DHH · CF · 1
Revised:2-08

CFMS: 675515
DHH: 053157
Agency # 305

AGREEMENT BETWEEN STATE OF LOUISIANA
DEPARTMENT OF HEALTH AND HOSPITALS

MEDICAL VENDOR ADMINISTRATION
ELIGIBILITY FIELD OPERATIONS
AND
UNIVERSITY OF NEW ORLEANS, Metropolitan College
FOR

☐ Personal Services ☐ Professional Services ☒ Consulting Services ☐ Social Services
Governmental

1) Contractor (Legal Name if Corporation) UNIVERSITY OF NEW ORLEANS, Metropolitan College	5) Federal Employer Tax ID# or Social Security # 72070200000 (Must be 11 Digits)

2) Street Address University of New Orleans - Lakefront Campus			6) Parish(es) Served ST
City New Orleans	State LA	Zip Code 70148	7) License or Certification #

3) Telephone Number (504) 280-7100			8) Contractor Status
4) Mailing Address (if different) 2000 Lakeshore Dr. - CERM Bldg. Rm 460			Subrecipient: ☐ Yes ☒ No Corporation: ☐ Yes ☒ No For Profit: ☐ Yes ☒ No Publicly Traded: ☐ Yes ☒ No
City New Orleans	State LA	Zip Code 70148	8a) CFDA#(Federal Grant #)

9) Brief Description Of Services To Be Provided:

The University of New Orleans (UNO), Metropolitan College shall provide an array of technical and professional services for the Department of Health and Hospitals (DHH), Medical Vendor Administration (MVA), also referred to as the Bureau of Health Services Financing (BHSF) or Medicaid. Technical services are provided by the Database Administration, Grants and Procurement Support, Information Technology Procurement Support, Software Development and Technical Support groups. Professional services are provided by the Medicaid Eligibility Quality Control (MEQC), Pharmacy, Training and Waiver Assessment groups.

10) Effective Date 07-01-2009	11) Termination Date 06-30-2012

12) This contract may be terminated by either party upon giving thirty (30) days advance written notice to the other party with or without cause but in no case shall continue beyond the specified termination date.

13) Maximum Contract Amount

14) Terms of Payment

Contractor obligated to submit final invoices to Agency within fifteen (15) days after termination of contract.

University of New Orleans shall submit a quarterly detailed invoice for payment. This is a cost reimbursement contract in accordance with the attached budget. Travel will be reimbursed according to State Travel Regulations.

Payment will be based on approval of invoices/deliverables.

PAYMENT WILL BE MADE ONLY UPON APPROVAL OF:	First Name John	Last Name Fralick, Jr.	
	Title Section Chief		Phone Number (225) 342-5716

15) Special or Additional Provisions which are incorporated herein, if any (IF NECESSARY, ATTACH SEPARATE SHEET AND REFERENCE):

Attachment A: Statement of Work
Attachment B: HIPAA Addendum
Attachment C: Special Provisions
Attachment D: Budget
  07/01/2009 - 06/30/2010
  07/01/2010 - 06/30/2011
  07/01/2011 - 06/30/2012
Attachment E: Budget
  07/01/2009 - 06/30/2012

Exhibit A: Multi Year Letter
Exhibit B: IT-10 Form

CONTENTS:
1.0   GOALS/PURPOSE
2.0   TECHNICAL SERVICES/OUTCOME
3.0   PROFESSIONAL SERVICES/OUTCOME
4.0   ADDITIONAL UNO ADMINISTRATIVE RESPONSIBILITIES
5.0   SPECIAL PROVISIONS FOR FUNDING
6.0   PERFORMANCE MEASURES
7.0   MONITORING

1.0   GOALS/PURPOSE

The University of New Orleans (UNO or The University), Metropolitan College shall provide an array of technical and professional services for the Department of Health and Hospitals (DHH). Medical Vendor Administration (MVA), also referred to as the Bureau of Health Services Financing (BHSF) or Medicaid.

These services include, but are not necessarily limited to, these functions:

1.1   Database Administration – database support and administration for all PC server-based databases. The database administration group's goals are the safe-keeping of MVA's data and optimal performance of the databases in support of the end users.

