Addendum No. 1: Questions and Answers

Request for Information for Call Center Services

December 14, 2020

1. Please reconfirm the due date for this procurement by providing it in response to answers to questions.

   Answer: December 30, 2020, 4PM EST

2. Please describe your level of satisfaction with your current or recent vendor(s) for the same purchasing activity, if applicable.

   Answer: At this stage, we are only interested in collecting information from Respondents which will inform our future decisions.

3. How are fees currently being billed by any incumbent(s), by category, and at what rates?

   Answer: PMPM pricing is used for Call Center services based on tiered membership.

4. What estimated or actual dollars were paid last year, last month, or last quarter to any incumbent(s)?

   Answer: In fiscal year 2020, we spent approximately $16,430,000 with our Call Center vendor for Call Center services.

5. Please provide a complete list of the means of inbound and outbound communication the call center must accommodate.

   Answer: Inbound and outbound calls, emails and web-based chat.

6. Is previous experience with any specific customer information systems, phone systems, or software required?

   Answer: See Section VII, Minimum Qualifications, in RFI.

7. What is the minimum required total call capacity?

   Answer: See Appendix A, Exchange Volumes (Historical), page 12.

   What is the minimum simultaneous inbound call capacity?

   Answer: See Appendix A, Exchange Volumes (Historical), page 12.

8. What is the maximum wait time?

   Answer: See Requirements Traceability Matrix, KPI'S/ Performance Guarantees, 3.5.

9. What is the maximum hold time?

Answer: See Requirements Traceability Matrix, KPI'S/ Performance Guarantees, 3.5.

10. What percentage of inbound calls must be answered by a live operator?

    Answer: All calls are answered by live agents.

11. What percentage of calls must be resolved without a transfer, second call, or a return call?

    Answer: See Requirements Traceability Matrix, KPI'S/Performance Guarantees, 3.5.

12. What is the maximum percentage of calls that can be terminated by the caller without resolution?

    Answer: See Requirements Traceability Matrix, KPI'S/Performance Guarantees, 3.5.

13. Is there a minimum or maximum number of operators and supervisors?

    Answer: No, staffing model is approved by Exchange based on need.

14. What are the Call Center's hours of operation?

    Answer: See Requirements Traceability Matrix, KPI'S/ Performance Guarantees, 3.5.

15. What are the required language options?

    Answer: See Requirements Traceability Matrix, Core functionality/Operations. 2.13, 2.14.

16. What is the required degree of dedication for the Call Center?

    Answer: The Call center should be fully dedicated to Access Health CT.

17. What is the required degree of dedication for the operators?

    Answer: The Call Center agents should be fully dedicated to Access Health CT.

18. Are callers required or allowed to connect with a message verification system or pre-recorded message before connecting to a live operator, or must a live operator be the initial contact?

    Answer: Currently, our Call Center utilizes an Integrated Voice Response System (IVR) that directs consumers through prerecorded messaging.

19. What are the recording requirements for inbound and outbound phone calls and how long must recordings be maintained?

    Answer: All calls must be recorded and, pursuant to federal regulation, recordings must be retained for a period of ten (10) years.

20. What are the recording and storage requirements for non-phone communications?

    Answer: All original records, or copies thereof, must be maintained for a period of ten (10) years.

21. What information is to be included in call logs?

Answer: See Requirements Traceability Matrix, Customer Relationship Management System (CRM) (7.12).

22. What is the current number of seats for operators and supervisors at your existing Call Center?

    Answer: The current number of operators, supervisors, leads, trainers and quality staff is 332.

23. What is the current average wait time for phone calls?

    Answer: Current average wait time is 63.6 seconds.

24. What is the current average handle time for phone calls and other types of communications?

    Answer: Current average hand time is 12.30 minutes for calls and other communications.

25. What is the current average after-call work time for operators?

    Answer: 25.04 second.

26. Over the past year, what is the percentage of calls received in English versus non-English?

    Answer: 12.4% were Spanish.

27. Over the past year, what percentage of calls received were in Spanish?

    Answer: See response to question #26.

28. What time of day, days of the week, or times of the year do calls typically peak?

    Answer: Mondays are the busiest day of the week both during open enrollment and outside open enrollment. The busiest time of day is 9AM-12PM during open enrollment and outside open enrollment. Calls typically peak during open enrollment the first two (2) weeks of December.

29. Section VII, Minimum Qualifications, item 6 – Please confirm if the Respondent's experience with similar or like projects would suffice?

    Answer: Submit references for review.

30. Appendix B, section 1.0 General, item 1.10:

    i.   Please confirm if the Respondent would pay for long distance.

         Answer: Such matters may be discussed as part of a contract negotiation.

    ii. Will the Respondent be required to provide the voice/data circuits?

         Answer: Yes.

    iii. Please confirm the minimum workstation requirements.

         Answer: This is determined by the vendor and approved by the Exchange.

    iv. Please describe the bandwidth requirements per user

         Answer: This is determined by the vendor and approved by the Exchange.

31. Appendix B, Section 2.0 Core Functionality/Operations, item 2.3- How long will you require the Respondent to store call recordings?

   Answer: See response to #20.

32. Appendix B, Section 5.0 Staffing and Workforce Management, item 5.7 – With the present pandemic situation, would the respondent be able to propose a virtual environment?

   Answer. Call Center locations must be located in the United States with at least one location within Connecticut. We are open to a work from home hybrid model.

33. Page 13 is missing from the RFI. The RFI ends on Page 12 of 13, with 13 being Appendix B, the pricing model.

   Answer: There is no page 13 or pricing model template. Respondents should refer to Appendix A in formulating its Pricing Proposal.

