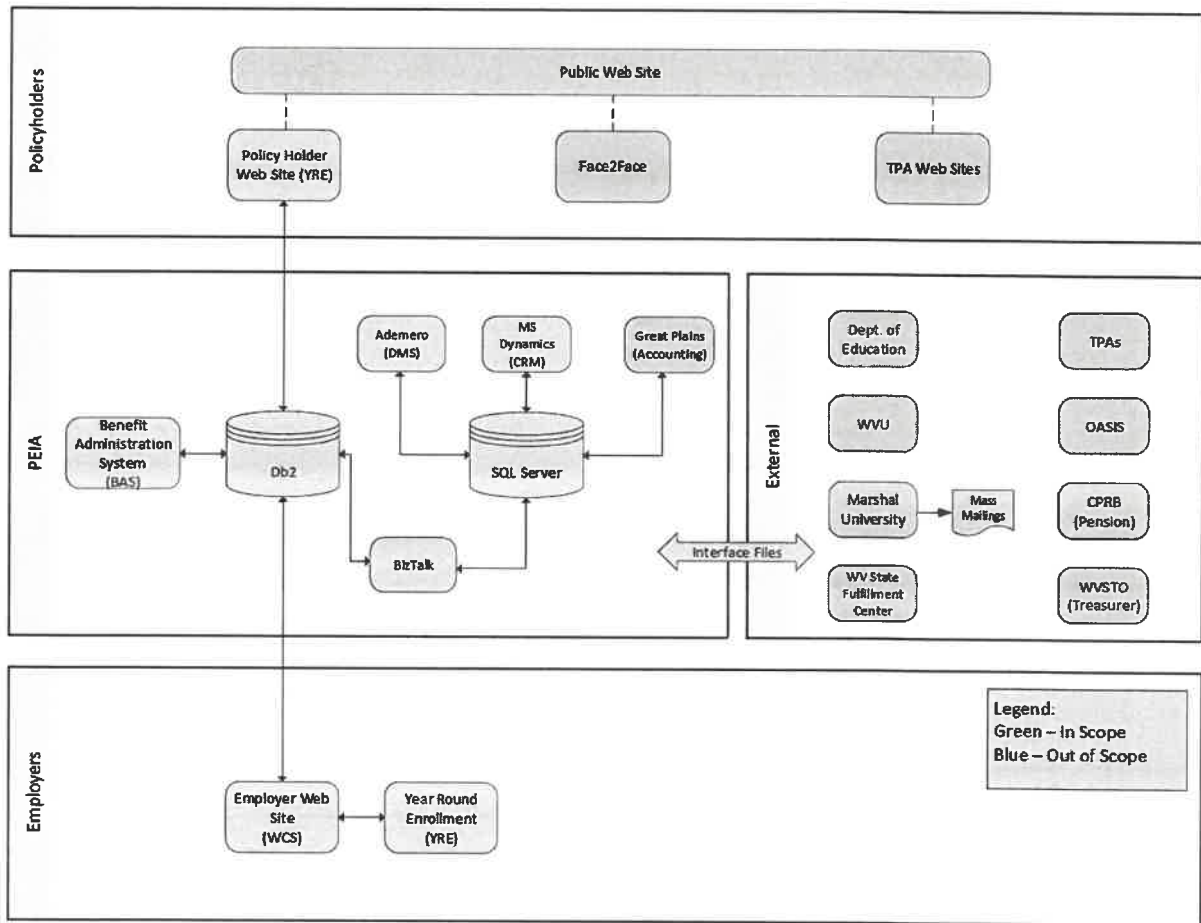
**The Benefit Administration System is written in COBOL & utilizing a Db2 database**

44. Are there any API's available for the current systems in place?  
**No, PEIA does not currently use any custom API's. Biztalk integrations are currently used where needed, however, PEIA doesn't wish to continue use of Biztalk.**
45. Are the development resources required to be US-based or would the WVDOA consider an offshore solution to help achieve cost savings?  
**See Question 3**
46. **RFP Section 4.1** - Can you confirm how many and different types of benefit eligible subscribers (i.e.: active, and post 65 retirees, pre65 retirees) are a part of the PEIA? If pricing is based off of "Per Employee Per Month" what number would you expect the vendors to use?  
**As of June 30, 2021, there were approximately 127,000 benefit eligible subscribers (policyholders), as follows: 84,000 active, 6,500 pre-65 retirees, and 36,500 post-65 retirees.**  
**"Per Employee Per Month" would be defined as the number of policyholders, 127,000 with active coverage in a given month.**
47. **RFP Section 4.1** - Can you confirm if your Mountaineer Flexible Benefits are also included in this Benefit Administration evaluation? OR is the PEIA provided health and life insurance the only benefits in scope for this modernization project? We did see the Mountaineer Flexible Benefit Open Enrollment period listed, but didn't clearly see if this was in scope for the evaluation.  
**No, Mountaineer Flexible Benefits are not administered by PEIA. However, if enrollment of these benefit plans is already included in the solution, PEIA may wish to pursue inclusion of the enrollment aspect.**
48. **RFP Instructions to Vendors Submitting Bids** - Can you confirm the PEIA timeline after 3/29? Is there a period of time you're looking to make the vendor award, and a timeline to start the implementation?  
**See Question 41.**
49. **General** - Does the vendor need to respond that they will provide every functional requirement addressed in Appendix 1 in order to be considered responsive?  
**Vendors need to indicate whether they do or do not provide each functional requirement, but "no" is not a disqualification. These items are calculated into a Vendor's technical score.**
50. **RFP Section 4.1** - How many employers and agencies fall under the scope of the RFP? Can PEIA provide a summary of the size (benefit eligible subscribers) for each?  
**As of June 30, 2021, PEIA provided insurance benefits to 828 different entities (see Question 5). The employers may have as little as 1 policyholder, or as many as 7,500.**



51. **RFP Section 4.2.1.1** - How many employer/agency payroll and demographic file integrations are in scope? Can PEIA provide a breakout of the employers/agencies and their associated payroll and demographic systems (e.g., Great Plains, ADP, etc.)  
There is only one payroll integration, from wvOASIS, bi-weekly. All other entities pay PEIA directly via the BAS Web Contributions System and submit the payment coupon to PEIA with payment via physical check, ACH payment, or the wvOASIS system with an IET document.  
PEIA does not envision accommodation of different system file integrations. It is anticipated that a single file format and layout will be implemented for all employers that choose to upload their payroll data for payment purposes.
52. **Appendix 1 #103 and #104** - How are the sick and/or annual leave balances tracked for extended employer-paid insurance coverage at retirement? What system houses this information?  
PEIA is provided this information by the member's employer at the time of retirement, if applicable. Only the final provided balance is entered into the member's data in BAS as an attribute - no other sick and/or annual leave data is tracked or housed by any PEIA systems.
53. **Appendix 1 #103 and #104** - How are the eligible years of services tracked for extended employer-paid insurance coverage at retirement? What system houses this information? Does PEIA anticipate feeding this data to the new Benefit Administration System for eligibility purposes?  
PEIA is provided this information by the Consolidated Public Retirement Board or the former employer at the time of the member's retirement, if applicable. Only the final provided years of service are entered into the member's data in BAS as an attribute - no other years of service data is tracked or housed by any PEIA systems.  
PEIA does anticipate feeding this information by file to the new BAS.
54. **Appendix 1 Integrations Tab** - How many outbound enrollment/eligibility files to carriers/vendors are currently in scope for the new BAS system?  
All the outbound enrollment/eligibility files listed in the Integrations tab with PEIA in the "From" column are in scope for the new BAS system.
55. **Appendix 1 Integrations Tab** - Should vendors assume the new BAS will be replacing "PEIA" wherever it is referenced on the interfaces tab? Or are there other various PEIA systems that are not in scope that will not be sunsetted and continue to manage certain interfaces?  
Yes, vendors should assume all the integration(s)/interface(s)/file(s) listed in the Interfaces tab are in scope for the new BAS system.

56. **RFP Section 4.1** - Can PEIA please provide a colored version of the Benefit Administration Diagram with the Blue/Green sections identified for in/out of scope?



57. **RFP Section 4.2.1.1** - What types of documents would PEIA anticipate need to be housed in the Ben Admin system?

