⊓ Staples.

From: salesforce

To: bid clerk

Memo: crfi 0511 bms2200000001

⊓ Staples.

Self-Serve Fax Cover Sheet

To: Bid Clerk

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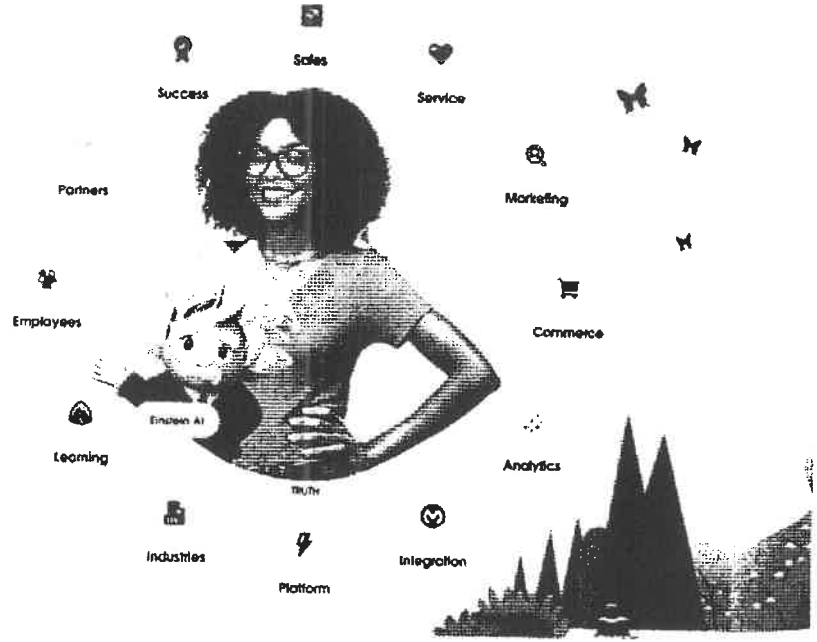
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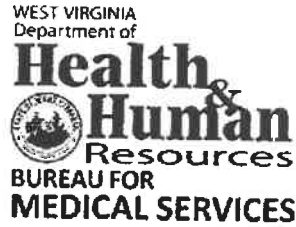
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Response to

WEST VIRGINIA
Department of
Health & Human
Resources
BUREAU FOR
MEDICAL SERVICES

REQUEST FOR INFORMATION-MEDICAID ENTERPRISE SYSTEM
CRFI 0511 BMS2200000001

January 7, 2022

Melissa Rowe
Account Executive
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(859) 333-0873

salesforce.com, Inc.
Corporate Headquarters
Salesforce Tower
415 Mission Street, 3rd Floor
San Francisco, CA 94105

Salesforce Response to RFI: CRFI 0511 BMS2200000001

January 7, 2022

Crystal G. Hustead, Bid Clerk
West Virginia Department of Administration
Purchasing Division
2019 Washington Street E
Charleston, WV 25305

Email: crystal.g.hustead@wv.gov

Re: Response to DHHR BMS Medicaid Enterprise Systems Modernization Request for Information

Ms. Hustead:

Salesforce appreciates the opportunity to respond to the West Virginia Department of Health and Human Resources (DHHR) request for information for Medicaid Enterprise Systems (MES) modernization approaches. We understand that the Department is seeking information from vendors on other Medicaid Enterprise solutions that may be used for Medicaid Enterprise Systems Roadmap planning. While system integrators that utilize Salesforce technology may also be responding directly, Salesforce is providing an RFI response that provides an overview of our recommendations and platform.

Salesforce is pleased to present our capabilities to help DHHR deliver innovative solutions supporting the Medicaid Enterprise. Salesforce is the world's enterprise cloud computing leader, dedicated to helping companies and government agencies transform and connect through cloud, social, and mobile technologies. Our 150,000+ customers include over 3,400 government agencies worldwide, representing all federal cabinet level agencies and the majority of the United States. Cloud computing offers a tremendous opportunity to consolidate and innovate, freeing up time, money and resources towards agency productivity. Salesforce provides the #1 ranked Platform as a Service (PaaS) and the World's #1 Software as a Service (SaaS) CRM solution. Salesforce's world leading, trusted cloud platform allows agencies and partners to build applications that achieve a 59% accelerated time to value, implementing solutions in weeks and months vs. months or years, compared to on-premise system implementations. *It's one of the many reasons why Forbes named Salesforce one of the World's Most Innovative Companies nine years in a row and Innovator of the Decade.*

We look forward to building a long lasting relationship to support the DHHR in your technology and program innovation efforts and the opportunity to meet with you and provide a formal demo to further educate your team on our capabilities.

I can be contacted at (859) 333-0873 or melissa.rowe@salesforce.com with any questions or clarifications. Thank you for your time and interest in our solution.

Sincerely,

Melissa Rowe

Melisssa Rowe, Account Executive

Salesforce Response to RFI: CRFI 0511 BMS2200000001

Disclaimer:

Salesforce is an innovative cloud services provider with evolving technology. Salesforce has made a good faith effort to provide you with responses to your request that are accurate as of the date of the response and within our knowledge. Because Salesforce procedures and policies change from time to time and Salesforce continues to innovate by providing each customer multiple major release upgrades each year, we cannot guarantee that the answers to your request will remain the same over time. The rights and responsibilities of the parties with regard to your use of Salesforce's online software services shall be set forth solely in the applicable agreement executed by Salesforce, including its provision that any purchases thereunder are not contingent on the delivery of any future functionality or features, or dependent on any oral or written public comments made by Salesforce regarding future functionality or features. The responses here to your request shall not be part of a final contract. Salesforce provides its proprietary information herein with the expectation that it will be exempt from disclosure under applicable federal, state, or local laws.

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Executive Summary

The West Virginia Department of Health & Human Resources (DHHR) Bureau of Medical Services (BMS) is seeking information to create a Medicaid Enterprise Systems (MES) Strategic Plan for the design, development and implementation of core systems supporting the administration of the State's Medicaid program. The Department is looking to implement innovative solutions across the Medicaid Enterprise to drive improvements across core business priorities, including cost savings, performance efficiencies, and improved care outcomes. Salesforce has used this RFI to provide DHHR with information on available technologies, including applications, infrastructure solutions, technical innovation, process re-engineering, and recommendations that we believe merit consideration to meet your goals.

Transform the Medicaid Enterprise to Gain Efficiency & Improve Program Outcomes Through Interoperability & Better Care Coordination

The COVID-19 pandemic created a crisis of economic uncertainty unlike the country has ever seen, putting the most critical elements of health, shelter, and safety at high risk. This has resulted in unprecedented demand for government services and programs, like Medicaid, to ensure the basic needs of citizens are met. The country witnessed information technology systems buckle under the pressure of surges in enrollment, coupled with the inability for government employees to interact face-to-face at the rate they did prior to the pandemic, creating a highly unstable environment for citizens to maintain their well-being and safety. As the ripple effect of the pandemic continues, economic shifts caused by income and job loss continue to drive trends in growing enrollment.

Prior to the pandemic, the design of Medicaid Enterprise Systems primarily focused on the transactional aspect of program delivery -- managing enrollments, processing claims, reviewing retroactive transactional data, and ensuring continuous operations. Over the last decade, conversations around interoperability and modularity have trended within the Medicaid community, further driven by guidance and compliance mandates from the Centers for Medicare & Medicaid Service (CMS). Many states have struggled to execute on these requirements from within the legacy MES environment - running into systemic limitations and budgetary constraints. These limitations have hampered progress in achieving the goals of the Medicaid Information Technology Architecture around modularity and program outcomes, as well as maximizing the opportunity presented by Health Information Exchanges.

A fundamental challenge of the last 10 plus years of dialogue on Medicaid, modularity, interoperability, program administration approaches, and other trends around MES technology is inwardly focused on the transactional elements of Medicaid. This has often resulted in overlooking the core stakeholders in the program - Members and Providers. The COVID-19 pandemic has brought to light the renewed need to shift the fundamental drivers of MES solutions from program administration outcomes to public health outcomes. There is a need to ensure MES systems also have the capacity to track quality of care, constituent safety, and health outcomes rather than just pay claims.

A once in a lifetime opportunity has been presented in the wake of the pandemic. With new funding sources like the American Rescue Plan Act of 2020, Medicaid agencies around the country have the unique opportunity to reimagine the delivery of government healthcare with a renewed focus on Member health outcomes. With new ways to incorporate innovative technologies around topics like value-based payments (VBP), Block Grant Funding Models, and CMS Outcomes-based Certification, state Medicaid agencies are further empowered to evaluate how technology is maximizing these tools for the benefit of its Members and other stakeholders. Most importantly, there is an opportunity to align MES solutions with a focus on leveraging population health data as a mechanism for helping drive better outcomes for at risk Members, but also using this data to proactively monitor and address health challenges before they appear at the scale of a pandemic like COVID-19. Salesforce commends DHHR in its proactive approach to identifying new and innovative ideas to make this shift and ensure the health of West Virginians sits at the core of any new MES investments.

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Impact of the Legacy of Medicaid Modularity

The 2016 guidance provided by the CMS outlined recommendations for the development of modular MMIS components. It was driven by the intention of reducing the risk of large, lengthy projects and to facilitate incremental updates and changes to IT systems. In CMS' letter to State Medicaid Director to supplement CMS-2392-F, "Mechanized Claims Processing and Information Retrieval Systems (90/10)," which became effective January 1, 2016, CMS defined a module as "...a packaged, functional business process or set of processes implemented through software, data, and interoperable interfaces that are enabled through design principles in which functions of a complex system are partitioned into discrete, scalable, reusable components."

CMS anticipated this approach, which allowed for the use of both commercial-off-the-shelf (COTS) products and Software-as-a-Service (SaaS) solutions, would facilitate agile and interoperable projects while avoiding lengthy implementations and vendor lock-in. However, many states struggled to create a framework for modularity that facilitated a common view of Member and Provider data. States became hindered by complex integrations of differing technologies and data models. As a result, the market has become saturated with COTS solutions built on varied technology platforms with limited opportunity for configuration to the specific needs of each state and challenges integrating across each unique module. Vendors selected to serve for the System Integrator role are burdened with designing and building the integration technology to handle this complexity, while managing outcomes across multiple vendors, module business processes, and data models.

As a result, while states may be able to procure these technology components more quickly, integration challenges drive lengthy, high cost and high risk projects. This approach to modularity has allowed states to continue to successfully manage Medicaid program administration, but it has not facilitated better coordination of care for Members or allowed for clearer visibility and impact on individual and population health outcomes.

Reimagining Medicaid Enterprise Systems Drive Better Health Outcomes

As agencies like DHHR look to modernize their MES solutions, Salesforce sees an opportunity to shift the narrative around delivering on the goals and desired outcomes for the Medicaid program. The COVID-19 pandemic has proven the need to refocus on constituent health outcomes, while continuing to ensure supporting systems can facilitate efficient program administration. This requires taking the dynamics of a modular approach and putting the Members at the center of the entire MES enterprise.

Salesforce recommends, rather than beginning a project with each module viewed individually with the intention of integrating via a System Integrator, creating single Member and Provider 360 views to serve as the single source of truth for a Member or Provider's record across modules. To achieve this new approach, DHHR would need to create a front-end digital engagement layer to serve as the single source of truth (SSOT) for Members and Providers. This layer is where employees and other users interact with the Member or Provider's record. Once the Member and Provider 360 views are determined, DHHR plugs these 360 views into the existing systems, new modules, or 3rd party systems that represent the system of record for the critical Member and Provider data. Salesforce believes a Member- and Provider-centric approach to the modernization of state Medicaid Enterprise Systems will increase **Engagement** enable **Interoperability** for improved insights and **Care Coordination** that drive better health outcomes.

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Reimagining State Medicaid Enterprise Systems

Gaining Efficiency & Driving Better Member Outcomes Through Interoperability & Better Care Coordination

Member-Centric Engagement	Gain _Insights_ Via Interoperability	Drive Health _Outcomes_ with Coordinated Care
Single View of the Member Across Modules & Systems	FHIR-ready Interoperability & Integration 3rd Party Systems	Leverage Member Data to Manage Ongoing Care & Services
Member-friendly Eligibility & Enrollment	Single Source of Truth for Member Data Across Systems	Develop Comprehensive Care Plans Across Care Teams
Proactive Outreach & Communications	Analytics & Data Visualization for Tracking Trends & Identifying At Risk Individuals or Populations	Coordinate Member Care & Assistance Across State Agencies, MCOs & Providers

Section 4: RFI Purpose & Background

Question 4.2.1	Please describe any elements BMS should consider incorporating into its vision, planning, and implementation for a modernized, modular MES.

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Salesforce recommends, rather than beginning a project with each module viewed individually with the intention of integrating via a System Integrator, creating single Member and Provider 360 views to serve as the single source of truth for a Member or Provider's record across modules. To achieve this new approach, BMS would need to create a front-end digital engagement layer to serve as the single source of truth (SSOT) for Members and Providers. This layer is where employees and other users interact with the Member or Provider's record. Once the Member and Provider 360 views are determined, BMS plugs these 360 views into the existing systems, new modules, or 3rd party systems that represent the system of record for the critical Member and Provider data. Salesforce believes a Member- and Provider-centric approach to the modernization of state Medicaid Enterprise Systems will enable interoperability and care coordination enabling insights that drive better health outcomes.

When government agencies take a cloud-based approach in modernizing their citizen engagement systems, this provides scalability for today and future growth. Agencies can add services at their pace, only as they need them and this speeds up deployment. By integrating previously siloed agency departments with shared services on a single Member 360 engagement platform, you create a

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future-ready platform with the benefit of automatic updates. More and more citizens and businesses are turning to self-service channels to seek support from government agencies. Almost overnight, COVID-19 has accelerated these user preferences and trends to new levels. Agencies are also experiencing a growing demand from their user base (i.e. business owners, citizens, partners, employees, inspectors, etc.) to provide more personalized experiences to simplify access to services and programs. Agencies need the citizen engagement tools to digitally transform with speed, flexibility and scale to keep up with changing times and their stakeholder demands, and we are proud to be the only technology platform company to offer the breadth of citizen engagement solutions to help agencies accelerate innovation and prepare for the future.

Digital transformation planning is becoming essential to ensure the technology investments made today are part of a larger vision to reimagine government service delivery of the future. It can be overwhelming to balance urgent needs with long-term planning and goals. Agencies with complex programs and many different stakeholders benefit from using a customer-focused approach to develop a plan that is oriented to the most mission-critical goals and needs for each stakeholder group.

Question 4.2.2	**In the projects you have been on, what was the optimal configuration of MES modules specific to functionality, integration of other solutions, and management of data?**

We will defer to other systems integrator respondents on the question of optimal configuration of MES modules for a more informed point of view than we can offer the State.

Question 4.2.3	**Describe Medicaid Enterprise solutions your organization provides or is developing that BMS should consider during its roadmap planning. BMS is interested in learning about the following:** **1. The Medicaid Enterprise business processes or discrete functionalities targeted by the Medicaid Enterprise solution.** **2. How the Medicaid Enterprise solution is packaged (i.e., commercial-off-the shelf (COTS) or proprietary; modular or tightly integrated; cloud or local). 3. How the Medicaid Enterprise solution is priced (please include methodology only, e.g., Per Member per Month, fixed price per year, data usage—please do not provide actual purchase prices).** **4. In how many states is your Medicaid Enterprise solution currently deployed, or expected to be deployed, and how long has it been in use.** **5. Configurations and customizations typically requested to adapt the product for use in a State Medicaid Program.** **6. Technical architecture and processing capacity/scalability.** **7. User-facing and self-service capabilities.** **8. Interface support, flexibility, and extensibility to other stakeholders and State agencies.**

Salesforce is the enterprise cloud computing leader dedicated to helping companies and government agencies transform into connected organizations through social and mobile technologies. The company's trusted cloud platform is creating a connected experience for over 3,400 government agencies worldwide, including all Federal cabinet-level Government agencies and 45 out of 50 US States. With the world's leading cloud platform, Salesforce is freeing government data from legacy systems, empowering citizens and connecting agencies to administer government in powerful new ways. Government agencies are using Salesforce solutions for a multitude of government functions including health and human services, case management, grants management, constituent communications and correspondence management, 311, call/contact center management, licensing,

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permitting and inspections, outreach programs, learning management, volunteer management, project/program management, and even donor management, among numerous others.