1.2   Grants and Procurement Support (GPS) – grant writing, Request for Information (RFI) and Request for Proposal (RFP) writing and stewardship. The GPS group's aim is to assist MVA in the large, complex procurement processes which it must undertake and to support management of grants received.

1.3   Information Technology Systems Procurement Support – to provide technical advice and guidance on IT systems procurement and implementation.

1.4   Medicaid Eligibility Quality Control (MEQC) – to conduct the federally required MEQC reviews as prescribed by federal regulations and MVA.

1.5   Pharmacy – a collection of analysis and auditing services centered on the Pharmacy Benefits Management program. The pharmacy group's goal is to provide management of the Rebate and Audit programs designed to maximize efficiency in both time and revenue for the state.

1.6   Software Development – custom software development for the desktop, web and web services platforms. The software development group's purpose is to increase automated support for MVA's many business processes.

1.7   Technical Support – both frontline desktop support and comprehensive system administration. The technical support group shall provide PC software support, hardware support and diagnostics, and network support for all Medicaid regions and the state office.

1.8   Training - a program of computer software training and eligibility policy training. The main objective of the training program shall be to improve the skills of employees in conducting their duties and increase the productivity of the Medical Vendor Administration personnel and their agents.

1.9   Waiver Assistance and Assessments - assist MVA in the preparation of one or more waivers to CMS and relevant state agencies and conduct an independent analysis of MVA programs scheduled for assessment by CMS.

UNO shall provide staff that shall be centralized at MVA Headquarters in Baton Rouge or other designated sites as determined by MVA.

The staff shall report administratively and functionally to the UNO Contract Coordinator, but will work closely with and receive requests for assistance directly from the MVA contract monitor or designee. Each of the above UNO functional units will be closely assigned with a corresponding MVA section chief(s) as designated by the contract monitor.

2.0   TECHNICAL SERVICES/OUTCOME

2.1   General
For designated systems UNO shall:

2.1.1   Definition of technical services
Technical services are defined as any services provided by the Database Administration, Grants and Procurement Support, Information Technology Procurement Support, Software Development and Technical Support groups.

2.1.2   Governance
UNO's technical groups shall chair and staff governance boards for the business and technical aspects of projects.

Business Process Analysis board – UNO's technical groups shall participate in the analysis and documentation of Medicaid business processes.

Technical Architecture and Design board – UNO's technical groups shall be primarily responsible for the technical architecture and design of select new Medicaid systems.

2.1.3   Consultation
UNO's technical groups shall provide consultation level support for other groups in Medicaid's sphere of influence, as directed.

2.1.4   Medicaid Information Technology Architecture (MITA)
MITA is a national framework to support improved systems development and health care management for the Medicaid enterprise.

All systems developed as a result of this contract will strive to meet the standards set forth by MITA. Any deviation from those standards will be acknowledged as such and justification for the deviation should be provided.

2.1.5   UML/WSDL
UNO's other technical groups shall support the GPS group with Universal Modeling Language (UML) and Web Services Definition Language (WSDL) assistance as needed for RFPs and other documents.

2.1.6   Disaster Recovery
It is the responsibility of all of UNO's technical groups to plan for, document, and respond to disasters which affect Medicaid systems.

2.1.7   Business Continuity
It is the responsibility of all of UNO's technical groups to plan for, document, and implement high availability solutions for Medicaid systems.

2.1.8 Service Coverage

The following sections of MVA currently share the technical resources of the contract:

- Medicaid Director's Office
- Eligibility Field Operations
- Eligibility Policy
- Eligibility Special Services
- Eligibility Supports
- Eligibility Systems
- Financial Management and Operations
- Health Standards
- Medicaid Management Information Systems
- HIPAA Compliance and Maintenance Unit
- Pharmacy Program
- Policy Development and Implementation
- Program Integrity
- Program Operations
- Rate and Audit
- Waiver Assistance and Compliance

Services may be provided to others as directed by the contract monitor.

2.2 Software Development

UNO shall provide customized computer applications to run on MVA servers or personal computers for the purpose of increasing the efficiency of MVA operations. Customers of the Software Development group include all Medicaid sections, other UNO groups, and other Medicaid business partners and clients.

