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