

Attachment D

The following performance management information has been extracted from Appendix I of the new RIBridges M&O Services Contract with Deloitte.

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1. Definitions:

Severity	Definition
1 (Fatal)	<p>The production system is down, or mission critical functionality is inoperable. Users are unable to reasonably perform their normal functions. The situation is considered an emergency.</p> <p><i>Examples: portal outage, network outage, critical system component outage (eligibility, worker inbox)</i></p>
2 (Serious)	<p>The system is usable but severely limited. Significant impact to application functionality, data, or performance which is resulting in a high number of users being unable to perform their normal functions or is resulting in a high number of customer benefits being blocked/incorrect. There is either no workaround or it is cumbersome to business operations.</p> <p><i>Examples: scanning outage, connectivity to critical interface (e.g. FIS, MMIS) is down, notice generation not working, eligibility determination blocker or data issue resulting in large impact, external verification source unavailable</i></p>
3 (Normal)	<p>Moderate impact to application functionality, data, or performance resulting in multiple users being impacted in their normal function or resulting in a high number of customer benefits being blocked/incorrect. A readily apparent and convenient workaround exists, or the degradation is minor and not impacting production.</p> <p><i>Examples: incorrect benefit calculation for limited/specific scenario, incorrect screen validation requiring workaround, incorrect notice fragment for limited/specific scenario</i></p>
4 (Minor)	<p>Minor loss of application functionality resulting in limited or no impact to users being able to perform their normal function. A workaround is not required as a result of the limited impact.</p> <p><i>Examples: typo with no material impact, display alignment issue</i></p>

2. Business Hours

- 8:00 AM ET to 7:00 PM ET seven days per week, excluding planned downtime.

3. Measurement Period and Earn Back

- Measurement Period is monthly, except as otherwise stated.

- SLA penalties will be earned back if the SLA is met for the three (3) consecutive months following the month in which the SLA was not met except as listed in the “notes” column of the SLA table below.

4. Table of SLAs, Key Measure, and KPIS

- The tables in this section list and define SLAs, Key Measures, and KPIS. For the purposes of this contract, SLAs, Key Measures, and KPIS are defined and categorized as follows:
 - SLA: Describes the expected Information Technology (IT) service specification, service level targets, and penalties if any targets are missed
 - Key Measures: Describes the expected IT service specification and service level targets. However, there are no penalties if any targets are missed
 - Key Performance Indicators (KPI): Describes a business operations metric specification and service level that measures the efficiency and effectiveness of the vendor’s performance over time to achieve the State’s business outcomes.

SLA	KEY MEASURE	KPI
1. Production System Availability	1. Adherence to Release Schedule and Scope	1. DHS SNAP and Cash Benefits Timeliness
2. Incident Resolution Time	2. Accuracy of Rough Order of Magnitude (ROM) Estimates	2. Medical Benefits Timeliness
3. Business Continuity & Disaster Recovery (BC&DR)	3. Staffing Attrition Rate	3. SNAP and Cash Benefit Accuracy
4. "Time to Market" for problem tickets	4. Production Infrastructure Utilization Rates	4. Medical Benefits Accuracy-1
5. Application Performance	5. Level of Test Automation	5. Medical Benefits Accuracy-2
6. Recon Discrepancies - HSRI and MMIS	6. Incident Inflow Volume	6. QHP Eligibility and Enrollment Accuracy
7. Defects Detected in User Acceptance Testing	7. Problem Ticket Backlog	7. Worker Portal Application Processing
8. Security SLA – Defect Injection, Controls, Patching, and Exploits	8. Root Cause Analysis Delivered On-Time	8. Self-Service Portal Application Processing
9. Batch Jobs Success Rate	9. Incident Response Time (Severities 1 and 2)	9. Client Notice Accuracy and Timeliness
10. Interface Success Rate		

SERVICE LEVEL AGREEMENTS (SLA)