Eligibility verification documents such as birth certificate, marriage certificate, QDRO documents, death certificate, documents validating residence, etc. would be housed in the BAS as well as incoming and outgoing participant and employer correspondence (letters, email, etc.).

58. **RFP Section 4.2.1.1** - Should PEIA member's see all documents while Employer HR members should just see their employees' documents?

Terminology clarification: PEIA members are policyholders. PEIA employees are State employees employed by the agency.

PEIA employees should be able to see all documents, Employer HR members should see documents for their employees, PEIA members should see only their own personal documents.

59. **RFP Section 4.2.1.1** - Please confirm the types of indexed values that are currently being used.  
**Adamero uses multiple index fields, including but not limited to SSN, Member ID, first name, and last name.**
60. **RFP Section 4.2.1.1** - How many documents does PEIA process annually?  
**PEIA scans approximately 25,000 documents per month, with a total of approximately 50,000 pages and using 2-3 GB of storage.**
61. **RFP Section 4.2.1.2** - What types of documents would PEIA anticipate requiring e-signature? How are e-signatures for these documents managed today? Is this a function of the PEIA existing Imaging/document management system?  
**E-signature functionality is not currently utilized in the BAS system or the existing Adamero imaging system. However, PEIA requires a signature for all its enrollment (additions, changes, or deletions) as well as any affidavits required, and desires the use of e-signature technology for its metadata transactions.**
62. **RFP Section 4.2.1.8** - The RFP and functional requirements reference client access to configurations such as business rules and rates. Is PEIA agreeable to a SaaS-based arrangement with a vendor that manages these configurations on behalf of the client?  
**PEIA would be agreeable to a SaaS-based arrangement with a vendor that manages configuration such as business rules and rates. However, PEIA's preference is that rules and rates that typically change annually are available to PEIA to manage.**
63. **RFP Section 4.2.1.1** - What type of forms does the system need to generate?  
**PEIA has a library of approximately 75 various 'forms' it produces each year. These range from enrollment forms to topic specific correspondence. PEIA needs the ability to create and edit standard and template forms that can be disseminated as a PDF and other necessary formats.**
64. **RFP Section 4.2.1.1** - How many forms are generated and completed each year?  
**PEIA estimates there are approximately 100,000 forms generated each year.**
65. **RFP Section 4.2.1.1** - Is Adamero the system that generates forms today? If not, what is the current technology?  
**Adamero is the Electronic Content Management system which stores documents. Forms are not created by Adamero. Forms are created in CRM and BAS.**
66. **RFP Section 4.2.1.1** - Does PEIA have existing form templates that can be used?  
**Samples of forms, letters and reports can be provided to the selected vendor.**

67. **RFP Section 4.2.1.1** - Are forms required if the Benefits Solution automates the requirements of the forms?  
**Automated forms (i.e., self-service) are preferred provided the automation does not negatively impact PEIA's operation.**
68. **RFP Section 4.2.1.1** - Who prints and mails letters today?  
**Letters are printed and mailed by PEIA staff, the state Central Mail Office, and outside vendors.**
69. **RFP Section 4.2.1.1** - How many mailings are sent annually?  
**Mailings are printed both internally and through a third-party printer. The new BAS should be able to create ad hoc individual mailings as well as data files for mass mailings. The Vendor should anticipate a minimum of 100,000 individual mailings.**
70. **RFP Section 4.2.2.5** - Can PEIA provide additional detail on the necessary legacy data desired for data conversation and migration (e.g., how many years, which data elements)?  
**All current coverage data elements and any that have the ability to impact retirement health coverage eligibility will be migrated to the new system. PEIA will work with the vendor to develop an agreed upon migration plan. Please see the two charts at the end of this Q&A to this document for more details pertaining to BAS data elements. PEIA estimates 90% of existing data will be migrated.**
71. **RFP Section 2.11** - For exceptions and/or clarifications, may Vendors redline the RFP Terms and Conditions, the HIPAA Business Associate Addendum and Data Exchange - Data Management Addendum, or do we need to fill out the exceptions/clarifications in table format with proposed language?  
**Vendors should submit exceptions/clarifications in table format in their proposal but should be aware that there are contractual terms and conditions and privacy/security terms that the State cannot and will not accept. If the winning Vendor has submitted exceptions/clarifications, the Vendor will need to work with the State to resolve any items the Vendor takes issue with, up to and including accepting the State's terms and signing additional paperwork acknowledging those items which are non-negotiable for the State. The contract cannot and will not be awarded without a signed and executed HIPAA Business Associate Addendum and a Data Exchange - Data Management Addendum in place.**
72. **RFP Section 2.21** - The RFP asks for information (i.e., corporate information and policies, reference contact information and staff resumes, etc.) that is considered confidential and proprietary and should not be publicly disclosed. Would PEIA allow Vendors to submit a redacted version of the proposal that can be disclosed to the public?

**See Question 27.**

73. **RFP Section 3** - May we include our standard service agreement template with our response for PEIA's review as a possible basis for negotiations?  
**See Question 28.**
74. **RFP Section 4.1** - Please provide number of employers and number of PEIA staff.  
**See Question 5.**  
**PEIA has around 50-55 direct employees.**
75. **RFP Section 4.1** - Please provide the total number of images currently stored in the Adamero imaging legacy system. Please provide a breakdown of images by image file type (e.g., TIFF, PDF).  
**PEIA has approximately 4 million images/documents stored in the imaging legacy system. There are 300K .pdf's, 3.2M .tif's, and the remainder are various formats (.txt, .png, .jpg, etc.).**
76. **RFP Section 4.1** - Does the Adamero imaging legacy system support annotations? If so, approximately how many annotations are stored in the system?  
**PEIA does not use annotations.**
77. **RFP Section 4.1** - We would like to understand the in scope and out of scope items in the diagram on page 27 (Green is in-scope, Blue is out of scope). The PDF version of the RFP is in black and white. Can PEIA kindly provide the diagram in color?  
**See Question 56.**
78. **RFP Section 4.2.1.2** - Enrollment Platform. Is it anticipated that the BAS solution will store medical history data for members?  
No, the BAS solution will not store medical history data for members.
79. **RFP Section 4.2.1.2** - In our experience clients have wanted to take the lead on training the Employer Benefit Coordinators as they are your customers. Can PEIA confirm it would be reasonable to assume the scope of services from the vendor would be building training materials and assisting/supporting PEIA in the Employer training? That PEIA will lead the Employer Training plan, coordination, and training?  
**PEIA requests employer training for system users in 4.2.1.4. Project Goals: "Training for system users (including employers), and administrators (but not participants or retirees) - not only in application navigation and the use of screens and windows, but also in the use of the new solution to perform all their various job functions, processes, and sub-processes in the new environment."**



80. **RFP Section 4.2.2.5** - Please confirm that as part of the data conversion partnership PEIA will be responsible for extraction from legacy systems and transformation to a staging area, and the Vendor will be primarily responsible for loading from staging to the new system and reporting results.  
**PEIA and WV Office of Technology will be responsible for the extraction from the legacy systems and transformation to a staging area.**
81. **RFP Section 4.2.2.5** - Will PEIA be performing data cleansing activities in preparation for the project? If so, can PEIA please elaborate?  
**Data Transformation will be performed by PEIA and WV Office of Technology resources as needed for meaningful legacy data conversion and migration.**
82. **RFP Section 4.2.2.5** - Is WVPEIA considering contracting with a separate Data Conversion vendor to help WV PIA with the extraction and transformation? If so, what is the timing of that selection process please?  
**No, PEIA and WV Office of Technology staff will be responsible for extracting and transforming the data.**
83. Would PEIA kindly clarify that if Vendors elect to submit their proposals through wvOASIS portal, then delivery of a hard copy version is not required?  
**See Question 2**  
**Bids submissions for an RFP are not permitted through the wvOASIS portal. Electronic proposals must be on physical digital media (CD's, flash drives, etc).**
84. **RFP Appendix 1, Req. 50** - Would PEIA please provide a list of possible Customer Service tools and applications the PAS solution may need to integrate with?  
**To the extent that the selected vendor does not have an integrated CRM, and/or imaging solution, PEIA expects the vendor solution to integrate with PEIA's existing applications (i.e., currently Adamero, MS Dynamics,).**
85. **RFP Appendix 1, Req. 103** - How do Employers report Employee Sick Leave and Leave balances and how often are they reported?  
**See Question 52**
86. **RFP Appendix 1, Req. 185** - Please confirm that this means last login  
**Requirement 185 refers to the last time data was updated and saved.**
87. **RFP Appendix 1, Req. 188** - Please define agency standards.  
**Agency standards for the employer portal refer to coloring, logos, and font as presented on PEIA's website ([PEIA \(wv.gov\)](http://www.wv.gov)).**