Salesforce service offerings are intuitive and easy-to-use, can be deployed rapidly, customized easily and integrated with other platforms and enterprise apps. Salesforce delivers solutions as a service via all the major Internet browsers and on leading mobile devices. Not only does Salesforce provide enterprise cloud apps, Salesforce also provides an enterprise cloud computing platform upon which Salesforce customers and partners build and customize their own apps.

Salesforce's vision is based on a multi-tenant technology architecture and a subscription service business model. Salesforce metadata-driven, multi-tenant cloud runs on a single code base, which enables every customer to run their organization on the latest release without disruption. Because Salesforce deploys all upgrades on its servers, new features and functionality automatically become part of the Salesforce service on the upgrade release date and therefore benefit all Salesforce customers immediately. Salesforce continually provides these cloud computing technologies to enterprise customers around the world.

Recognition for Leadership in the Cloud

Salesforce has received multiple awards and recognition for its expertise and leadership in the cloud. From Salesforce's beginnings over 22 years ago, their 150,000+ customers have responded to their cloud computing offerings with overwhelming enthusiasm. Such success has propelled Salesforce to be #1 in Enterprise Cloud Computing and #1 in CRM according to International Data Corporation (IDC). Salesforce also ranks as the Leader in the Gartner Magic Quadrants for "CRM Customer Engagement Center" (SaaS), "Field Service Management" (SaaS), and "Sales Force Automation" (SaaS), and a Leader in the Gartner Magic Quadrant for "Enterprise Low-Code Application Platforms" (PaaS). In addition to the recognition from leading Industry Analysts, Forbes Magazine named Salesforce "Innovator of the Decade" and has named Salesforce one of the World's Most Innovative Companies nine years in a row.

Gartner Leader Sales Force Automation, 2020	**Gartner** Leader CRM Customer Engagement Center, 2020	**Gartner** A Leader Field Service Management, 2020
Gartner A Leader Enterprise Low-Code Application Platforms, 2020	**Forbes** "Innovator of the Decade" 2016	FORTUNE 100 BEST COMPANIES TO WORK FOR #6 Best Place to Work in 2020
FORTUNE 500 Fortune 500 Member	**Forbes** The World's Most Innovative Companies 2011-2018	
50 #9 on Fortune Future 50 List	FORTUNE WORLD'S MOST ADMIRED COMPANIES 2020 Named #10 Most Admired Company in the World	#3 World's Best Workplaces, 2019
IDC #1 CRM Provider 2014 2020	TOP COMPANIES #4 Top Companies 2019	FORRESTER A Leader CRM Suites Q4 2018
FORRESTER A Leader Data Management Platforms Q2 2019	FORRESTER A Leader SaaS Marketplaces Q4 2018	FORRESTER A Leader Digital Experience Platforms Q3 2019

The Magic Quadrant Gartner reports reflected in this graphic are available upon request from Salesforce. To access these reports, please go to: https://www.salesforce.com/company/recognition/analyst-reports/.

Rated #1 by IDC, Gartner, and Forrester, the Salesforce Platform has been designed to provide customers with high levels of performance, reliability, and security. Salesforce built and maintains a

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multi-tenant application architecture that has been designed to enable the service to scale reliably, and cost-effectively to accommodate millions of users. Our customers will not need to maintain any hardware or software. The Salesforce cloud based architecture will allow you to deploy solutions supporting Medicaid Enterprise Systems rapidly and scale at will for future needs.

BMS can extend your initial investment and easily find, test, and install hundreds of pre-integrated apps from the Salesforce partner community. With the Salesforce Private AppExchange offering, BMS can create a secure, customized, branded application store location to host customized apps and distribute apps across users. Role-based access allows BMS' users instant access to any mobile or cloud application they need to be productive, on any device. And what is truly unique to Salesforce is that any application built on the Salesforce Platform can be reused and can also be utilized in a Private AppExchange. This allows organization CIOs to foster reuse of applications and drive down development costs. Visit the public Salesforce application store at: https://appexchange.salesforce.com/. View a private AppExchange Demo: Salesforce AppExchange demo.

Salesforce provides a single enterprise platform that delivers multiple services and enables state Medicaid agencies to rapidly configure solutions specifically tailored to your mission and requirements. Salesforce solutions free data from legacy systems, empower customers, and connect organizations, and employees to administer services in powerful new ways. The Salesforce Platform is the lowest risk and fastest way to securely build, connect, optimize, and deploy every kind of app tailored for any type of use case. The key advantages of Salesforce solutions include:

Enterprise Cloud Platform. State Medicaid agencies can optimize mission activities by managing all interactions and data through a customer success "platform of engagement." Salesforce built and maintains a multi-tenant application architecture that has been designed to enable the Salesforce service to scale securely, reliably and cost-effectively. Salesforce's multi-tenant cloud solutions provide a single, shared infrastructure, one code base, one platform that is all centrally managed, with platform-based Application Programming Interfaces (APIs) to support all integration traffic, and (3) three major

A True Multi-tenant Cloud Platform
- Single, shared infrastructure and common code base that is consistent across all customers
- Platform-based APIs to support all integration traffic
- Scalable, metadata-driven architecture to rapidly configure, test, and deploy apps on any device with clicks and not code
- 3 major release upgrades a year included in the service with no impact to your configurations and customizations

release upgrades a year included as part of the subscription service at no additional cost. The Salesforce Platform offers a core set of technologies that not only power the Salesforce Software as a Service (SaaS) and high-productivity application Platform as a Service (PaaS) products, but also allows organizations to build and rapidly deploy custom apps with just a few clicks all from a single canvas, connecting data from any system, and managing it from anywhere on any desktop and mobile device.

Secure, Private, Scalable, and Reliable. The Salesforce service has been designed to provide customers with 100% trusted privacy with the highest levels of performance, reliability and security. Salesforce has built, and continues to invest in a comprehensive security infrastructure, including firewalls, intrusion detection systems, and encryption for transmissions over the Internet, which Salesforce monitors and tests on a regular basis. Salesforce built and maintains a multi-tenant application architecture that has been designed to enable the Salesforce service to scale securely, reliably and cost-effectively. The Salesforce multi-tenant application architecture maintains the integrity and separation of customer data while still permitting all customers to use the same application functionality simultaneously. With multi-tenancy, all Salesforce customers run their applications on a common infrastructure. This means that every customer is always on the latest release of Salesforce applications, and has access to the latest technology. Multi-tenancy means that it is easier to scale new users and applications. With multi-tenancy, customers don't have to worry about managing infrastructure.

FedRAMP Certified SaaS/PaaS At the Highest Level. One of the reasons for Salesforce's success in

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government is their investment in delivering a secure Cloud experience. The service has been designed to provide Salesforce customers with privacy and high levels of performance, reliability, and security. Salesforce cloud-based solutions, Software as a Service (SaaS) and Platform as a Service (PaaS), are FedRAMP certified at the High Impact level to provide DHHR with the assurance that your data is secure. Focusing on a cloud-based application platform allows you to minimize internal administration, while providing organizational agility, speed-to-value, and ease-of-use for a broad range of stakeholders.

AppExchange and Private AppExchange. Developed in 2006, the Salesforce AppExchange is an enterprise cloud marketplace of over 5,000 pre-built enterprise cloud computing solutions that are integrated with Salesforce's SaaS/PaaS solutions and developed on the Salesforce Platform. To date, our customer community has utilized these solutions more than 5 million times. With just a mouse click and a *Collaboration is Embedded into all Aspects of the Solution.* Collaboration is critical to organizational effectiveness and productivity. Salesforce provides numerous standard collaboration capabilities that are embedded into the fabric of how users work within the system with a complete record of activity. This includes unstructured communications, reports, dashboards, triggered alerts, document management, universal search, knowledge management, mobility and much more.

Rapid App Development Using the Salesforce Platform. The Salesforce Platform allows customers to build apps fast with just a few clicks, designed for desktop and mobile devices, all from a single canvas, including pre-built AppExchange solutions. To help IT deliver apps faster, the Salesforce Platform offers a simple yet powerful set of declarative, point-and-click tools that anyone can use to achieve business goals at lightning speed.

Salesforce's trusted cloud platform allows customers to deliver 63% more new features per year generating an additional $5.7 million in new revenue per year on average according to IDC.

Without writing code, developers and business users alike can quickly and easily create custom apps on the Salesforce Platform with complex business logic and beautiful user interfaces designed specific to every screen. Salesforce Lightning Builder tools allow your organization to work in alignment with agile development methodologies as IT meets business demands faster.

Accelerated Time to Value. The Salesforce service can be deployed rapidly since customers do not have to spend time procuring, installing or maintaining the servers, storage, networking equipment, security products, or other infrastructure hardware and software necessary. Salesforce's trusted cloud platform offers customers 63% more new features per year generating an average of $5.7 million in new revenue per year. Additionally, customers are able to develop entirely new applications with greater frequency (111% more applications) and user adoption (a 95% increase) (according to IDC).

Lower Total Cost of Ownership and Dramatic Return on Investment (ROI). Salesforce enables customers to achieve significant up-front savings relative to the traditional enterprise software model. Customers benefit from the predictability of their future costs since they generally pay for the service on a per subscriber basis for the term of the subscription contract. Because Salesforce deploys all updates on Salesforce servers, new features and functionality automatically become part of the Salesforce service (on the update release date) and therefore benefit all Salesforce customers immediately.

Independent studies conducted by leading Industry Analysts such as Gartner, Forrester and IDC (International Data Corporation) show the cost effectiveness and the large ROI potential of the Salesforce Platform. In IDC's study published in October 2020, the following key Business Value results were cited:

- 508% five-year ROI
- 6 months to payback
- 56% more productive application development teams
- 2x more applications released annually
- 68% reduction in application development lifecycle
- 63% more new features released per year

89%
reduced unplanned downtime

68%
reduction in app dev lifecycle

56%
more productive app dev teams

508%
ROI
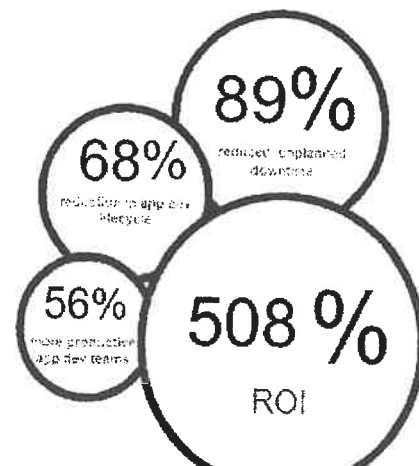
- $5.7 million additional new revenue generated per year
- 89% reduced unplanned downtime
- 63% more efficient application management teams

View IDC Report for more information and complete details.

Salesforce provides the benefit of three new product releases each year, including features for Health and Human Services agencies. Our customers have the opportunity to provide input into the new features included in each release, to help ensure the solution evolves with your changing needs. BMS can quickly launch customized engagement portals (supporting your Members, Providers, employees, and State or community partners) on the Salesforce Platform that incorporate real-time data, complex business logic, tailored, self-service components, and user interfaces designed specific to every screen. Salesforce SaaS/PaaS solutions have been designed to provide Salesforce customers with privacy and high levels of performance, reliability, and security. Salesforce's highly flexible, open platform can enable BMS to modernize rapidly and deliver unprecedented service.

The Medicaid Enterprise business processes targeted by the solution

To support the Member- and Provider-centric vision for reimagining Medicaid Enterprise Systems outlined, Salesforce recommends BMS begin with an an omni-channel, one-stop digital engagement platform solution that provides West Virginians a convenient, user-friendly way to connect with and get help from BMS, while giving BMS the tools it needs to provide this service. The solution needs to be flexible, secure, and able to support future increases in workload, integrate with BMS's current existing and legacy systems,. Salesforce recommends seeking a platform that improves Member engagement, Provider collaboration, and increases productivity in the most effective and efficient manner, while keeping with BMS's vision and mission. Salesforce recommends BMS procure a solution that gives a 360-degree view of the Member to ensure that every interaction is an opportunity to engage the Member in their health.

A Modern, Complete Engagement Platform. Salesforce offers a proven Digital Engagement Platform and solutions to meet the complex integrated eligibility and case management needs of Health and Human Services agencies. Salesforce provides a secure, multi-channel enterprise platform that puts the Member at the center of all government services providing a 360 degree view of the individual, their family, and a chronological view of all Member interactions (e.g., applications, benefit cases, activities, notes, etc.), which allows BMS to build out to a complete single record of all encounters with each client over time. The Member engagement platform meets Members where they are - on a mobile device, via text message, live chat, phone, email, or social media - reducing time in office locations and paper-based applications.

Salesforce lets Medicaid agencies gain data-driven insights and meet or exceed Member service expectations. With all member information (for example, benefits, preferences, and claims) **accessible via a single source,** every member of the care team has the information they need at their fingertips regardless of the system of record. Salesforce also tracks **social determinants of health,** which greatly impact health outcomes. Knowing even the most basic information — such as a member's transportation options, housing status, proximity to caregivers — can make a big difference in a member's health journey.

Members, care managers, and employees **can easily collaborate on any device** across all healthcare touchpoints, resulting in quicker and simpler processes. Case managers can push out simple surveys to identify and analyze barriers to completing care tasks and work with members to improve outcomes. From managing care requests to setting health goals, anyone involved in the healthcare process can efficiently communicate for an overall better member experience.

Complete member views enable anyone involved in a member's healthcare to easily identify behavior patterns, missing tests, and more. But Salesforce goes beyond presenting a consolidated view. With the help of **AI and automated workflows,** care team members can quickly identify the most at-risk

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populations to prioritize. Identifying members with the highest risk enables BMS and supporting care teams to focus their health intervention strategies and create campaigns to target them. By automating tasks in a member-centric way, care team members become more efficient and are able to personalize service at scale.

The key business processes supported by Salesforce solutions include:

Eligibility and Enrollment. Salesforce offers a self-service community portal to provide a user-friendly online interface for Members to learn about, apply and manage benefits for which they may be eligible and fill out an application. Self-service functionality can be configured for application, enrollment, payment, and change of circumstance reporting. With a knowledge base, BMS can also share information with Members via an online channel. With this feature, users can easily set up different knowledge base views including creating a Member-facing view and a separate internal view.

> The **New Jersey Division of Medical Assistance and Health Services** FamilyCare solution uses Salesforce for a guided, self-service Medicaid process, including electronic applications, ability to set up registered accounts, and integrated screening for Medicaid, SNAP, TANF, and GA. The screening is "mobile first" and designed based on previous projects done for CMS on integrated eligibility. NJ has seen a drastic reduction in abandoned applications and a reduction in development time to implement rule changes and maintenance.

Salesforce supports intake through all channels (web, email, call center, mobile). BMS can take applicants, enrollees, staff, providers, or participants through a step-by-step process to ensure the necessary information is captured correctly the first time and reduce redundant data entry. The solution provides the ability to create forms that make a user's experience easy by guiding them step-by-step through capturing the information that is necessary to complete intake.

States require real-time eligibility determination in compliance with federal and state program rules including rule periodicity (e.g. multiple rules set their own effectuation date ranges and the ability to retroactively calculate and enforce rule changes). States can compute eligibility for benefits based on the data provided in the individual's application and track a full history of eligibility determinations. For example, eligibility and benefit levels can be determined one of two ways to support multiple health coverage and financial benefit programs:

1. For very complex eligibility, such as Medicaid, Salesforce can collect all of the required information and submit it to an existing (or newly implemented) rules engine which determines eligibility. Salesforce supports web standards such as REST and SOAP and can integrate with any rules engine that also supports these standards.

2. For less complex programs, eligibility and benefits can be determined directly within Salesforce using calculation procedures, which are multi-step, table driven calculation services.

Salesforce provides Medicaid agencies with the resources it needs from initial program eligibility intake to plan assignment and selection, all the way through enrollment completion, benefit issuance, and managing care plans.