- Current software development projects in production include: Administrative Renewals 1.0, Application Suite for Windows, ARLS 3.1, Automated Task Controller (ATC) System, Auto-Notice 1.0 (Phase 1), MVA Web Portal 2.1, BR-9B 2.0, Circulations 1.0, COLA Notices 2.1, Contact Manager 2.2, Cost Report FTP Utility 1.0, Data Broker System (with MEDS, Health Standards, et al), Diagnostics/Logging, Document Requests, Document Reporting System, Document Verifications 1.0, Electronic Document Management System (EDMS), DHH Field Newsletter 1.0, EZNotice 1.9, Foreign Language Notices 1.0, Hospice 2.4, Inquiries 2.0, KIDMED Contract Monitor 1.0, Locations Component (Security), Medicaid Application System – Resource Eligibility 6, MPP Back Office 0.9, Notifications/History, Online App (for Application Centers) 3.1, Online App - Public 1.0, Online Clearances 1.0, Online Manuals 2.0, Online Requests 1.0, Out of Conformity 2.1, People Component, Provider Component, Provider Data Publication, Provider with Sanction IDR 1.0, Recipient Request Module, Security Module, Special Needs Case Management 1.0, Syntellect Automatic Call Distribution integration. These projects are subject to change at the discretion of MVA.
- Software projects under development include: 148 Automation for MVA, Administrative Renewals 1.1, Application Suite for Web, Auto-Notice 1.1, Case Component, Collaborative Workflows, Content Retention, Cross Access Replacement, MEDS Data Broker Interface, ECR & ECR-Software Integrations 1.9, Electronic File Cabinet 1.0, New- & Ex-Employee Workflows, Notices in Application Suite, Online App - Public 1.1, Online App 3.1, Online Requests 1.1, Position Tracker 2.0, Single Point of Entry 1.0, Work at Home. These projects are subject to change at the discretion of MVA.
- Software projects that have been identified as potential new projects include: 148 Automation for DHH, Appeals Automation, Audit Tracking, Automated Notice Requests, Case Management Data Collection and Analysis, Circulations 2.0, Claims Processing Recipient Call-in Line, CommunityCARE 1.3, Common Medicaid Person, Contractor Review and Monitoring (CRAM), Cost Report System 1.0, DHH Information Sharing and Data Warehousing 1.0, Electronic File Cabinet 1.1, FIMS Process Automation with EFC, FileNet Replacement, Hospice Assessment, H&R Block Application Web Service, Interactive Medicaid Services Chart 1.0, Integrated Client View, MakeMyCalls integration, Medicaid Resource Eligibility Assessment

(MAS 7), Medicaid Disability Assessment (MEDT 3.0), MEDIPLEX, MPP Back Office 1.0, NADA Broker Interface, OAAS Basic Forms Reporting, OAAS ECR, OAAS HR Process Tracking, OAAS LISP Referral, OAAS Patient Data Extensions, OAAS ARLS Related Extensions, OGB Interface Automation, Online App - Long Term Care 4.0, Online Clearances 1.1, OTIS Provider Extensions, Out of Conformity 2.2, Pharmacy Online POS Recertification, Position Tracker 3.0 (Employment), Provider Email Broadcast Utility 1.0, Resources Component, Secure Renewal Website, Secure Recipient Self-Service, Special Needs Case Management 2.0, UNO Electronic Case Record 1.0, WorkNumber Broker Interface. These projects are subject to change at the discretion of MVA.

2.3 Technical Support

UNO technical support staff will provide systems, network, and user support for all MVA resources including hardware, software, and personnel. These technical services will be provided through a combination of both on-site and remote support. UNO shall:

- Provide statewide support and maintenance of Windows servers, Novell servers, Local Area Networks, workstations, laptops, portables, desktop printers, network printers, network communication devices, and all associated components, peripherals, and media.
- Uphold IT policies and standards as described in official documentation developed by the Division of Administration's Office of Information Technology, the Centers for Medicare and Medicaid Services, and other state and federal regulatory agencies.
- Provide installation and configuration of new equipment (PCs, printers, servers, switches, etc.).
- Provide installation and configuration of new software and systems applications.
- Provide installation of network and workstation components and/or peripheral devices.
- Troubleshoot, diagnose, and repair hardware and software problems, with DHH maintaining responsibility for applicable maintenance and support agreements with vendors and equipment manufacturers.
- Provide technical assistance with procurement of hardware and software.
- Provide individual attention to users on specific hardware or software issues and problems.
- Maintain a log of requests and work completed using a ticket based system for call tracking and reporting.
- Maintain systems and network security using industry accepted standards and best practices, including regular updates to antivirus software and critical patches to applications based on industry or vendor recommendations.
- Provide regular standard maintenance and health checks of systems based on industry recommended intervals.
- Provide monthly status reports to the contract monitor reflecting the current and future projects.
- Implement system and network resource access policies based on industry accepted standards and best practices.
- Participate in technical meetings to discuss agency needs, issues, operations, strategy, and other topics as needed.
- Plan, implement, and document appropriate disaster recovery procedures.
- Utilize multiple data centers that provide for adequate security and protection of MVA equipment and data from loss due to uncontrollable circumstances and provide the means to restore critical services.
- Provide and maintain appropriate backup and recovery procedures for all server based systems and data contained on those systems.
- Maintain appropriate enterprise level storage solutions to allow for hosting and retention of MVA data based on current and future needs of the agency.

2.4 Database Administration

UNO shall provide staff to perform the following database administration functions:

• Provide full software and database support to the Pharmacy Program. Their system contains a very large database consisting of over 250 million pharmacy claims as well as a data warehouse built off of those claims. The system requires extensive support which mainly consists of complex database tasks.

• Protect all data included in UNO maintained databases. This involves having processes for backup and recovery as well as a method of regularly verifying the ability to restore the databases.

• Perform database releases for UNO maintained databases using a structured process which puts an emphasis on testing, therefore reducing potential issues when moving to production. The customers for this process could be UNO Software Development or any external entity who wants to make changes to a UNO maintained database.

• Implement and maintain security measures on all database servers geared toward the elimination of unwanted activity based on the role of each server.

• Create and maintain documentation for database administration routine processes.

• Provide assistance to all sections of the contract with database tasks including:
   o complex development
   o performance tuning
   o Extract, Transform and Load (ETL) processes
   o Data Warehousing
   o resolution of database related issues

2.5 Grant and Procurement Support Unit

UNO will provide staff to perform in a supportive role by assisting MVA and its various Sections in writing of both Grant and Proposal (RFP/RFI) documents. UNO staff will be involved in these procedures from initial research and writing of documents through contract negotiations and implementation of identified and requested services to be outsourced. UNO will:

• Provide support in both procurement and grant writing processes and responsibilities. Consult with and advise agency personnel in RFP preparation.

• Organize materials and implement procedures to assist MVA with time frames allotted for procurement and grant processes.

• Consult with and advise MVA personnel in RFP responsibilities and assist with interpretation of rules and regulations pertaining to procurement of services.

• Research various State websites and other internet resources to gather information referencing identified services to be outsourced.

• Solicit all Sections within MVA and provide proposal/procurement and grant support within their respective areas of operation.

• Interact with various entities of DHH to assist in meeting responsibilities required in the procurement and grant writing processes. (i.e. exchanging documents with contract review. Division of Administration, web posting, etc.)

• Provide monthly status reports to the Contract Monitor reflecting the projects working on and to provide status updates and projected time frames for assignment completion.

• Provide assistance to MVA staff through reading, reviewing, and offering direction and recommendations for changes in document preparation. Ensure staff understands various phases of the procurement process.

• Provide information and participate in proposer presentation, evaluation and scoring processes for vendor selection and contract negotiations.

• Assist in tracking the approval process of RFI and RFP procedures and ensure all necessary approvals are received in a timely manner.

- Participate in various meetings to obtain and understand all necessary information for successful procurement of identified services to be outsourced.
- Ensure both security and confidentiality in all aspects of handling grant and procurement documents and assist MVA with transmission of said documents (i.e. electronic transmission, hand delivery, mail service, etc.).