34. How many calls a vendor can anticipate receiving on a monthly basis. What would that number be?

   Answer: See Appendix A, Exchange Volumes (Historical), page 12.

35. Please clarify which of the components provided in the bulleted list will be provided by the Call Center Services vendor and which will be provided by other vendors (II. Current Call Center Environment, Overview of the Exchange Call Center Platform. For example, is the Call Center Services vendor responsible for providing:

      i.   Exchange-Developed Customer and Worker Portal Health Exchange platform

      ii.   Web-Based self-registration application Exchange provided registration technical assistance

   Answer: The following components would be provided by the Call Center vendor; Interactive Voice Response (IVR), Automatic Call Distributor (ACD)/Private Branch Exchange (PBX) Systems Soft Phones, IP Desk Phones and Digital Phones, Call Management System, Workforce Management System, Call Recording and Agent Screen Recording System, Reporting and Analytics System, Intelligent Call Routing System, Toll Free Network Service , Toll Free Network Routing Platform, Business Rules Engine for Hours of Operation/Per Site/Per Skill, Outbound Dialer Notification Capabilities , Agent, Skill Group, IVR, Call Routing and Toll-Free Reporting , Chat and ask a question via email capabilities.

36. This requirement (VI. Responses to RFI, format and content of RFI Responses) states, "Total length of the RFI response should not exceed thirty (30) pages. The length of the introductory or the letter or the Requirements Traceability Matrix will not be counted on the thirty (30) page criteria." The Requirement Traceability Matrix includes only requirements without areas for response. Are respondents required to submit the Respondent Traceability Matrix (Appendix B) with their response? If so what kind of responses are expected with the document?

   Answer: No, Respondents do not need to submit the Requirement Traceability Matrix. It is for reference only.

37. VI. Responses to RFI, Questions and Clarifications. The requirement immediately following the box states, "At the discretion of the Exchange, relevant questions and the

corresponding answers will be made available to all Respondents by posting to the Exchange website, http://ct.gov/hix under the "Contact Us' tab beneath the heading "Doing Business with the Exchange" on December 14, 2020 by 4:00PM EST." We were unable to find the "Contact Us" tab at this website link. Please provide additional instructions on where to find the answers once they are posted.

Answer:

The correct Exchange website is: https://agency.accesshealthct.com/solicitations.

38. The requirement states "Respondent's Pricing Model and applicable Total Fee/Costs, including implementation Costs must be provided on a 3-year contract" Does the Exchange expect vendors to submit a "notional pricing model" in the form of a Rough Order of Magnitude (ROM) estimate?

Answer: Yes.

39. To properly provide a pricing model and applicable Total Fees/Costs, including Implementation Costs, can the Exchange provide the previous 12 months contact volume by ½ hour, daily, weekly, and annually? Further, can the Exchange provide a further delineation of the contact 'types' (Husky A, B, and D program and QHP Enrollment) and provide an average handle time for each contact type by channel – phone, email, etc.?

Answer: This information is not available.

40. To properly provide a pricing model and applicable Total Fees/Costs, including Implementation Costs, can the Exchange provide a position description of a CSR? Does the position require any special/unique educational requirements and/or certifications?

Answer: The Call Center's Customer Service Representatives assist consumers in the following;

- **enrolling/re-enrolling in Qualified Health Plans and/or Husky Health programs (Medicaid/Chip), consumers into**
- **assisting consumers with determining eligibility for financial help (Premium Tax Credits and Cost Sharing Reductions)**
- **answering questions about applying for, determining eligibility for, and enrolling in healthcare coverage through the Exchange**
- **assisting Exchange consumers with information and support during the annual IRS Form 1095 delivery period**

Please note, CSRs are employees of the Call Center vendor and as such, the vendor will ultimately formulate the job description and required qualifications, with input from the Exchange.

41. Item #5: Efficiency Measures – Contact Handling: To adequately determine required/necessary staffing levels and associated pricing, can the Exchange confirm to definitions and time for a properly handled contact/call? The RTM defines Average Handle Time as "Talk time." The RTM then provides additional definitions AND expended time for On Hold Time and After Call Work. This information is typically included in the definition of Average Handle Time (defined as Talk, wrap, and hold time). Can this vendor then assume that the total expected 'AHT' for a contact is: 14 min + 2 Min + 70 Seconds for a

total AHT of 17 Min 10 Seconds, or is the AHT 14 Min inclusive of Talk, Wrap, and Hold time?

Answer: Average handle time is defined as the sum of talk time measured for all inbound calls +hold time + after call work time.

42. What are the requirements for offering information in a manner that is accessible to individuals living with disabilities?

Answer: Access Health CT and its Call Center complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Access Health CT does not exclude people or treat them differently because of race, color, national origin, age, disability for sex.

Access Health CT provides:
- **Free aids and services to people with disabilities to communicate effectively with us, such as:**
- **Qualified sign language interpreters**
- **Written information in other formats (large print, audio, accessible electronic formats, other formats)**
- **Free language services to people whose primary language is not English, such as: (i) qualified interpreters; and (ii) information written in other languages**

43. Is Access Health CT willing to provide current vendor pricing so RFI respondents may provide competitive pricing?

Answer: See response to question # 3.

44. Please outline any challenges with current vendor.

Answer: At this stage, we are only interested in collecting information from Respondents which will inform our future decisions.

45. Should Access Health CT move forward with an RFP, would volumes be split between multiple vendors? If so, how would the volumes be split?

Answer: No.

46. Which languages does the vendor need to support?

Answer: See Requirements Traceability Matrix, Core functionality/Operations. 2.13, 2.14.

47. Please outline the preferred contract term

Answer: Generally, our contract terms are three (3) years with options to extend the term.

