

### Note for Procurement

Only work steams 1 through 3 are relevant for the HBPO Procurement

# Quality Assurance Plan

## Outsourced Health Operations

Version 1.3

# 1. DOCUMENT CONTROLS

## 1.1 PURPOSE OF THE DOCUMENT

This Quality Assurance Plan (QAP) defines the sampling methodology and thresholds used to measure the quality of work streams and tasks for the State’s outsourced health operations.

## 1.2 INTENDED AUDIENCE

The expected audience for this document includes:

- DSS Management
- DSS Cadres
- Quality assurance professionals
- Operational trainers
- Operational staff as required
- Access Health CT Staff as required

## 1.3 VERSION CONTROL

Version	Date	Author(s)	Change
1.0	01/23/2017	DSS	Version 1
1.1	03/30/2017	DSS	<p>The definition of critical errors was changed for data entry/update in the WS-1/Task-1 Verifications process. A data update is only considered critical if the element could directly affect the eligibility outcome, individual identity or addresses.</p> <p>The changes will have the effect of reducing the number of reported critical errors and so improve scores.</p> <p>Additionally altered the default sampling size table. The change reduced the sampling sizes periods (from 2 weeks to 1 week) and the sample sizes. QA should measure the process and identify issues; it shouldn’t be a substitute for supervisory support.</p> <p>The change will have the effect of reducing the</p>

			work of the QA workers.
<b>1.2</b>	3/15/2018	Rob Marchant	Fixed >= (typo) errors in the Target Scores table of Section 4.4  Updated the scoring with respect to: <ul style="list-style-type: none"> <li>• Critical scoring for W/S 1 Tasks 2, 3 and 4 in Section 6.</li> <li>• Changed the default levels for A, B and C grades.</li> <li>• Added new grade level of F.</li> <li>• Captured the (current practice) requirement for sampling a minimum of 25 items for low volume tasks.</li> </ul>
<b>1.3</b>	9/6/2018	Rob Marchant Angie Guerrero	<ul style="list-style-type: none"> <li>• Updated reviewers.</li> <li>• Removed legacy tasks.</li> <li>• Removed 1095-B reference.</li> <li>• Removed legacy system references.</li> <li>• Reorganized tasks and works streams under a new naming numbering structure.</li> <li>• Consolidated two premium tasks into one.</li> </ul>
<b>2.0</b>	12/16/2018	Rob Marchant Angie Guerrero	<ul style="list-style-type: none"> <li>• Expanded the placeholder content of Work Stream 2.0 for full guidance.</li> </ul>
<b>2.1</b>	01/21/2019	Rob Marchant	Removed the VLP Step 2 and Step 3 tasks and renumbered accordingly.

#### 1.4 KEY REVIEWERS

Name	Position	Organization
<b>Kristin Dowty</b>	Program Administration Manager	DSS
<b>Jeff Valentine</b>	Executive Account Manager	Conduent

**1.5 DOCUMENT SIGN OFF**

Name	Kristin Dowty
Organization	DSS
Date	3/27/18
Signature	

Name	Jeff Valentine
Organization	Conduent
Date	
Signature	

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### 3. QUALITY ASSURANCE PURPOSE AND GOALS

The goals of the Quality Assurance (QA) approach are two-fold:

1. Provide DSS with a quantifiable view into the accuracy and precision of the outcomes/results of the outsourced health operations. This important view is orthogonal to the other measures of the health operations that focus on backlogs and timeliness. Together these perspectives provide a 360° view of contractor performance and contract compliance.
2. Provide DSS and the outsourcing contractor with insights into possible process improvements. These process improvements could be training related, procedure related, hiring related, supervisory or involve adjustments in how we measure people or the outsourcing contractor.

## 4. QUALITY ASSURANCE METHODOLOGY

Each outsourced task, that is part of the QAP, consists of distinct work items and activities of which a sample will be subject to QA measurements.

### 4.1 QA REPORTING PERIOD

A standard QA reporting period is a calendar month. A calendar month approach has some advantages:

1. Aligns with a monthly executive reporting approach.
2. Aligns with invoicing periods and to the extent that QA measures are used in the service level agreement (SLAs) this will simplify invoicing and speed payment processing.
3. It is a recognized and readily understood period as opposed to say a bi-weekly or four week period, i.e., you readily know what month you are in.

There are some known disadvantages to the calendar month approach:

1. Months are variable lengths and even the same month can contain a different number of workdays in different years. This can make month-over-month and year-over-year comparisons problematic. However, since most quality measures are percentage based, as opposed to absolute numbers, this is largely handled.
2. A monthly QA period may not align with the outsourcing contractor's staff payment period, e.g., weekly or bi-weekly. To the extent that the outsource contractor wants to provide quality assessment measurements to its staff, that align with their pay periods, the outsourcing contractor will need to find a way to satisfy both goals without incurring material overhead.