2.6 Information Technology Systems Procurement Support
The University shall:

- Provide technical advice and guidance on IT systems procurement and implementation.
- Provide transition quality assurance assistance to a state transition project team, including:
- Quality assurance tasks and activities in the areas of project management, site preparation, telecommunications design and installation, system development and testing, conversion, system implementation and initial maintenance and operations.
- Provide quality assurance management to all aspects of these parallel efforts in accordance with the minimum tasks assigned to software integrity.
- Analyze, evaluate, review, and report on each of the vendor deliverables contained in the transition and turnover plans.
- Identify any risks contained in such plans, propose mitigation solutions to same, and report all findings within the time periods specified.
- Participate in all meetings as specified.
- Review all aspects of project management and reporting standards with respect to this effort and advise the state as to any identified deficiencies and recommended corrective action on an ongoing basis throughout the term of this agreement.
- Identify and monitor configuration management tools that will provide verification of successful turnover of system components from the incumbent vendor to the new vendor.
- Validate the new telecommunications network required to operate the system and for providers to submit electronic data.
- Monitor and validate the correct transfer of all data from the incumbent vendor system to the selected replacement system.
- Review of operating policies and procedures.
- Review of Disaster Recovery and Business Continuity plans.
- Review Operations Readiness Assessments and Contingency Plans.
- Interact directly through meetings, walkthroughs, and reviews with both the new and incumbent vendors to identify and resolve issues that may arise during the transition process.

3.0 PROFESSIONAL SERVICES/OUTCOME
Professional services are defined as any services provided by the Customer Service Unit Support, MEQC, Pharmacy, Training and Waiver Assessment groups.

3.1 Pharmacy Program
UNO shall provide staff to perform the database administration, programming, auditing and accounting responsibilities as they relate to the Pharmacy Rebate program, Pharmacy Claim Database, Pharmacy Point of Sale recertification system and other pharmacy related programs which are necessary for the pharmacy program to operate in a more efficient manner.

3.1.1 Database Administration Staff

The University of New Orleans shall provide database administration, software development and support staff to provide services in-house which include but are not limited to the following:
Application Development and Implementation
- Maintenance and support of Pharmacy Rebate applications, including LAPRIMS and customized SQL statements
- Maintenance and support of Pharmacy Audit applications, including ADW (audit data warehouse) and customized reports.

- Maintenance and support of newly developed applications and reports
- The design, coding, compiling, testing, debugging, modification, and documentation of new or existing application programs. Maintenance of source code and documentation of technical procedures on all aspects of rewrites, reports, applications, etc.
- Financial and Statistical Report Creation and Generation
- Technical advice, assistance, training and guidance to employees less experienced with specific programming language
- Consultations with users to determine needs while evaluating user requests for changes to determine specific tasks and effects on existing programs and systems
- Analyzing changes, enhancements, and/or system designs to ensure data integrity and availability
- Maintenance of program user list and description of programs and location

3.1.2 Rebate Analysts and Pharmacy Auditors

UNO shall provide staff to perform the following functions:

- Maintain and update the rebate and audit procedural manuals
- Reviews, approves and revises audit plans and reports; provides audit development criteria.
- Conducts financial analysis and special projects pertaining to the Medicaid Pharmacy Program and other areas of the PBM (pharmacy benefit management) as requested.
- Develops and maintains a system of internal controls to ensure the allocation of rebate monies and dispute resolution are made in accordance with Federal and State regulations.
- Responds verbally and in writing to PBM staff, drug manufacturer representatives, pharmacy providers, legislative auditors, Federal officials, etc.
- Designs the financial reporting and claim detail enhancements to the Medicaid Pharmacy Rebate program software. Designs and maintains financial reporting and compliance reporting reports for pharmacy audits.
- Plans and coordinates activities of application development with the systems personnel in order to establish priorities and sequence of development; analyze problems and recommends solutions to resolve problems.
- Prepares required financial statements and fiscal reports which may include the compilation and analysis of data for the preparation of specialized federal and state reports.
- Assists in the preparation of the Department's budget request.
- Identifies overpayments of pharmacy claims and oversees recovery of overpayments.
- Performs audits of drug rebate data by examining statements and other correspondence from drug manufacturers. These audits ensure compliance with Federal and/or State policies, rules and regulations and facilitate the preparation of National Drug Code (NDC) level reconciliations for each drug manufacturer in accordance with the Omnibus Budget Reconciliation Act of 1990 (federal regulations). From each reconciliation, financial transactions from each reconciliation, are entered into a database program for use in the dispute resolution and the audit process.
- Prepares, assembles and inspects audit report findings and other documentation for presentation to drug manufacturers for a validity check prior to dispute resolution.
- Reviews, audits, and performs validity checks of financial receipts prior to entering into the database systems ensuring all receipts are entered correctly and in a timely manner.
- Interprets and applies federal and/or state policies, rules and regulations as they affect the reporting, calculation and collection of rebates and the application of auditing procedures.
- Initiates and confirms corrective action by correspondence or other follow-up procedures to assure drug manufacturers' compliance with Federal and/or State policies, rules and regulation. Working files are maintained for each drug manufacturer, which contains all documentation and correspondence between the auditor and the manufacturer.
- Corresponds by telephone and in writing with pharmacy providers to validate pharmacy claim data. Initiates corrective action when required. Submits follow-up correspondence as required for those pharmacy providers failing to respond to initial requests for corrective action.