48. Should Access Health CT move forward with an RFP, what would the targeted go live/implementation date be?

Answer: This information is not known at this time. We will evaluate all options following the conclusion of the RFI process.

49. Please share the current budget for this service

Answer: The budget for fiscal year 2020 was $16,500,000.

50. Is Access Health CT interested in vendor support of other communication channels not listed in the RFI, such as social media?

Answer: Not at this time.

51. Does Access Health CT have a preferred pricing model (such as per call, per minute or per agent)

Answer: We are open to all pricing models.

52. Does Access Health CT prefer the vendor to place staff all in one location, or in multiple locations for business continuity purposes?

Answer: Multiple locations for business continuity purposes, but the primary location must be in Connecticut.

53. What information should be documented in the CRM system?

Answer: See response for question #21.

54. Please provide sample reports or the reporting requirements (for dashboards, departmental reports and user reports).

Answer: Weekly Call Metrics-KPIs, Number of Calls, staffing, initiatives, MTD metrices and Quarterly metrics Monthly Call Metrics-same as weekly metrics just accumulative metrics, Quarterly Business Review Report-Highlights of the last three months, Performance results based on Service level agreement, Training results and information, Customer satisfaction results, improvement initiatives, focus for next quarter.

55. What are the hours of operation?

Answer: AHCT sets Call Center hours based on requirements and operational needs. During Non-OE periods, typical hours are 8am to 4pm, Monday-Friday. During OE periods, typical hours 8am to 8pm Monday-Friday, Saturday 10am to 3pm. Hours are customarily increased on key dates within Open Enrollment.

56. What are the required and preferred agent qualifications?

Answer: This information is not available.

57. What is the expectation for average speed of answer? What is the current average speed of answer?

    Answer: See Requirements Traceability Matrix, KPI'S/ Performance Guarantees, 3.5. Current average speed of answer for November 2020 was 112.9 seconds.

58. Is Access Health CT interested in an online image viewer or workflow tool?

    Answer: Yes, we would be interested in both.

59. What is the current average handle time?

    Answer: See response for question #24.

60. Please outline the calls per agent per day.

    Answer: With shrink factored, about 28 calls per agent per day.

61. Please outline the current abandonment rate.

    Answer: The current abandonment rate is 3.51%.

62. Is there a front-end system that we will have to build to interface with HIX?

    Answer: No.

63. Is the incumbent bidding on this?

    Answer: This is a Request for Information (RFI) not a Request for Proposal (RFP).

64. Are they any improvements you'd like to see made in your Call center program?

    Answer: We engage in constant evaluation of our Call Center program and welcome proposals that provide commensurate service and value.

65. If you decide to go with a new vendor, do you have a transition plan?

    Answer: A transition plan would be put in place.

66. Will the incumbent be part of the transition?

    Answer: Yes, an incumbent would be part of a transition.

67. Are you looking for this to be on shore, near-shore or offshore?

    Answer: On shore, see response to question #32.

68. In contract terms, are you looking for another initial 3-year contract with the option to renew for an additional two (2) years?

    Answer: See response to question #47.

69. What percentage of increase in call volume do anticipate for 2021 open enrollment?

   Answer: This information is not available at this time.

70. Is there any need for licensed agents?

   Answer: The Call Center staff includes licensed certified independent brokers to assist consumers with selecting plans throughout the year.

71. Do you need bilingual agents? If so, what languages and what are the percentages of those languages based on call volume?

   Answer: See Requirements Traceability Matrix, Core Functionality/Operations (2.13).

72. Are you looking for a single or multi-site location?

   Answer: See response to question #32.

73. What are the hours of operation?

   Answer: See response to question #55.

74. What is the AHT (average handle time)?

   Answer: - See response to question #24.

75. How much outbound volume is there?

   Answer: A small percentage of outbound calls are requested annually.

76. Does the center receive emails or texts from residents?

   Answer: The Call Center receives email from consumers.

77. For the months in Appendix A, can Access Health provide the number of successfully completed self-service transactions via the IVR or online chat?

   Answer: For the months indicated in Appendix A there were 78,496 self-service transactions via IVR online chats.

78. Can Access Health provide following metrics for the Call Center operations for the months in Appendix A. This information will help respondents assess variations across high and low volume months? Average Handle Time, Abandon Rate, Total Service Level, Average Speed to Answer; On Hold Time

   Answer: See Requirements Traceability Matrix, KPI'S/ Performance Guarantees, 3.5.

79. Will the Exchange please describe how the current vendor performs "voice call tracking with workflow processing?"

Answer: The current voice call tracking system can track telephone numbers and time of call from that telephone number.

80. On page 2 of the RFI, there is a reference to an Appendix B "Requirements Traceability Matrix" but there does not appear to be any such Appendix included in the RFI. Is there an additional Appendix B document or template we should access for this RFI or are respondents expected to create their own?

    Answer:
    There are only 2 attachments posted on https://agency.accesshealthct.com/, the main RFI document and the Appendix B – Requirements Traceability Matrix.

81. Please provide a breakdown of the incoming calls reflecting peak daily, weekly and monthly volumes.

    Answer: See Appendix A, Exchange Volumes (Historical) page 12.

82. What is the current average talk time (ATT) and average handle time (AHT)?

    Answer: Current average talk time is 12:25 minutes and average handle time is 13:55 minutes the average was taken over the last 2 years.

83. What type of reporting is currently used to track performance (can you provide examples from earlier this year)?

    Answer: Answer: See Requirements Traceability Matrix, KPI'S/ Performance Guarantees, 3.5.

84. What were the total fees paid to perform this service in 2019 and 2020 YTD?

    Answer: See response to question #4.

85. What is the fee structure currently in place?

    Answer: See response to question #3.