### 4.2 WORK ITEM SAMPLE SELECTION APPROACH

The general approach to sample selection for a task work item is based on ensuring that each individual worker has an appropriate amount of QA oversight for a given work item. Arguably for DSS the performance of any one individual is not as important as compared to the overall performance of the outsourcing vendor. However, by using a worker-centric sampling approach three objectives can be met:

- The outsourcing contractor can use the worker-based information in payment-performance models.
- The outsourcing contractor can use the worker-based information in order to improve an individual's performance via training or extended supervision.



- The data collected at an individual level can be readily aggregated into a monthly “vendor level” view for each task so that DSS can review performance and meet its contract oversight needs, i.e., if the sample is enough to review an individual’s performance then the aggregate is enough to review the vendor.

To determine the sample size for an individual for a particular task a lookup-table is used that cross-references past performance of the person and his/her experience in a task. The first week of experience is defined as the first week a worker performs tasks alone without supervision.

Table-1 is the default minimum sample-size table but unique tasks could adopt modified approaches. Exact thresholds for each task expectations are described in section 6.

For example, if a worker was in their third week on a task and they had previously received a B grade, then the sample size for their work would be 50%.

### Special Circumstances

The sample size approach is intended for steady-state operations. During the start-up of a task or transition of a task between organizations then a different sampling or quality gating approach could be created.

Table 1 – Standard (default) minimum-sample-size table to determine an appropriate sample size for an individual

Tenure	Meets Expectations	Below Expectations		
		B	C	F
0 - 2 Weeks	20%	20%	20%	20%
2 - 3 Weeks	5%	10%	20%	20%
3 - 4 Weeks	5%	10%	20%	20%
Over 4 Weeks	5%	10%	20%	20%

When a particular task is low volume, the vendor should ensure that a minimum of 25 items (or the total number of items) are sampled. For example, a target sample size of 5% that results in only 10 items being selected is insufficient to measure a given task; select 25 as the minimum number of items.

The approach described thus far is the general approach that emphasizes worker experience, i.e., most errors come from inexperienced staff. However there may be specific tasks that may benefit from the overlaying of an additional *Pareto* approach, i.e., if 80% of the errors come from 20% of a type of work item. In that situation we would alter the general approach and create a unique sampling size for the different types of work items (and possibly a different score aggregation approach for the task as a whole).

**4.3 SAMPLED WORK ITEM SCORING**

Example work items include applications entered, documents verified, calls answered, and notices printed. For each work item sampled the outsourcing contractor must keep a detailed tracking of appropriate quality measurement. We recognize two types of scoring:

1. *Elemental* – these are low-level measurements and each task will typically consist of multiple elemental measures. Elemental items can carry a weighting, i.e., not all elemental items are scored the same.
2. *Outcome* – this is the overall pass-fail type scoring of a work item.

Elemental type errors could include, for example, how accurately individual data fields were entered into a computer system; each mistyped field would be an elemental error. The aggregation of these elemental-level errors provides one measure of quality for a completed work item.

In designing the elemental scoring for a given task there are various considerations to balance:

- Not all elements need to be scored/weighted the same. For example, the accuracy of a social security number is more important than say a middle name and a social security number is also more prone to mistyping.

- It is not necessary to strictly adhere to a score per field. A set of fields could be bundled together, e.g., treat an address as one (important) item rather than five individually scored fields.
- It may be necessary to score optional fields as a success when they are 'blank'. For example, we may leave a mailing address blank when it is the same as the residential address, and so when it is (correctly) blank we need to award it a full score.

The more elemental measurements that are scored the less important any individual measurement, i.e., as more items are measured it is possible to lose sight of issues. Therefore the design of the elemental scoring for a task seeks to find a balance between breadth or measured elements, weighting of elements and bundling of elements.

In addition to the weighted elemental measurements, each work item will also receive an *Outcome Score* as input into the overall scoring. There are two possible outcome scores for each work item:

1. Pass, i.e., no errors and 100% correct. This has a score of 1.
2. Fail, i.e., there were one or more errors that affected the perceived success of the work item. This will typically result in a score of zero (0), but individual tasks could define alternative weights for this, e.g., a multiplier of 0.5 rather than zero (0). The exact definition of what constitutes critical is unique per type of work item.

Each work item is evaluated as a whole into a single score as per the following formula.

$$\text{Work Item Score \%} = (\text{Outcome}) * \frac{\sum_{i=1}^N (\text{Earned Elemental}_i)}{\sum_{i=1}^N (\text{Total Elemental}_i)}$$

Tasks that differ from this general approach are noted in the particular Task Details section.

As an example, consider a fictitious task that involves the data entry of documents into a legacy computer system. In our example there is only one type of work item that is measured, and each work item (document) has 11 data elements. Three of these data elements are considered critical (e.g., the eligibility result and the start and end dates) and were weighted at 60 points (20 points each). The remaining 8 elements are weighted at 5 points apiece bringing the total to 100 possible points.