Contact Center. The Salesforce Contact Center solution allows public health organizations to serve their residents as they inquire about social care or public health services and when they want information from their government quickly, through their channel of choice. The pandemic only magnified this need and growing resident requests quickly overwhelmed most government call centers – with the exception of those who already had a cloud foundation. This

> COLORADO **PEAK.**
>
> The State of Colorado has over 90 applications built on top of the Salesforce Platform. The Department of Health Care Policy and Financing migration to the new case management system on Salesforce - along with a multi-channel call center and customer portal called PEAK - has **doubled the number of Medicaid benefits applications the State can process each month - from 30k to 60k - with the same budget.**
>
> To see the State's current Salesforce solution, please visit: http://coloradopeak.force.com/

solution offers a secure, multi-channel enterprise application that puts the customer experience at the center of all organizational services, knowledge, and experts, providing a personalized journey, which enables scalable access to services, more streamlined intake processes and effective mission execution -- all while delivering an engaging consumer experience.

Today's members expect a faster, more personalized healthcare experience than ever before. There has never been a more critical time for payers to leverage Salesforce to ensure not only the health of the member, but also the health of the business. Using native capabilities like CTI/telephony integration, intelligent call routing, chat, two-way SMS, knowledge articles, portals, video and predictive intelligence, your clinical team will be equipped with relevant member information the moment they engage the member. MetroPlus will be able to unlock data from legacy systems of record, give your team the tools they need to collaborate more efficiently, understand patients and members more deeply, and build 1-to-1 relationships across entire care journeys.

Contact centers can also offer an opportunity to drive overall cost savings through call deflection tools. Salesforce provides customer service chatbots to tackle simple, repetitive tasks that don't require the soft skills and experience of an agent. For example, if a customer asks how to reset a password or wants to know their application's status, a customer service chatbot quickly answers the question by accessing relevant information automatically. At the same time, your agents stay focused on solving complex problems and building relationships with customers.

> **Maryland Health Benefit Exchange (MHBE)** deployed Salesforce to assist their customers & partners with faster access to health insurance program assistance. Marylanders obtain answers, guidance & resources faster than ever before. The Salesforce Promise CRM 3.0 system replaced a legacy system with new & automated case management to assign cases to 24 local Health Departments. The system assists customers with health coverage program eligibility criteria, program changes, detailed information on health coverage benefits, & adding family members.

Member Management. Using Salesforce, BMS can create personalized Member journeys, extend reach across all channels and devices, deliver consistently relevant and personalized messaging, optimize benefits and services, gather better events data, and educate its target populations. BMS can develop a "physical and mobile front door" to engage Members at every stage of their relationship with the organization, enabling a personalized experience that delivers relevant content and functionality to each end user in alignment with their preferences and needs. This engagement can be done through phone, email, chat, SMS, video, or integration of data such as medical device monitoring or emergency alert systems tied right into the member profile. BMS will know where the Member is in their journey and provide the right touchpoint with the right message at the right time.

> The Mount Sinai Health System is using Salesforce to coordinate and manage the care of Medicaid recipients in its Performing Provider System (PPS). The Mount Sinai PPS includes more than 10,000 Medicaid service providers and 200 community organizations, from large area hospitals, to private medical practices, nursing homes and substance abuse treatment centers, to soup kitchens, homeless shelters, housing agencies and faith-based service groups. The Salesforce platform needed a way to effectively connect every provider and organization across its vast ecosystem—something that had never formally been done before—and easily provide individual caregivers with complete views of their patients, including medical histories, treatments, medications and other clinical data plus insights into social determinants.

Salesforce offers a proven Member Engagement Platform and solutions to meet the complex needs of Medicaid Enterprise Systems. Salesforce provides a secure, multi-channel enterprise platform that puts the Member at the center of all government services providing a 360 degree view of the Member. Our solution can help BMS enhance its mission to improve the quality of life for individuals and families in need while deploying in an accelerated fashion. Salesforce's highly flexible, open-platform can enable the Department to modernize rapidly, and deliver unprecedented service. Salesforce ranks as the Leader in the Gartner Magic Quadrant for "CRM Customer Engagement Center" (SaaS).

Provider Management. Using native functionality in the Salesforce platform, BMS will be enabled to manage the end-to-end provider journey for your Medicaid provider ecosystem from screening to enrolling to service delivery. The Salesforce platform can accelerate the certification or recertification of Medicaid providers, facilitate ongoing engagement, engage as part of broader care

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teams, and facilitate
overall administrative productivity.

Care Management. As BMS continues to serve Members, you will be equipped to interact, assess, and plan for their care on a continuous journey. Salesforce technology supports acquisition of data, at-risk member identification, risk stratification, disease management, complex case management, care planning, team collaboration (member, provider, other human services agencies, and extended network), member education, program measures & evaluation, predictive modeling, and more all in an effort to address medical, behavioral, and social needs.

Care plans are an evidence-based dynamic, organized plan that allows for the Member and healthcare care teams to identify and prioritize appropriate needs and establish goals and interventions for resource coordination, education, and advocacy. Each care plan identifies barriers, problems, goals, and interventions that can help optimize the Member's service and care delivery. Barriers and Problems are identified by answers to assessment questions. Each problem has a one-or-more goal (the desired outcome and resolution to the Problem and/or Barrier) that addresses the deficiencies identified in the assessment. Goals include improved knowledge of the condition, better self-monitoring and management of the condition, effective medication management, and tobacco and alcohol abstinence, etc. Interventions list the specific strategies and actions that providers or other program caseworkers can take to help Members meet the identified goals. These actions fall into four categories: assist, educate, coordinate, and send.

Care teams can choose care plans, for example, for diabetes, or they can choose to customize a care plan. A care plan might include access to transportation or child care, check-ups, medication, exercise classes, and nutrition classes. Members can receive alerts and updates on all of the care plan activities, and the care team can follow in real time. Through coordinated care management, BMS and the supporting government and healthcare ecosystem have the opportunity to drive the best possible health outcomes for Members. Creating a completely integrated set of MES solutions facilitates:

- Easy enrollment for participants in **public health care programs**, like a diet and nutrition class or a smoking cessation program.
- An **Intelligent Care Management** approach to engage in personalized and proactive interventions with guided workflows, utilization management, and customized care plans.
- A **Connected, Collaborative Experiences** to engage the entire care team with digital Member access through secure sites and real-time collaboration between Members and Providers, accessible on any channel and any device.
- **Risk Stratification** with prebuilt dashboards to help identify your at-risk Members and enroll them in a care management program.
- **Assessment** surveys to efficiently gather information about the health of enrolled Members.
- **Social Determinants** allows you to assist your Members by removing the barriers to care.
- Customizable **care plans** to serve as an action plan for improving a Member's health. These care plans help Members take practical steps to improve their health every day. The Member's care team can remove barriers to care, manage chronic conditions, provide preventive care, and apply health and wellness protocols with care plans.

> **Salesforce was named a Leader in the The Forrester Wave™: Healthcare CRM Providers, Q1 2020**
> In the Q1 2020 report, Forrester noted the key differentiators of CRM vendors supporting the healthcare industry were:
>
> - Robust Customer 360 View to Deliver Insight - Not Just Data
> - Actionable Prescriptive Analytics that Bring Together Workflow & Results
> - Deep Individualization Beyond Standard Customer Segmentation

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- **Concurrent care plans** with a complete view of all care plans including problems, goals, and tasks with different care teams. They provide the ability to manage a care plan for a defined period of time, close and report out on results. And lastly, you can keep sensitive Member data secure with separate permissions for each care plan and related care team.

As BMS continues to serve their Members, you will be equipped to interact, assess, and plan for their care on a continuous journey. Salesforce technology supports acquisition of data, at-risk Member identification, risk stratification, disease management, complex case management, care planning, team collaboration (member, provider, and extended network), member education, program measures & evaluation, predictive modeling, and more all in an effort to address medical, behavioral, and social needs.

Dashboards and Analytics. Salesforce's Tableau Platform is designed for the business user to get answers to questions instantly through powerful, interactive visualizations of any data, on any device. Tableau is designed to analyze data not just from within Salesforce, but from across different sources, and be surfaced across BMS. Many other larger State Health departments use Tableau such as State of New York, State of California, State of Florida, State of Texas, State of Ohio and several others. Public and commercial healthcare providers and payers use Tableau's self-service analytics to drive improved outcomes within defined populations. Tableau's easy-to-use advanced visual analytics such as

- Segmentation & cohort analysis
- Scenario & what-if analysis
- Time-series analysis
- Predictive analysis

Tableau has supported multiple payers in the shift from fee-for-service to value-based payment models. Specific use cases supported include rapidly identifying avoidable complications, comparing cost of services between organizations, such as an MCO or IPA, and others treating the same episodic bundle and viewing high risk/high cost patient information to better manage care and outcomes over time.

Tableau's self-service reporting/visualization flexibility and built-in array of graphical charts and displays will allow West Virginia to quickly build and deploy a variety of dashboards and analysis capabilities for virtually all envisioned use cases. Tableau includes a wide variety of optimized data connectors, including Salesforce, making Tableau the ideal choice for environments where multiple data sources are required in order to bring clarity on a given business problem. Tableau supports and works in conjunction with standard security mechanisms, assuring only those with appropriate access are capable of interacting with specific projects, dashboards and reports. As the leading visual analysis software company, Tableau has been built on the principles of ease of use for all knowledge workers. Everyday users should not be encumbered by or limited by the capacity of the IT shop to develop and provide data analytics. As discussed below, Tableau's products are built on breakthrough technologies that allow West Virginia users to quickly create visually compelling ways to see and understand one's data.

Mobile Services. Salesforce applications are mobile-enabled out of the box (no coding required) and can be accessed from any mobile device, anywhere at any time. State agencies are able to provide mobile access to any/all applications and data that reside on or integrated with the Salesforce platform. Internal users will experience a consistent UI across a variety of mobile devices, including iOS and Android smartphones and tablets. The Salesforce Mobile SDK will also allow agencies to build fully customized mobile apps to meet existing and future requirements. With the power of the platform, administrators can build applications on the desktop and then mobile-enable them with just a few clicks. From custom tabs and configurations to Salesforce pages and more, agencies can tailor mobile deployments for individual users or groups so that everyone is ultra-productive, no matter where they are located.

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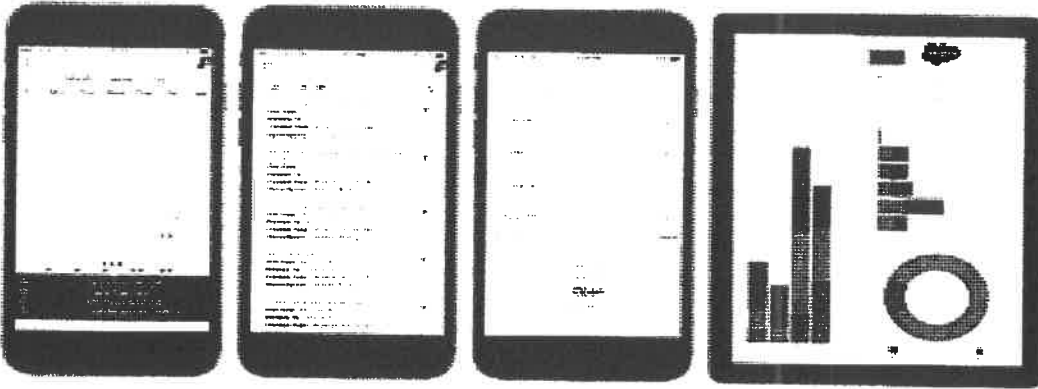
Outreach. With Salesforce, state Medicaid agencies can manage its entire member population outreach process and activities. Agencies have 360° of each member outreach and enrollment interaction and activity. The functionality that can be leveraged for outreach and enrollment includes, but is not limited to:

- **Campaigns.** A campaign is an outbound effort that agencies can plan, manage, and track within the Salesforce Campaign tab. The goal of a campaign is to generate member participation in the program. Examples of types of campaigns include outbound emails, events, print advertising, and webinars.
- **Contacts.** Contacts contain information about the Member including: contact name, how to reach them, and related information such as logged calls, contact interactions, and interviews scheduled. A contact record has standard and customizable fields and includes fields such as: phone calls, tasks and events, meetings, and emails.
- **Mass Email.** Agencies can send and manage personalized outreach email messages to segmented, targeted Member contact lists. Agencies can analyze and optimize outreach efforts and improve external and internal communication.

Salesforce Pricing Model

With a cloud-based service model, BMS would only pay for the cloud services that you need and purchase, unlike traditional software solutions in which all of the necessary hardware and software is purchased initially in the hopes that the solution will grow to use all of it. Salesforce's cloud services offer a tremendous amount of value in the sense that BMS doesn't have to procure hardware or software upfront that it might not use until the project is fully implemented later. Another significant differentiator is the flexibility in costing models that we can provide that account for surges in usage. This flexibility provides BMS with the absolute most value by not having to overbuy the solution from day one of implementation.

The Salesforce cost model is subscription based and varies by product. Most of our products are in a per user/month or user/year format billed annually. There are some products offered as total logins per month or by a defined number of members billed annually. We also have offerings that are offered by an edition representing a bundle of products.

Salesforce licenses are purchased in one of three ways:

1. Pay-as-you-go - in which customers purchase licenses based upon their immediate need.

2. Volume - to take advantage of additional volume discounts. Volume discounts may apply based on BMS's final total user counts and their access requirements. This information is needed in order to derive an accurate price estimate.

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3. Salesforce Enterprise License Agreement ("SELA") - in order to achieve the greatest financial savings, many customers license and provide multiple Salesforce applications to all of their employees. Salesforce SELAs are based on the total license mix, volume, and term of the agreement that is negotiated with BMS.

Question 4.2.4	**What do you see as the benefits and risks of including business process outsourcing (BPO) services together with technical services?**

Leveraging the private sector to provide either BPO or ITO services has significant merit in our opinion. The private sector can and generally does bring significant innovation and efficiency to both the BPO and ITO service space. In certain circumstances combining the BPO/ITO can be optimal; however, the combination of both elements together often does have the potential for negative consequences. For example, the straightforward BPO/ITO service that is used with regularity for a customer service call center. Traditionally, a State will request a BPO provider that provides the staffing for the call center, but it also asks the BPO to provide the underlying technology to support it. It's easier to delegate that responsibility to a single vendor from a procurement perspective as well as from an accountability perspective. However, when the State hires the BPO, what happens behind the scenes is that the BPO buys the supporting technology and pays to configure and implement the technology. Essentially, there is a hidden one time cost associated with BPO providers that include IT services embedded in the BPO service.

Recently, many states stood-up new contact centers to support Contact Tracing for Covid-19 during the pandemic. Time was certainly of the essence, and states generally did not have the staffing or the IT infrastructure to support Contact Tracing at the scale that was required. Most chose to outsource both the technology and the people, sometimes to a single BPO/ITO vendor. Given the need for speed to deliver, simplicity of contracting, and the thought and hope that the need for Contact Tracing would be short term, combining the BPO/ITO made perfect sense if a vendor exists that can do both efficiently and effectively.

However, most Medicaid programs that use BPO/ITO services are much longer term in nature, and we have the benefit of time to evaluate and execute the approach that is in the best interest of the state both short and long term. While it can be optimal to use the BPO/ITO model in a short-term emergency to support the intended outcomes, what happens over the course of a long-term BPO/ITO contract for say 5-7 years when the State wishes to change BPO providers at the end of the term?

The incumbent BPO provider will take their technology with them, and the State will once again bear the cost of the new BPO buying and implementing the call center technology again. Further, the time, effort and disruption of implementing a new BPO is greatly increased, which often causes the State to stay with the "Devil You Know". So long-term, the cost and flexibility of the BPO/ITO model is less optimal in our opinion.

> **In the News: "Health Connector Aims to Tighten Up Customer Service"**
> **Kate Lannan, June 10, 2021, State House News Services**
>
> The Massachusetts Health Connector on Thursday took what its executive director described as a "significant step" toward improving its customer services, green-lighting an agreement for call center planning and design work this summer. "Our member services need to improve. We've heard that clearly from our members," Executive Director Louis Gutierrez said during a livestreamed board meeting. He said payments made under the agreement would be credited toward "overall implementation of proposed platform and service components, including, significantly and for the first time ever, a Connector-owned and controlled customer relationship management that will help us avoid long-term vendor lock-in and the pain and member disruption inherent in vendor transitions every time we re-up or renew or re-procure a contract."