SLA	Title	Specification	Service Level	Penalty	Notes
1.	Production System Availability	<ul style="list-style-type: none"> The system must be available and operational 24 hours/day, 7 days a week, excluding planned downtime 	<ul style="list-style-type: none"> 99.9% during Business Hours and 98.0% during non-Business Hours over the course of a calendar month. 	<ul style="list-style-type: none"> \$20,000 per hour for any period beyond the service level and less than 8 hours \$50,000 per hour for any period beyond 8 hours 	<ul style="list-style-type: none"> The definition for purposes of this SLA does not change that maintenance activities <u>not requiring system downtime</u> begin at 7:00 PM ET This SLA also applies to the failover and disaster recovery environments when they are used for production Planned downtime will be agreed upon prior to each month in which the SLA is calculated. “System Availability” is defined as having, at a minimum, all 4 portals up and accessible. In other words, there should be no unresolved Severity 1 incidents. Earn back for this SLA (#1) does not follow the standard 3-month rule but is instead at the discretion of the State.
2.	Incident Resolution Time	<ul style="list-style-type: none"> Severity 1 Incidents: Resolve the incident within 4 hours 	<ul style="list-style-type: none"> Severity 1: 100% 	<ul style="list-style-type: none"> Severity 1 Incidents: \$15,000 for each incident beyond the service level and \$25,000 if not resolved within 8 hours 	<ul style="list-style-type: none"> Incident severity levels will be determined in good faith but the final decision is with the State. Earn back for this SLA (#2), if missed due to a Severity 1

		<ul style="list-style-type: none"> • Severity 2 Incidents: Resolve the incident or deploy an acceptable workaround within 8 hours 	<ul style="list-style-type: none"> • Severity 2: 98% 	<ul style="list-style-type: none"> • Severity 2 Incidents: \$5,000 for each incident beyond the service level 	<p>incident, does not follow the standard 3-month rule but is instead at the discretion of the State.</p>
	<ul style="list-style-type: none"> • Severity 3 Incidents: Resolve the incident or deploy an acceptable workaround within 5 business days 	<ul style="list-style-type: none"> • Severity 3: 95% 	<ul style="list-style-type: none"> • Severity 3 Incidents: \$2,000 for each incident beyond the service level. 		
	<ul style="list-style-type: none"> • Severity 4 Incidents: Resolve the incident or deploy an acceptable workaround within 20 business days 	<ul style="list-style-type: none"> • Severity 4: 90% 	<ul style="list-style-type: none"> • Severity 4 Incidents: \$500 for each incident beyond the service level. 		