If someone types in all 11 fields correctly then the score is:

$$\text{Work Item Score \%} = (1) * \frac{20 + 20 + 20 + 5 + 5 + 5 + 5 + 5 + 5 + 5 + 5}{20 + 20 + 20 + 5 + 5 + 5 + 5 + 5 + 5 + 5 + 5} = 100\%$$

If someone types in 10 fields correctly but not the eligibility start date (received 0/20 points for that field, but since it's a critical item, received an Outcome score of 0):

$$\text{Work Item Score \%} = (0) * \frac{0 + 20 + 20 + 5 + 5 + 5 + 5 + 5 + 5 + 5 + 5}{20 + 20 + 20 + 5 + 5 + 5 + 5 + 5 + 5 + 5 + 5} = 0\%$$

If someone types in all 11 fields apart from a minor error on one of the 5 point fields (received 2/5 points for that field):

$$\text{Work Item Score \%} = (1) * \frac{20 + 20 + 20 + 5 + 5 + 5 + 5 + 5 + 5 + 5 + 2}{20 + 20 + 20 + 5 + 5 + 5 + 5 + 5 + 5 + 5 + 5} = 97\%$$

When a task consists of a number of types of work items then the different scores for the different work items will have to be combined to create a single resultant score. The aggregation approach will be unique to the task and the work items be measured. Note that you could have multiple work items for a task if it was a two-step process (one person does step 1 and another person does step 2) or if there were different artifacts being processed, e.g., a Pareto-based separation or work item artifacts such as the types of verification documents or the types of "unknown documents".

The individual work item scores are aggregated into the following measures:

- *Person Task Quality Score* – this is a person's total score for a given task. When someone performs more than one task they will have more than one score. This score is compared against the target for the task.
- *Monthly Task Quality Score* – this is the total score for a given task for the whole organization. This score is compared against the organizational target for the task and would be the basis of any contractual quality SLAs.

The Person Task Quality Score is calculated as the average of all their measured scores for the period:

$$\text{Person Task Quality Score \%} = \frac{\sum_{i=1}^K (\text{WorkItemScore}_i)}{K}$$

The Monthly Task Quality Score is calculated as the average of all measured scores for the period across all people:

$$\text{Monthly Task Quality Score \%} = \frac{\sum_{i=1}^N (\text{WorkItemScore}_i)}{N}$$

**4.4 TARGET SCORES**

Every month a Monthly Task Quality Score will be calculated for a Task. Similarly individual workers will have a monthly Person Task Quality Score calculated for the tasks they are involved in. These actual task and person scores are compared against a *Minimum Monthly Task Quality Score Target* and a *Minimum Person Task Quality Score Target* respectively.

Based on the deviation from the monthly target a task may be shown on the monthly dashboards as Green, Amber or Red. Similarly SLAs may be tied to meeting or exceeding targets.

Table-2 is the default thresholds for judging the monthly task quality score and person task quality score. Note that when the total number of work items being QA'd during the time period is less than 100, any critical errors would result in missing expectations.

*Table 2 – Standard (default) expectation thresholds*

Measure	Meets Expectations	Below Expectations		
		B	C	F
<b>Monthly Task Score Targets</b>	>= 96%	93% – <96%	90% – <93%	<90%
<b>Person Task Score Targets</b>	>= 96%	93% – <96%	90% – <93%	<90%

## 5. QUALITY ASSURANCE REPORTS

QA tasks will be ongoing throughout a month. Measurements and results will be recorded on a daily basis and will be included in the daily end-of-day Excel-based operational report.

A Monthly Quality Assurance Dashboard will be provided within 5 business days of the end of the month in Microsoft PowerPoint format. It will be possible to directly map/calculate/aggregate the monthly report from the information captured in the daily report.

## 6. TASK DETAILS

### Work Stream 1: MAGI Data Entry Support

#### Task 1: Paper Verification Data Entry

##### Scoring

The artifacts described in the QA Methodology are as follows:

##### *Work Item Score Calculation* – Standard

##### *Verifications Elemental vs Outcome*

Section	Category	Error	Critical
Verification Evaluation	Did the verification meet acceptable criteria?	Document used does not meet the acceptable criteria	Yes
	Electronic sources used? (EMS/SAVE/Impact)	Did not use electronic source	
Manage VCL	Was the correct action selected?	Incorrect action was selected	Yes
	Was the correct Document ID added?	Document ID incorrect/blank	
	Was the correct Document Type selected?	Document type incorrect/blank	
Report a Change	Was a change reported (if applicable)?	<p>Changes were not made – (possible) impact to Eligibility or Identity.</p> <p>Specifically:</p> <ul style="list-style-type: none"> <li>• Social Security Number</li> <li>• Date of Birth</li> <li>• First &amp; last name</li> <li>• Detailed income amounts, i.e., not the APTC annual amount.</li> <li>• 5-year bar question</li> <li>• Citizenship/Immigration type and document details</li> <li>• Tax details when forced by system to update a new year.</li> </ul>	Yes