In addition, what happens during the term of a BPO/ITO contract, using the same call center example? In our experience, the cost of the BPO/ITO contracts are almost always based on the BPO cost of providing the service, there is often no separate cost for the ITO services, it is embedded, so the BPO is paid to

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provide people and process. The BPO may choose to use technology to be more efficient, but oftentimes there is little incentive to do so. Would it make sense for the BPO/ITO provider of a call center to offer a non-human chatbot that deflects the need for 50% of the incoming phone calls under an existing contract? Perhaps not, particularly if they are being paid on a per call basis or for a fixed amount of people staffing a call center. It's not in their self-interest to do so. However, if the State owned or managed the call center technology (ITO) separately from the BPO, then there is greater opportunity to leverage technology for better outcomes (in this case perhaps reduce the number of phone calls), and to have the BPO adjust their services as a result of the need for less call center agents.

Finally, the BPO/ITO model often results in system "silos". The technology they use might support integration, but the system itself is generally not leveraged as part of an integrated holistic State solution. Frankly, the ITO solution is often not in the State's control. So, in the call center example, what happens when the BPO/ITO receives a call that they cannot answer, can they live transfer the call to a "Tier 2" customer service agent at the State? Probably not. Can the state author knowledge articles that agents in the BPO/ITO call center can leverage as well as internal State staff? Probably not. Would the State be able to offer an integrated process where for example a Member is applying online for medicaid, has a question in the middle of an application and support a chatbot feature to help answer a question in the middle of the process, and if needed direct the individual to contact the call center and the call center agent would see and know where the member is in the application process using the BPO/ITO's call center technology solution? Again, probably not. The BPO/ITO model tends to result in siloed technology and processes rather than deeply integrating them into the Medicaid Program more holistically where the State has the ability to leverage the acquired technology for better outcomes to support their members and providers.

So while we fully support both BPO services and ITO services where appropriate, we believe that the two should remain separate where feasible rather than combined together or at minimum ensure that the technology is licensed and available to the State directly rather than through the BPO provider solely.

Question 4.2.5	**Describe your experience, if any, with CMS Outcomes-Based Certification or Streamlined Modular Certification.**

Salesforce would rely on our network of Systems Integrators to support the state's ability to earn these certifications.

Question 4.2.6	**What approaches to supporting consistency in business process functions and data architecture across multiple systems and vendors have you encountered?**

As the State is well aware, data and process consistency across the Medicaid Program has always been a challenge, and with the introduction of modularity, it has in some cases gotten more challenging. There are several elements to consider to address these challenges.

First, from a data consistency standpoint we have provided a point of view in this document for the need to have a "Customer 360", that single pane of glass that allows members and providers with an ability to see their information which draws data from across disparate State systems. The Customer 360 capability is intended to not only support the viewing of information, but also to support processing changes to information as well.

In this instance, a change that is managed in the Salesforce Customer 360, say for example, a member uses their mobile phone to enter a change of address which would then update Salesforce's Customer 360 and publish the information to the other subscribing systems via Mulesoft, thereby helping to promote

data consistency. In this context, Salesforce would operate as "the single source of truth" for other Medicaid modules. For more advanced data consistency features and data governance tasks, a full Master Data Management module can be added to the Salesforce Customer360 solution, providing enhanced capabilities for managing data policies, data transformation, etc.

Further, we believe that the Salesforce Customer360 is an innovative approach to support MITA business processes. In the State of Maryland for example, the Maryland Department of Health is using CRM as one of its first priorities to modernize service delivery across the Enterprise (called Enterprise Technology Solutions) in order to mature their MITA processes and to make an immediate impact on improved customer outcomes.

Enterprise Technology Solutions for MDH
- Most operationally impactful modules and support all aspects of Medicaid programs across all business areas
- Implemented first to allow the state to realize benefits and address current issues
- Premier solutions for improving customer service and strengthening program integrity

Customer Relationship Management (CRM)
- Enterprise-wide solution – supports 72 Medicaid business processes
- Will move MDH up the MITA maturity scale through automation and integration across the organization
- Customer Service – common database will provide more holistic view of customer interactions and services

For more information about Maryland's blueprint for Medicaid Transformation, please see:
https://mmcp.health.maryland.gov/Documents/MMAC/2019/05_May/2019%20MMAC%20Summit_MMIS%20Transformation.pdf

Question 4.2.7	**Please provide your recommended strategy for ongoing compliance with the CMS Interoperability and Patient Access final rule (CMS-9115-F). The rule can be found at the following location: https://www.cms.gov/files/document/cms-9115-f.pdf.**

As the overarching technology landscape changes toward an API-focused integration approach, we predict FHIR standards (and REST API usage in general) will expand usage across more areas to allow for easier, modernized integration to systems of record. Data is most effective and timely when it is transacted upon in the system of record. Replicated data sitting in a staging repository or data lake is always outdated. The ability to access and update data in real-time is of paramount importance in the digital age where real-time access to data is not just desired, but expected.

MuleSoft and the Accelerator for Healthcare allow for fast implementation of CMS interoperability via APIs. Our continually updated FHIR API repository will help you maintain solid endpoints for a modern integration approach and be able to adapt to frequent changes in compliance standards.

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Question 4.2.8	**Provide your strategy for compliance with the Health Insurance Portability and Accountability Act (HIPAA) and Federal Risk and Authorization Management Program (FedRAMP) Requirements.** **Information about HIPAA compliance can be found at the following location: https://www.hhs.gov/hipaa/for-professionals/privacy/index.html. Information about FedRAMP can be found on www.fedramp.gov.**

In provisioning and operating the services, Salesforce complies with the provisions of HIPAA's Privacy Rule and Security and the HITECH Act that are applicable to business associates. Salesforce's customers are still responsible for complying with the same in their capacity as a covered entity or business associate using the Salesforce services. The services' features permit customers to customize use as per a compliance program for HIPAA (including the HITECH Act) and many customers store protected health information (PHI) on our service. From a legal standpoint, some of our customers have asked Salesforce to assist them in meeting their compliance obligations; for example, by entering into business associate agreements (BAA) to address formal legal requirements pertaining to use and disclosure of protected health information (PHI). More details on Salesforce and HIPAA (including FAQs and Whitepapers) can be found here.

The trust and success of our customers are the highest priorities for Salesforce. In provisioning and operating the Salesforce Covered Services, Salesforce complies with the provisions of the HIPAA Security Rule that are required and applicable to it in its capacity as a business associate (to the extent that its customers are HIPAA-regulated Entities and choose to submit ePHI to the Salesforce Covered Services following their signing of a BAA with Salesforce). Salesforce also offers customer-controlled security features that may be implemented by customers in their respective uses of the Salesforce Covered Services. These features can serve as a set of tools to help its customers address certain security requirements, such as portions of the HIPAA Security Rule.

Here is the Salesforce BAA for your organization's review that can be discussed during the contract negotiation phase:
https://org62.my.salesforce.com/sfc/p/000000000062/a/0M000000QwzS/IWv2uQIX5EpAVosQZ7SJYzpH FGNrrNlyqDl6zclfQTQ

One of the reasons for Salesforce's success in government is their investment in delivering a secure Cloud experience. The service has been designed to provide Salesforce customers with privacy and high levels of performance, reliability, and security. Salesforce cloud-based solutions, Software as a Service (SaaS) and Platform as a Service (PaaS), are FedRAMP certified at the High Impact level to provide DHCD with the assurance that your data is secure. Focusing on a cloud-based application platform allows you to minimize internal administration, while providing organizational agility, speed-to-value, and ease-of-use for a broad range of stakeholders.

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Question 4.2.9	**Provide your strategy for assisting states in achieving compliance with CMS, and federal rules, regulations, and guidance related to modularity, leverage, reuse, and outcomes achievement.**

Salesforce would defer to our ecosystem of certified partners who would support states in implementing systems that meet all relevant federal and state requirements.

Question 4.2.10	**What approaches do you suggest for Disaster Recovery processes in a modular MES that accounts for integration and communication across multiple partners?**

The Salesforce service has been designed to provide customers with 100% trusted privacy with the highest levels of performance, reliability and security even in the circumstance of a disaster. Salesforce has built, and continues to invest in a comprehensive security infrastructure, including firewalls, intrusion detection systems, and encryption for transmissions over the Internet, which Salesforce monitors and tests on a regular basis. Salesforce built and maintains a multi-tenant application architecture that has been designed to enable the Salesforce service to scale securely, reliably and cost-effectively. The Salesforce multi-tenant application architecture maintains the integrity and separation of customer data while still permitting all customers to use the same application functionality simultaneously. With multi-tenancy, all Salesforce customers run their applications on a common infrastructure. This means that every customer is always on the latest release of Salesforce applications, and has access to the latest technology. Multi-tenancy means that it is easier to scale new users and applications. With multi-tenancy, customers don't have to worry about managing infrastructure.

Question 4.2.11	**What organizational change and communications management processes have you seen employed for a modernized, multi-vendor MES implementation? How would you help support the evolution of the Medicaid Enterprise as a whole?**

Salesforce would defer to our ecosystem of certified partners who would support states managing change and communication processes throughout the project implementation.

Question 4.2.12	**How does a multi-vendor environment change how you manage your own Design, Development, and Implementation (DDI) work? How should dependencies be identified, negotiated, and implemented in a multi-vendor environment?**

Salesforce would defer to our ecosystem of certified partners that are experienced system integratorsto manage the implementation approach on the Salesforce platform.

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Question 4.2.13	Describe your experience, if any, with collaboration tool(s) such as or equal to Jira®, Confluence, and IBM® Rational Team Concert (RTC) or other tools to track items, which include, but are not limited to, project milestones, deliverables, and/or implementation testing. Do you recommend any specific approaches or tool(s) for collaboration in a multi-vendor environment? Does your company prefer using its own collaboration tool(s) to support an implementation, or do you prefer using collaboration tool(s) provided by a state and/or a systems integrator (SI)?

Salesforce would defer to our ecosystem of certified partners that are experienced system integrators to manage implementation processes including milestones, deliverables and implementation testing.

Question 4.2.14	What roles and responsibilities have you seen for a system integrator (SI) in a modular systems environment? Was this role fulfilled by a separate vendor, incorporated with other services, or performed by the state Medicaid agency itself? What are the key success factors and risks to success related to using a SI?

Salesforce recommends BMS consider requiring agency ownership of the enabling technology solution agreement and data rights from the outset of the project. For example, BMS should decouple the Salesforce Software as a Service (SaaS) and Platform as a Service (PaaS) solution licensing from the System Integration provider's implementation services, and form two separate agreements, rather than acquire both at the same time as a single contract award. This gives BMS the greatest flexibility and value and allows you to pre-select the right solution provider and the right system integrator.

By separating the SaaS/PaaS licensing agreement from the integrator services agreement, the agency would have a stronger choice over the technology platforms that would ultimately form the foundation of your solution and prevent lock-in with the System Integrator service provider. For instance, if BMS made an award to a System Integrator provider for both SaaS/PaaS licensing and implementation services for a base year, plus four one year option periods, the Department would be in an agreement with the System Integrator for potentially five years. Whereas, if the licensing agreement was separate, and the implementation services were completed in the first year of the contract, BMS would then only need to maintain the relationship with the provider of the licensing agreement. BMS would also have the flexibility to change implementation service providers as your needs may dictate, keeping your SaaS/PaaS solution intact as you transition from one System Integration service provider to another.

The agency should procure licensing for the Salesforce platform and then procure the system integrator. This helps the agency control of the project cost and facilitates the agency's ability to evaluate system integrators using a uniform system.

Question 4.2.15	Describe your depth, breadth, and frequency recommendations for performing periodic vulnerability scans of production and development environments?

Salesforce would defer to our ecosystem of certified partners that are experienced system integrators for recommendations on performing vulnerability scans.

Question 4.2.16	**What processes, techniques, and solutions does your organization consider critical for delivering optimal data sharing throughout the MES?**

Salesforce would defer to our ecosystem of certified partners that are experienced system integrators for recommendations on optimizing data sharing.

Question 4.2.17	**What standards and practices would you recommend with regards to key data governance, master data management, data stewardship, and data-sharing concerns? What approaches do you recommend for engaging business data owners separately from technical data system managers?**

Salesforce would defer to our ecosystem of certified partners that are experienced system integrators for recommendations on data governance, master data management, data stewardship and data-sharing concerns.

Question 4.2.18	**Describe your company's current roles and responsibilities as a fiscal agent, if applicable, in a modular systems environment. Describe how you coordinate with other vendors to incorporate their services in a modular systems environment. What are the key success factors and risks for separating Fiscal Intermediary functions from technical functions?**

Not applicable

Question 4.2.19	**Describe the division of responsibilities on successful projects, in relation to a multi vendor environment, between vendor and subcontractor Project or Portfolio Management Offices (PMO), and an Enterprise PMO provided by either BMS or a separate vendor?**

Salesforce would defer to our ecosystem of certified partners that directly implement projects to make recommendations on required project roles and responsibilities.

Question 4.2.20	**Describe your recommended approach to addressing the complex relationships between a variety of vendors working on separate parts (or modules) of the overall Medicaid Enterprise System. To what degree do you recommend BMS require these approaches in any RFP(s) it issues?**

Salesforce would defer to our ecosystem of certified partners that directly implement projects to make recommendations on required project roles and responsibilities.

Question 4.2.21	**What factors (technologies, development methodologies, frameworks, etc.) would you recommend BMS require in an RFP in order to accelerate the DDI of MES modules?**

Salesforce recommends requiring a cloud-based, platform approach as a requirement of RFP responses.

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This approach provides a single enterprise platform that delivers multiple services and enables state Medicaid agencies to rapidly configure solutions specifically tailored to your mission and requirements. Salesforce solutions free data from legacy systems, empower customers, and connect organizations, and employees to administer services in powerful new ways. The Salesforce Platform is the lowest risk and fastest way to securely build, connect, optimize, and deploy every kind of app tailored for any type of use case.

Question 4.2.22	**Describe ways you feel BMS should structure an RFP to encourage competition and innovation from Medicaid Enterprise solution bidders.**

The biggest inhibitor to innovative solution providers in Medicaid has tended to be mandatory qualifications and not permitting "Alternative Options". While it is understandable why a State Medicaid Agency would both ask for and value customer references, many times the mandatory qualifications become exclusionary and do not allow new innovators an opportunity to bid their solutions. We recommend closely reviewing which terms and qualifications are Must/Shall have versus those that the State can agree to make desirable.

In addition, providing a single condition in an RFP that permits Alternative Solutions is very helpful. It's not uncommon that by the time an RFP is actually released, the marketplace may have changed from the time the requirements were gathered. The simple insertion of language that allows the State to consider alternative options allows solution providers to propose innovative solutions to problems that may be more advantageous than the original requirement(s) within the RFP.

Question 4.2.23	**What recommendations do you have for establishing procurement and implementation timelines that help deliver value sooner, reduce risk, maximize Federal Financial Participation (FFP), and achieve Outcomes-Based Certification or Streamlined Modular Certification,?**

We would recommend that the SI evaluate accelerated procurement and implementation schedules made possible by the deployment of the Customer 360 platform and an API-Led integration layer. Such an approach could help deliver value sooner, reduce risk and maximize 90/10 Federal Financial Participation (FFP) for DDI, while accelerating 75/25 M&O/O&M reimbursement for operating costs.

Question 4.2.24	**Describe the major trends in your Medicaid Enterprise solution category that you believe BMS should be aware of, including any product or approach changes that you believe will come to market within the next 12 – 24 months. How do your Medicaid Enterprise solution roadmaps stay current with such trends? If possible, please be specific regarding how these trends affect Medicaid, WVCHIP, or healthcare IT in West Virginia.**

The impact of the COVID-19 pandemic on the delivery of government services served as a mirror to reflect on the many challenges facing the modernization of complex technology systems. Across the country, we saw many legacy systems unable to handle the surge in demand. These systems were unable to scale to the volume of transactions, nor were they able to be adapted for rapidly changing policy and program needs. These challenges have accelerated the need to modernize these systems to ensure constituents consistently have access to the services and benefits they need without delay. Salesforce is anticipating many states will be looking to continue modernizing their MMIS systems to ensure they are ready for future challenges.