88. **RFP Appendix 1, Req. 211** - Can PEIA please elaborate on “individual workflow-driven action item”?  
An individual workflow-driven action item is a task that is assigned to an individual (or individual position) that requires action. For example, PEIA receives a form from an employer. The form is routed to a PEIA representative for review. The representative documents the form as incomplete. The form is routed back to the employer for completion.
89. **RFP Appendix 1, Req 611 through 632** - Please confirm that these requirements are to be delivered during the implementation project and would not be included in the Requirements Traceability Matrix or scope of requirement #614 for testing.  
Confirmed. Requirements 611 through 632 will not be included in the Requirements Traceability Matrix or scope of requirement #614 for testing.
90. **RFP Section 2: Instructions to Vendors Submitting Bids, Item #8 Addendum Acknowledgement (RFP page 15)**, Please clarify where the Item #8 Addendum Acknowledgement form is located in the wvOasis portal.  
The Addendum Acknowledgement form is added to the solicitation with a first addendum. It is located in the document Add No. 1, on page 11.
91. **Section 4: Project Specifications, 4.1. Background and Current Operating Environment (RFP page 24)**, PEIA provides health and life insurance benefits for over 200,000 eligible public employees, retirees, and their dependents. Please provide the number of active and retiree benefits eligible population along with the number of employer users and the number of admin users.  
There are approximately 127,000 benefits eligible policyholders in the system as of June 30, 2022. This is made up of 84,000 active policyholders and 43,000 retiree policyholders. In addition, there are approximately 102,500 dependents.  
Any policyholder would be considered an employer user, for the purposes of enrolling in, changing, and managing their personal benefits. There are approximately 1,400 benefit coordinators across the participating agencies, who manage the employees in their agencies. PEIA has 50-55 direct employees plus up to 5 additional people who would need technical support access. Administrative access cannot be fully determined without knowing the final system’s administrative functionality.
92. Please advise how you would like us to respond to the Functional Requirements document. In what format do you expect our exceptions?  
In Column F please state whether your system meets the requirement (Y/N).

93. The RFP references both hardcopy and electronic submission, and states that electronic submission is not permitted, yet gives full instructions for it. Please confirm whether electronic submission is permissible.

**See Question 2.**

**Bids submissions for an RFP are not permitted through the wvOASIS portal. Electronic proposals must be on physical digital media (CD's, flash drives, etc).**

94. What is the Purchasing Division's timeline for vendor selection and desired go live date?

**See Question 41.**

95. Please describe the current process flow/integration and data exchanged between the BAS and Microsoft Great Plans.

**Data is exchanged between BAS and Microsoft GP through several Biztalk integrations.**

96. Please describe the desired roles of the benefits administration vendor in the appeals process.

**Please see RFP Appendix 1, #385, 480 and 482.**

97. In what instances are benefits coordinators remitting premium payments for direct bill members currently? What methods of payment are used?

**Benefit coordinators remit premium payments for agencies who are not part of the wvOASIS payroll system, or for employees who are off payroll (Leave of Absence, termination with three months additional coverage, etc). Benefit coordinators pay these premiums via check, ACH, or through the State payment system with an IET.**

**See Question 33.**

**PEIA has approximately 6,800 direct-pay retirees as their pension is less than their monthly premium.**

98. Please describe the benefits administrator's role in initiating the creation of an IET on OASIS and receiving IET's from OASIS.

**See Question 33.**

99. Please describe the current MAPD enrollment process (e.g., is the CMS electronic enrollment mechanism used or does Humana require paper forms?).

**CMS electronic enrollment**

100. Is the prescription drug offered with the Special Medical Plan Commercial Rx or EGWP? If the former, do you file for RDS and require support with that process?  
**Medicare-eligible retirees in the Special Medicare plan have drug coverage through PEIA's PBM, which files for RDS on the plan's behalf. The PBM uses data from our standard eligibility file to create its RDS filing, so no additional support would be required.**
101. Is your medical plan for retirees administered as "split family" (i.e., the Non-Medicare Retiree may elect a different plan than their Medicare enrolled spouse and vice versa).  
**Non-Medicare retirees are enrolled in the PEIA PPB Plan A, and the Medicare Retiree is enrolled in the MAPD or the Special Medicare Plan. The policyholder's status determines which plan the dependent is enrolled in. The dependent cannot make an election separate from the policyholder.**
102. Does PEIA allow for dependent only coverage when both the Retiree and dependent are Medicare Primary?  
**PEIA does not allow for dependent-only coverage. Surviving dependents may continue coverage upon the policyholder's death but they are then treated as a policyholder.**
103. Please confirm administration of the Mountaineer Flexible Benefits plan is included in the scope of this RFP.  
**No, administration of the Mountaineer Flexible Benefits plan is not included in the scope of this RFP.**  
**See Question 47.**
104. Is support requested for the determination of retirement eligibility or will notification of eligibility be provided on the ongoing HRIS file? If the former, please describe eligibility rules (e.g., age, years of service, rounding requirements).  
**Assuming this question references retirement pension eligibility, when members are enrolled by their benefit coordinators, benefit coordinators and/or CPRB are responsible for providing employee information relevant to PEIA eligibility and premiums. However, PEIA does desire to create a self-service online retirement health benefit enrollment module which will then utilize different factors and rules to determine the retiree premium.**
105. How are transfers between State agencies communicated on the HRIS file (e.g., transfer, termination/rehire).  
**Health and life benefit information related to transfers between State agencies is communicated through the online enrollment system, however we would like to explore using current files to automate this. PEIA has no responsibility for the actual transfer of employment.**

106. How many retiree/survivors pay for benefits through Direct Bill? Through pension payroll?  
**Approximately 6,800 retirees/survivors pay for benefits through Direct Pay and 36,200 retirees/survivors who pay through pension payroll.**
107. What data is supplied to define the duration of the coverage extension for employees using Accrued Sick/Leave time to extend employer-paid insurance?  
**PEIA receives this information on paper retirement enrollment forms from the employee's agency at the time of retirement. However, PEIA does desire to create a self-service online retirement health benefit enrollment module which will then utilize different factors and rules to determine the retiree premium.**
108. Please describe the benefits administration vendor's role in support of the Retired Employee Premium Assistance Program and/or Benefits Assistance program. For example, is the policy holder's income level provided to the benefits administrator so premiums can be adjusted?  
**Yes. The current Benefits Administration System has a module that determines eligibility for Premium and Benefit Assistance based on the retiree's years of service, reported income, and number of people in the household. BAS determines eligibility and then calculates the amount of assistance to be provided to the retiree, and generates a letter to the retiree with the determination**
109. What forms do employees currently request through IVR? Is PEIA open to alternative approaches (e.g., available via employee self-service)?  
**Currently only a plan transfer form and a tobacco affidavit can be requested through the IVR.**  
**Yes, PEIA will be open to alternative approaches to request forms.**
110. For the purposes of VDSA, does PEIA leverage the MSP and/or Non-MSP file schemas?  
**PEIA does not use VDSA.**
111. Please further describe the service crediting support requested in **Appendix A (Requirement 141, 143 for example)** specific to health and life insurance administration. The retiree plan allows for premium and benefit assistance based on years of service. See the Medicare Retiree Shoppers Guide, The Medicare Plan SPD and the Medicare Advantage Plan SPD. If a retiree's service credits are adjusted at the retirement agency, the same adjustment may be required to accurately calculate the retiree premium or benefit assistance amount.



112. Please expand on the health and life administrator's role with respect to the submission of pension applications (**Appendix 1, 231, 233**).

**The health and life administrator has no role in the submission of pension applications. Retiree health and life insurance enrollment is accomplished separate from pension application.**

113. How many employers designate PEIA as their DGE and require 1095B support? How many FEINs does this represent? How many total forms were produced in 2021?