		Changes were not made – No impact to Eligibility or Identity.	
	Was the proper updates/changes made?	Partial / incorrect changes were made – (possible) impact to Eligibility or Identity.  Specifically: <ul style="list-style-type: none"> <li>• Social Security Number</li> <li>• Date of Birth</li> <li>• First and last name</li> <li>• Detailed income amounts, i.e., not the APTC annual amount.</li> <li>• 5-year bar question</li> <li>• Citizenship/Immigration type and document details</li> <li>• Tax details when forced by system to update a new year.</li> </ul>	Yes
		Partial / incorrect changes were made – no Impact to Eligibility or Identity	
	Enrollment	Enrollment was processed in error	Yes
Enrollment was not processed			
Client Follow-Up	Manage Case Comments	Partial info was requested	
		Notes are incomplete	
		Notes are incorrect/blank	
	Outbound Call	No outbound call was made	
Work Item Details	Was the correct action taken?	Incorrect action was selected	Yes

**Sampling**

Uses the standard default sample-table.

**Quality Targets**

Uses the standard default quality-table.



## Task 2: Paper Application Data Entry

### Scoring

The artifacts described in the QA Methodology are as follows:

**Work Item Score Calculation** – Standard formula, but use the critical Outcome multiplier of 0.5

### **Paper Application Elemental vs Outcome**

Section	Category	Error	Critical	
Application and Family	Application Info	Application filing date incorrect	Yes	
	Document Info	Document ID incorrect		
	Channel	Channel is incorrect		
	Subsidy Question	Subsidy question is incorrect	Yes	
	Household Members		Resides with primary question is incorrect	Yes
			Gender is incorrect	Yes
			SSN is incorrect	Yes
			Name is incorrect	Yes
			DOB is incorrect	Yes
		Needs coverage question is incorrect	Yes	
Household Relationships	Relationships	Relationships were set incorrectly	Yes	
	Marital Status/Details	Marital status is incorrect	Yes	
	Caretaker Relatives/Foster Care Info	Caretaker relative box is incorrect	Yes	
		Foster care information is incorrect	Yes	
Contact Information	Primary Applicant Contact Info	Phone number wasn't entered		
		Paperless question wasn't selected		
		Preferred language is incorrect	Yes	
		Email wasn't entered/Incorrect	Yes	
		Phone number is incorrect		
	Primary Applicant Home Address	Mailing address is incorrect	Yes	
		Primary address is incorrect		
	Residency/ Living Arrangement	Residency info is incorrect	Yes	
Living arrangement is incorrect				

Person Information	Tax Status	Tax status is incorrect	Yes
		Yearly income is incorrect	Yes
	Pregnancy	Due date wasn't added	
		Number of babies is incorrect	Yes
	Disability	Disability question is incorrect	
	Citizenship	Alien number is incorrect	
		Citizenship and status questions are incorrect	Yes
		Document type is incorrect	
	Ethnicity/Race	Race is incorrect	
		Ethnicity is incorrect	
Income Information	Current Income	Deduction wasn't added	Yes
		Income question is incorrect	Yes
		Type is incorrect	
		Employer name is incorrect	
		Person name is incorrect	Yes
		Amount is incorrect	Yes
		Additional questions were left blank	
	Previous month's income/Deductions	Retro box was selected in error	Yes
		Retro box wasn't selected	Yes
Detailed Person Info	Tribal Status	Received Indian Health Services question is incorrect	
		State is incorrect	
		Name of tribe is incorrect	
		Eligible for Indian Health Services question is incorrect	
	Impairments/Accommodations	Incorrect check box was selected	
	Veteran Status	Veteran status is incorrect	Yes
Family Health Coverage	Health Insurance Questions & Employer Health Insurance Info	Health insurance questions are incorrect	Yes
		Coverage type is incorrect	Yes
		Who is covered is incorrect	Yes
		Policy holder is incorrect	
		Effective date is incorrect	Yes

		Plan name is incorrect	
		Policy number is incorrect	
		Group number is incorrect	
		Payment frequency or Premium cost for APTC is incorrect	Yes
		Name of carrier is incorrect	
		Work status is incorrect	
		EIN is incorrect	
		Employer name is incorrect	
		Contact name is incorrect	
		Insurance type is incorrect	
		Who is eligible is incorrect	Yes
		End date is incorrect	Yes
		Employer phone number is incorrect	
		Contact phone number is incorrect	
		Contact email is incorrect	
		Employee name is incorrect	
Employer address is incorrect			
Confirm All	Yearly Renewal Confirmation	Incorrect amount of years was selected	
	Signature & Assignment of Interest	Signature question is incorrect	Yes
		Signature type is incorrect	
		Incorrect selection was made	Yes
	Authorized Representative	AREP info wasn't added	
		AREP info is incorrect	
Enrollment	Enrollment wasn't processed	Yes	
	Enrollment was processed in error	Yes	
Client Follow-Up/Outcome	Manage Case Comments	Notes were not added	
		Notes are incomplete	
	Manage Missing Info/Notices	Unnecessary info was requested	
		The VCL wasn't managed	Yes
		Notice wasn't generated	Yes

		Partial Info was requested	Yes
		Incorrect notice was generated	Yes

### Sampling

Uses the standard default sample-table.