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In March 2021, the Kaiser Family Foundation noted in its issue brief "Growth in Medicaid MCO Enrollment during the COVID-19 Pandemic":

"States project that the 'maintenance of eligibility' (MOE) requirements and the continued economic downturn will maintain upward pressure on Medicaid enrollment in FY 2021. Additionally, with the Biden administration's executive order to reopen enrollment in the Federal ACA Marketplace and the "no wrong door" application process, more individuals may receive Medicaid coverage in the coming months. As Medicaid enrollment increases and as additional states transition to Medicaid managed care programs, so will enrollment in MCOs. As MCO enrollment continues to rise putting pressure on overall state budgets, states may want to carefully review options to mitigate risks in MCO payment rates balancing payments to MCOs due to changes in utilization, new costs related to COVID-19 testing and treatment and direct payments to providers." All of these changes will need to be subsequently "unwound" at the end of the PHE. States will need tools for communication with customers, efficient recertification processing, advanced data and analytics and handoffs for exchange coverage.

In addition to continued growth in Medicaid enrollment driven by a combination of economic and political factors, other trends impacting the state of healthcare include:

Virtual Care and remote work adoption. There was an 8335% increase in telehealth medical claim lines between May 2019 – May 2020. The uptick in virtual care has impacted coverage amendments, provider reimbursements, and the need for scalable technology solutions

Interoperability. Growing availability of APIs and FHIR standards due to legislative mandates under 21st Century Cures that will further enable payer to payer, provider to payer and payer to patient/beneficiary sharing of data.

State CIO Involvement. 21 of 47 states responding to a GAO survey reported that their state CIO had little or no involvement in overseeing their MMISs. Such non-involvement of officials with duties that should be heavily focused on successful acquisition and operation of IT projects could be hindering states' ability to effectively implement systems.

Question 4.2.25	**Identify any innovations in your Medicaid Enterprise solution for addressing Medicaid Business Priorities (cost savings, performance efficiencies, improved care outcomes, etc.).**

With a Member and Provider 360 serving as a foundation for all Medicaid Enterprise Systems, there is substantial opportunity to drive significant impact on Medicaid priorities, such as cost savings, program efficiencies, and better care outcomes. Having a complete, single source of truth for all Members and Providers that pulls the most important data from either within Salesforce or external systems of record facilitates a consistent, accurate view into all Member and Provider activity. This consistency of information drives better accuracy, reduced redundancy or duplication, and the ability to derive better insights from a complete set of data. The Salesforce platform is driven on the premise of this 360 view serving as the driver of program innovations. The following are examples of potential innovations BMS could leverage using the Salesforce program to drive better overall program outcomes:

Driving Efficiency & Better Program Outcomes Through Person-Centric Approach

Leveraging a person-centric approach, many states are turning to new channels of communication to make service delivery and the technology supporting it more focused on a customer's needs. This approach drives both better outcomes for recipients but also drives efficiencies and cost savings. For example, in February 2015, Michigan's governor signed an executive order to transform the State's service delivery model to support greater flexibility to become more person-centric, reforming how the state interacts with customers through technology, and making the service delivery system more focused
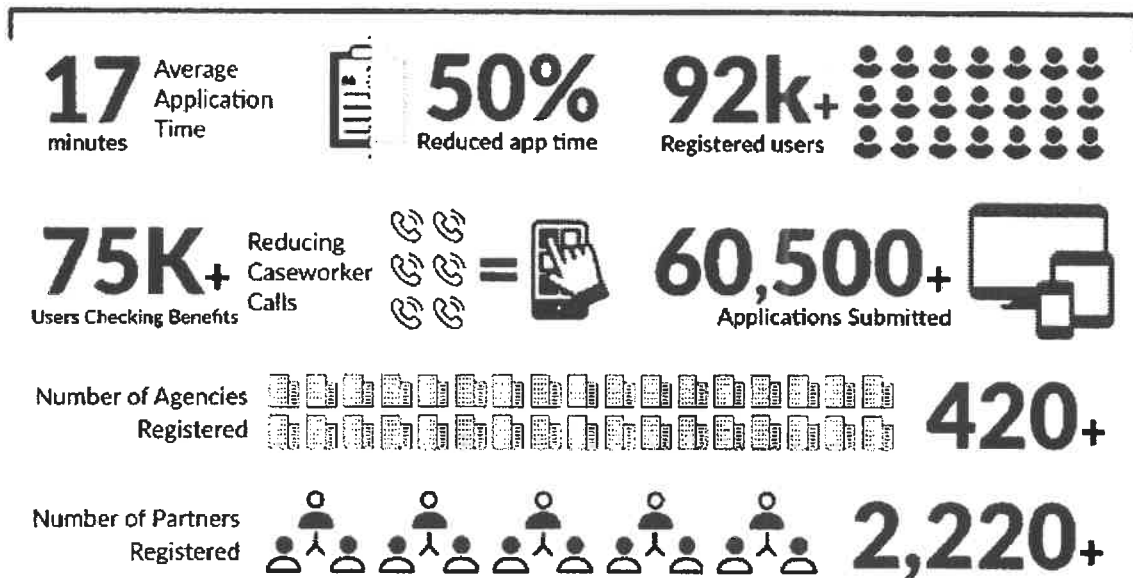
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on the customer's needs in an efficient way. To support this transformation, the Michigan Department of Health and Human Service (MDHHS) and the Michigan Department of Technology and Budget (DTMB) embarked on a mission to change the processes used to support Michigan residents, and build an intuitive digital platform to empower citizens to work towards self-sufficiency.

Michigan's goal was to leverage existing State IT infrastructure and services to enable integrations with other State and external systems, and shift from a program- focused way of delivering services, to a person-focused delivery model. This included laying the foundation to transform their delivery model to focus on the circumstances that brings individuals and families to MDHHS's door, and target the problems that must be solved to get them back on their feet, instead of simply focusing on programs the individual or family is eligible for.

A cornerstone of this transformation is MI Bridges, a new digital platform that offers an improved citizen self-service portal as an avenue to interact with customers. In alignment with Michigan's Mobile First and Cloud First strategy, the solution is built on the leading enterprise scale Salesforce lightning cloud platform and hosted on secure FedRAMP certified Salesforce Government Cloud. MI Bridges transformed both the way residents interact with the State and the way the State interacts with its residents. When applying for benefits residents experience faster application times and, after they are determined eligible they have all the information needed to manage their own case. The ability for residents to take ownership over their case means State workers spend less time requesting verifications or explaining why benefits are closed and more time focused on processing applications correctly and efficiently. Customers now have the tools to help themselves and search for resources offered in their community.

With the Salesforce GovCloud platform of the new MI Bridges, the possibility for enhanced features in the future is limitless. Already MDHHS and DTMB are working on adding additional integrations with other agencies, such as the Woman, Infants and Children (WIC) program, and adding an interface with Great Start to Quality, helping customers find child care and early education programs. DTMB General Manager Ward Beauchamp shared, "The department was able to rapidly transform legacy systems into an integrated service model by leveraging the latest cloud technology to deliver citizen-centric government."

17 minutes — Average Application Time

50% Reduced app time

92k+ Registered users

75K+ Users Checking Benefits — Reducing Caseworker Calls =

60,500+ Applications Submitted

Number of Agencies Registered — **420+**

Number of Partners Registered — **2,220+**

Source: 2018 NASCIO State IT Recognition Award, "MI Bridges: Helping Citizens Every Step of the Way"

For the complete Michigan Bridges story and the impact it has had on program delivery, read here and view their story here.

Streamlining the Provider Screening and Enrollment Process Through Self-Service
Today, the Medicaid provider screening and enrollment process in many states is still highly paper-based with forms exceeding 50-100 pages. This can result in substantial delays in review, inaccuracies and lost information. This proved extremely problematic during the COVID-19 pandemic as providers looked to be certified to be a Medicaid provider in new states. Without a Provider 360, it also makes it difficult to adequately screen providers based on criteria that may make them high risk as a provider. There is often no integration between systems to ensure provider data is kept up to date. With Salesforce, BMS can leverage the power of the Provider 360 combined with its omni-channel self-service and integration capabilities to facilitate provider screening, enrollment, and ongoing provider management.

First, Salesforce would recommend a Provider self-service community portal to provide a user-friendly online interface for Providers to learn about becoming a Medicaid provider in New York, complete their screening application and submit supporting documentation. This process can be a guided, interview-like experience to ensure only relevant questions are required and the system dynamically adapts requirements based on data entered by the Provider. Also, if the Provider is known to the system or perhaps to a 3rd party system like the Federal NPI Look-up, data can be pulled directly into the Provider's 360 record for use throughout the application and review process. With a knowledge base, DOH can also share information with Providers via an online channel. A virtual chatbot can be used to both answer FAQ-type questions, as well as allow Providers to complete some basic transactions, such as resetting their password or submitting a missing document.

A Provider will have a one-stop-shop for all interactions with BMS, a record of interactions and transactions, and updates in changes in status on items like application review or appeals status. This will ensure there is a single source of truth for all the Provider's details. It also makes it possible to gain insight into the provider and their activities - is there a history of complaints, have they been engaged in any legal issues, are there specific trends identifiable from what we know about the provider that might indicate they are at risk for fraud.

Through the combination of the Provider 360 and the Provider Self-Service portal, BMS stands to streamline its interactions with Providers, driving many transactions to self-service while the more complex issues are handled by agency staff. It also gives DOH deeper insight into those providers servicing the Medicaid population - where are their strengths and weaknesses, where are outcomes being missed, and where do opportunities exist to better care for Medicaid recipients.

Question 4.2.26	**Identify any innovations in your Medicaid Enterprise solution for addressing technical risk management.**

In many state Medicaid agencies today, the wholesale modernization of complex legacy systems is a significant multi-year process. However, there are steps that can be taken immediately to alleviate the bottlenecks that are constraining the current systems. By taking these steps immediately, a foundation can be set for the longer-term digital transformation, while addressing immediate technology and program needs. This unprecedented era calls for a rapid, flexible approach. Salesforce offers the following recommendations for consideration to help address technical risk:

Leverage a Flexible Platform. Legacy systems are costly to maintain and lack the agility to drive agency innovation in support of modernization. Agencies can't implement mission-critical initiatives fast enough. Incremental modernization facilitates phased improvements within a broader system replacement strategy. The State has indicated its need to develop a modern solution that not only provides the flexibility to meet BMS's present needs for Medicaid Enterprise Systems, but also being able to quickly adapt to changing requirements, regulations, and guidelines as needed to comply with ever-changing policies and guidelines from both the State of West Virginia as well as the US CMS.

An innovative alternative approach that State governments are turning to for systems is to use an Enterprise Platform approach - like Salesforce - instead of using "purpose-built" Commercial Off the Shelf

(COTS) software. Unlike a purpose-built COTS Medicaid module that is at most used by a handful of states, a Platform is used by tens of thousands of clients. These modern Platforms support a concept called low code - no code, which allows organizations such as BMS to configure rather than code the desired Medicaid solution. Platforms can easily be configured to meet BMS's specific requirements and support rapid changes when there are urgent shifts in needs or policy. With a platform, the majority of configuration is done through clicks, not code, so that the user interface, workflows, data model, integrations, and other core elements of the system are not hard coded, rather they are configured. This helps to "future proof" BMS's system to ensure future enhancements and changes are made quickly and easily. An easily modified, configuration-based platform also helps to reduce technical debt versus a majority "code-focused" approach that enhancements and debugging require specialized developer skills. BMS should embrace an architecture that incorporates the power of a flexible, configurable platform in providing an engagement layer with rapid delivery of business value along with an API-led integration strategy for exposing legacy functionality.

Ensure the Solution is Sustainable. Flexibility will enable and empower BMS to be able to support sophisticated real-time integration to systems (which are also constantly changing) and to meet peak scalability performance in times of need. We believe the desired solution also empowers BMS to be able to make its own changes to the system (when desired), to allow for staff to make their own system improvements as well as build its own ad-hoc reports quickly and cost-effectively. The aging technology that is used by so many Purpose-Built Medicaid solutions, combined with the unique state requirements and complex integrations required, result in solutions that are essentially custom and difficult to maintain, enhance, and upgrade. Finding a technical solution that will reduce or eliminate these challenges to ensure the eventual solution is sustainable is key to long-term success.

Many of the industry-specific Medicaid solutions offerings available today represent legacy systems or soon to be outdated systems that traditionally fall short in delivering expected results for participating states. A single purpose-built COTS product for Medicaid would seem to mitigate the risk of meeting the functional needs of BMS. A system that meets the specific Medicaid program requirements and is proven in other states has a great deal of merit, as these traits are considered by many to lower project risk. However, we believe the very characteristics that make such a purpose-built COTS approach seem attractive, may also result in a number of significant limitations. These purpose-built products typically bring a predefined data model and set of workflow. These proprietary "black box" solutions can often make it both difficult and costly to modify to the needs of BMS. Often, an agency finds that it has to confirm its business to the technology, rather than adapting the technology to fit the agency's specific needs and requirements.

Ease of Use: Declarative Configuration and Development. The Salesforce Platform offers a core set of technologies that not only power the Salesforce SaaS products, but will also allow BMS to build custom apps, connect data from any system, and manage it from anywhere. The Salesforce Platform allows customers to build apps fast (with clicks, not code), designed for desktop and mobile devices, all from a single canvas. To help IT deliver apps faster, the Salesforce Platform offers a simple yet powerful set of declarative, point-and-click tools that anyone can use to achieve business goals at lightning speed. Without writing code, developers and business users alike can quickly and easily create custom apps on the Salesforce Platform with complex business logic and beautiful user interfaces designed specific to every screen. Salesforce tools will allow BMS to work in alignment with agile development methodologies as IT meets business demands faster. The Platform uses open APIs based on industry standards such as REST and SOAP to make it easy for BMS to build apps that integrate with legacy systems.

Use of Modern Standards and Co-existing with Established Standards. The MuleSoft Accelerator for Healthcare enables organizations to unlock and integrate their data into key systems to streamline clinical processes and power connected experiences. The solution includes pre-built APIs, connectors, implementation templates, and a prescriptive end-to-end reference architecture to enable connectivity using HL7 V2 or FHIR standards.

In order to comply with the CMS and ONC interoperability mandates, the Accelerator provides pre-built APIs including the Patient Access, Provider Directory, and Formulary APIs. In addition, the Accelerator

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includes Epic System APIs built specifically to integrate with Epic's FHIR server allowing healthcare organizations to surface clinical data faster than ever before. The solution also provides an HL7v2 to FHIR data converter, a library of United States Core Data for Interoperability (USCDI), and all 145 FHIR R4 resources. These FHIR resources are continually updated to stay current and are free to all customers.

MuleSoft's API-Led connectivity approach provides a methodology and technical ability to expose data in older formats and provides an immediate roadmap to modernize on newer formats and technologies. This approach can evolve to support any integration pattern, design, and use case.

Question 4.2.27	**Describe 1 to 3 use cases where innovations in your Medicaid Enterprise solution would apply and the value your Medicaid Enterprise solution would add when applied to them.**

Use Case: Consumer Portal

With Salesforce, BMS can deploy a self-service community portal that will provide a user-friendly online interface for consumers to learn about, apply and manage benefits for which they may be eligible and fill out an application. Self-service functionality can be configured for application, enrollment, payment, and change of circumstance reporting. Consumers can use the portal to select their plan, select a primary care provider, or report changes to their circumstances. The portal can take consumers, staff, or community partners through a step-by-step process to ensure the necessary information is captured correctly the first time and reduce redundant data entry. Using API-led integration technology, critical data in external systems of record can be pulled into the Salesforce Member 360 view – a single source of truth for applicant data.

MI Bridges

Michigan Department of Health and Human Services, as part of its integrated service delivery initiative called Bridges, wanted to better integrate income support programs and improve customer service. Michigan staff have said they had one of the longest applications in the country.