86. What key performance indicators are in place?

    Answer: See Requirements Traceability Matrix, KPI's/ Performance Guarantees.

87. What is the preferred method of connectivity?

    Answer: This question is unclear.

88. Please provide the below information for manpower calculation
    i.   Interval volume of the past two months (Campaign/Program wise)
    ii. If agents make any call back to the customer (% of calls)

    Answer: Generally, October and the beginning of November have lower call volumes but after the Thanksgiving holiday volumes increase. Approximately 5% of call require call backs.

89. Is this opportunity only for onshore locations?

   Answer: See response to question #32.

90. Minimum requirements for Agent system.

   Answer: This question is unclear.

91. Would you please clarify your organization's quasi-public agency definition?

   Answer: As a quasi-public agency of the State of Connecticut ("State"), Access Health CT was created by Public Law 11-53. We enjoy both State and federal tax-exempt status and are subject to certain State requirements, including nondiscrimination and ethics requirements with respect to our contractual engagements with vendors. We are not, however, subject to the State Contracting Requirements or Purchasing Standards, which allows us to be nimble in our business affairs given potential changes in federal and state law affecting our operations.

92. What are your preferred contract vehicle(s) for procurement of contact center technology and services?

   Answer: We have created a standard contract for the management of the Call Center Services.

93. It is our understanding that Access Health CT outsources all contact center agents to a 3rd party BPO. Is this understood correctly?

   Answer: Correct.

94. Is the intent of this RFI to purchase new contact center technology or to seek new BPO services, or a mix?

   Answer: The Exchange seeks to gather information through this Request for information on vendor capabilities, pricing and general option for Call Center services.

95. Is there interest in Chatbots and Voice Bots?

   Answer: Access Health CT is always interested in new technology.

96. Would you please expand on knowledge management requirements? What Knowledge Management is in place today?

   Answer: We currently use the knowledgebase in the Oracle Service Cloud Customer Relationship Management System.

97. What are the chat volumes by month?

Answer: Currently the chat volume for November 2020 is 11,197.

98. What are email volumes by month?

   Answer: Average email volume per month is 70.

99. Does the current implementation have screen pop?

   Answer: No.

100.What is the average handle time per call?

   Answer: See response to question #24.

101.Section II of Page 4 states that" Call Center services consistently remain available during Call Center hours". Can you please elaborate on the requested hours of operation for this project?

   Answer: See response to question #55.

102.On average, how many calls per month involve a customer whose primary language is Spanish?

   Answer: The average calls per month that involve a customer whose primary language is Spanish is 12.5%.

103.Are there any quality requirements the vendor has to adhere to, such as how long they can stay on a call with a customer?

   Answer: See Requirements Traceability Matrix, KPI's/Performance Guarantees (3.0) and Quality assurance (6.0).

104.Please provide breakdown of call per month by topic and subject matter.

   Answer: This information is not available.

105.What is the contract value?

   Answer: See response to question #49.

106.Will remote agenda be allowed for this procurement?

   Answer: See response to question #32.

107.On average, how many emails per month are sent via customer service representatives?

   Answer: Average email volume per month is 70.

108.Will the vendor assume responsibility of a toll-free number or will the vendor have to provide a toll-free number for this project?

Answer: The vendor will assume responsibility of toll-free numbers that are provided by the Exchange.

109. How many chat conversations are held per month?

    Answer: See response to question #97.

110. What are the required hours of operation for chat?

    Answer: Chat hours are the same as the Call Center phone hours.

111. When does the Exchange expect the implementation to start, and how long do you expect it will take?

    Answer: See response to question #63.

112. Will the successful bidder have the option to outsource Call Center staffing?

    Answer: This can be considered if we issue an RFP.

113. Re: the HIX system: Are the customer service representatives (CCR) required to process paper enrollment applications?

    Answer: No.

114. Re: the HIX system: The RFI mentions the need for a CRM – is this in addition to the integration to Oracle?

    Answer: No, the CRM is the Oracle Service Cloud Customer Relationship Management System.

115. Will there be an opportunity to assume existing resources from the incumbent, including staffing, facility leases and facility infrastructure?

    Answer: No, these are all owned/leased by our current vendor.

116. What is the willingness for a work-from-home model if the pandemic continues, as well as in general?

    Answer: See response to question #32.

117. Will performance penalties and/or incentives be built into the existing contractual arrangement?

    Answer: Performance penalties and incentives are part of the contract.

118. In addition to the call volumes, what are the volumes for paper transactional processing if any?
    Answer: The Call Center does not process paper applications.

119. What is the base membership for Individual Market versus Medicaid?

Answer: As of October 13, 2020, Individual Market membership was 99,814 and Medicaid membership was 801,592.

120. It appears from the RFI that 80% of the volume is Medicaid – please confirm.

    Answer: Correct.

121. Are the Special Resource Team members (brokers) for complex issues HIX employees or employees of the Call Center?

    Answer: This question is unclear. Tier 2 Customer Care Representatives handle complex issues at the Call Center.

122. What is the current compensation structure for the brokers?

    Answer: Certified Independent Brokers receive compensation from the Insurance Carriers.

123. Please provide the costs and pricing model of the current contract.

    Answer: See response to question #3.

124. Please indicate the Exchange's preferred pricing model.

    Answer: We are open to all pricing models.

125. Does the Exchange require that the Call Center be in Connecticut?

    Answer: See response to question #32.

126. Will training materials related to the Exchange's program be provided to the successful bidder?

    Answer: Yes, if there is an RFP and a new vendor selected.

127. Does the Department have an anticipated award date, an anticipated implementation period and a 'go live' date?

    Answer: No.