### Quality Targets

Uses the standard default quality-table.

## Task 3: Paper Renewal Data Entry

### Scoring

The artifacts described in the QA Methodology are as follows:

**Work Item Score Calculation** – Standard formula, but use the critical Outcome multiplier of 0.5

### **Renewal Elemental vs. Outcome**

Section	Category	Error	Critical	
Application and Family	Application Info	Application filing date incorrect	Yes	
	Document Info	Document ID incorrect		
	Channel	Channel is incorrect		
	Subsidy Question	Subsidy question is incorrect	Yes	
	Household Members		Resides with primary question is incorrect	Yes
			Gender is incorrect	Yes
			SSN is incorrect	Yes
			Name is incorrect	Yes
			DOB is incorrect	Yes
			Needs coverage question is incorrect	Yes
Household Relationships	Relationships	Relationships were set incorrectly	Yes	
	Marital Status/Details	Marital status is incorrect	Yes	
	Caretaker Relatives/Foster Care Info	Caretaker relative box is incorrect	Yes	
		Foster care information is incorrect	Yes	
Contact	Primary Applicant Contact Info	Phone number wasn't entered		

Information		Paperless question wasn't selected	
		Preferred language is incorrect	Yes
		Email wasn't entered/Incorrect	Yes
		Phone number is incorrect	
	Primary Applicant Home Address	Mailing address is incorrect	Yes
		Primary address is incorrect	
	Residency/ Living Arrangement	Residency info is incorrect	Yes
		Living arrangement is incorrect	
Person Information	Tax Status	Tax status is incorrect	Yes
		Yearly income is incorrect	Yes
	Pregnancy	Due date wasn't added	
		Number of babies is incorrect	Yes
	Disability	Disability question is incorrect	
	Citizenship	Alien number is incorrect	
		Citizenship and status questions are incorrect	Yes
		Document type is incorrect	
	Ethnicity/Race	Race is incorrect	
		Ethnicity is incorrect	
Income Information	Current Income	Deduction wasn't added	Yes
		Income question is incorrect	Yes
		Type is incorrect	
		Employer name is incorrect	
		Person name is incorrect	Yes
		Amount is incorrect	Yes
		Additional questions were left blank	
	Previous month's income/Deductions	Retro box was selected in error	Yes
		Retro box wasn't selected	Yes
Detailed Person Info	Tribal Status	Received Indian Health Services question is incorrect	
		State is incorrect	
		Name of tribe is incorrect	
		Eligible for Indian Health Services	

		question is incorrect	
	Impairments/Accommodations	Incorrect check box was selected	
	Veteran Status	Veteran status is incorrect	Yes
Family Health Coverage	Health Insurance Questions & Employer Health Insurance Info	Health insurance questions are incorrect	Yes
		Coverage type is incorrect	Yes
		Who is covered is incorrect	Yes
		Policy holder is incorrect	
		Effective date is incorrect	Yes
		Plan name is incorrect	
		Policy number is incorrect	
		Group number is incorrect	
		Payment frequency or Premium cost for APTC is incorrect	Yes
		Name of carrier is incorrect	
		Work status is incorrect	
		EIN is incorrect	
		Employer name is incorrect	
		Contact name is incorrect	
		Insurance type is incorrect	
		Who is eligible is incorrect	Yes
		End date is incorrect	Yes
		Employer phone number is incorrect	
		Contact phone number is incorrect	
		Contact email is incorrect	
Employee name is incorrect			
Employer address is incorrect			
Confirm All	Yearly Renewal Confirmation	Incorrect amount of years was selected	
	Signature & Assignment of Interest	Signature question is incorrect	Yes
		Signature type is incorrect	
		Incorrect selection was made	Yes
Authorized Representative	AREP info wasn't added		

		AREP info is incorrect	
	Enrollment	Enrollment wasn't processed	Yes
		Enrollment was processed in error	Yes
Client Follow-Up/Outcome	Manage Case Comments	Notes were not added	
		Notes are incomplete	
	Manage Missing Info/Notices	Unnecessary info was requested	
		The VCI wasn't managed	Yes
		Notice wasn't generated	Yes
		Partial Info was requested	Yes
Incorrect notice was generated	Yes		

### Sampling

Uses the standard default sample-table.

### Quality Targets

Uses the standard default quality-table.