<p>3. Business Continuity and Disaster Recovery (BC & DR)</p>	<ul style="list-style-type: none"> • Backup: Recovery: Backup Recovery, using the most recent backup copies (or a mutually agreed version) must be able to start within one (1) hour and complete within (8) hours of the determination a recovery is necessary, excluding periods of planned downtime • Disaster Recovery & Fail Over: Recovery Point Objective (RPO) is 15 Minutes and Recovery Time Objective (RTO) is 24 hours. Failover and fallback processes must be executed if the primary production configuration is unavailable • Failback: Failback should occur from the Disaster Recovery site to the Production site within 24 hours and at a mutually agreed upon date and time 	<ul style="list-style-type: none"> • Backup Recovery: 100% • Disaster Recovery Fail Over: 100% • Failback: 100% 	<ul style="list-style-type: none"> • Backup & Recovery: \$25,000 for each occurrence • Disaster Recovery & Fail Over: \$100,000 per day beyond the specification • Failback: \$50,000 for each attempt after 2 unsuccessful attempts 	<ul style="list-style-type: none"> • Backup Recovery: <ol style="list-style-type: none"> 1. Scope: All production and non-production databases, file systems, and any other critical system data required for a fully functional system restoration. Backup and Recovery Backups must be executed daily (incremental) and weekly (full) at a minimum 2. Measure: Recovery start time will be measured by the time the request is made and when the initial steps of recovery begin • The Measurement Period is monthly for both Backup Recovery as well as Disaster Recovery & Fail Over and reporting is quarterly for both. Note that reporting should specifically include would-be RPO times even if cutover to DR does not occur. • Disaster Recovery refers to major disruptions to the production environment. Plans, procedures, and infrastructure need to be established to recover from a major disaster and resume daily operations
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4.	"Time to Market" for problem tickets	<ul style="list-style-type: none"> • Severity 1 & 2 Problem: For each Problem the vendor must: <ol style="list-style-type: none"> 1. Provide a Root Cause Analysis (RCA) within one (1) week, and 2. Deploy a fix within one (2) weeks of the RCA 	<ul style="list-style-type: none"> • Severity 1 & 2 Problems: 98% 	<ul style="list-style-type: none"> • Severity 1 & 2 Problems: \$10,000 for each problem beyond the service level 	<ul style="list-style-type: none"> • The Root Cause Analysis (RCA) provided must include a full and detailed explanation of the source and impact of the problem from both technical, business, and process perspective. For example, indication that a system issue was caused by a broken business rule is insufficient. Instead, the RCA must indicate when, how and why the business rule became broken. Additionally, where appropriate, the RCA must include forward looking corrective actions and process improvements.
		<ul style="list-style-type: none"> • Severity 3 & 4 Problems: For each Problem the vendor must: <ol style="list-style-type: none"> 1. Provide a Root Cause Analysis (RCA) within two (2) weeks, and 2. Deploy a fix within 3 months 	<ul style="list-style-type: none"> • Severity 3 & 4 Problems: 95% 	<ul style="list-style-type: none"> • Severity 3 & 4 Problems: \$5,000 for each problem beyond the service level 	
5.	Application	<ul style="list-style-type: none"> • Online Application and 	<ul style="list-style-type: none"> • Online 	<ul style="list-style-type: none"> • Online Application 	<ul style="list-style-type: none"> • Identification of business functions

	Performance	<p>Batch Performance: Online application response time should not degrade overall or for a specific business function. Batch run times should not degrade.</p>	<p>Application and Batch Performance: 100%</p>	<p>and Batch Performance: \$10,000</p>	<p>(for online transactions) and baseline performance levels (for both online and batch) will be measured during vendor transition phase</p> <ul style="list-style-type: none"> • Current business functions for the purposes of online transaction performance measurement are as follows: <ul style="list-style-type: none"> ○ Application Registration ○ Data Collection ○ Eligibility ○ Homepage/Login/Logout ○ Household Details ○ MCI Search ○ Provider ○ Worker Inbox ○ Visit Record (Lobby) search • Measurement of online application transaction performance will occur during business hours and is reported on monthly • Measurement of batch run times will take volume into consideration • Vendor responsibility for response time begins at the network demarcation back to and including the interface servers within HIX/IES System. Application and network response time for those components not under the direct control of
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					Vendor and/or its Subcontractors are outside of Vendor responsibilities.
6.	Recon Discrepancies - HSRI and MMIS	<ul style="list-style-type: none"> The total number of discrepant records for HSRI shall not exceed the threshold below (measured at the end of each month): <ol style="list-style-type: none"> By January 31st each year: 2,500 By April 30th each year: 1,250 By July 30th each year: 750 The total number of discrepant records with MMIS shall not exceed the baseline amount (average recorded during the transition period). Fewer than 20% of discrepant records shall be older than 30 days and fewer than 5% of discrepant records shall be older than 60 days. 	<ul style="list-style-type: none"> 100% 	<ul style="list-style-type: none"> \$10,000 	<ul style="list-style-type: none"> Discrepant records are defined as those where the information in RIBridges does not match that which is available in downstream systems. In the case of HSRI, this included the financial management system as well as all carrier systems. In the case of MMIS, this is just for the MMIS system Discrepant records that are not due to HSRI Bridges System Deficiencies (e.g., carrier system issues, data issues caused by a worker) are not counted in this SLA measurement
7.	Defects Detected in User Acceptance Testing	<ul style="list-style-type: none"> The UAT defect detection rate should not exceed the service level. The defect detection rate (X) is calculated as the number of valid defects identified during UAT & regression 	<ul style="list-style-type: none"> Severity 1: less than 1% defect detection rate Severity 2 & 3: less than 2% defect detection 	<ul style="list-style-type: none"> Severity 1: \$5,000 for each valid defect beyond the service level Severity 2 & 3: \$1,000 for each 	<ul style="list-style-type: none"> Earn back for this SLA (#7) will be considered after 3 subsequent consecutive application releases (not months) of a similar nature (e.g. patch release are to be compared with patch releases) in which the SLA has been met for all severities (1, 2, & 3).