128. Re: question 3, is it acceptable to provide job descriptions for Key Personnel 'to be named' in lieu of hiring Key Personnel prior to contract award notice?

    Answer: Yes.

129. In what format (additional Excel column, Word document, e.g.) does the Exchange want our responses to the Requirements Traceability Matrix?

    Answer: See response to question #36.

130. Is the Small Business segment part of the responsibility for the functions that the Call Center will perform? If so, is there a delineation of volumes?

   Answer: No.

131. RTM 1.6 The Call Center shall seamlessly coordinate and integrate with applicable Exchange IT core system components, including Web Portal enrollment, reporting, noticing, appeals, etc. Please provide the API definitions

   Answer: This information is not available.

132. RTM 1.8 a. Calls are overflowed to a different Call Center location to handle major outages and business releases. Is work from home an option for overflow calls?

   Answer: See response to question #32.

133. RTM 2.5 The Respondent's system and procedures shall have the ability to manage outbound IVR campaigns. What if the call destination is on the DNC list?

   Answer: If a consumer is flagged on a DNC list we would not contact them.

134. RTM 2.11 The Respondent's system and procedures shall have the functionality to export to the Exchange all ACD, IVR and CRM statistical data and contact information. Please define the required statistics.

   Answer: The following is a high-level list of reports we require from our vendor.
   - **Number of calls**
   - **Types of calls**
   - **Open and closed incidents**
   - **Age of open incidents**
   - **Length of calls**
   - **Timing of calls**
   - **TTY calls verses regular calls**
   - **Reporting of call numbers after hours**
   - **Number of Chats**
   - **Calls identified by Subject**
   - **Access to Recorded Calls**
   - **Calls by Representative or Users**

135. RTM 2.17 The Respondent's system and procedures shall allow for Call Center and support staff to view information about Exchange consumer status (eligibility, enrollment, as well as plan information) in real time. Where does this data come from and how often is it refreshed?

   Answer: The CRM and HIX system provide real time data information regarding consumer enrollment status, plan selection and several other key data components.

136. RTM 5.5 Respondent's proposed IVR system and procedures should have required level of access and support 24 X 7 to ensure consumer access during hours that are not CSR staffed by the Respondent. If call cannot be resolved through the IVR, is a next business day call back OK?

Answer: Calls are captured, and outreach calls are made the following day.

137. RTM 5.6 The Respondent shall have the capacity to provide emergency help desk and technical support on holiday, weekends, and after hours if necessary. What is the expected response time from this after-hours support?

    Answer: The expected response time would generally be within an hour.

138. RTM 6.2 The Respondents systems and procedures shall provide the capability to automate customer surveys with the capacity to configure groups of questions at intervals as required by the Exchange from time to time. How are these surveys to be performed, mail, email of IVR?

    Answer: Currently the automated customer surveys are performed through the Respondents Interactive Voice Response System (IVR).

139. RTM 7.1 The Respondent's systems and procedures shall track all client encounters and associated in a CRM solution. What data elements are required to be tracked? Is there a recommended solution already developed?

    Answer: This has already been developed in the Oracle Service Cloud Customer Relationship Management System (CRM).

140. RTM 7.2 a. Increasing the availability of self-help capability, such as providing on-line FAQs and help documentation for common problems across Call Centers. Is this a customer facing web portal tied into the CRM?

    Answer: Yes.

141. RTM 7.2 b Keeping consumers regularly updated with alerts advising of any new or changed information. How are the alerts to be distributed?

    Answer: We are open to ideas from the Respondents.

142. RTM 7.6 The Respondent's systems and procedures shall, at the Respondent's expenses, provide the Exchange with appropriate licenses and/or interfaces to use the CRM solution and database (or any replacement thereof). How many licenses are required?

    Answer: Approximately 70.

143. RTM 7.13 The Respondent's systems and procedures shall be able to make an initial determination of the potential resolution to service requests. Is there some pre-existing knowledge matrix to assist in this?

    Answer: Yes.

144. RTM 7.27 The Respondent's systems and procedures shall close a request, including service requests, after receiving confirmation from the affected consumer that the request has been resolved. What is the appropriate timeline for closing requests and how are the notifications received?

Answer: Ideally a service request would be closed within 48 hours, the resolution notification would be sent through our CRM system.

145. RTM8.1 The Respondent shall develop and maintain a central knowledge database used to capture, store, and retrieve information and solutions for reuse by Call Center personnel, Exchange CRT, and other Exchange staff. This knowledge database must enable the sharing of all Call Center policies, procedures, best practices, and methods to resolve requests among Call Center personnel, Exchange CRT, and other Exchange staff. Is there a pre-existing solution that can be simply ported over or is this a from-scratch solution? Are there recommendations for or against certain products?

   Answer: There is a pre-existing solution in the current CRM.

146. RTM 9.5, part b. Sources of the requests. Please define "sources of the requests" in this context.

   Answer: This refers to calls, emails, IVR and chats.

147. RTM 9.10 Respondent shall provide the Exchange with a weekly report of Respondent availability and performance of application/telephonic systems, including the CRM. How will system availability be calculated, i.e., will only hours of operation be considered, or will it be calculated on a 24x7 basis? (Restarts and/or maintenance outside of working hours would impact the calculations in that case.)

   Answer: This information is not available.

148. RTM 11.5 The Respondent shall implement a robust and reportable process for Problem Management, which is approved by the Exchange to reduce the recurrence of problem requests. Are there examples of such systems that can be shared with us?

   Answer: Our problem management process with the respondent includes standard timelines and required information that is implemented into the CRM and Integrated Eligibility System (HIX) for immediate distribution to identified users. The systems used, would be CRM and HIX.