**PEIA provides 1095B forms for all policyholders who are not paid through wvOASIS payroll. This includes 631 non-state agencies, 55 county boards of education, and 2 colleges, for a total of 688 FEIN's. There were 59,924 forms produced in 2021.**

114. How many employers require support for the ability to extract 1095 B/C data based on health coverage store in the system? How many FEINs does this represent?

**PEIA does not support employer extract of 1095 B/C data. 1095B forms are generated by PEIA and mailed to policyholders s individually. 1095C forms are generated and mailed by the State Auditor's Office for all wvOASIS-paid employees with PEIA providing coverage data.**

115. Please confirm the Current PEIA systems that are in the scope of this RFP and/or supply an updated version of the graphic in the "PEIA's Current Technical Environment" section of the RFP that includes the indicated green/blue distinction for in/out of scope systems.  
**See Question 56.**

116. What are the key drivers for including accounting functions and the management of cash receipts (particularly for employer purposes) as a part of a benefits administration RFP? Is PEIA open to a best-in-class/industry standard practice (i.e., separating these functions).  
**PEIA is open to keeping the accounting functions in MS Dynamics. However, PEIA's preference is to have fewer systems, less system maintenance. Additionally, PEIA believes there is greater efficiency in reconciling invoice payments to invoices and managing an employer's overall balance if all transactions are located in one system.**

117. To date, have you viewed a demo of any specific product offerings?

**PEIA elects not to respond.**

118. Has your team talked to other vendors?

**PEIA elects not to respond.**

119. Is there a budget in place?

**PEIA is prohibited from discussing a budget.**

120. Within **Attachment 1** several references are included requesting the health and life benefits administrator to support refund transactions/issue refund checks for pension annuitants.
- a. Please describe your current process and systems integrated for the purpose (e.g., role of BAS, wvOASIS, etc.).  
**Currently, insurance refunds are processed manually. Reports are run in the benefit administration system that detail retroactive benefit changes which result in refunds. The Premium Accounts and Finance departments research, verify, and process refunds individually.**
  - b. Describe why the Pension payroll system does not perform these functions and confirm if PEIA is open to alternative process recommendations.  
**To avoid financial harm to the retiree in the event an adjustment is larger than their pension check. Additionally, PEIA is limited in its ability to interface with the pension system. Yes, PEIA is open to alternative process recommendations.**
121. Please expand on the request for the "ability to integrate with the State Treasurer for processing credit card payments (acting as WV PEIA bank)". What payments would this process support?  
**This process would support occasional policyholder payments, as well as regular , surviving dependent and retiree direct payments.**
122. PEIA provides health and life insurance benefits for over 200,000 eligible public employees, retirees, and their dependents. Please provide additional breakouts of your population counts across the employers.
- a. Number of active eligible employees:  
**As of June 30, 2021, there were approximately 84,000 active policyholders.**
  - b. Number of pre-65 retirees:  
**As of June 30, 2021, there were approximately 6,500 pre-65 retirees enrolled in one or more plans.**
  - c. Number of post-65 retirees:  
**As of June 30, 2021, there were approximately 36,500 post-65 retiree policyholders enrolled in one or more plans.**
  - d. Number of COBRA participants:  
**Typically, between 200-250 members per month, but it may be lower or higher on atypical months.**

- e. Number of active employees (non-retirees) enrolled in medical benefits:

**As of June 30, 2021, there were approximately 84,000 live employees enrolled in medical benefits.**

123. How many FEINs are in place for ACA Reporting purposes?

**PEIA provides 1095B forms for all policyholders who are not paid through wvOasis payroll. This includes 631 non-state agencies, 55 county boards of education, and 2 colleges, for a total of 688 FEIN's.**

124. How many administrators fall into each category below?

- a. Employer Benefit Coordinator users:

**Approximately 1,400**

- b. Regular users:

**Approximately 127,000 policyholders may access the online enrollment application.**

- c. Power users:

**20**

- d. Business Administrator:

**55**

- e. Technical Administrator:

**10**

125. How many total employers make up the PEIA?

**See Questions 4 and 5**

126. Is direct billing for Leave of Absence members in scope? If so, how many are direct billed across the employers today?

**No, PEIA does not direct bill for leave of absence members. Billing is provided to the employer as per normal billing practices, and employers are responsible for remitting payment as necessary if the employee is not on wvOASIS payroll.**

127. Integrated Document Management: Please give additional background on this request and what this system manages today. What types of documents are stored in the current system? Today the Document Management System ("DMS") is a separate, non-integrated system from BAS. To retrieve or deposit documents to the DMS, the user must access the DMS system directly. An integrated DMS system would provide the following operational efficiencies:
- Access stored documents directly from the employer or member's record in the BAS system.
  - Index and store documents submitted through the employer or member portals.
  - Automatically save and index outgoing letters created by the BAS system.
  - Search for specific documents by member or employer (i.e., birth certificate, marriage certificate, etc.) .
128. On the **Functional Requirements** tab: "The system should provide the ability for members to view and provide a printable version of imaged documents, per PEIA business rules." What kind of documents does this reference?  
Imaged documents can include birth certificates, marriage certificates, outgoing letters/notifications, statements, or any artifact collected from or distributed to a participant or employer.
129. Will the selected vendor work with a centralized team of administrators across the employers?  
The selected vendor will work with specific employees within PEIA and/or the Office of Technology. The vendor will not work directly with the individual employers covered under the Plan.
130. Where do employees go today for benefits questions?  
Employees can go to their own benefit coordinators, or call PEIA for eligibility, premium and payment questions. Specific claim questions are directed to the benefit administrators of the Plans (i.e., medical claim questions are handled by UMR (3rd party administrator)).
131. Is dependent verification in place today? How is this managed? Are statistics available around how many verification events are processed annually?  
Yes, dependent verification is in place. Tracking the requests for and the receipt of required documents is managed in BAS.

132. How many new hire welcome packets were generated in 2021? Are these consistent across the employers?

**PEIA does not generate new hire welcome packets. The third-party administrators are responsible for creating and distributing their own welcome kits.**

133. Are vendors able to submit a services proposal to support the pricing provided in the **Cost Proposal workbook**?

**Yes, vendors may submit a services proposal to support the pricing provided in the Annual Fees and Additional Support Services section of the Cost Proposal workbook. However, it is the Annual Fees and Additional Support Services section of the Cost Proposal workbook that will be used for vendor comparison.**

134. Do employer groups have a set menu of eligibility rules, waiting periods, etc. to choose from when joining the PEIA?

**For active employees, PEIA does not impose different eligibility rules for different employer groups. There are different rules for who qualifies for retiree coverage for certain non-state agencies, but those rules are set by PEIA and not chosen by the employer.**

135. Will the selected vendor house additional benefits/manage enrollment for unique benefits on an individual employer group basis?

**No. All benefits and enrollment managed will be for the Public Employees Insurance Agency and its members; no additional unique benefits that any agencies may offer their employees are managed through PEIA.**

136. We look forward to PEIA's publication of answers to the vendor questions submitted in early March. We understand there has been a delay in addressing those. Therefore, we respectfully request a 4-week extension on the RFP Closing Date to May 6, 2022.