		(A) divided by the number of UAT test cases (B) + UAT regression test cases (C) executed for that release. $X = A / (B + C)$	rate	valid defect beyond the service level	<ul style="list-style-type: none"> Valid defects are defined as those having been identified in JIRA as having a cause of coding issue, environment issue or code merge issue
8.	Security SLA – Defect Injection, Controls, Patching, and Exploits	<ul style="list-style-type: none"> Security Defect Injection: All security defects must be identified in pre-release scanning and corrected prior to deployment. For the purpose of this SLA, security defect injection refers to security defects discovered by scanning/validation in production and prior to a breach or exploit. 	<ul style="list-style-type: none"> Security Defect Injection: 100% (0 introduced high/moderate defects) 	<ul style="list-style-type: none"> Security Defect Injection: High - \$10,000 Moderate - \$2,000 	<ul style="list-style-type: none"> The definition of high and moderate security defects will be based on defense in depth and mitigating controls and will be mutually agreed upon during the transition period Security control deficiencies will be calculated on a rolling 12-month basis (for each level) as the number of unmitigated & uncorrected deficiencies identified in the POAM divided by the total number of deficiencies identified High risk patching service levels will be calculated on a rolling 12-month as (for each level) the total number of CVEs patched after the target timeframe divided by the total number CVEs patched. In addition to these SLAs, all costs and penalties (e.g. CMS), malware (including ransomware), and services
		<ul style="list-style-type: none"> MARS-E2 Security Control Deficiencies: MARS-E2 security control deficiencies must be mitigated or corrected within the CMS defined timelines: High - 90 days Moderate - 180 days Low - 365 days 	<ul style="list-style-type: none"> MARS-E2 Security Control Deficiencies: High - 95% Moderate – 90% Low – 80% 	<ul style="list-style-type: none"> MARS-E2 Security Control Deficiencies: For each deficiency beyond the service level High - \$5,000 Moderate - \$2,000 Low - \$500 	

		<ul style="list-style-type: none"> • High Risk Patching: Common Vulnerabilities & Exposures (CVEs) that impact RIBridges will be patched within the following timeframes: High CVEs - 7 days Moderate CVEs - 15 days Low CVEs - 30 days 	<ul style="list-style-type: none"> • High Risk Patching: High – 100% Moderate – 90% Low – 80% 	<ul style="list-style-type: none"> • High Risk Patching: For each CVE that misses the service level High - \$5,000 Moderate - \$2,000 	<p>for breached clients will be paid by the vendor.</p> <ul style="list-style-type: none"> • In addition to this SLA, security exploits and breaches are covered by the terms and conditions of the Agreement.
		<ul style="list-style-type: none"> • Security Exploits/Breach: For any security breach the vendor must: <ol style="list-style-type: none"> 1. Follow the State Incident Response Plan through system restoration 2. Provide Root Cause Analysis 	<ul style="list-style-type: none"> • Security Exploits: No breaches 	<ul style="list-style-type: none"> • Security Exploits: Cause: <ol style="list-style-type: none"> 1. \$20,000 Approved patching schedule not followed 2. \$10,000 Undetected non legacy insecure code 3. \$5,000 Known security defect with past due correction date 	
9.	Batch Jobs Success Rate	<ul style="list-style-type: none"> • All production batch jobs must be executed on schedule and complete 	<ul style="list-style-type: none"> • Critical Batch Jobs: 99% success rate 	<ul style="list-style-type: none"> • Critical Batch Jobs: \$2,500 per job that misses the 	<ul style="list-style-type: none"> • The complete list of production batch jobs included daily, monthly, and other frequency batch jobs and can be found in