## Task 4: Missing Information Requests

### Scoring

The artifacts described in the QA Methodology are as follows:

**Work Item Score Calculation** – Standard formula, but use the critical Outcome multiplier of 0.5

**MIN Elemental vs. Outcome**

Section	Category	Error	Critical	
Application and Family	Application Info	Application filing date incorrect	Yes	
	Document Info	Document ID incorrect		
	Channel	Channel is incorrect		
	Subsidy Question	Subsidy question is incorrect	Yes	
	Household Members	Resides with primary question is incorrect		Yes
		Gender is incorrect		Yes
		SSN is incorrect		Yes
		Name is incorrect		Yes

		DOB is incorrect	Yes
		Needs coverage question is incorrect	Yes
Household Relationships	Relationships	Relationships were set incorrectly	Yes
	Marital Status/Details	Marital status is incorrect	Yes
	Caretaker Relatives/Foster Care Info	Caretaker relative box is incorrect	Yes
		Foster care information is incorrect	Yes
Contact Information	Primary Applicant Contact Info	Phone number wasn't entered	
		Paperless question wasn't selected	
		Preferred language is incorrect	Yes
		Email wasn't entered/Incorrect	Yes
	Primary Applicant Home Address	Phone number is incorrect	
		Mailing address is incorrect	Yes
	Residency/ Living Arrangement	Primary address is incorrect	
		Residency info is incorrect	Yes
		Living arrangement is incorrect	
Person Information	Tax Status	Tax status is incorrect	Yes
		Yearly income is incorrect	Yes
	Pregnancy	Due date wasn't added	
		Number of babies is incorrect	Yes
	Disability	Disability question is incorrect	
	Citizenship	Alien number is incorrect	
		Citizenship and status questions are incorrect	Yes
		Document type is incorrect	
	Ethnicity/Race	Race is incorrect	
Ethnicity is incorrect			
Income Information	Current Income	Deduction wasn't added	Yes
		Income question is incorrect	Yes
		Type is incorrect	
		Employer name is incorrect	
		Person name is incorrect	Yes
		Amount is incorrect	Yes



		Additional questions were left blank		
		Previous month's income/Deductions	Retro box was selected in error	Yes
			Retro box wasn't selected	Yes
Detailed Person Info	Tribal Status	Received Indian Health Services question is incorrect		
		State is incorrect		
		Name of tribe is incorrect		
		Eligible for Indian Health Services question is incorrect		
	Impairments/Accommodations	Incorrect check box was selected		
	Veteran Status	Veteran status is incorrect	Yes	
Family Health Coverage	Health Insurance Questions & Employer Health Insurance Info	Health insurance questions are incorrect	Yes	
		Coverage type is incorrect	Yes	
		Who is covered is incorrect	Yes	
		Policy holder is incorrect		
		Effective date is incorrect	Yes	
		Plan name is incorrect		
		Policy number is incorrect		
		Group number is incorrect		
		Payment frequency or Premium cost for APTC is incorrect	Yes	
		Name of carrier is incorrect		
		Work status is incorrect		
		EIN is incorrect		
		Employer name is incorrect		
		Contact name is incorrect		
		Insurance type is incorrect		
		Who is eligible is incorrect	Yes	
		End date is incorrect	Yes	
		Employer phone number is incorrect		
Contact phone number is incorrect				

		Contact email is incorrect	
		Employee name is incorrect	
		Employer address is incorrect	
Confirm All	Yearly Renewal Confirmation	Incorrect amount of years was selected	
	Signature & Assignment of Interest	Signature question is incorrect	Yes
		Signature type is incorrect	
		Incorrect selection was made	Yes
	Authorized Representative	AREP info wasn't added	
		AREP info is incorrect	
	Enrollment	Enrollment wasn't processed	Yes
		Enrollment was processed in error	Yes
Client Follow-Up/Outcome	Manage Case Comments	Notes were not added	
		Notes are incomplete	
	Manage Missing Info/Notices	Unnecessary info was requested	
		The VCI wasn't managed	Yes
		Notice wasn't generated	Yes
		Partial Info was requested	Yes
		Incorrect notice was generated	Yes

### Sampling

Uses the standard default sample-table.

### Quality Targets

Uses the standard default quality-table.

## Task 5: Unknown Item Administration

### Scoring

The artifacts described in the QA Methodology are as follows:

**Work Item Score Calculation** - Standard

**Unknown Elemental vs. Outcome**

Section	Category	Error	Critical
Document	Was the correct Application ID saved?	Application ID incorrect	Yes

Search	Was the correct Document Type selected?	Document ID incorrect	
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**Sampling**

Uses the standard default sample-table.

**Quality Targets**

Uses the standard default quality-table.

**Task 6: Hearing/Appeals Support**

The QA methodology for appeals support is under review.

**Task 7: Enterprise Master Person Index (EMPI) Administration**

The QA methodology for EMPI administration is under review.

**Work Stream 2: MAGI Case Maintenance Support**

**Task 1: Age-Outs**

**Scoring**

The artifacts described in the QA Methodology are as follows:

***Work Item Score Calculation*** - Standard

***Unknown Elemental vs. Outcome***

Section	Category	Error	Critical
HIX	Application Defaults	Filing Date incorrect	Yes
		Channel is incorrect (not online)	
		E-signature not selected	
	Case Processed correctly	Case was not processed	Yes
	Case comment is correct?	Incomplete or blank Case Comments	
		Case Comments list incorrect information	
	Enrollments completed?	Enrolment not processed correctly	Yes

**Sampling**

Uses the standard default sample-table.