149. RTM 12.1 The Respondent shall immediately notify the Exchange orally and in writing of any major Crisis event. Full write up of the event and mitigation process and milestones required by end of the day in which the event occurs. Please define a crisis.

   Answer: A crisis would be defined as any event that substantially disrupts Call Center operations for a period. Examples include but are not limited to, issues with Call Center phones and evacuation of Call Center location(s) due to an unforeseen event.

150. RTM 14.2 The Respondent shall ensure that DR Plans comply with the Exchange external audit requirements. The Respondent shall be responsible for updating the DR Plans in the event of changes to the audit requirements. Can we please have a copy of the external audit requirements?

Answer: The regulatory requirements we must comply with in respect to Contingency Planning inclusive of Disaster Recovery are governed by the following key cybersecurity frameworks, as they pertain to Exchanges:

- **NIST Special Publication 800-53**
- **CMS MARS-E**
- **IRS Publication 1075**

151. RTM 14.5 The Respondent shall maintain offsite copies of all information, data, configurations, processes, procedures and other materials required for full recovery of the services so as to meet or exceed the Service Levels. Offsite storage plan and inventory must be submitted at startup and updated each July 1st to the Exchange's Senior IT manager. What is the expected DR time?

    Answer: The Disaster Recovery Plan must ensure minimal disruption to Call Center operations; there isn't a specific timeframe.

152. Are detailed job descriptions available? If yes, please provide.

    Answer: These are created by our vendor and approved by the Exchange.

153. What skills are required for the agent that will be hired?
    i.   What experience levels are required
    ii. Should they have previous customer care experience?

    Answer: This is determined by our vendor and approved by the Exchange.

154. Are all agents considered at the same level, or are there different tiers in place?

    Answer: There are different tiers i.e. CCR, escalation team, lead, supervisor.

155. Are agents trained to handle all 4 queues mentioned in the RFP?

    Answer: Yes.

156. Is licensing necessary for any of your positions? If so, what type of licenses and for which positions?

    Answer: No.

157. Are government clearances required for any positions relating to this contract?
    i.   If so, which positions and what level of clearances?
    ii. Are credit checks part of this clearance?
    iii. If so, do clearances have to be passed by day 1 of training or can training start with pending results?
    iv. Is there a cost to the vendor for this check?

    Answer: The Call Center vendor is responsible for performing background checks (federal, national, state, citizenship, social security trace) on all employees before they begin providing services to the Exchange. Credit checks are not required. The Call Center vendor is responsible for costs associated with background checks.

158. What is the training length and nesting duration for each line of business?

Answer: There is one training and it is three (3) weeks with Trainer and one (1) week of nesting.

159. In 2.13 it is mentioned that language translation services are required by either a service or agents-what languages will need to be supported? What percentage of calls are in each language needed?

Answer: All languages.

160. Do all of the agents need to be in the State of CT

Answer: No, see response to question #32.

161. Can support functions such as WFM and QA be located outside of CT?

Answer: Yes, see response to question #32.

162. Can the additional agents required during open enrollment be located outside of CT?

Answer: Yes, see response to question #32.

163. Can at home agents be utilized in all or part of the agent solution? Would the at home agents need to be located in the state of CT?

Answer: See response to question #32.

164. For costing purposes, should suppliers submit directional pricing to reflect the entire technological footprint outlined in the RFI and subsequent Appendix B?

Answer: Yes.

165. For costing purposes, if a new supplier is selected, does the Exchange intend to remove/replace all existing technologies in place today and replace with the newly developed supplier technology solutions, including CRM, during the implementation and launch? If no, please detail, in list format, which technology and/or applications will remain intact so that suppliers can determine necessary integrations.

Answer: No, the Exchange owns the integrated eligibility system (HIX) and the Call Center vendors holds the Oracle Service Cloud Customer Relationship Management System licenses on our behalf. The Call Center does not integrate with the HIX system.

166. Please provide a 12 month on month call volume forecast for 2021.

Answer: This information is not available.

167. Please provide 6-8 weeks arrival pattern with day of week distribution %.

Answer: This information is not available.

168. Will the ACD be on provider's switch or the Exchange's?

Answer: The Vendor's switch.

169. Will the provider need to supply a WFM tool?

Answer: Yes.

170. There are 3 SL target (90/30, 95/45, 99/60), what will be the target during peak and non-peak season?

Answer: Currently during Open Enrollment (peak time) the service level target is 90/30. During non-peak times it is 70/30.

171. What is the current telephony system utilized by Access Health CT?

Answer: Our Call Center utilizes the Cisco UCCE 10.5 telephony platform.

172. How many DID or Toll-Free numbers are being utilized in the current telephony system?

Answer: AHCT currently has 50 "media lines" or toll-free numbers that are used for specific outreach initiatives.

173. In the RFI issued it was indicated in the illustrative list of components of the current telephony system capabilities: Automatic Call Distributor (ACD)/Private Branch Exchange (PBX) Systems. Is this a feature required for the proposed system in regard to the RFI?

Answer: Yes.

174. Will Oracle Service Cloud Customer Management continue to be utilized by Access Health CT?

Answer: At this time, yes.

 i. Is Oracle Service Cloud Customer Management utilized for WFM, BI, and reporting

 Answer: No.

175. Is the existing ("HIX") system designed by Deloitte Consulting LLP expected to be utilized by Access Health CT for the future?

Answer: Yes.

 i. Is data that consumers to "self-serve" and go on-line to get a predetermination of health insurance coverage eligibility, eligibility for HUSKY Health Programs, potential premium costs, APTC's(tax credits) and shop for health plans transferred to the Oracle CRM for the CRR to reference during a call? Does the HIX system present that data to the CCR?

 Answer: Some of the information is transferred to the Oracle CRM however the CCR does need to also utilize the HIX system.