**PEIA is extending the closing date of the RFP. The new closing date is May 25, 2022.**

137. Can WVPEIA please provide interface layouts for the interfaces identified on the Interfaces tab of Appendix 1?

**No, these interfaces vary by vendor and may be proprietary in nature.**



## BAS DATABASE STATISTICS

TABLE	# COLUMNS	RECORD COUNT	LENGTH	MEGABYTES	DESCRIPTION
EITBAS_ADDRESS	17	709,824	158	121.000	Addresses of Members and Employers
EITBAS_AFFILIATION	10	456,554	77	43.100	Policyholder/Employer Affiliation
EITBAS_AFF_STAGE	10	48,461	77	4.590	Policyholder/Employer Affiliation - used for employee transfers on MMB
EITBAS_AFFS_AUDIT	22	218,967	185	54.700	Audit of Affiliation Stage table
EITBAS_AUDCRM	17	50,564,305	138	7,319.400	Audit of CRM_flag for multiple tables
EITBAS_AUDIT	160	9,390,013	1,964	19,345.700	BAS Audit table
EITBAS_AUDSUB	30	118,119	147	21.900	Audit of Subsidy table
EITBAS_BENEFICIARY	8	2,395	56	0.150	Beneficiary table (not used, archived data)
EITBAS_BENS_AUDIT	48	3,196,105	657	2,202.200	Audit of Ben_Stage table
EITBAS_BEN_CHGFLAG	6	7,250	26	0.180	Flags whether to send a beneficiary change letter
EITBAS_BEN_DETAIL	9	514,195	65	39.700	Beneficiary table (Beneficiary information)
EITBAS_BEN_HEADER	20	363,344	389	145.000	Beneficiary table (demographic information)
EITBAS_BEN_HISTORY	27	1,327,056	421	593.000	Beneficiary history - records previous change from Ben_Header and Ben_Detail
EITBAS_BEN_STAGE	25	1,938	470	0.760	Beneficiary table for MMB
EITBAS_BEN_WORK	19	0	367	0.000	Not used
EITBAS_BILLING	38	93,549,223	187	20,186.560	Billing/Adjustments
EITBAS_BIZ_PAYMENT	17	0	418	0.000	Temporary table for Web Contribution payments
EITBAS_BOEWORK	16	2,420,200	406	975.000	Board of Ed Work table used to load deduction information into Web Contributions
EITBAS_BOE_AMT	8	5,555	66	0.430	Used for BOE state aid payments
EITBAS_BOE_EMR	6	55	43	0.003	Used for BOE state aid payments
EITBAS_BOE_INV	6	125,464	65	7.050	Used for BOE state aid payments
EITBAS_BOE_PAYROLL	17	5,631,335	168	1,064.960	Board of Ed Payroll table
EITBAS_CAPHIST	25	581,513	202	124.000	Capitation History (not currently used)
EITBAS_CAPITATION	26	3,219,669	206	700.000	TPA Capitation premiums
EITBAS_CHEAT_SHEET	8	2,160	40	0.103	Optional life premium determination
EITBAS_CHK_REG	8	152,771	118	19.500	Web Contributions Check Register
EITBAS_COMMENT	8	627,711	155	108.000	Comments (mostly replaced by CRM)
EITBAS_COVDDETAIL	12	2,702,837	91	306.000	Member level Coverage
EITBAS_COVSUMMARY	8	1,640,115	54	118.000	Policyholder level Coverage
EITBAS_COV_COBRA	6	1,075	42	0.050	Cobra Coverage data from UMR
EITBAS_CPRB_GP	9	6,689,157	58	475.000	Stores CPRB payroll information
EITBAS_CPRB_LETTER	6	224	53	0.022	Letters for new retirees
EITBAS_CPRB_RETIRE	19	30,361	164	5.880	Stores retirement information from CPRB
EITBAS_CRM_ALERT	10	17	618	0.011	Warning/Account lockout for MMB
EITBAS_CRM_TASKS	7	504,509	1,065	521.000	Tasks created in CRM sent to MMB/BAS
EITBAS_CSACCESS	3	9	78	0.001	Access table for Customer Service Inquiry system (used by TPA's)
EITBAS_CVD_STAGE	32	190,691	334	66.200	Temporary table for Dependents
EITBAS_DEMOGRAPHIC	24	646,233	418	271.000	Demographic information for members
EITBAS_DEM_AUDIT	4	7	39	0.002	Used to sync Demographic data between BAS and CRM - update id in CRM when it changes in BAS
EITBAS_DEM_COBRA	23	1,055	258	0.266	Cobra Demographic data from UMR
EITBAS_DOC_STAGE	15	29,462	274	8.310	Not used
EITBAS_DOCS_AUDIT	34	503	533	0.293	DocStage table Audit
EITBAS_EARLY_WARN	24	3,828,726	116	504.000	Early Warning Table - stores premiums to let Agencies know early what the next months premium will be
EITBAS_EDIT_ERROR	10	0	132	0.000	RETURN CRM EDIT ERRORS TO BIZTALK
EITBAS_EMPLOYEE	11	312,554	85	35.400	Employee information (hire date, retire date, what account retired from, etc)

EITBAS_EMPLOYER	19	1,790	142	0.280 Employer information
EITBAS_EMRFEN	4	965	48	0.053 Employer FEIN #
EITBAS_EPICS_GP	18	5,208,707	208	1,136.640 Stores EPICS/OASIS payroll data
EITBAS_ERP_ADDRESS	11	31,778	233	7.870 Current Mailing Address in WV OASIS system
EITBAS_ERP_APPLY	2	57	16	0.001 Not used
EITBAS_ERP_I248	16	48,573	288	13.800 Holds I.248 file data from WV OASIS
EITBAS_ERP_LT12	6	75	39	0.004 Higher Ed members who get have less than 12 month withhold
EITBAS_ERP_LT12D	5	0	58	0.000 Not used
EITBAS_ERP_PP	4	126	24	0.005 WVOASIS pay periods
EITBAS_ERP_WAVE	6	217	87	0.018 Shows which wave an agency was implemented in during OASIS rollout
EITBAS_FIELD_HIST	6	78,951	153	12.200 Shows history of certain fields in the system
EITBAS_HTOM	11	143,761	71	11.100 Healthy Tomorrows data
EITBAS_IGTFIMS_CMP	6	26,577	50	1.520 Used for comparing the IGT totals between Web Contributions and OASIS
EITBAS_INDICATOR	8	5,149,386	71	456.000 Stores Attributes/Indicators (IDX, MED, ITYP, etc)
EITBAS_IND_AUDDEL	5	28,383	56	1.950 Delete History from BAS Indicator table
EITBAS_LOGIN	4	500,166	54	30.700 Login history for MMB
EITBAS_NEW_AGENCY	23	0	280	0.000 Not used
EITBAS_OTHERINS	6	9,944	89	1.050 Not used
EITBAS_PARM_AUDIT	24	247,494	295	89.300 Audit of the EITBAS_YREPARM table
EITBAS_PAYMENT	20	45,525,834	488	22,327.400 Payment data
EITBAS_PAY_AUDIT	12	107,467	95	11.900 Audit of Payment table when Biztalk Flag is updated from 0 to 1
EITBAS_PEND	10	29,839	64	2.730 Used for Collections
EITBAS_PHYSICIAN	9	39,789	155	6.710 Member/Physician data - HealthPlan TPA only
EITBAS_PREM_STAGE	12	1,933	111	0.136 Used for Premium Calculation
EITBAS_PROVIDER	23	7,357	374	2.770 Provider/CCP information from UMR
EITBAS_PROVIDER_LTR	10	103,897	319	33.100 BAS GENERATES MHP/CCP LETTER FILE
EITBAS_RATE	5	47,381	84	4.060 Billing premium rates
EITBAS_RECON	11	1,019	79	0.087 Not used
EITBAS_RELATION	7	741,737	57	55.800 Relationship to Policyholder
EITBAS_ROLES	9	158,445	63	11.900 MMB user roles (policyholder, benefit coordinator, etc)
EITBAS_SALARY	4	144,907	43	7.320 Salary information for IDX determination
EITBAS_SECQUEST	5	393,683	148	59.300 MMB security questions
EITBAS_STATE_ID	5	88,087	57	5.620 WVOASIS state id's - received from I.248 file
EITBAS_STATE_IDH	10	231	106	0.030 Shows WVOASIS id's that have been updated
EITBAS_SUBSIDY	12	62,111	63	4.320 Premium Assistance data
EITBAS_TERM	11	141,859	68	14.300 Batch Terms
EITBAS_TRANFORM	2	1	18	0.000 Not used
EITBAS_UNIQUEID	3	1	22	0.000 Member Id generator
EITBAS_USERPROFILE	8	73	94	0.007 BAS online access data
EITBAS_USER_HIST	6	2,669,885	128	351.000 History of certain changes to a user's MMB account
EITBAS_VALIDATION	11	2,736	354	0.980 Valid Values (codes) in BAS
EITBAS_WELL	9	7,389	181	4.420 Wellness program data
EITBAS_WEPARM	8	3,806	126	0.551 Web Enrollment Parm - archived data
EITBAS_WORKFILE	12	60,733	444	25.300 Used by Web Contributions to temporarily change the deduction amount
EITBAS_YREPARM	10	867,501	139	136.000 used to update approved changes to BAS from MMB
EITYRE_AUDIT	145	47,544,600	1,368	68,229.700 Archived YRE Audit data