The state used Salesforce to implement a customer self-service portal and a streamlined, online multi-program application and have **reduced the time it takes to apply for assistance by 50%**. Residents can also use the portal to recertify and submit changes and upload documents, all of which can be done on a mobile device.

With a knowledge base, BMS can also share information with clients via an online channel. Within this feature, BMS can easily set up different knowledge base views including creating a client-facing view and a separate internal view. With this powerful knowledge management tool at their disposal, consumers can get the answers they need without requiring BMS's assistance. Applicants can be guided through a step-by-step process to provide information about themselves and other household members, plus income, expenses, and assets. All of this information is saved in Salesforce.

Through the use of a consumer self-service portal, applicants can log-in to see real-time updates of their enrollment status. BMS can also take advantage of automatically-generated text/SMS and email updates sent to the enrollee when their status changes or action is needed. Chatbot technology can also be used to provide knowledge articles on the timeline for processing, as well as facilitate authentication via the bot to directly check status. Data between each of these channels is consistent and up-to-date via the Salesforce Customer 360.

Use Case: Interoperability

MuleSoft provides assets within the MuleSoft Accelerator for Healthcare for:

- **Patient 360.** MuleSoft can be used by customers aiming to develop a 360-degree view of their patients by exposing critical information from their EHR(s) to other applications like Salesforce Health Cloud. MuleSoft provides assets that enable connectivity via HL7 V2 and FHIR protocols.

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Customers can make use of the solution to integrate with other similar systems in their environments.

- **CMS Interoperability.** The CMS Interoperability and Patient Access final rule establishes policies that break down barriers in the nation's health system to enable better patient access to their health information, improve interoperability and unleash innovation, while reducing burden on payers and providers. Patients and their healthcare providers will have the opportunity to be more informed, which can lead to better care and improved patient outcomes, while at the same time reducing burden. In a future where data flows freely and securely between payers, providers, and patients, we can achieve truly coordinated care, improved health outcomes, and reduced costs.

Salesforce provides the full library of 145 FHIR R4 API specifications, 26 of them adhering to the USCDI core profile. With these API Specifications, providers have the framework for building APIs required under the new rules, which safely exposes patient record information to third party applications, allowing the patient to access their medical records upon request.

The full FHIR R4 API Specifications provides payers with the same framework for building the new Patient Access and Provider Directory APIs, as required in the final ruling. Also, both the Provider Directory and Formulary APIs specifications are built according to the Da Vinci PDEX implementation guide and template that CMS recommends to satisfy the data requirements.

| Question 4.2.28	**In the states where you have implemented, what have been some of the higher value outcomes? What performance metrics were you able to provide to substantiate this success?**

With the world's leading cloud platform, Salesforce is freeing government data from legacy systems and unleashing staff, partners, and citizens to administer government in powerful new ways. In the public sector, Salesforce's trusted cloud platform and applications help government employees and agencies collaborate easily and connect with citizens and partners like never before. Organizations around the globe are leveraging Salesforce's leading cloud solutions and experiencing incredible results ranging from more connected customer service, to streamlined operations, better performance, and overall cost savings. Salesforce's commitment and experience across the nation and across the spectrum of BMS programs gives us a unique perspective on how cloud technology can improve service and outcomes.

- 36 states and the District of Columbia are using Salesforce to modernize HHS.

- Five states including Colorado, New Jersey and West Virginia have leveraged the Salesforce platform for eligibility which spans full case management

- In addition to Colorado, Maine, Michigan, and West Virginia, seven other states are using Salesforce for Medicaid - spanning eligibility and case management, waiver programs, and health insurance exchanges.

- Seven states are using Salesforce for child welfare, including Delaware that went live two years ago. The State of Indiana has chosen SF as their platform for both child welfare and child support modernization, and California has chosen SF as the platform for its new child welfare system.

- Five states are using Salesforce for adult protective services - originally implemented in Colorado and shared with four states since then, most recently Indiana and Oklahoma.

- Three states are using Salesforce for child support

- 27 states are using Salesforce for other HHS programs like mental and behavioral health, child care licensing, early learning, Covid response and more.

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Salesforce in Health & Human Services
CSE, Child Welfare, Adult Protective Services, Child Care, Integrated Eligibility and Beyond
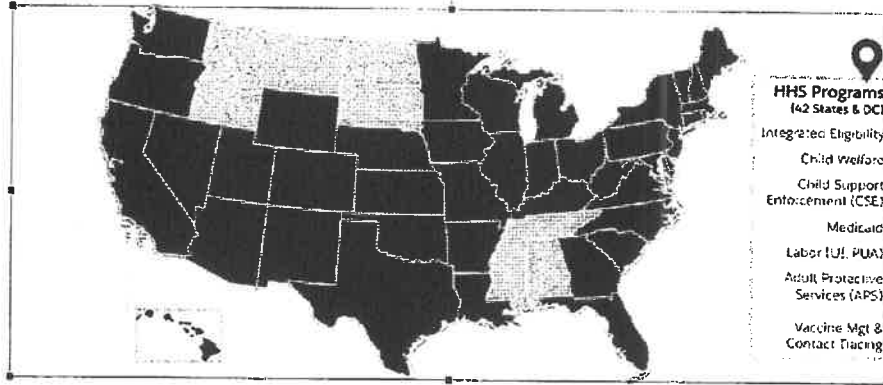
A few representative customer success stories are provided below.

The **State of Colorado** embarked on a statewide "Cloud First" transformation effort in 2009. The state chose Salesforce as its trusted transformation partner and established the Colorado Salesforce Program to execute the modernization of over 90 applications over a 10-year period. Three agencies took the lead - the Governor's Office of Information Technology, Colorado Health Care Policy and Financing (HCPF), and the Department of Human Services (DHS). Many other agencies across the state embraced "Cloud First", including labor and employment, transportation, public health and environment, public safety, energy, natural resources, corrections, local affairs, revenue, regulatory and licensing, personnel and administration, economic development, tourism, and more. Several agency transformation successes are highlighted below.

The **Colorado Department of Human Services** provides needed services to Colorado's most vulnerable populations by providing the right services to the right people at the right time. Programs include food and cash assistance, heat assistance, child care, child support, disability assistance, employment services, and refugee services. With the establishment of its own health insurance marketplace in 2013, Colorado expanded Medicaid coverage for low-income citizens, putting pressure on the state's public assistance programs to screen and enroll more applicants and deliver food, cash and medical services to more people.

The state's existing eligibility system was outdated, relying primarily on manual, paper-based processes and data entry, taking up to 45 days to determine eligibility, delaying critical assistance to residents. The state needed to build a modern platform to streamline the eligibility process and scale its Colorado Benefits Management System (CBMS). With the launch of its new insurance marketplace looming, the State of Colorado mobilized quickly to replace its manual system with a modern online portal that would allow citizens to easily and quickly apply for welfare benefits online.

The State's web-based portal, PEAK, powered by Salesforce, provides a self-service delivery model for eligibility services, allowing constituents to apply for welfare benefits online, via mobile apps, and through portal-connected contact centers for medical, food, and cash assistance programs. Built in just six months, Colorado PEAK reduces manual, paper-based application processes, speeds eligibility screening, and delivers vital health care benefits to 2.5 million citizens. Currently the app attracts more than 200,000 logins per month, and successfully integrates with numerous legacy ERP systems. PEAK is dramatically improving operational efficiencies, increasing staff productivity, and accelerating the eligibility and enrollment process. Eligibility screening and approval processing was reduced from 45 days to

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real-time. The number of applications processed per month doubled with the same number of employees and budget. Citizens can access and manage their account and benefit information anytime. Salesforce driven contact centers give citizens additional methods of applying for benefits. Community-based organizations (like food pantries and nursing homes) can link to the portal, helping citizens access additional services and resources. The solution was extended to include a provider module whereby hospitals are provided with an automated method to help newborns receive benefit coverage. To see the State's current Salesforce solution, please visit: http://coloradopeak.force.com/.

The State continued down their transformation path with the goal to modernize the entire eligibility and enrollment environment and added full case management functionality for over 4,700 caseworkers. The fully modernized Colorado Benefits Management System went live in 2019. It incorporates Medicaid, SNAP, TANF, Children's Basic Health Plan, and case management for work programs. Colorado, together with Salesforce and Deloitte, developed and deployed an incremental modernization strategy for this large, statewide system that included the addition of Salesforce applications for complex case management and legacy conversion to the Salesforce platform.

Colorado was grappling with rising caseloads combined with aging legacy issues - rising hardware and on-premise data center costs, meeting and maintaining Federal security requirements, increased release time for fixes and enhancements due to a large custom codebase, batch extending into primetime, limited mobile support, and overall system complexity that affected usability and caseworker training. The state moved away from the existing on-premise legacy system to a Salesforce solution, using configuration rather than custom code, driving more efficient business processes, reducing overall maintenance costs, and improving ease of use for caseworkers. The architecture also includes the MuleSoft integration engine that synchronizes Salesforce data with a backend database in real-time. The CBMS modernization effort achieved a 70% reduction in the code base, reduced 8 million lines of code into the configurable Salesforce platform, and migrated 450 million rows of data. Since the system went live in August 2019, the state has experienced reductions in application appeals and untimely application processing, decreases in client ID merges due to data entry errors, and improved user experience and satisfaction.

Colorado Health Care Policy and Financing focuses on delivering customer-centric health and human services: increasing access to care, improving health outcomes, and containing health care costs. The department has six programs, including Health First Colorado (Colorado's Medicaid program) and Child Health Plan Plus, that together deliver on the mission "to improve healthcare access and outcomes for the people we serve while demonstrating sound stewardship of financial resources." As of August 2020, over 1.3 million Coloradans were enrolled in Health First Colorado and 73,000 enrolled in Child Health Plan Plus (CHP+). Other programs include home and community based services, dental programs, indigent care and other buy-in services.

HCPF used a federal grant to fund improvements to its contact center and invested in the cloud, re-platforming its contact center on Salesforce. The new system launched in three months, enables agents to deliver better service faster, opens up new service channels, and supports the Department's vision of having a single platform that connects Medicaid clients and applicants, service providers, community partners, local government, larger public health programs, and more. Call-handling time was cut in half, going from an average of 12.5 minutes to 6 minutes. Call abandonment rate dropped from 54% to 12%. Tasks that once took hours were reduced to minutes, and tasks that once took minutes were reduced to seconds.

The **Michigan Department of Health and Human Services**, as part of its integrated service delivery initiative called Bridges, wanted to better integrate income support programs and improve customer service. Michigan staff have said they had one of the longest applications in the country. With 2.5M customers - 1 in 4 Michigan residents - simplifying the process was critical. The state used Salesforce to implement a customer self-service portal and a streamlined, online multi-program application and have reduced the time it takes to apply for assistance by 50%. Residents can also use the portal to recertify and submit changes and upload documents, all of which can be done on a mobile device. Code for America analyzed more than 75 state online applications - screen by screen - and found Michigan's to be

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one of the best in the nation, largely due to the improvements made with the Salesforce solution to reduce the time to complete and the overall number of screens.

New Jersey Division of Medical Assistance and Health Services (DMDHS) FamilyCare. When the State's Affordable Care Act (ACA) compliant eligibility system did not go live, the Division of Medical Assistance and Health Services (DMDHS) was forced to implement a contingency plan to meet the ACA requirements. DMDHS implemented a solution on the Salesforce Government Cloud platform to support the ACA related applications. The solution provides the security environment and controls required by Centers for Medicare & Medicaid Services (CMS) and eliminates the risk that a single hardware failure can take down the ACA systems for weeks or months. Applicants are now able to create an account and save a Medicaid application (previously 50% of the applications were abandoned) and the State has experienced a reduction in development time to implement rule changes and maintenance. Using Salesforce, New Jersey implemented a solution that includes electronic applications, ability to set up registered accounts, and integrated screening for Medicaid, SNAP, TANF, and GA. The screening is "mobile first" and designed based on previous projects done for CMS on integrated eligibility. New Jersey connects to the Federal Data Hub and is a Federally Facilitated insurance state. Medicaid Eligibility is determined at the Federal Level using New Jersey rules and information that is passed using the Account Transfer functionality. New Jersey will pass over income and other critical categories, including a Medicaid Eligibility check. New Jersey recently added an Asset Verification system for the Aged, Blind, and Disabled (ADB). New Jersey will soon be going live with SSA verification web service for SSN, Name, DOB and citizenship. Additionally, New Jersey uses Salesforce for what is referred to as the 'Worker Portal' for case management. Case workers from the New Jersey Health Benefits Coordinator and the New Jersey County welfare agencies complete MAGI determinations. New Jersey is over 95% managed care and uses 21 county welfare agencies to complete redeterminations, ABD Medicaid applications, and SNAP, TANF and GA applications.

Maryland Health Benefit Exchange (MHBE) works to ensure that health coverage options are attainable for all residents. MHBE has deployed Salesforce Service Cloud and a Partner Community to assist their customers and partners with faster access to health insurance program assistance. Health coverage programs are often confusing and time consuming, but with the MHBE case management solution, Marylanders are obtaining answers, guidance and resources faster than ever before. The Salesforce Promise CRM 3.0 system replaces a legacy system with new and automated case management that has the ability to assign cases to some 24 different local Health Departments. This system also manages a large number of case types to include assisting customers with health coverage program eligibility criteria, program changes, detailed information on health coverage benefits, adding family members, and much more. Local Maryland Health Departments access their cases via a Partner Community and they quickly respond, review and resolve cases. The system automation and engagement of partner health organizations is providing MHBE the ability to deliver exceptional customer service, their #1 priority. MHBE leveraged their internal Change Management team and their Learning Management System (built on Salesforce) to provide communications, system documentation and application training to internal users. The success of this implementation has been well received by MHBE COO, Michele Eberele and CIO, Venkat Koshanam. This is their third successful implementation since March 2017. With their recent partnership with Maryland Department of Health (MDH) and their recent acquisition of Marketing Cloud, MHBE plans to expand their Salesforce footprint across the agency.

Covered California's mission is to "Increase the number of insured Californians, improve healthcare quality, lower costs, and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and providers that give them the best value." Covered California was struggling with legacy systems and manual workarounds, which resulted in poor user experience. Enrollment and intake specialists were challenged with staying connected and accessing the information they need to help consumers navigate the healthcare enrollment process. A scalable, easy, open, compliant, and flexible solution was needed to bridge the gap and develop a modern, digital mission. Covered California is using Salesforce CRM to build a digital platform that empowers a highly mobile, highly specialized workforce with the info they need, right at their fingertips.

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DC Department of Human Services, DC Health Benefit Exchange (DCHL) (Affordable Care Act) is using Salesforce for their Health Benefit Exchange (HBX) call center, complaint management, and information requests. DC initially started using Salesforce for support of their HBX and has recently expanded with more users to support a backup facility and their greater call center within the Department of Human Services. DC is using the Salesforce Community and Salesforce Knowledge components to share operational guides from the Salesforce knowledge base to the non-CRM users that are part of the Health Link process including DC employees, carriers, and brokers. To support DC Health Benefit Exchange DCHL case management requirements DCHL implemented Salesforce to enable DCHL to capture, process, and resolve citizen's applications, inquiries, and complaints. This allowed DCHL to serve the citizens of DC effectively and efficiently. DC quickly expanded this implementation to support case management in the centralized command center and Department of Human Services (DHS). Salesforce was deployed over geographically diverse Contact Centers and allowed DC to manage customer intake across multiple channels. The case management system allows DCHL to: Give employees a 360° view of the citizen including all related case, contact and communication data; Identify and track service level agreements, escalations and tasks to better serve each citizen; Store additional case related information in Word, PDF, Excel, emails, and other formats; Integrate with DC Government's Oracle Based Legacy Systems to validate eligibility criteria; Generate case closeout emails based on predefined/branded email templates; and Capture multiple types of cases and activities ranging from applications, inquiries, complaints to requests for information queries.