176. Please describe, if any, the current or future integration with the current telephony system and Exchange -Developed Customer and Worker Portal Health Exchange platform and Web-Based Self-Registration Application with Exchange provided registration technical assistance.

Answer: Currently there is no integration between the systems.

    i.   Please describe further the functionality of the current application and enrollment process and provide assistance to telephonic, web-based, and paper-based applicants in regard to the existing telephony system

        Answer: Currently there is no integration.

177. Please describe the current, or future, functionality of Chat and ask a question via email capabilities in regard to the current telephony system.

Answer: Chat and "Ask a Question" are functions through the Oracle Service Cloud Customer Relationship Management System.

178. Can Access Health CT describe in further detail the current Exchange Call Center architecture consisting of several vendor/subcontractor licensed and/or owned sub-systems and interfaces?

Answer: For purposes of this RFI we have provided enough detail for Respondents to compile a response and estimated pricing.

179. Is there a further breakdown of call volume by hour/day?

Answer: This information is not available.

180. What are the current hours of operation for inbound call handling?

Answer: See response to question #55.

181. Is there any information on current average handle time for all calls?

Answer: See response to question #24.

182. Is there any data on current service levels (abandoned calls, average wait time, average abandon time etc.)?

Answer: This data is not available.

183. Do call takers have to be based in Connecticut for this program?

Answer: See response to question #32.

184. Is Access Health CT open to a solution that includes work from home employees, or does it require 100% of call takers on premise?

Answer: See response to question #32.

185. What is the duration of the current initial new hire training?

   Answer: See response to question #158.

186. Can you provide call volume data for bilingual Spanish calls received the last twelve months by hour/day/month interval?

   Answer: See response to question #26.

187. What staff positions are bidders required to fill?

   Answer: All staffing positions would need to be approved by the Exchange.

188. Can the state please explain the Tier levels and which, if any, of these will staffed by the successful bidder?

   Answer: A successful bidder would be responsible for staffing Tier 1 and Tier 2. Tier 1 Customer Care Representatives answer general questions about programs offered through the Exchange and guide consumers through an application to determine eligibility for Qualified Health Plans, Medicaid, the Children's Health Insurance Program and enroll consumers in health care coverage. Tier 2 Customer Care Representatives handle more complex issues (i.e. matters needing escalation).

189. Can the state provide the proposed ratios for managers to supervisors to CCRs as well as those ratios for the current vendor?

   Answer: The ratio is determined by the vendor and approved by the Exchange based on need.

190. What is the average call time for inbound, outbound, chat, and email?

   Answer: The average call time for inbound, chat and email is 14:33 minutes over the span of the last 2 years.

191. What is the average volume for outbound, chat, and email?

   Answer: The average volume outbound, chats and emails is as follows: 3,400 emails and 95,000 chats per year over the last two years.

192. Will the successful bidder be able to occupy the current contact center facilities in Connecticut or will they be required to secure another office?

   Answer: Respondents should assume they would need to secure a different location.

193. Appendix B, Section 5.7 states, "The Respondent shall provide a core base of Call Center personnel that are exclusively dedicated to the servicing the Exchange consumer year-round. The Exchange expects that core base to be largely co-located in the Greater Hartford – New Haven area."

i. What percentage of the core base are required to be in the Greater Hartford – New Haven area?
ii. What percentage of total employees are required to be in the Greater Hartford – New Haven area?

Answer: To be determined, also see response to question #32.

194. Is there a requirement to replicate the current environment by having the Call Center, at least in part, physically within the state of CT?

Answer: See response to question #32.

195. Is there a preferred billing methodology for the Call Center (Hourly, per call, etc.)

Answer: We are open to all pricing models.

196. Is there a requirement to support multiple languages?

Answer: Yes.

197. If multiple languages are required, what languages need to be considered, and is there an expected breakout of call volume?

Answer: All languages need to be considered. English and Spanish are the languages in the Integrated Voice Response System (IVR).

198. Is there a requirement to provide support for omnichannel services beyond Voice: Chat, email, SMS text messaging, etc

Answer: Currently, voice, chat and email are supported through our Call Center.

199. What are the employee background requirements?

Answer: Call Center employee background checks are required; specific requirements are determined by the vendor. See response to #157.

200. What training is required before someone starts job training? (HIPAA, PII, Data Security, is there any training specific to the state of Connecticut?

Answer: Not at this time, the above are incorporated into the training.

201. Is there specific SLA's that need to be measured against?

Answer: See Requirements Traceability Matrix, KPI'S/ Performance Guarantees, 3.5.

202. Will all equipment be provided to the employees for the vendor that is chosen? (Ex. laptop, headset)

Answer: The cost of equipment is the vendor's responsibility.

203.Does the opportunity allow for Virtual (Work from Home) operations or is there a requirement for a brick and mortar work location?

Answer: See response to question #32.

204.Would the awarded vendor utilize the existing Call Center architecture (IVR, PBX, call recording, etc...) or would the expectation be that we provide?

Answer: No.

205.In the interest of compliance, would the requirement be that the awarded vendor store and retain the call recordings for a period of time (For example, 10 years + 1 day)?

Answer: See response to question #19.

206.Are there any components of the existing Exchange Call Center architecture that the awarded vendor would need to build out?

Answer: See response to question #35.

207.What training would be provided to an awarded vendor on the application?

Answer: The Exchange would supply training on the Integrated Eligibility System (HIX).

208.What are the data storage and retention requirements by channel: recorded calls, emails, sms/text, etc. Please also clarify any document storage requirements for this effort.

Answer: See response to question #19.

209.Please clarify and elaborate on the Document Management solution including:
  i.   What is the current document management platform (DMP) and where does it reside?