EITYRE_BENEFICIARY	23	449	390	0.176 Not used
EITYRE_INDICATOR	9	425,246	81	48.300 same as BAS indicator for MMB
EITYRE_IND_AUDIT	22	4,026,362	176	1,075.200 Audit of EITYRE_INDICATOR
EITYRE_LIFEINS	11	206,634	73	18.700 Coverage table for MMB
EITYRE_LIF_AUDIT	26	1,791,542	157	395.000 Audit of EITYRE_LIFEINS
EITYRE_QUALEVENT	8	344,769	199	72.700 Qualifying Events - used by both BAS and MMB
EITYRE_REL_AUDIT	22	367,119	153	92.400 Audit for EITYRE_RELATION
EITYRE_RELATION	9	116,085	68	11.700 Relationship to Policyholder for MMB
EITYRE_USER	53	169,170	360	95.200 Used for Roles and Coverage approval status and other
EITYRE_USER_AUDIT	48	1,743,312	222	654.000 Audit of EITYRE_USER
EITYRE_WORK	6	20,261	313	6.230 Temporary table for Open Enrollment
EITCMCMT	6	4,620	242	1.100 not used - old MMB system
EITCNCTY	4	139	34	0.006 not used - old MMB system
EITDUMMY	1	0	13	0.000 Not used
EITERMSG	2	20	212	0.006 not used - old MMB system
EITHLPLN	7	1,221	77	1.000 Coverages available to counties
EITININD	6	21,974	82	1.840 not used - old MMB system (replaced by EITYRE_INDICATOR)
EITLFPLN	12	616	159	1.000 Life Coverage amounts based by certain criteria (age, ityp, tobacco status, etc)
EITLGLOG	15	1,428,650	582	811.000 Audit of MMB, history of changes
EITMEMEM	38	113,367	510	60.000 copy of EITUPUPD table
EITREREL	8	10,289	62	0.824 not used - old MMB system (Replaced by EITYRE_RELATION)
EITUPUPD	45	116,187	580	80.000 multiple BAS tables combined into one table - pulls data from BAS into this table
EITUPUPD_AUDIT	88	1,192,268	1,100	1,607.680 Audit of EITUPUPD
EITUSUSR	26	17,265	210	4.210 not used - old MMB system (replace by EITYRE_USER)
EITBNBEN	11	8,698	126	1.310 Benefit Coordinator information
EITCDCOD	3	153	162	0.023 not used

Total MB 153,485.958

Total GB 149.8886

## BAS DATABASE FIELD DATA

Table: Demographic Table

TableName: EITBAS\_DEMOGRAPHIC

TableSpace: EISBDEM

DEM_MEMBER_ID	Unique Identifier	Char(10)
DEM_SSN	Social Sec. Number	Char(9)
DEM_FIRST_NAME	First Name	Char(20)
DEM_MID_NAME	Middle Name	Char(20)
DEM_LAST_NAME	Last Name	Char(30)
DEM_SUFFIX_NAME	Name suffix	Char(5)
DEM_BIRTHDATE	Date of Birth	date field
DEM_GENDER	Gender	Char(1)
DEM_PRIMARY_PHONE	Primary Phone	Char(20)
DEM_SECOND_PHONE	Secondary Phone	Char(20)
DEM_WORK_PHONE	Work Phone	Char(20)
DEM_FAX	Used as Cell Phone	Char(20)
DEM_EMAIL	Email Address	Char(50)
DEM_DECEASED_DATE	Deceased Date	date field
DEM_MARITAL_STAT	Marital Status	Char(1)
DEM_BIZTALK_FLAG	BizTalk Flag	Char(1)
DEM_ORGANIZATION	Beneficiary Organization	Char(100)
DEM_USER_ID	last user update	Char(10)
DEM_TSTAMP	last timestamp update	Date/Time Current tstamp
DEM_CRMBIZ_FLAG	CRM Biztalk Flag	Char(1)
DEM_EMAIL_FLAG	Email Only Correspondence	Char(1)
DEM_USERNAME	Web User Name	Char(20)
DEM_PASSWORD	Web Password (encrypted)	Char(32)
DEM_REQ_PWD_CHG	Request Password Change	Char(1)
DEM_TEXT_FLAG	Want to receive test msgs	Char(1)

**Table: Employee Table**

**TableName: EITBAS\_EMPLOYEE**

**TableSpace: EISBEME**

EME_EMPLOYEE_ID	Unique Identifier	Char(10)
EME_RETIRED_FROM	Emp. Retired From	Char(10)
EME_RETIRE_DATE	Date of retirement	date field
EME_HIRE_DATE	Hire Date	date field
EME_STATE_ID	State Identifier	Char(10)
EME_SURVIVOR_ID	Survivor's Polholder	Num(10)
EME_USER_ID	last user update	Char(10)
EME_TSTAMP	last timestamp update	Date/Time Current tstamp
EME_STOP_DATE	Escrow Stop Date	date field
EME_START_DATE	Escrow Start Date	date field
EME_CRMBIZ_FLAG	CRM Biztalk flag	Char(1)

**Table:Address**

**TableName: EITBAS\_ADDRESS**

**TableSpace: EISBADR**

ADR_MEMBER_ID	Unique Identifier	Char(10)
ADR_SYSTEM_CD	Address System	Char(1)
ADR_TYPE	Type of Address	Char(1)
ADR_LINE1	Address line 1	Char(35)
ADR_LINE2	Address line 2	Char(35)
ADR_CITY	City	Char(20)
ADR_STATE	State	Char(2)
ADR_ZIP_CD	Zip Code	Char(10)
ADR_COUNTY_CD	County Code	Char(2)
ADR_COUNTRY_CD	Country Code	Char(3)
ADR_MAIL_FLAG	Current Mailing Flag	Char(1)
ADR_BIZTALK_FLAG	Biztalk flag	Char(1)
ADR_EDATE	Effective Date	date field
ADR_TDATE	Termination Date	date field
ADR_USER_ID	Last User Update	Char(10)
ADR_TSTAMP	Last timestamp update	Date/Time Current Tstamp
ADR_CRMBIZ_FLAG	CRM Biztalk Flag	Char(1)



**Table: Indicator**

**TableName: EITBAS\_INDICATOR**

**TableSpace: EISBIND**

IND_MEMBER_ID	Unique Identifier	Char(10)
IND_INDICATOR	Indicator Name	Char(4)
IND_VALUE	Value of Indicator	Char(20)
IND_EDATE	Effective Date	Date Field
IND_TDATE	Termination Date	Date Field
IND_USER_ID	Last user Update	Char(10)
IND_TSTAMP	Last timestamp update	Date/Time Current Tstamp
IND_CRMBIZ_FLAG	CRM Biztalk Flag	Char(1)

**Table: Employer Affiliation Table**

**TableName: EITBAS\_AFFILIATION**

**TableSpace: EISBAFF**

AFF_EMPLOYEE_ID	Unique Identifier	Char(10)
AFF_EMPLOYER_ID	Employer identifier	Char(10)
AFF_EDATE	Effective Date	Date Field
AFF_TDATE	Termination Date	Date Field
AFF_TRANSFER_ID	Acct. transfer ID	Char(9)
AFF_BIZTALK_FLAG	BizTalk Flag	Char(1)
AFF_USER_ID	Last User Update	Char(10)
AFF_TSTAMP	Last Timestamp Update	Date/Time current tstamp
AFF_STATE_ID	Epics Employee Number	Char(10)
AFF_CRMBIZ_FLAG	CRM Biztalk Flag	Char(1)

**Table: Member/Employee Relationship**

**TableName: EITBAS\_RELATION**

**TableSpace: EISBREL**

REL_EMPLOYEE_ID	Employee unique id	Char(10)
REL_MEMBER_ID	Member unique id	Char(10)
REL_RELATION_CD	Relationship code	Char(1)
REL_EDATE	Effective date	Date Field
REL_TDATE	Termination Date	Date Field
REL_USER_ID	Last User Update	Char(10)
REL_TSTAMP	Last Timestamp Update	Date/Time current tstamp