**Quality Targets**

Uses the standard default quality-table.

**Task 2: Pregnancy Income Lock-In**

**Scoring**

The artifacts described in the QA Methodology are as follows:

*Work Item Score Calculation* - Standard

*Unknown Elemental vs. Outcome*

Section	Category	Error	Critical
HIX	Case processed correctly?	Case was not processed or processed incorrectly	Yes
HIX Application and Family	Application Info	Application filing date incorrect	Yes
	Channel	Channel is incorrect	
HIX Confirm All	Signature & Assignment of Interest	Signature type is incorrect (Not E-Signature)	
HIX Case Comments	Manage Case Comments	Notes were not added, are incorrect or incomplete	

**Sampling**

Uses the standard default sample-table.

**Quality Targets**

Uses the standard default quality-table.

**Task 3: Past Due Pregnancy**

**Scoring**

The artifacts described in the QA Methodology are as follows:

**Work Item Score Calculation - Standard****Unknown Elemental vs. Outcome**

Section	Category	Error	Critical	
HIX Application and Family	Application Info	Application filing date incorrect	Yes	
	Channel	Channel is incorrect		
	Subsidy Question	Subsidy question is incorrect	Yes	
	Household Members		Resides with primary question is incorrect	Yes
			Demographic information is incorrect	
			Needs coverage question is incorrect	Yes
HIX Household Relationships	Relationships	Relationships were set incorrectly	Yes	
	Marital Status/Details	Marital status is incorrect		
HIX Contact Information	Residency/ Living Arrangement	Residency info is incorrect	Yes	
		Living arrangement is incorrect		
HIX Person Information	Tax Status	Tax status is incorrect	Yes	
	Pregnancy	Incorrect selection was made		
	Disability	Disability question is incorrect		
	Citizenship	Citizenship and status questions are incorrect	Yes	
HIX Family Health Coverage	Health Insurance Questions & Employer Health Insurance Info	Health insurance questions are incorrect		
HIX Confirm All	Signature & Assignment of Interest	Signature question is incorrect	Yes	
		Signature type is incorrect		
		Incorrect selection was made	Yes	
	Enrollment	Enrollment wasn't processed	Yes	
		Enrollment was processed in error	Yes	
HIX Case Comments	Manage Case Comments	Notes were not added, incorrect or incomplete		

Database	Reviewing in AHCT	Incorrect selection for "Overall Status"	
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**Sampling**

Uses the standard default sample-table.

**Quality Targets**

Uses the standard default quality-table.

**Work Stream 3: General Administrative Support**

**Task 1: Data Entry of HUSKY C and Medicare Savings Program Referrals**

**Scoring**

The artifacts described in the QA Methodology are as follows:

***Work Item Score Calculation - Standard***

***HUSKY C Elemental vs. Outcome***

Section	Category	Error	Critical
EMS	Start Date	Incorrect start date was entered	Yes
	Case screened correctly	Case was not screened	Yes
		Incorrect consumer was screened	Yes
	Coverage	Incorrect coverage was screened	
		Coverage not screened (Different filing month)	
		Spouse not listed as NM	
		Subscriber not listed as NM (Applicant the son/daughter)	
	Narratives	Narratives were not entered	
		Incorrect abbreviation used in narratives	
		Narratives list incorrect information	
		Narratives Missing Information	
	AREP	Name not entered correctly (includes last name and middle	

		initial)	
		AREP address not entered/incorrect	
		AREP phone number not entered/incorrect	
		AREP was not entered / Incorrect	
	Address	Incorrect Residential/Mailing Address/Consumer not active in other programs	Yes

**Sampling**

Uses the standard default sample-table.

**Quality Targets**

Uses the standard default quality-table.

**Task 2: Premium Billing Support**

**Scoring**

The artifacts described in the QA Methodology are as follows:

**Work Item Score Calculation - Standard**

**S05 Outcome vs. Elemental**

Section	Category	Error	Critical	
PPS	Lock Box Date	Lock Box date does not mirror the date in the lock box file.		
	EMS Client ID	EMS ID / Name used to process Doesn't match in PPS	YES	
	Payment Form Type	Selected the incorrect payment type (Personal, Money Order, etc.)		
	Check Date	Incorrect Check date was used to process payment	YES	
	Invoice Payment		Payment applied incorrectly in EMS	YES
			Payment applied incorrectly	YES
EMS	Payment Amount	Amount applied incorrectly	YES	
Tracking	Issues Log	Case was not added in the Issues		

		Log	
	Documents receive Log	Case was not added in the Documents received Log	

**Sampling**

Uses the standard default sample-table.

**Quality Targets**

Uses the standard default quality-table.