With the effects of COVID-19 permeating the healthcare industry, **BCBS of Michigan**, Michigan's largest healthcare insurer, needed to balance fostering long term loyalty across their member base and while optimizing their marketing spend to stay agile and stable during uncertain times. With Datorama, BCBSM was able to use data to monitor and react to trends around public health concerns, quickly pivot around messaging to their members to facilitate the most empathetic and informative experiences around their coverage needs, all while creating more value with every dollar spent to achieve maximum ROI and efficiency. With all groups across the business aligned to a single marketing system of record, BCBSM is able to share resources and data across teams and has been able to gain a fuller picture of their 450,000+ member and prospect base.

Mount Sinai Health System, an integrated health system committed to providing distinguished care, conducting transformative research and advancing biomedical education, is using Salesforce to coordinate and manage the care of Medicaid recipients in its Performing Provider System (PPS). The Mount Sinai PPS includes more than 10,000 Medicaid service providers and 200 community organizations, from large area hospitals, to private medical practices, nursing homes and substance abuse treatment centers, to soup kitchens, homeless shelters, housing agencies and faith-based service groups. Collectively, these groups are responsible for more than 350,000 Medicaid recipients across the New York Metro area. The Salesforce platform needed a way to effectively connect every provider and organization across its vast ecosystem—something that had never formally been done before—and easily provide individual caregivers with complete views of their patients, including medical histories, treatments, medications and other clinical data plus insights into social determinants. With this information at their fingertips, caregivers can better understand their patients' needs and provide more proactive and personalized care. Salesforce aligned with Mount Sinai to tackle this challenge and streamline the way communities are served. Using Salesforce, the health system is establishing a mobile, real-time care coordination program so everyone in the Mount Sinai PPS—from doctors and physical therapists to case managers and social workers—can help patients along every step of their care journey. For example, if an individual today fails to take medication at the right frequency because of issues at work, a doctor may only see the lapse in medication adherence, whereas a case manager may only see the employment concerns. The result is a disconnected look at the patient's life, which can impact care and lead to more expensive emergency room visits down the road. Salesforce makes it possible for everyone involved to get a complete, up-to-date view of the patient so that they can help keep the patient on track with the goal of preventing an unnecessary trip to the hospital.

Salesforce Response to RFI: CRFI 0511 BMS2200000001

Question 4.2.29	Discuss any experiences you have had integrating your Medicaid Enterprise solution with legacy system management and lessons you have learned for implementing new Medicaid Enterprise solutions. Do you recommend any specific approach for modifying, interfacing with, and managing the legacy system while implementing a new Medicaid Enterprise solution?

Salesforce recommends, rather than beginning a project with each module viewed individually with the intention of integrating via a System Integrator, creating single Member and Provider 360 views to serve as the single source of truth for a Member or Provider's record across modules. To achieve this new approach, BMS would need to create a front-end digital engagement layer to serve as the single source of truth (SSOT) for Members and Providers. This layer is where employees and other users interact with the Member or Provider's record. Once the Member and Provider 360 views are determined, BMS plugs these 360 views into the existing legacy systems, new modules, or 3rd party systems that represent the system of record for the critical Member and Provider data. Salesforce believes a Member- and Provider-centric approach to the modernization of state Medicaid Enterprise Systems will enable interoperability and care coordination enabling insights that drive better health outcomes.
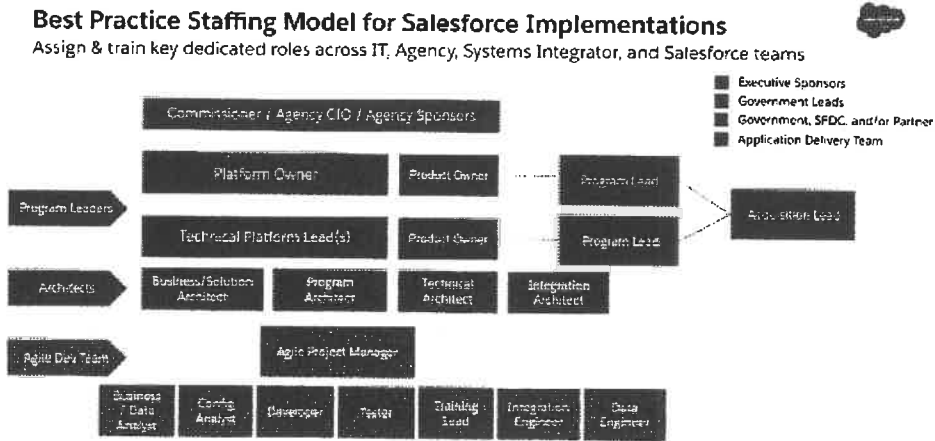
Salesforce recommends an API-Led connectivity approach. This means connecting a network of system, proces, and experience APIs together, decoupling systems to provide more flexibility, agility, and legacy modernization. We suggest leveraging technology that provides integration templates built with best practices in mind using industry standard message formats like HL7 v2 and FHIR, and reference architectures that follow professionals services guidelines.

With an API-Led approach to connectivity, you will be able to consistently access all systems (modern and legacy) via real-time APIs. This allows legacy systems to be consumed into modern systems and processes with ease by developers. It also allows for immediate legacy modernization with the flexibility to retire legacy systems when appropriate with minimal disruption to the overall integration landscape.

Question 4.2.30	What staffing levels, including experience and skillset, are typically required to implement your Medicaid Enterprise solution? What are the suggested state Medicaid agency staffing levels to support DDI and ongoing operations? How do these staffing requirements compare to other offerings in your Medicaid Enterprise solution?

For a typical Salesforce project, the required staffing levels are determined by the chosen System Integrator based on the scale and scope of the project. However, Salesforce does have a recommended model for establishing an organization aligned to Agile delivery of Salesforce solutions. These roles are critical to ensuring the project maximizes the low code configuration abilities of the Salesforce Platform so that BMS can recognize rapid delivery of innovations.

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Best Practice Staffing Model for Salesforce Implementations
Assign & train key dedicated roles across IT, Agency, Systems Integrator, and Salesforce teams

These roles typically require experience and skills to:
- Manage the Product Backlog / Demand
- Define User Stories
- Configure & Develop Applications
- Perform Testing
- Configure & Develop APIs & Integrations
- Configure Visualizations & Dashboards
- Manage Release Process
- Provide End User Training

Ease of use is one of the most important factors in ensuring broad adoption of the solution and organizational utility. To achieve the highest value from the solution investment, BMS can customize the Salesforce solution to best fit its user's needs. The Salesforce Platform offers tools for "no compromise customizations," to make it possible to create both fast and easy configuration, as well as deep customizations to meet just about any need. BMS can easily customize the Salesforce application through clicks or code methodology. Salesforce configuration, development, and administration is focused 80% on clicks vs. 20% code, dramatically improving cost of ownership and enabling non-technical business users to easily extend existing Salesforce functionality and/or create entirely new applications that run in the Salesforce framework. Through the point-and-click methodology, custom fields, custom objects and new applications are easily configured in Salesforce. All customizations are stored as metadata and interpreted at runtime allowing the core code to be upgraded while guaranteeing that customizations will work across upgrades.

Question 4.2.31	**Describe the System Development Lifecycle (SDLC) approach that you use for implementing your Medicaid Enterprise solution. Can your SDLC approach be incorporated into an environment that uses a traditional "waterfall" SDLC approach? What about "agile" methodologies to support the implementation of your Medicaid Enterprise solution? If so, how can this be accomplished?**

An agency like BMS, with a complex set of programs and stakeholders, will benefit from taking an incremental approach to modernization that uses short, mid, and long-term goals to develop a path to not only modernize the enterprise, but to reimagine how it does business to drive the best possible program

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outcomes. Salesforce recognizes that organizations, like BMS, cannot modernize all of the components of its MES overnight. Instead, Salesforce advocates taking discrete stakeholder (e.g. Members, Providers) and program functions, such as Member or Provider enrollment, and modernizing in a phased, iterative way. This approach reduces risk to the organization and also facilitates an orderly change management process to help BMS Members, Providers, and staff to adapt to new systems and processes.

Commercial Off The Shelf vendors and many System Integrators will often use a Waterfall implementation approach. While the Waterfall approach can have merit, an Agile approach has become the preferred implementation methodology to reduce project risk, ensure better project outcomes. As such, we believe the Agile Implementation Methodology is better aligned to BMS's vision and stated goals, providing quicker time to value, a more cost effective process to meet BMS's unique needs and through continuous feedback ensures the user experience is the focal point of the development process while significantly lowering project risk.

One of the primary measures of success within the Agile approach is delivering working software quickly: within weeks, not years. The shorter time scale enables users to provide feedback early and often thus reducing the time to value. Beyond delivering working software quickly, the Agile approach establishes a feedback loop to facilitate collaboration between IT, the Business Users and the Development Team. The continuous feedback loop enables these teams to work as one cohesive unit. The Agile approach also ensures a more cost effective method to meet BMS's unique needs. Business users are able to change requirements before significant efforts have been expended. In contrast, the Waterfall approach often leads to exhaustive requirement specifications which often fail to meet project expectations as well as lead to increased costs. Ultimately, the Agile approach emphasizes individuals and interactions over processes and tools, customer collaboration over contract negotiation, and most importantly, builds relationships and trust with the project stakeholders. We believe the Agile approach will produce a more successful implementation in the quickest most cost effective manner possible.

Question 4.2.32	**What is the typical duration of a project to implement your Medicaid Enterprise solution? How does this timeline break down across the planning and DDI phases?**

Salesforce would defer to our ecosystem of certified partners that directly implement projects to recommend duration for DDI efforts for a Medicaid Data Hub and Service Integration Layer.

Question 4.2.33	**What do you see as the key cost drivers for implementing your Medicaid Enterprise solution? What recommendations do you have for managing MES costs and demonstrating outcomes that mitigate any unnecessary costs of a Medicaid Enterprise solution?**

Typically, Salesforce software is deployed and configured by certified Salesforce partners. Project management and governance are key factors that can lead to unexpected project costs. As mentioned in this RFI response, leveraging an Agile Project Methodology is perhaps the single most important approach to mitigate risk and demonstrating outcomes sooner in the project. As it relates to Salesforce specifically, we often recommend customers secure the services of a Salesforce Program Architect (PA) to aid in executing best practices as well as accommodating any design challenges the State and its selected SI might encounter.

In addition, in our experience, many projects are rather tactical and do not necessarily provide an overall vision and strategy of how individual initiatives fit into the more holistic goals for the Agency. Understanding the vision and how to incrementally achieve that vision is important to lower risk and achieve better long term outcomes. Salesforce customers have access to no cost Digital Transformation services that can produce platform pathway considerations to guide the configuration of additional solutions and accelerate enterprise adoption. The Salesforce Customer 360 platform drives immediate

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business value, along with the deployment of an integration layer, accelerates outcomes and mitigates the high costs of a Medicaid solution.

Question 4.2.34	**Using your Medicaid Enterprise solution as an example, what guidelines do you recommend for "phasing in" your modules and/or services? How do these guidelines maximize efficiency and/or minimize risk? What constraints would they place on DDI partners and BMS?**

Leveraging a cloud-based approach to modernizing citizen engagement and program case management systems provides scalability for today and future growth. Agencies can add services at their pace, only as they need them and this speeds up deployment. By integrating previously siloed agency departments and modules with shared services on a single digital engagement and case management platform, you create a future-ready platform with the benefit of automatic updates. Agencies need cloud-based citizen engagement and case management tools to digitally transform with speed, flexibility and scale to keep up with changing times and their stakeholder demands, and we are proud to be the only technology platform company to offer the breadth of citizen engagement solutions to help agencies accelerate innovation and prepare for the future.

Digital transformation planning is becoming essential to ensure the technology investments made today are part of a larger vision to reimagine government service delivery of the future. It can be overwhelming to balance urgent needs with long-term planning and goals. Agencies with complex programs and many different stakeholders benefit from using a customer-focused approach to develop a plan that is oriented to the most mission-critical goals and needs for each stakeholder group.

Salesforce works with the largest governments in the world to ensure they've carefully assessed their needs and goals to develop an impactful Transformation Roadmap that rapidly addresses critical needs while looking to reimagine technology into the future. An agency like BMS, with a complex set of programs and stakeholders, will benefit from taking an incremental approach to modernization that uses short, mid, and long-term goals to develop a path to not only modernize the enterprise, but to reimagine how it does business to drive the best possible program outcomes for citizens. This facilitates "phasing in" capabilities and services in a strategic manner designed to drive rapid ROI and quick time to value.

We have created a sample of what an incremental Transformation Roadmap could look like for a Medicaid program. This reflects conversations we have had with other states and industry specialists experienced in issues similar to those faced by BMS.

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Transforming the Medicaid Enterprise
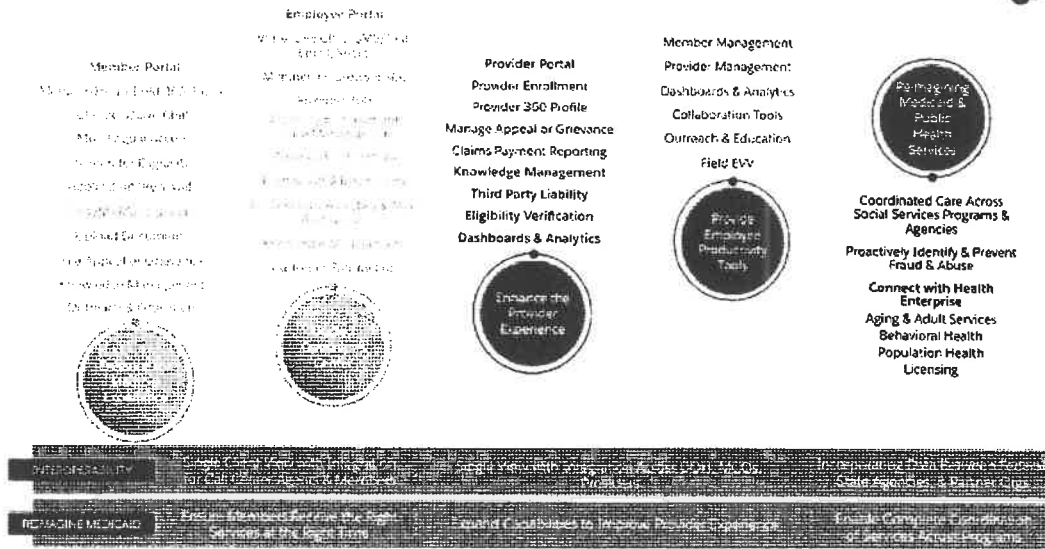
This plan is notional and based on past experience and best practices with other human services agencies going through a similar cross-agency and program transformation process. Salesforce would welcome the opportunity to work with our Global Government Digital Strategy team to evaluate your stakeholder groups - including clients, employees, and other parties - to assess their challenges and objectives in dealing with BMS. The Digital Strategy team would work with the Department to assess your technology footprint and target areas ripe for short, mid, and long-term transformation and assist BMS in prioritizing these opportunities against your goals and objectives. The result is a comprehensive Digital Transformation Plan tailored for BMS.

Question 4.2.35	**What do you believe would be the optimum duration and the minimum duration for DDI of your Medicaid Enterprise solution?**

Salesforce would defer to our ecosystem of certified partners that directly implement projects to recommend duration for DDI efforts for a Medicaid Data Hub and Service Integration Layer.

Question 4.2.36	**List and describe the documentation developed by your company and/or the state Medicaid agency that is essential to DDI and operations of your Medicaid Enterprise solution.**

Salesforce would defer to our ecosystem of certified partners that directly implement projects to provide a list of the documentation necessary to transition legacy data.

Question 4.2.37	**Detail how your Medicaid Enterprise solution could support BMS in improving data analytics and reporting capabilities, data sharing initiatives, and overall confidence in health data.**

Salesforce's Tableau Platform is designed for the business user to get answers to questions instantly through powerful, interactive visualizations of any data, on any device. Tableau is designed to analyze data not just from within Salesforce, but from across different sources, and be surfaced across BMS. The Many other larger State Health departments use Tableau such as State of California, State of Florida, State of Texas, State of Ohio and several others.