		with the transaction success rate defined in the service level.	<ul style="list-style-type: none"> • Important Batch Jobs: 95% success rate • Normal Batch Jobs: 90% success rate 	<p>service level</p> <ul style="list-style-type: none"> • Important Batch Jobs: \$1,000 per job that misses the service level • Normal Batch Jobs: \$500 per job that misses the service level 	<p>Appendix M</p> <ul style="list-style-type: none"> • Designation of batch jobs as critical, important, and normal will be completed during the transition period based on mutually agreed upon business criticality
10	Interface Success Rate	<ul style="list-style-type: none"> • All production interfaces must be executed as needed (e.g. real time web service, batch/file based, on-demand) and with the attempt success rate defined in the service level. 	<ul style="list-style-type: none"> • Critical Interface: 99% success rate • Important Interface: 95% success rate • Normal Interface: 90% success rate 	<ul style="list-style-type: none"> • Critical Interface: \$5,000 per interface that misses the service level over the course of the measurement period (month) • Important Interface: \$2,500 per interface that misses the service level over the course of the measurement period (month) • Normal Interface: \$1,000 per interface that misses the service level over the course of the 	<ul style="list-style-type: none"> • The complete list of interfaces is inclusive of both internal (between subsystems, e.g. image retrieval or scanning) and external (with other systems, e.g. DSH, mail, EBT, MMIS) interfaces and can be found in Appendix B • Designation of interfaces as critical, important, and normal will be completed during the transition period based on mutually agreed upon business criticality. In addition, definitions and measurement method will be defined during the transition period.

				measurement period (month)	
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KEY MEASURES

Key	Title	Specification	Service Level	Penalty	Notes
1.	Incident Response Time	<ul style="list-style-type: none"> • Severity 1 Incidents: Provide an initial response and perform incident triage within 15 minutes; communication triage findings to the State within 30 minutes • Severity 2 Incidents: Provide an initial response and perform incident triage within 1 hour; communicate triage findings to the State within 2 hours • Severity 3 & 4 Incidents: Provide initial response and perform incident triage within 2 days; document triage results in JIRA 	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • For each month, the vendor should report on the % of incidents within each severity level that met and did not meet the target response time
2.	Adherence to Release Schedule and Scope	<ul style="list-style-type: none"> • The vendor must adhere to release scope and schedule as determined by governance processes. <ol style="list-style-type: none"> 1. All planned releases should receive a “go” decision 	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • Scope items will be considered delivered (BRRs/PTs) assuming they are "UAT Passed" at the time of the production deployment. IN other words, they are not deferred, and they are not being delivered into production in a UAT failed status

		<p>2. The percentage of problem tickets that are deferred (removed or cancelled after development starts) or delivered to production in a UAT failed status (partial fix or not working) should be less than 2%</p> <p>3. The number of BRRs tickets that are deferred (removed after development starts) or delivered to production in a UAT failed status (partial fix or not working) should be 0%</p>			
3.	Accuracy of Rough Order of Magnitude (ROM) Estimates	<ul style="list-style-type: none"> The accuracy of ROM estimates will be determined by comparing ROMs to the actual hours reported and calculating the variance which should not exceed 10% 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> All ROM estimates will be created using a standard ROM estimation tool Actual hours will be reported by the Vendor at least monthly The accuracy of ROMs for completed work for the month will be reported by comparing the actual hours to the estimated hours
4.	Staffing Attrition Rate	<ul style="list-style-type: none"> The staff attrition rate shall be less than 3% 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> The “Staffing Attrition Rate” will be reported on monthly but will be measured on a rolling 12-month basis. Measurement of this rate will begin only after the transition period