**Task 3: Spend-Down Expense Support**

**Scoring**

The artifacts described in the QA Methodology are as follows:

***Work Item Score Calculation - Standard***

***Spend Down Outcome vs. Elemental***

Section	Category	Error	Critical
Spend down / Excel Expense Worksheet	Worksheet Review	Date of service is incorrect	
		Expense not applied/applied in error	
		Expense listed as paid/unpaid in error	
		Expense received date incorrect	
		Expenses not listed in chronological order	
		No worksheet on file	
		The amount entered is incorrect on the worksheet	
		TPL info on worksheet incorrect/blank	
ConneXion Details	Was the SDS name selected in the prepared by drop-down for each AU?	Case was not assigned	
	Expense Date & Period	Expense applied to incorrect spend down period	
		Expense date entered incorrectly	
		Expense was applied in error	



	Applied Amount	Amount applied incorrect	
	Expense Type	The Expense type is incorrect	
	Verification type	The Verification type is incorrect	
	Expense Paid	Paid/Unpaid incorrect	
	Provider Name	The provider name is incorrect	
	Medical Expense For	Expense wasn't applied to the correct HH member	
	Were appropriate notes added (if applicable)?	Case notes were not added	
ConneXion Interactions	Follow-Up Call	Phone call was not made to consumer/provider	
		Call notes are incorrect / Incomplete / Not entered	
		Partial info requested	
	Request for Information	Incorrect / Partial RFI was sent	Yes
		RFI was not sent/sent in error	Yes
ImpaCT	Individual Information	Incorrect Name selected	
	Spend down Period	Spend-down period selected is incorrect	Yes
	Medical Bills/Expense dates	Circumstances Start/Change Date is incorrect / Reported On date is incorrect / Date Client Became Aware is incorrect / Verification Received On date is incorrect	
	Medical Bills/Expense Information	Expense not entered / applied Incorrectly / in error	Yes
		Expense not entered / applied Incorrectly / in error (Does not impact eligibility)	
		Provider name Incorrect / not entered	
		Date of service is Incorrect	Yes
		Frequency selected is incorrect	Yes
		Amount per frequency is incorrect	Yes
	Medicaid Covered service selection is incorrect		

		Bill Status is incorrect	Yes
		Verification type is not "Hard Copy"	
	Were the case notes entered correctly?	Case note is missing / incorrect/incomplete	
		Spelling/grammar / typo incorrect	

### Sampling

Uses the standard default sample-table.

### Quality Targets

Uses the standard default quality-table.

## Work Stream 4: Call Center Services

### Task 1: ConneCT MyAccount Call Center Services

#### Scoring

The artifacts described in the QA Methodology are as follows:

**Work Item Score Calculation** - Standard

**MyAccount Outcome vs. Elemental**

Section	Category	Error	Critical
Opening Statement	Was the opening script followed?	Did not greet the client / Did not follow opening Script (thank you for calling...)	
		Did not provide your name to the client	
		Did not request the client's name	
		Side conversation at the beginning of the call	
		Did not state "how may I help you"	
	Consumer with EMS ID - Was the call authenticated and an explanation provided? - Was	Did not obtain Client ID to open account	Yes

	AREP verified (If applicable)?	Last 4 numbers of SSN were not verified	Yes
		Date of birth not verified	Yes
		Did not verify Community partner info	Yes
		Did not state why call needs to be authenticated	
		AREP Name was not verified	Yes
	Consumer without EMS ID - Was the call authenticated and an explanation provided? - Was AREP verified (If applicable)?	Full SSN or last 4 digits of SSN was not verified	Yes
		Date of birth not verified	Yes
		Complete email address was not verified	Yes
		Did not verify Community partner info	Yes
		Did not state why call needs to be authenticated	
		Consumer's Full Name was not verified	Yes
		AREP's Name was not verified	Yes
	Customer Service	Courteous tone & Empathy	Did not show empathy
Did not use a courteous tone			
Displayed active listening skills		Asked client to repeat information	
		Did not address consumer by Mr/Mrs. Or Correct Name	
Was appropriate language used?		Did not use appropriate language or used Slang words	
Hold & Long Pauses		Did not ask permission to place client on hold	
		Did not thank consumer for Holding	
		Long pauses or long holds during call	

		Side conversation during pending transfer	
	Interrupted client while he or she was speaking	Spoke over the client	
	Did the Rep control the call?	Client moved off topic/Rep did not redirect conversation	
Research & Case info	Password reset and Account information	Provided incorrect Username to consumer	Yes
		Password reset on incorrect account (HIX vs. MyAccount)	Yes
		Provided incorrect instructions & could not find client but client is in system	
	Narratives in EMS / MyAccount Database	Did not document in EMS	Yes
		Did not document in Tracking Database	
Closing	Do you have any further questions?	Did not ask the client if any further questions	
	Thank you for calling.	Did not state the "Thank You" closing Script	

### Sampling

Uses the standard default sample-table.

### Quality Targets

Uses the standard default quality-table.