- Attends, as approved by the DHH Pharmacy Director, pharmacy rebate meetings with CMS and the drug manufacturers to resolve disputes. Confers with contracted auditors and manufacturers to document findings to obtain additional information to answer questions, to resolve problems and to represent the agency as necessary in defending audit findings at hearing and informal discussions.
- Requests approval of the Pharmacy Director for conference leave and permission to attend appropriate seminars.
- Makes recommendations for additions to audit procedures.
- Participates in training for new procedures.
- Assists in continuous development of database programs and database generated special purpose reports which aid in the auditing process.
- Performs desk audits and in-depth research into special and unusual drug related matters which require auditing claim level data submitted by pharmacy providers.
- Tracks and reports unit productivity
- Will incorporate onsite audit visits on a limited basis if warranted by results of desk audit.
- Receives and distributes monthly Clawback bills from CMS and prepares memos for payment of the Clawback bills to CMS.

3.2 Training
Develop and implement training plans, in conjunction with MVA, for its central and/or regional or parish offices. UNO trainers are stationed throughout the state. In addition, various PC and Medicaid policy training modules are available online at a training website maintained by UNO. Training is provided in the following areas:

3.2.1 Eligibility Training
Training to State Eligibility staffs:

The University shall provide:
- Development and implementation of MVA approved/certified curriculum and materials for eligibility training or specialized training (primarily for Medicaid Analyst staff and supervisors). Courses include: General Employee Orientation; Women and Children Programs (C-Related); Aged, Blind, and Disabled Programs (D-Related); Long Term Care; Customer Service; Advanced MNP; and Supervisory Training,
- Delivery of training and materials according to prearranged schedules directed by MVA.
- Delivery of training sites and notifications determined by MVA.
Ongoing evaluation of instructors, contents, and state employee assessments of training effectiveness,
- Delivery of courses within each MVA region for attendees, and
- Delivery of reports outlining training statistics as directed by MVA

3.2.2 Medicaid Application Center and Neighborhood Place Employee Training:
In addition to MVA staff, UNO shall provide:

- Development and implementation of MVA approved/certified curriculum and materials for Medicaid Application Center and Neighborhood Place managers and employees. Courses include: Management Orientation and General Representative Training,
- Delivery of training and materials according to prearranged schedules directed by MVA.
- Delivery of training sites and notification determined by MVA,
- Ongoing evaluation of instructors, content, and Medicaid Application Center and Neighborhood Place employee and manager assessments of training effectiveness,
- Delivery of courses within each MVA region for attendees,
- Updated Medicaid Application Center and Neighborhood Place Handbooks as directed by MVA, and

3.2.3 Computer Training
The University shall provide:

- A wide variety of computer training to MVA personnel which includes but is not limited to, Introduction to Microcomputers and Application Software; Introduction to Networks and Wide Area Communications; Microsoft Office Software (Word, Excel, Access, and Powerpoint); and Specialized Training in Applications Software for employees whose job requirements include specialized use of software and/or programming techniques
- Initial and advance training which consist of courses in operating systems and application software as directed by MVA
- Delivery of training on software developed and released by the UNO Software Group
- Development of user guides and training videos
- Approved/certified curriculum and materials for training
- Delivery of training according to prearranged schedules directed by MVA
- Delivery of training sites determined by MVA
- Ongoing evaluation of instructors and content, and
- Delivery of courses within each MVA region for attendees.