		<ul style="list-style-type: none"> The staffing attrition rate (X) will be calculated as (A) the number “Attrition Staff” divided by (B) the average number of vendor personnel over the course of the measurement period. 			<ul style="list-style-type: none"> “Attrition Staff” includes staff in each of the following situations: (a) such individual’s employment or engagement with vendor was terminated; or (b) such individual was allocated or assigned, in whole or in part, to perform services for another client/account, unless such allocation or assignment is approved in advance by the State
5.	Production Infrastructure Utilization Rates	<ul style="list-style-type: none"> Mean Peak System CPU utilization of less than 80% over 24-hour period Mean Disk utilization of less than 80% over 24-hour period Mean hung threads and zombie process less than 5 over 24-hour period Mean Network: Utilization of less than 70% over 24-hour period 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> N/A 	
6.	Level of Test Automation	<ul style="list-style-type: none"> The level of test case automation, measured in terms of test coverage and test case count, shall increase by 10% each quarter until 90% coverage is reached 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> Test case “coverage” measurement metrics will be agreed upon during the transition period but will be based on the application functions and programs as defined in Appendix F

7.	Incident Inflow Volume	<ul style="list-style-type: none"> The weekly incident inflow volume should not exceed the target range during any measurement period 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> Incident inflow should be measured and reported on a weekly basis, but this key measure will be evaluated on a monthly basis. The target range will be defined as the average incident inflow during the transition period plus or minus 10% (e.g. if the average inflow is 100 per week, the defined range is 90 to 110). The parties will mutually agree to update the target range if the target has been met consistently for a period of 6 months
8.	Problem Ticket Backlog	<ul style="list-style-type: none"> The average number of open problem tickets should not increase over the baseline during any consecutive 3-month period 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> For the purposes of this key measure, problem tickets are inclusive of code defects and data defects The problem ticket baseline will be defined as the average number of open problem tickets recorded during the 3 months prior to the transition period
9.	Root Cause Analysis Delivered On-Time	<ul style="list-style-type: none"> Root Cause Analysis (RCA) for all Severity 1 & 2 problem tickets shall be completed within one (1) week Root Cause Analysis (RCA) for all Severity 3 & 4 problem tickets shall be completed within two (2) weeks 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> The timeliness of RCAs delivered on time will be reported on a monthly basis Reporting should include the number of problem tickets that were created in the month and the number of tickets that exceeded the RCA target The report should also include the number of days the target was exceeded by

					<ul style="list-style-type: none">• For any tickets where the RCA is pending, the report should include the aging of each ticket.• The Root Cause Analysis (RCA) provided must include a full and detailed explanation of the source and impact of the problem from both technical, business, and process perspective. For example, indication that a system issue was caused by a broken business rule is insufficient. Instead, the RCA must indicate when, how and why the business rule became broken. Additionally, where appropriate, the RCA must include forward looking corrective actions and process improvements.
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KEY PERFORMANCE INDICATOR (KPI)

KPI	Title	Specification	Service Level	Penalty	Notes
1.	DHS SNAP and Cash Benefits Timeliness	<ul style="list-style-type: none"> The scheduled issuance cycles (e.g., daily, monthly, biweekly) must be complete within 24 hours of the scheduled run time. In addition, the transaction processing error rate must be less than 5% in order for the run cycle to be considered completed successfully. 	<ul style="list-style-type: none"> KPI Target <= 2: The number of run cycles that exceed the 24 hour target or the 5% transaction error rate must be less than or equal to 2 for the KPI to be considered met for the month. 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> The DHS SNAP and Cash Benefits Timeliness KPI will be reported on a monthly basis and will include: <ol style="list-style-type: none"> The SNAP Daily Batch, the SNAP Monthly Batch, The RIW Daily Batch and the RIW Bi-weekly Batch If the KPI target is not met in any given month, the Vendor shall provide a Root Cause Analysis and a corrective action plan.
2.	Medical Benefits Timeliness	<ul style="list-style-type: none"> The scheduled MMIS interface daily cycles must be complete within 24 hours of the regularly scheduled run time. In addition, the transaction processing error rate must be less than 5% in order for the run cycle to be considered completed successfully 	<ul style="list-style-type: none"> KPI Target <= 2: The number of run cycles that exceed the 24-hour target or the 5% transaction error rate must be less than or equal to 2 for the KPI to be considered met for the month 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> The Medical Benefits Timeliness KPI will be reported on a monthly basis and will include: <ol style="list-style-type: none"> The run cycles that completed within 24 hours The run cycles that completed with a 95% transaction success rate The run cycles that exceeded 24 hours or had more than 5% transaction errors.