**Table: Coverage Summary Table**

**TableName: EITBAS\_COVSUMMARY**

**TableSpace: EISBCVS**

CVS_EMPLOYEE_ID	Unique Identifier	Char(10)
CVS_COVERAGE_CD	Coverage code	Char(4)
CVS_OPTION_CD	Coverage option code	Char(3)
CVS_TIER	Tier	Char(1)
CVS_EDATE	Effective Date	Date Field
CVS_TDATE	Termination Date	Date Field
CVS_USER_ID	Last user Update	Char(10)
CVS_TSTAMP	Last timestamp Update	Date/Time current tstamp

**Table: Coverage Detail**

**TableName: EITBAS\_COVDETAIL**

**TableSpace: EISBCVD**

CVD_EMPLOYEE_ID	Unique Identifier	Char(10)
CVD_MEMBER_ID	Unique Identifier	Char(10)
CVD_COVERAGE_CD	Coverage Code	Char(4)
CVD_PRIMARY_DOC	Primary Physician	Char(20)
CVD_EDATE	Effective Date	Date Field
CVD_TDATE	Termination Date	Date Field
CVD_TERM_RSN	Termination Reason	Char(3)
CVD_PENDING_DT	Claim Pending Date	Date Field
CVD_USER_ID	Last user Update	Char(10)
CVD_TSTAMP	Last tstamp Update	Date/Time Current tstamp
CVD_CRMBIZ_FLAG	CRM Biztalk Flag	Char(1)

Table: **Employer Table**  
**flag)**

(Revised Date: 09/20/07 – added RETIRE

**TableName: EITBAS\_EMPLOYER**

**TableSpace: EISBEMR**

EMR_EMPLOYER_ID	Unique Identifier	Char(10) new number
EMR_EMPLOYER_NUM	Account Number	Char(10) new number
EMR_EMPLOYER_TYPE	Employer type	Char(2)
EMR_EDATE	Employer effective date	Date
EMR_TDATE	Employer term date	Date
EMR_INTER_OFFICE	Interoffice Indicator	Char(1) 'Y' or 'N'
EMR_EMPLOYER_NAME	Employer Name	Char(50)
EMR_EMPLOYER_PHON	Employer Phone #	Char(10)
EMR_STATUS	Employer Status	Char(1)
EMR_BRANCH_CD	Branch Code	Char(3)
EMR_SYSTEM_CD	Who's Employer?	Char(1) ('P','A')
EMR_FIMS_ORG	FIMS Org Number	Char(4)
EMR_BIZTALK_FLAG	BizTalk Flag	Char(1)
EMR_RETIRE_ELIG	Retire Eligible	Char(1) 'Y','N', or 'R' Y = 'Eligible to have Retirees' N = 'Opted out of OPEB' R = 'Keep their Retirees'
EMR_SPLIT_PAYROLL	Split Payroll Indicator	Char(1) 'Y' or 'N'
EMR_USER_ID	Last User Update	Char(10)
EMR_TSTAMP	Last Timestamp Update	Date/Time current timestamp
EMR_CRMBIZ_FLAG	CRM Biztalk Flag	Char(1)
EMR_SPLIT_EMNUM	Split Employer Number	Char(10)

## BENEFICIARY TABLES

### Table: **Beneficiary Header**

**TableName: EITBAS\_BEN\_HEADER**

**Tablespace: EISBBNH**

BNH_EMPLOYEE_ID	Unique Identifier	Char(10)
BNH_SEQNUM	Sequence Number	Char(5)
BNH_SSN	Beneficiary SSN	Char(9)
BNH_LNAME	Beneficiary Last Name	Char(100)
BNH_FNAME	Beneficiary First Name	Char(35)
BNH_MNAME	Beneficiary Middle Initial	Char(1)
BNH_GENERATION	Beneficiary Generation	Char(3)
BNH_RELATION_CD	Beneficiary Relation	Char(1)
Values(P,S,X,C,D,O,G)		
BNH_TYPE	Beneficiary Type	
Char(1) Values(P,O,E)		
BNH_ADRLINE1	Beneficiary Address line 1	Char(35)
BNH_ADRLINE2	Beneficiary Address line 2	Char(35)
BNH_CITY	Beneficiary City	Char(20)
BNH_STATE	Beneficiary State	Char(2)
BNH_ZIP_CD	Beneficiary Zip Code	Char(10)
BNH_COMMENT	Beneficiary Comment	Char(70)
BNH_ENTRY_TSTAMP	Entry Timestamp	Date/Time Tstamp
BNH_USER_ID	Last User Update	Char(10)
BNH_TSTAMP	Last timestamp update	Date/Time Current
Tstamp		
BNH_SIGNATURE_DT	Signature Date	Date

### Table: **Beneficiary Detail**

**TableName: EITBAS\_BEN\_DETAIL**

**Tablespace: EISBBND**

BND_EMPLOYEE_ID	Employee_Id	Char(10)
BNH_SEQNUM	Sequence Number	Char(5)
BND_COVERAGE_CD	Beneficiary Coverage Code	Char(4)
BND_PRIM_CONT	Beneficiary Primary/Contingent	Char(1)
BND_PERCENT	Beneficiary Percentage	Dec(5,2)
BND_USER_ID	Last User Update	Char(10)
BND_TSTAMP	Last timestamp update	Date/Time Current
Tstamp		
BND_SIGNATURE_DT	Signature Date	Date



Department of Administration  
Purchasing Division  
2019 Washington Street East  
Post Office Box 50130  
Charleston, WV 25305-0130

State of West Virginia  
Centralized Request for Proposals  
Info Technology

<b>Proc Folder:</b> 966930			<b>Reason for Modification:</b> Addendum No. 2 To move the Bid opening to 05/25/2022.
<b>Doc Description:</b> Addendum No. 2 BENEFITS ADMINISTRATION SYSTEM			
<b>Proc Type:</b> Central Master Agreement			
<b>Date Issued</b>	<b>Solicitation Closes</b>	<b>Solicitation No</b>	<b>Version</b>
2022-04-01	2022-05-25 13:30	CRFP 0225 PEI2200000001	3

**BID RECEIVING LOCATION**

BID CLERK  
DEPARTMENT OF ADMINISTRATION  
PURCHASING DIVISION  
2019 WASHINGTON ST E  
CHARLESTON WV 25305  
US

**VENDOR**

**Vendor Customer Code:**

**Vendor Name :**

**Address :**

**Street :**

**City :**

**State :**

**Country :**

**Zip :**

**Principal Contact :**

**Vendor Contact Phone:**

**Extension:**

**FOR INFORMATION CONTACT THE BUYER**

Melissa Pettrey  
(304) 558-0094  
melissa.k.pettrey@wv.gov

**Vendor  
Signature X**

**FEIN#**

**DATE**

**All offers subject to all terms and conditions contained in this solicitation**



# SOLICITATION NUMBER: PEI2200000001

## Addendum Number: 2

---

The purpose of this addendum is to modify the solicitation identified as ("Solicitation") to reflect the change(s) identified and described below.

### Applicable Addendum Category:

- ☒ [X] Modify bid opening date and time
- ☐ [ ] Modify specifications of product or service being sought
- ☐ [ ] Attachment of vendor questions and responses
- ☐ [ ] Attachment of pre-bid sign-in sheet
- ☐ [ ] Correction of error
- ☐ [ ] Other

### Description of Modification to Solicitation:

1. To move the bid opening date to 05/25/2022 @ 1:30 PM
2. Responses to vendor questions will be published in an upcoming addendum.

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

### Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.



Department of Administration  
Purchasing Division  
2019 Washington Street East  
Post Office Box 50130  
Charleston, WV 25305-0130

State of West Virginia  
Centralized Request for Proposals  
Info Technology

<b>Proc Folder:</b> 966930			<b>Reason for Modification:</b> Addendum No. 1
<b>Doc Description:</b> Addendum No. 1 BENEFITS ADMINISTRATION SYSTEM			
<b>Proc Type:</b> Central Master Agreement			
<b>Date Issued</b>	<b>Solicitation Closes</b>	<b>Solicitation No</b>	<b>Version</b>
2022-03-25	2022-04-06 13:30	CRFP 0225 PEI2200000001	2

**BID RECEIVING LOCATION**

BID CLERK  
DEPARTMENT OF ADMINISTRATION  
PURCHASING DIVISION  
2019 WASHINGTON ST E  
CHARLESTON WV 25305  
US

**VENDOR**

**Vendor Customer Code:**

**Vendor Name :**

**Address :**

**Street :**

**City :**

**State :**

**Country :**

**Zip :**

**Principal Contact :**

**Vendor Contact Phone:**

**Extension:**

**FOR INFORMATION CONTACT THE BUYER**

Melissa Pettrey  
(304) 558-0094  
melissa.k.pettrey@wv.gov

**Vendor  
Signature X**

**FEIN#**

**DATE**

All offers subject to all terms and conditions contained in this solicitation

# SOLICITATION NUMBER: PEI2200000001

## Addendum Number: 1

---

The purpose of this addendum is to modify the solicitation identified as ("Solicitation") to reflect the change(s) identified and described below.