Training seminars will consist of one (1), two (2) and/or three (3) day sessions unless the University and MVA agree on a revised length.

3.3 Federally Mandated Waiver Assistance and Assessments
The University shall:
- Assist MVA in the preparation of one or more waivers to CMS and relevant state agencies.
- Conduct an independent analysis of MVA programs scheduled for assessment by CMS during the term of the contract
- Submit timely data requests to MVA
- Provide staff to conduct field research
- Assess the data and operation of the programs
- Complete an assessment in order to fulfill federal mandates. Specifically, the team will assure an effective evaluation component is included in the waiver(s) to demonstrate to relevant government agencies an ability on the part of MVA to properly assess the initiatives. The evaluation plan(s) will include—to the extent possible—goals and objectives, measurements, methods of evaluation, timelines, and division of labor between the UNO Evaluation Team and possible third party evaluators.
- The University will provide ongoing (formative) evaluation services to MVA from the initiation of the program(s) until the date of implementation as requested by MVA and consistent with the initial evaluation plan. Such process evaluation may, for example, assess the effectiveness of MVA in executing the waiver
- Upon full implementation of the waiver, the University will provide formative evaluation services upon request of MVA and in accordance with the initial evaluation plan. In addition, the Team will assist in the preparation of RFPs to obtain evaluation services for aspects of the program(s) that require fully independent, third-party evaluators
- After operation of the program for a sufficient amount of time (to allow for sufficient data collection), the University will provide assessment of such elements of the program requested by MVA. The University will be available to assist in the review of any external contracts for evaluation or facilitate communications among internal and external evaluation efforts to assure full compliance and continuity of evaluation services
- Such assessments should not exceed (3) three per fiscal year

3.4 Medicaid Eligibility Quality Control (MEQC)
The University shall conduct the federally required MEQC reviews as prescribed by federal regulations and MVA.

Requirements for Recipient Eligibility Reviews:
The MEQC system is based on a monthly review of Medicaid applicants/recipients identified through statistically reliable statewide samples of cases selected from eligibility files. Reviews are then conducted to determine whether the sampled cases meet applicable State and Federal requirements.

3.4.1 Focus of Positive Reviews
Positive reviews consist of active cases in which an assistance unit is currently certified or certified in the review month as indicated on MEDS.
a) Determine whether policies are being carried out properly and the program in which currently certified is appropriate.
b) Determine that simplification and exparte procedures are being followed.

Determine if financial and non-financial eligibility criteria are met in accordance with the Medicaid Eligibility Manual. For example, determines if the individual
*   under review was eligible/ineligible when he/she received Medicaid services,
*   had met/not met his/her liability when certified,
*   had income and/or medical expenses incorrectly counted by the agency,
*   had an over/understated liability for institutional care or Home and Community-based services in determining the correctness of these payments.

3.4.2 Focus of Negative Reviews
Negative reviews consist of closed and rejected cases in which an assistance unit is not currently certified or was not certified in the review month as indicated on MEDS.
*   Determine if a lack of cooperation from the client was used as the reason for rejection or closure, and if so, that it was a valid reason.
*   Determine if there was adequate information in the case record to certify or extend eligibility rather than deny or terminate, and if so, identify it.
*   Determine if eligibility was explored in all applicable type cases prior to denial or closure.

3.4.3 Responsibilities
*   Prepares and submits a quarterly summary of reviews completed by the Recipient Eligibility Unit to the Medicaid Deputy Director and Eligibility Policy Section for an analysis of trends and patterns.
*   Collecting and verifying all information necessary to determine the eligibility status of the case such as:
*   Analyzing the case record and recording the analysis on the worksheets,
*   Conducting field investigations, including a telephone interview with the applicant/recipient or designated representative to determine eligibility.
*   Verifying the elements of eligibility through collateral contacts as required, and recording the information on worksheets,
*   Determining the eligibility status of each case member,

3.4.4 Distribution of Findings
Reviews on cases that are established as incorrect will be sent to the parish office for response with a copy to the appropriate Medicaid Regional Administrator.