					<ul style="list-style-type: none"> If the KPI target is not met in any given month, the Vendor shall provide a Root Cause Analysis and a corrective action plan
3.	SNAP and Cash Benefit Accuracy	<ul style="list-style-type: none"> In conducting the State's regular monthly QC activities, the State will use the system QC functionality to pull a sample of SNAP and RIW cases for the purposes of reviewing the benefit accuracy. 	<ul style="list-style-type: none"> KPI Target 5%: The formula for this KPI will be the number of cases which fail (the QC process due to system issues / number of cases QCed). This KPI will be met when fewer than 5% of the QCed cases fail due to system issues. 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> The SNAP and RIW Benefit Accuracy KPI will be reported on a monthly basis. If the KPI target is not met in any given month, the Vendor shall provide a Root Cause Analysis and a corrective action plan
4.	Medical Benefit Determination Accuracy	<ul style="list-style-type: none"> In conducting the State's regular PERM audit activities and MEQC process, the State will use the system PERM audit and MEQC functionality to review a sample of Medicaid cases for the purposes of reviewing the benefit accuracy. 	<ul style="list-style-type: none"> KPI Target 5%: The formula for this KPI will be the number of cases which fail (the PERM audit process or MEQC process due to system issues / number of cases PERM audited or MEQC'd). This 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> The Medicaid Benefit Accuracy KPI will be reported on a monthly basis. If the KPI target is not met in any given month, the Vendor shall provide a Root Cause Analysis and a corrective action plan

			KPI will be met when fewer than 5% of the PERM audited and MEQC'd cases fail due to system issues.		
5.	Medical Benefits Transaction Accuracy	The Vendor will measure the accuracy for medical benefits for all current and future MMIS transactions. The current MMIS transactions are as follows: Demographics (1A), new eligibility (1B), retroactive eligibility (2B), nursing home (1E, 3E, 4E), patient share (1F, 3F, 4F), waiver (1G, 3G, 4G), Medicare (C), merge (I) Premiums (N), RiteShare (T), and Plan Selection (M).	<ul style="list-style-type: none"> • Critical MMIS Transaction: 99% success rate • Important MMIS Transaction: 95% success rate • Normal MMIS Transaction: 90% success rate 	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • The Medical Benefits Accuracy KPI will be reported on a monthly basis • Designation of transactions as critical, important, and normal will be completed during the transition period based on mutually agreed upon business criticality. In addition, definitions and measurement method will be defined during the transition period. • In the event that a new transaction type is added to the RIBridges-MMIS interface, it will be subject to this KPI and its categorization as critical, important, or normal will be mutually agreed upon at that time. • If the KPI target is not met in any given month, the Vendor shall provide a Root Cause Analysis and a corrective action plan.
6.	QHP Eligibility and Enrollment Accuracy	<ul style="list-style-type: none"> • The Vendor will at a minimum every other 	<ul style="list-style-type: none"> • KPI Target 97%: 	<ul style="list-style-type: none"> • N/A 	<ul style="list-style-type: none"> • The Medical Benefits Accuracy KPI will be