### Applicable Addendum Category:

- ☒ [X] Modify bid opening date and time
- ☐ [ ] Modify specifications of product or service being sought
- ☐ [ ] Attachment of vendor questions and responses
- ☐ [ ] Attachment of pre-bid sign-in sheet
- ☐ [ ] Correction of error
- ☐ [ ] Other

### Description of Modification to Solicitation:

- 1. To move the bid opening date from 03/29/2022 to 04/06/2022 @ 1:30 PM.  
Vendor questions and responses will be published in an upcoming addendum.**

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

### Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: PE12200000001**

**Instructions:** Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

**Acknowledgment:** I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

**Addendum Numbers Received:**

(Check the box next to each addendum received)

<input checked="" type="checkbox"/> Addendum No. 1	<input type="checkbox"/> Addendum No. 6
<input checked="" type="checkbox"/> Addendum No. 2	<input type="checkbox"/> Addendum No. 7
<input checked="" type="checkbox"/> Addendum No. 3	<input type="checkbox"/> Addendum No. 8
<input type="checkbox"/> Addendum No. 4	<input type="checkbox"/> Addendum No. 9
<input type="checkbox"/> Addendum No. 5	<input type="checkbox"/> Addendum No. 10

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that 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.

LifeWorks (US) Ltd.

Company

*Max-Andre Lopez*

Authorized Signature

5/13/2022

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

**Vendor's Firm Fixed Price Cost Proposal for Goods and Mandatory Requirements**  
**Vendor-Hosted Solution Implementation Annual Cost**

Vendor Name: \_\_\_\_\_  
 LifeWorks \_\_\_\_\_

NOTE: All hourly rates quoted must be for "on-site" to support on-site and off-site support, travel, per diem, and any other applicable expenses.

Cost Element	Year 0 (Implementation Period)	Year 1			Year 2			Year 3			Year 4			Year 5			Total 5 Year Hours/Units	Total 5 Year Cost
		Hours/Units	Estimated Wage/Rate	Total	Hours/Units	Estimated Wage/Rate	Total	Hours/Units	Estimated Wage/Rate	Total	Hours/Units	Estimated Wage/Rate	Total	Hours/Units	Estimated Wage/Rate	Total		
<b>Implementation</b>																		
Solution Implementation <sup>1</sup>	\$5,471,140																	
Hardware	\$0.00																	
Third Party Software	\$528,860																	
<b>Annual Fees</b>																		
Hosting Fees				\$550,000			\$550,000			\$550,000			\$550,000			\$550,000		\$2,200,000
License/Maintenance Fees (Vendor Software)				\$857,572			\$857,572			\$857,572			\$857,572			\$857,572		\$4,287,860
License/Maintenance Fees (Third Party Software)				\$92,428			\$92,428			\$92,428			\$92,428			\$92,428		\$462,140
Support Fees (Third Party Software)				\$0			\$0			\$0			\$0			\$0		\$0
Other (specify):				\$0			\$0			\$0			\$0			\$0		\$0
<b>Subtotal</b>				\$1,500,000			\$1,500,000			\$1,500,000			\$1,500,000			\$1,500,000		\$7,500,000
<b>Additional Support Services - Service hour quantities are estimates only; PEIA neither guarantees nor implies that an individual category will be used; nor guarantees the number of hours needed over the course of the contract.</b>																		
Additional Functional Requirements			\$300.00	1000	\$300,000.00	\$300.00	1000	\$300,000.00	\$300.00	1000	\$300,000.00	\$300.00	1000	\$300,000.00	\$300.00	1000	\$300,000.00	\$1,500,000.00
Support Ticket Consulting Services																		
Low			\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$375,000.00
Moderate			\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$375,000.00
High			\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$375,000.00
Critical			\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$375,000.00
Additional Training			\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$750,000.00
Additional Interfaces			\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$750,000.00
Additional Reporting			\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$750,000.00
<b>Subtotal</b>				\$300	\$1,050,000.00	\$300.00	1000	\$1,050,000.00	\$300.00	1000	\$1,050,000.00	\$300.00	1000	\$1,050,000.00	\$300.00	1000	\$1,050,000.00	\$5,250,000.00
<b>TOTAL</b>	<b>\$8,000,000.00</b>			<b>\$2,550,000</b>			<b>\$2,550,000</b>			<b>\$2,550,000</b>			<b>\$2,550,000</b>			<b>\$2,550,000</b>		<b>\$12,750,000</b>

**\* Vendors: If a discounted rate is available for a multi-year long term agreement please provide this information here:**

Questions to Answer:	Yes/No
Multi-Year Discount Available?	Yes
5+ Year Discount?	Yes
Other Term?	

If 'YES' was entered for any above question, please provide details in the text box below:

LifeWorks looks forward to a long-term partnership with PEIA. In support of our partnership, we are proposing the following renewal multi-year Ariel EAS license cost discounts:

-Renewal contract for an additional five (5) years – twenty percent (20%) reduction in the Ariel EAS license cost of \$370,500.

**LifeWorks Pricing Notes and Assumptions:**

- 1) Solution Implementation cost includes \$605,000 for license fees
- 2) 100% U.S. resources are available at a higher cost
- 3) Annual hosting cost may vary based on 3rd party fee increases



Cost Element	Year 6 (Optional)			Year 7 (Optional)			Year 8 (Optional)			Total 8 Year Hours/Units	Total 8 Year Cost
	\$/hr or unit	Hours/Units	Total	\$/hr or unit	Hours/Units	Total	\$/hr or unit	Hours/Units	Total		
Implementation											
Solution Implementation <sup>1</sup>											
Hardware											
Third Party Software											
Annual Fees											
Hosting Fees			\$550,000			\$550,000			\$550,000		\$4,400,000
License/Maintenance Fees (Vendor Software)			\$857,572			\$857,572			\$857,572		\$6,860,576
License/Maintenance Fees (Third Party Software)			\$92,428			\$92,428			\$92,428		\$739,424
Support Fees (Third Party Software)			\$0.00			\$0.00			\$0.00		\$0
Other (specify):			\$0.00			\$0.00			\$0.00		\$0
Subtotal			\$1,500,000			\$1,500,000			\$1,500,000		\$12,000,000
Additional Support Services - Service hour quantities											
Additional Functional Requirement(s)	\$300.00	1000	\$300,000.00	\$300.00	1000	\$300,000.00	\$300.00	1000	\$300,000.00	8000	\$2,400,000.00
Support Ticket Consulting Services											
Low	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	2000	\$600,000.00
Moderate	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	2000	\$600,000.00
High	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	2000	\$600,000.00
Critical	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	\$300.00	250	\$75,000.00	2000	\$600,000.00
Additional Training	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	4000	\$1,200,000.00
Additional Interfaces	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	4000	\$1,200,000.00
Additional Reporting	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	\$300.00	500	\$150,000.00	4000	\$1,200,000.00
Subtotal		3500	\$1,050,000.00		3500	\$1,050,000.00		3500	\$1,050,000.00	28,000	\$8,400,000.00
TOTAL			\$2,550,000			\$2,550,000			\$2,550,000		\$20,400,000

[illegible]



**BAS - Schedule 3**  
**Third Party Software Costs for Mandatory Project Elements**  
**Vendor's Firm Fixed-Price Cost Proposal**

(The Vendor should replicate this table as necessary to account for all components.)

[illegible]

<b>Total</b>		<b>\$528,860</b>
<b>#</b>	<b>DESCRIPTION</b>	
1	Sequential item number	
2	# of copies / licenses required	
3	Who the manufacturer is	
4	Specific version number	
5	Item description	
6	Estimated cost of 1 copy / license (including all ancillary charges for freight, insurance while in transit, etc.)	