4.0 ADDITIONAL UNO ADMINISTRATIVE RESPONSIBILITES

Under this agreement, UNO shall:

4.1 Maintain all books, records and other documents relevant to funds expended under this agreement for a minimum of (4) four years. MVA shall be advised of any materials which UNO wishes to dispose of following the four year retention period and shall at the request of MVA transfer any materials requested.

4.2 Retain all books, records, and other documents relevant to funds expended under this agreement for not less than (4) four fiscal years from the end of the current fiscal year.

4.3 UNO staff should attend meetings as directed by the Contract Monitor and serve as functional members of task meetings.

4.4 UNO may sub-contract with other minority universities, individuals and contractors as needed to assist with any project; however, UNO must obtain written approval from DHH for any sub-contracts initiated between the University and sub-contractors, which would become a sub-contract for any services being performed by UNO on this contract. In addition, any sub-contractor to UNO on this contract must obtain written approval from DHH for any sub-contracts issued between sub-contractor and other sub-contractors for work under the scope of this contract.

4.5 UNO and MVA shall warrant that all services performed under this contract shall be exclusive, in content and scope, to Louisiana's Medicaid Program.

5.0 SPECIAL PROVISIONS FOR FUNDING

It is the intent of the parties to this agreement to jointly finance the State's Portion of costs accountable to the administration of Louisiana's Medicaid Program. In accordance with the federally approved cost allocation plans of each agency and any Centers for Medicare and Medicaid Services (CMS) requirements for designation of support staff of UNO or development of random moment sampling system, the state share of costs flowing from this agreement shall be agreed upon by both parties and reviewed on an annual basis. The University of New Orleans agrees to provide 40% of the required state match each year through certification of state funds. DHH agrees to provide the remaining 10% of the required state match each year through certification of state funds which are not reimbursed to the University of New Orleans. Quarterly expenditure reports submitted by UNO for payment shall include all expenses incurred as state match for purposes of receiving federal funding. The Department of Health and Hospitals will reimburse the remaining state and federal matching portions of all expenditures certified by UNO, as itemized on its quarterly invoices. The University of New Orleans agrees to certify any state match required for costs flowing from this agreement to the extent funds or resources are available. The Department of Health and Hospitals shall reimburse UNO for the costs covered under the certification of State expenditure flowing from this agreement, to the extent such funds are available and UNO has certified no additional funds or resources outside this contract are available. In the event of an adverse audit finding in regard to the UNO certification of state funds, The Department of Health and Hospitals will hold the University harmless to the extent of the disallowed costs and shall reimburse the University for any administratively final disallowed certification of state funds. The maximum reimbursement amount which may be made to UNO by the Department shall not exceed the amount identified in this contract.

6.0 PERFORMANCE MEASURES

UNO shall provide a quarterly expenditure report to MVA for federal reporting purposes, which specifies amounts expended as follows:

- Salaries, fringe benefits, travel and per diem of training staff;
- Tuition, books and educational supplies provided to MVA;
- Salaries, fringe benefits, travel and per diem of any experts engaged to develop or conduct special programs;

- Salaries, fringe benefits, travel, rental of space, clerical assistance, teaching materials and equipment such as books and audio/visual aids for field instruction in Medicaid;

- Provide a monthly report of all projects, user services, and training conducted to the Contract Monitor. Report should include the staff member who worked on the project, the amount of time spent on each project and status of the project. The monthly reports should be signed off by the UNO Project Director.

7.0   MONITORING
The Department of Health and Hospitals, Medical Vendor Administration (MVA):

- the Contract Monitor shall review a monthly report submitted by UNO of all ongoing projects, training and services provided. The Contract Monitor shall make an independent observation of time, attendance, and activities completed.
- shall review the quarterly expenditures submitted by UNO and verify services provided.
- shall determine the priorities of the MVA staff as it relates to each UNO group.
- shall maintain regular oral and written communication with UNO staff to ensure continuity and compliance with standards outlined in the contract.