

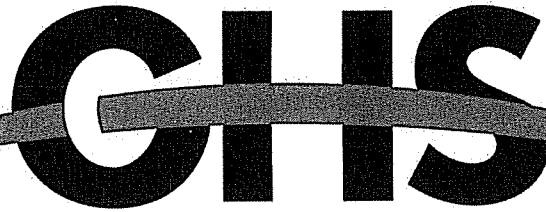


**State of West Virginia
Department of Administration
Purchasing Division**

NOTICE

Due to the size of this bid, it was impractical to scan every page for online viewing. We have made an attempt to scan and publish all pertinent bid information. However, it is important to note that some pages were necessarily omitted.

If you would like to review the bid in its entirety, please contact the buyer. Thank you.



DATA MANAGEMENT

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West Virginia Automated Prior Authorization Services

TECHNICAL PROPOSAL

**Prepared for the State of West Virginia
Bureau for Medical Services
Response to RFQ #BMS80643**

ORIGINAL

March 10, 2008

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Prepared by:

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Title Page

March 10, 2008

Roberta Wagner, Senior Buyer
Purchasing Division
2019 Washington Street, East
PO Box 50130
Charleston, WV 25305-0130

Dear Ms. Wagner,

We applaud the State of West Virginia's interest in implementing an Automated Pharmacy Prior Authorization system that will have the effect of increasing efficiencies, reducing expenditures, and improving therapeutic outcomes for the West Virginia Medicaid population.

GHS Data Management (GHS) is pleased to present West Virginia's Bureau for Medical Services (BMS) with our proposal to provide an Automated Prior Authorization (PA) system, as outlined in RFP #BMS80643, as amended. As instructed, we have included 1 original and 6 copies of our technical proposal and 1 original and 6 copy of our cost proposal. We have also included a CD containing our technical proposal in Word format, and a separate CD containing our cost proposal.

I will serve as the primary contact for this proposal and any subsequent contract negotiations. I am authorized to negotiate on behalf of GHS and shall be responsible for the management of any potential contract with respect to the Automated PA services project. We will work with the Bureau to establish a clear communication plan from initial design, development, and implementation (DDI) through on-going operations to ensure the goals and objectives of the bureau with regard to PA services are met.

We will provide the Bureau with a cost-effective Automated Prior Authorization solution that will integrate seamlessly with your POS vendor. As the clinical Supplemental Rebate and Preferred Drug List vendor for the State of West Virginia, we have an established relationship with the State and your POS vendor. GHS presently provides Prior Authorization services to the State Medicaid Agencies in Iowa and Maine. We were recently selected to be the Supplemental Drug Rebate vendor for the State of Wyoming. We are the pharmacy vendor to the Sovereign States Drug Consortium, a multi-state drug rebate pool that presently includes Iowa, Maine, Utah and Vermont.

GHS's proven systems integration capabilities coupled with our knowledge of pharmacies and prescription drugs as well as our subject matter expertise as the POS and PA vendor for the states of Maine and Iowa, will be invaluable to the Bureau. We have extensive experience developing, implementing, and operating POS and PA systems for state Medicaid programs. We presently cover over 600,000 Medicaid lives for POS and PA services in the states of Iowa and Maine. We have implemented an Automated PA system as part of our full Pharmacy Benefits Services Administration (PBSA) in Iowa and Maine. We have effectively built POS and PA edits into our existing pharmacy claims adjudication engine.

West Virginia, however, is seeking a “best of breeds” solution that will integrate seamlessly with your existing POS vendor. GHS is proposing a solution that will allow our Automated PA solution to integrate securely within the POS infrastructure in a way that will meet or exceed your expectations. Our Automated PA solution will be scalable, flexible and efficient in its operation within the overall POS solution. Our solution is consistent with the strategies, technologies, and business rules that will be implemented as part of the Bureau’s overall pharmacy strategy.

The team at GHS has integrated with numerous vendors over the years including CNSI in Maine and ACS in Iowa. As the current SR and PDL vendor in West Virginia, we have worked through many file sharing and data transfer issues with Unisys. We have communications networks and project management practices established that ensure proper work flow between the two companies. We are prepared to build upon our existing relationship in a way that will benefit all parties involved, including the West Virginia Medicaid population. We point with a matter of pride to our ability to work with State Medicaid staffs and vendors to ensure seamless integrations among and between our Pharmacy Benefits services and the MMIS services.

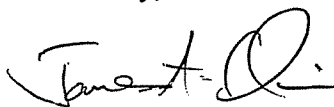
GHS will carry out all contract responsibilities in the same highly professional and successful manner that all our clients have become accustomed to receiving. The implementation of the Automated PA system will be seamless and without impact on providers, clients, or the State itself. Our commitment to a transparent partnership will allow for a smooth working relationship.

Based on our review of the State’s current POS system, the West Virginia pharmacy program and the RFP requirements, GHS believes that it is the most suitable Automated PA services candidate for the following reasons:

- We currently operate Automated PA and POS systems in Maine and Iowa.
- GHS has successfully established data feeds and file transfers with Unisys and will be able to quickly capitalize on our relationship.
- Our integrated clinical-data team will help the State develop a rules engine that will result in improved therapeutic outcomes for the West Virginia Medicaid community.
- Using lessons and experience from previous large-scale development projects in Colorado, Iowa and Maine, and from our ability to work well with WV state staff and vendors, the DDI phase and implementation will be seamless and without significant impact on Medicaid providers, beneficiaries, the State’s POS vendor or West Virginia.

We are excited about this opportunity because it represents a forward-thinking initiative aimed at improving services, while lowering costs in the West Virginia Medicaid community.

Sincerely,



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