		<p>month use a sample size between 300-1,000 QHP cases for purposes of reviewing eligibility and enrollment accuracy. The review will be limited to the accuracy of the eligibility begin and end dates, plan status, CSR calculation, APTC calculation, Eligibility Determination and Premium calculation using data within the worker portal for the then-current enrollment year.</p>	<p>The formula for this KPI will be the number of cases with accurate eligibility and enrollment / number of cases sampled. This KPI will be met when 97% of the reviewed cases are accurate for the monthly sample</p>		<p>reported on a monthly basis</p> <ul style="list-style-type: none"> If the KPI target is not met in any given month, the Vendor shall provide a Root Cause Analysis and a corrective action plan.
7.	Worker Portal Eligibility Processing	<ul style="list-style-type: none"> The Vendor will measure eligibility processing as the count of online eligibility determinations during the month (due to intake, renewals, change, or other activity). The total Incidents for Blocking Defects is equal to the number of applications blocked by a software or data issue within the applications selected during the month. 	<ul style="list-style-type: none"> KPI Target 98%: The KPI will be measured using the following formula: Total number of online eligibility determinations / (Total number of online eligibility determinations + Total Incidents for blocking defects). This KPI will be met when 98% of online eligibility determinations are made without 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> The Worker Portal Eligibility Processing KPI will be reported on a monthly basis If the KPI target is not met in any given month, the Vendor shall provide a Root Cause Analysis and a corrective action plan Note that eligibility transaction performance is measured in KPI #5 and is expected to not degrade.

			a blocking incident.		
8.	Customer Portal Application Processing	<ul style="list-style-type: none"> The Vendor will monitor applications processed through the Customer Portal on a monthly basis. Total Customer Portal Applications equals the count of applications initiated and submitted through the Customer Portal. Total blocked customer portal applications is equal to the number of customer portal applications blocked by a software issue (includes incidents plus backend system errors) during the defined time period. Abandonment rate is measured as the percentage of applications that are initiated on the customer portal but are not submitted. 	<ul style="list-style-type: none"> KPI Target (A) 98% processing: The KPI will be measured using the following formula: $KPI = \frac{\text{Total Customer Portal Applications Completed}}{\text{Total Customer Portal Intake Applications Completed} + \text{Customer Portal Applications Blocked}}$ KPI Target (B) Abandonment Rate Degradation: The KPI will be measured on all customer portal applications and will be measured on a monthly basis. The KPI will be met if the abandonment rate does not degrade. 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> The Customer Portal Application Processing KPI will be reported on a monthly basis If the KPI target is not met in any given month, the Vendor shall provide a Root Cause Analysis and a corrective action plan
9.	Client Notice Timeliness	<ul style="list-style-type: none"> The Vendor will perform QC on notices to validate 	<ul style="list-style-type: none"> KPI Target 98%: The KPI 	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> The Client Notice Timeliness KPI will be reported on a

		<p>timeliness. If the notice is late, it shall be counted as a “miss”. A notice that is “on hold” or late due to the State’s pending QC review will not be counted as late.</p>	<p>will be measured as an average for each notice defined as follows:</p> <p>Timeliness Success Metric: Number of notices that are determined to be late / Total number of notices expected to be generated in the time period</p>		<p>monthly basis</p> <ul style="list-style-type: none"> • The sample size must be at least 100 notices across specific types of notices including but not limited to: <ol style="list-style-type: none"> 1. Benefits Decision Notice (Adverse Action) 2. Benefits Decision Notice 3. Medicaid Termination 4. 6-Month Interim 5. NOMI 6. Appointment Notice 7. Age-Out Notice 8. SSI ex Parte Notice 9. QHP Disenrollment Notice • If the KPI target is not met in any given month, the Vendor shall provide a Root Cause Analysis and a corrective action plan
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5. Notes

- The vendor may require coordination and collaboration with other Third Parties for the achievement of the Service Levels and Key Performance Indicators.
- The vendor shall provide a Single Point of Contact (SPOC) for the prompt resolution of all incidents pertaining to the achievement of the Service Levels and Key Performance Indicators.