Public and commercial healthcare providers and payers use Tableau's self-service analytics to drive improved outcomes within defined populations. Tableau's easy-to-use advanced visual analytics such as

- Segmentation & cohort analysis

- Scenario & what-if analysis

- Time-series analysis

- Predictive analysis

Tableau has supported multiple payers in the shift from fee-for-service to value-based payment models. Specific use cases supported include rapidly identifying avoidable complications, comparing cost of services between organizations, such as an MCO or IPA, and others treating the same episodic bundle and viewing high risk/high cost patient information to better manage care and outcomes over time.

Tableau's self-service reporting/visualization flexibility and built-in array of graphical charts and displays will allow West Virginia to quickly build and deploy a variety of dashboards and analysis capabilities for virtually all envisioned use cases. Tableau includes a wide variety of optimized data connectors, including Salesforce, making Tableau the ideal choice for environments where multiple data sources are required in order to bring clarity on a given business problem. Tableau supports and works in conjunction with standard security mechanisms, assuring only those with appropriate access are capable of interacting with specific projects, dashboards and reports. As the leading visual analysis software company, Tableau has been built on the principles of ease of use for all knowledge workers. Everyday users should not be encumbered by or limited by the capacity of the IT shop to develop and provide data analytics. As discussed below, Tableau's products are built on breakthrough technologies that allow West Virginia users to quickly create visually compelling ways to see and understand one's data.

Question 4.2.38	**Describe or illustrate your data visualization capabilities.**

Salesforce recommends incorporating the above data analytics and best practices as also outlined below:

- **Self Service.** Enable users to ask their own questions of the data without requiring IT assistance. Visualization best practices & templates to guide users; regardless of role, skill level. Editing and creation of worksheets and dashboards over the web

- **Performance.** Connect natively with queries optimized to the underlying data; to all major data sources (databases, Big Data, cubes, text, desktop data, etc.). Flexible architecture supports mixing & matching virtually any type of data via direct connection or optimized extract queries

- **Flexible data storage & modeling.** Requires no fixed data model, cube, physical or meta layer and no up-front modeling exercise. Native drill down and throughout transactional data from disparate sources

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- **Sophisticated analytics at data volume scale.** Easily create simple or complex calculations with full external services integration to virtually any analytics available via scripts (ie R, Python, JAVA, C++ etc) or packages (ie SAS, SPSS, MATLAB etc)

- **Governed sharing & personalized distribution of content.** Collaborate with colleagues by sharing modified content or entering commentary. Publish personalized dashboards, reports, visualizations to web browsers, mobile devices and web portals

- **Hardened security.** Centralized row-level data security, authentication, authorization | permissioning & network layer security. Leverage virtually any 3rd party security standard (ie CAC Card, Active Directory, SSO, Kerberos and PKI security methodologies; including existing application security protocols. Multi tenancy, via a Tableau Site, enables multiple divisions or teams to use a single Tableau Server with varying degrees of security hardening as needed, i.e. some sites deploy via multi-factor authentication; other sites deploy with single-factor authentication.

Question 4.2.39	How does your Medicaid Enterprise solution improve the coordination of care, detect and prevent fraud, waste, and abuse to support Medicaid program integrity, and improve stakeholder access to state Medicaid Enterprise data?

As the State is well aware, data and process consistency across the Medicaid Program has always been a challenge, and with the introduction of modularity, it has in some cases gotten more challenging. There are several elements to consider to address these challenges.

First, from a data consistency standpoint we have provided a point of view in this document for the need to have a "Customer 360", that single pane of glass that allows members and providers with an ability to see their information which draws data from across disparate State systems. The Customer 360 capability is intended to not only support the viewing of information, but also to support processing changes to information as well.

In this instance, a change that is managed in the Salesforce Customer 360, say for example, a member uses their mobile phone to enter a change of address which would then update Salesforce's Customer 360 and publish the information to the other subscribing systems via Mulesoft, thereby helping to promote data consistency. In this context, Salesforce would operate as "the single source of truth" for other Medicaid modules. For more advanced data consistency features and data governance tasks, a full Master Data Management module can be added to the Salesforce Customer360 solution, providing enhanced capabilities for managing data policies, data transformation, etc.

Further, we believe that the Salesforce Customer360 is an innovative approach to support MITA business processes. In the State of Maryland for example, the Maryland Department of Health is using CRM as one of its first priorities to modernize service delivery across the Enterprise (called Enterprise Technology Solutions) in order to mature their MITA processes and to make an immediate impact on improved customer outcomes.

Enterprise Technology Solutions for MDH
- Most operationally impactful modules and support all aspects of Medicaid programs across all business areas
- Implemented first to allow the state to realize benefits and address current issues
- Premier solutions for improving customer service and strengthening program integrity

Customer Relationship Management (CRM)
- Enterprise-wide solution – supports 72 Medicaid business processes
- Will move MDH up the MITA maturity scale through automation and integration across the organization

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- Customer Service -- common database will provide more holistic view of customer interactions and services

Question 4.2.40	**Describe how your Medicaid Enterprise solution increases access and shared use of data with both the State and other vendors, improves healthcare quality management, and increases automation capabilities.**

Modularity and the insights gained from the Member and Provider 360 views are only attainable by creating strong connections between related systems to ensure a Single Source of Truth (SSOT) about each Member and Provider. BMS must be able to access and share data across other Medicaid modules, BMS's legacy systems, other State agencies, the Health Information Exchange, MCOs and other systems within the MES ecosystem. This requires defining the foundation of Member and Provider 360 views and integrating to these systems to pull in critical system of record information, which can then be used to drive analytics, reporting, and visualization of Provider, Member, and population-level data.

Through integrations, BMS can gain access to the single pane of glass Member or Provider view that connects many data sources. Access to this data is critical to maintaining a SSOT about the Member and gaining insight into the Member's needs, goals, outcomes, and barriers, while population-level data can be leveraged to identify population health trends, costs, outcomes, and program performance. Further leveraging the insights gained in connecting data across systems, Intelligent analytics can give BMS, MCOs and providers actionable insights to drive intelligent Member engagement.

Enabling actionable insights is more than embedding a visualization in an application. The benefit increases exponentially when recommendations (i.e. next best actions) are also embedded in program workflow. By surfacing insights at the point of engagement, the agency users have a best practices data based next best action to consider. The end-user determines how and when to apply the recommendation when engaging with a Member.

Integration options range from native Web Services support (APIs, outbound workflow, etc.) to import/export utilities to middleware integration via packaged connectors to toolkits for Java, .NET, and other open platforms. DOH requires a solution with the ability to call out to virtually all common APIs, to enable synchronization, push / pull, and mash-ups with external apps/systems.

Question 4.2.41	**If applicable, how does your Medicaid Enterprise solution improve access to end users, such as a user's data or access to additional services?**

Member Management. Using Salesforce, BMS can create personalized Member journeys, extend reach across all channels and devices, deliver consistently relevant and personalized messaging, optimize benefits and services, gather better events data, and educate its target populations. BMS can develop a "physical and mobile front door" to engage Members at every stage of their relationship with the organization, enabling a personalized experience that delivers relevant content and functionality to each end user in alignment with their preferences and needs. This engagement can be done through phone, email, chat, SMS, video, or integration of data such as medical device monitoring or emergency alert systems tied right into the member profile. BMS will know where the Member is in their journey and provide the right touchpoint with the right message at the right time.

Mount Sinai

The Mount Sinai Health System is using Salesforce to coordinate and manage the care of Medicaid recipients in its Performing Provider System (PPS). The Mount Sinai PPS includes more than 10,000 Medicaid service providers and 200 community organizations, from large area hospitals, to private medical practices, nursing homes and substance abuse treatment centers, to soup kitchens, homeless shelters, housing agencies and faith-based service groups. The Salesforce platform needed a way to effectively connect every provider and organization across its vast ecosystem—something that had never formally been done before—and easily provide individual caregivers with complete views of their patients, including medical histories, treatments, medications and other clinical data plus insights into social determinants.

Salesforce offers a proven Member Engagement Platform and solutions to meet the complex needs of Medicaid Enterprise Systems. Salesforce provides a secure, multi-channel enterprise platform that puts the Member at the center of all government services providing a 360 degree view of the Member. Our solution can help BMS enhance its mission to improve the quality of life for individuals and families in need while deploying in an accelerated fashion. Salesforce's highly flexible, open-platform can enable the Department to modernize rapidly, and deliver unprecedented service. Salesforce ranks as the Leader in the Gartner Magic Quadrant for "CRM Customer Engagement Center" (SaaS).

Provider Management. Using native functionality in the Salesforce platform, BMS will be enabled to manage the end-to-end provider journey for your Medicaid provider ecosystem from screening to enrolling to service delivery. The Salesforce platform can accelerate the certification or recertification of Medicaid providers, facilitate ongoing engagement, engage as part of broader care teams, and facilitate overall administrative productivity.

Question 4.2.42	**How can your Medicaid Enterprise solution help address gaps in health outcomes? Please provide outcomes from other engagements, if applicable.**

Leveraging the Member 360 and the insights derived through integration across modules and external systems, there is an opportunity to facilitate better care coordination across BMS, providers, MCO's, and other State agencies. A care team - potentially composed of a Member's healthcare providers, MCO care coordinators, and other State social services case managers - have access to all the information they need. Examples include: social determinants, a complete view of State or community services and programs the Member is enrolled in, their care team, family members, Member claims, timeline of interactions, and more. The care team has access to all information about the Member that is necessary for them to effectively assist the Member to develop care plans to not only access healthcare, but proactively assist in addressing potential barriers and risks.

Care teams can use visualizations of key metrics to identify and remove barriers, while improving care effectiveness and efficiency. BMS can use a platform that helps care teams identify Members who may be at risk and take steps to prevent avoidable admissions. Members can be segmented by age, risk, and barriers to identify at-risk individuals to help improve their health outcomes. Dashboards provide insight into the Member's services and benefits across State agencies and community partners, MCOs, and Providers.

Providing great care means having a comprehensive, holistic view of Members—including insights into their social and environmental circumstances. If someone with health issues can't drive to the grocery store or to medical appointments, it's difficult for them to maintain or pursue optimal health. It is critical to have tools to assess and record barriers to health and address them with interventions that make the difference between struggling and thriving

Clover Health

Clover Health is an US-based healthcare company with the goal to use data analysis & preventative care to improve health outcomes for seniors. Clover consolidated systems & automated intelligence to transform member engagement. A member 360 helped improve team collaboration and care while the provider 360 helped consolidate the data model consistent across the provider network.

To achieve effective care coordination, it is critical that the MES solutions leverage available data across systems to create a complete picture of the Member. This is achieved through a comprehensive integration strategy and a single view into the Member via a Member 360. With access to this data, the solutions should be able to not only provide information to stakeholders, but also track and monitor Member progress and outcomes. This is critical to proactively identifying potential at risk individuals or populations, identifying barriers to care, and maximizing the entire State and healthcare ecosystem to ensure the Member has the services and programs critical to their health.

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Question 4.2.43	**Describe your experience with payment milestones during the DDI of your Medicaid Enterprise solution. In other DDI projects, were payments tied to deliverables, acceptance criteria, and/or other DDI milestones?**

Salesforce would rely on our network of partners who are certified systems integrators to manage

Question 4.2.44	**Do you have a short demonstration of your approach and/or Medicaid Enterprise solution that you would like to present to BMS? If so, please describe the method of presentation for the demonstration and suggestions for who should attend. If BMS wishes to take part in a demonstration, they will reach out to the Respondent for further information.**

Salesforce would welcome the opportunity to meet with BMS to demonstrate our solutions supporting Medicaid. A sample of the capabilities Salesforce can bring can be viewed here. These guided tours include samples of capabilities supporting Program Eligibility, Integrations, and Analytics, among other capabilities. In addition, BMS can view demos of using Salesforce to Personalize Member Management and Scale Member Care Management.

Question 4.2.45	**Is there additional information you would like to share with BMS related to the topics addressed in this RFI?**

Salesforce doesn't have further information to provide in response to this RFI but welcomes the opportunity to discuss how the Salesforce platform can support the State in achieving the goals associated with the Medicaid program.

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Section 4: RFI Certification

Request for Information
CRFI BMS2200000001
Medicaid Enterprise System (MES)

By signing below, I certify that I have reviewed this Request for Information in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this response for review and consideration on behalf of my organization.

Courtney E Hawkins

Salesforce.com, Inc.

Courtney Hawkins, HHS Industry Executive

![State of West Virginia seal] Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130	State of West Virginia Centralized Request for Information Info Technology

Proc Folder:	964162	Reason for Modification:
Doc Description: REQUEST FOR INFORMATION-MEDICAID ENTERPRISE SYSTEM (MES)		ADDENDUM 2 TO CORRECT METHODS OF RESPONDING AND EXTEND THE OPENING DATE
Proc Type:	Request for Information	

Date Issued	Solicitation Closes	Solicitation No	Version
2022-01-05	2022-01-11 13:30	CRFI 0511 BMS2200000001	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: Salesforce.com, Inc.

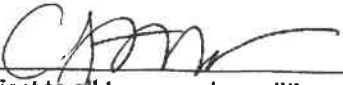Address: 415 mission st 3rd floor

Street:

City: San Francisco,

State: CA   Country: Zip: 94105

Principal Contact: Melissa Rove

Vendor Contact Phone: 859-333-0873   Extension:

FOR INFORMATION CONTACT THE BUYER
Crystal G Hustead
(304) 558-2402
crystal.g.hustead@wv.gov

Vendor
Signature X _____   FEIN# _____   DATE 1/10/22

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

Date Printed: Jan 5, 2022   Page: 1   FORM ID: WV-PRC-CRFI-002 2020/05

ADDITIONAL INFORMATION

REQUEST FOR INFORMATION:

THE WEST VIRGINIA PURCHASING DIVISION IS ISSUING THIS REQUEST FOR INFORMATION FOR THE AGENCY, WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES (DHHR), BUREAU FOR MEDICAL SERVICES (BMS), FOR THE PURPOSE OF GATHERING INFORMATION TO DEVELOP SPECIFICATIONS FOR A MEDICAID ENTERPRISE SYSTEM (MES) MODERNIZATION. INFORMATION PROVIDED WILL ASSIST THE WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES IN DEVELOPING SPECIFICATIONS AND WILL ASSIST IN THE PROCUREMENT PROCESS.

QUESTIONS REGARDING THE SOLICITATION MUST BE SUBMITTED IN WRITING TO CRYSTAL.G.HUSTEAD@WV.GOV PRIOR TO THE QUESTION PERIOD DEADLINE CONTAINED IN THE INSTRUCTIONS TO VENDORS SUBMITTING BIDS

ONLINE RESPONSES FOR THIS SOLICITATION ARE PROHIBITED

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Medicaid Enterprise System (MES) Modular				

Comm Code	Manufacturer	Specification	Model #
93151507			

Extended Description:
Medicaid Enterprise System (MES) Modular

SCHEDULE OF EVENTS

Line	Event	Event Date
1	VENDOR QUESTION DEADLINE	2021-12-06

SOLICITATION NUMBER: CRFI BMS2200000001
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:

[✓]   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 correct section 5.2.7 Response Submission, emailed submission was included by mistake.
Responses should be submitted by fax, mail, or drop off in person.

2. To extend the response date to January 11, 2022 at 1:30 PM ET

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.

ATTACHMENT A

To modifiy section **5.2.7 Response Submission**

<u>Methods for responding are as follows:</u>

*Fax to 304-558-3970

*Mail or drop off in person to :

2019 Washing Street East

Charleston, WV 25305

Emailed responses are not acceptable

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: BMS2200000001

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.
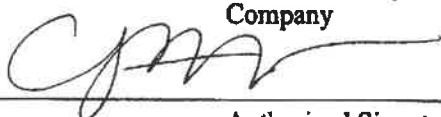
Addendum Numbers Received:
(Check the box next to each addendum received)

[✓] Addendum No. 1   [ ] Addendum No. 6

[✓] Addendum No. 2   [ ] Addendum No. 7

[ ] Addendum No. 3   [ ] Addendum No. 8

[ ] Addendum No. 4   [ ] Addendum No. 9

[ ] Addendum No. 5   [ ] 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 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.

Salesforce.com, Inc.
Company

[signature]
Authorized Signature

_1/10/22_
Date

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

Revised 6/8/2012