## **Summary of Information Requested**

## Hearing follow-up:

- Documentation outlining the process for bidding and awarding the current contract for the four vendors doing work on UHIP (Deloitte, CSG, AHS, PCG).
- Report on the specifics of the defects in the daily health report. Thom Guertin testified that JIRA detail could be provided in an excel file.
- Provide an update as to whether staff has been cross trained to answer phone calls on all programs. Testimony suggested most only had info on Medicaid programs.
- Answer to original question 3

## Weekly Reporting:

- 1) Copy of weekly report sent to FNS
- 2) Updated versions of the answers provided last week: #8, #10 and #16 (recapped below).

a. (#8) Precise numbers on how many existing clients didn't receive any benefits, how many received some but not all that they were entitled to, and how many received incorrect payments.

b. (#10) How many providers (day care centers, mental health centers, etc) did not receive payments when they were accustomed to receiving them after Bridges went live?

c. (#16) The most current report used by Deloitte that lists the "glitches" that need to be addressed and fixed

3) Scope of manual work-arounds – include data for each program (Medicaid, SNAP, Child Care, etc.)

- a. Number and percentage of applications being processed manually
- b. Number and percentage of payments being processed manually
- 4) Progress towards implementing emergency hotline and (once implemented) data on usage
- 5) Status of call-back system and any plans to re-implement
- 6) Report on additional efforts at employee engagement and examples of any suggestions or feedback implemented
- 7) Progress towards implementing different measure of regional office wait times to capture true customer experience and (once implemented) data on usage
- 8) Weekly version of daily report being provided to the press