  Answer: Oracle Service Cloud Customer Relationship Management System (CRM).

  ii. Where are documents currently stored, within the HIX, CRM, a DMP, or …?

  Answer: This question is unclear. Notices to consumers are stored in HIX, the knowledgebase is located in the CRM.

  iii. Is the DMP currently integrated with the HIX, CRM and/or IVR?

  Answer: See response for 209(ii).

210.Please elaborate on all document processing requirements for this effort including but not limited to the following:
  i.   describe how eligibility documents and other inbound consumer documents received in-person, by mail, and email are managed. For example: Do you intend for the contact center provider to manage incoming eligibility verification

documents including via US mail, email, and/or other channels? If so, will the established document processing interface, technology, and integration be in place for the proposed new contact center vendor, or is the vendor required to build this solution?

ii. Is the requirement to scan and upload paper-based applications or is the expectation they will be manually entered in the HIX system?

iii. If scanning is required, please elaborate on the scanning requirements for this effort including the requirement to supply scanners, location of scanners, volumes including pages per scan, and if possible, provide samples of documents for scanning.

iv. Please provide historical and/or projected volumes and pages per scan, if possible.

Answer: The Call Center is not responsible for handling paper applications.

211. Please elaborate on outreach campaigns and other outbound document requirements. For example:

i. Do you intend for the contact center provider to be responsible for printing and mailing documents, including forms and enrollment packages? If so, can you provide volume estimates and clarify if the contact center vendor will be responsible for generating and storing these documents in addition to printing and mailing them?

Answer: No.

ii. Please describe how outbound documents are managed including mailing, email, bulk outreach and other channels

Answer: These services are not handled by the Call Center.

iii. Please provide samples of printed inbound and outbound consumer communications, if possible.

Answer: This service is not handled by the Call Center.

212. Please provide historical and/or projected outbound communication volumes by channel: phone, email, print mail, and sms/text.

Answer: Please see Appendix A Exchange volumes (Historical), page 12.

i. Please elaborate on phone outreach requirements e.g. robocalling, outbound queues, etc. and use cases.

Answer: Occasionally AHCT has used the respondent to make robo calls to a targeted audience for a special campaign using a designated queue and assigned number for return calls. The process is handled through the Respondent's phone system and CRM.

ii. Please provide requirements for outbound sms/text such as characters per message, links, images, caller ID/from number(s), etc.

Answer: This service is not provided by the Call Center.

213. Based on what is stated in the RFI it is unclear if the Oracle Service Cloud CRM is currently installed and maintained by the incumbent Faneuil or by CT Access Health. Please provide additional clarification around the CRM requirements including:

    i.   Who currently owns the Oracle CRM instance?

    Answer: Our Call Center vendor holds the license on our behalf.

    ii. Is the Oracle CRM transferrable, for example to CT Access Health (if owned by the incumbent) or to the awarded Respondent?

    Answer: Yes.

    iii. Where does the Oracle Service Cloud Customer Management system currently reside from a data center standpoint?

    Answer: The vendor houses this data.

    iv. How many Exchange staff will need access to our CRM solution?

    Answer: Please see response to question #142.

    v.   Please describe Consumer CRM access needs and use cases.

    Answer: The Oracle CRM is utilized to log all phone calls by the Call Center and Exchange. It is also used for chat functionality, "Ask a Question" functionality and reporting.

214. Are there any new integration required that are currently not in place? If so, please elaborate.

    Answer: No.

215. Please provide a technology diagram with integrations, if possible.

    Answer: This information is not available.

216. What are the security requirements, for example FedRAMP?

    Answer: See response to question #150.

217. Please describe in detail each current IVR self-service integration and which system(s) it will be required to integrate with?

    Answer: This information is not available.

218. Of the IVR self-service integrations articulated above, are there any new requirement requests that are currently not in place within the current solution? If so, please elaborate and describe

Answer: No.

219. Please elaborate on the following ask - Self Service: "discuss readiness of Respondent to provide new platform with HIX data for self-serve."

Answer: Currently the Oracle Service Cloud Customer Relationship Management System interfaces with the Integration Eligibility System (HIX).

220. Will the Exchange require the knowledge base be available online for consumers for self-help?

Answer: We currently utilize the Oracle Service Cloud for our knowledge base.

221. Where are knowledge articles currently stored and managed (HIX or CRM)?

Answer: CRM, Oracle Service Cloud.

222. What protocols will be used for the migration of the knowledgebase to the selected Respondent's Knowledge Management solution, if they do not reside in HIX? Please elaborate.

Answer: The current knowledgebase will stay in our CRM.

223. The RFI requires core contact center staff to reside within the greater Hartford Area. What requirements does CT Access Health have for Agents' residence (in state vs. out of state), if any?

Answer: See response to question #32.

224. Given COVID-19 pandemic implications and uncertainty, will CT Access health be open to flexible workforce location models (on-site, virtual or hybrid), or will you require a physical brick and mortar contact center to house all personnel in CT?

Answer: See response to question #32.

225. What are the requirements or any restrictions around working from home in general, and specifically during the pandemic?

Answer: See response to question #32.

226. What is the requirement, if any, to train Brokers/Navigators/Assisters?

Answer: None.

227. Please provide additional call arrival pattern details including by hour, by day, week, month, etc.

Answer: Mondays are the busiest day of the week both during open enrollment and on open enrollment. The busiest time of day would be between 9AM-12PM during open enrollment and non-enrollment. Calls typically peak during open enrollment the first two (2) weeks of December.

228. The definition of "First Call Resolution" (FCR) varies by client and Call Center. What is the definition of "first call resolution" within the context of CT's Access Health Call Center?

Answer: Currently, First Call Resolution is defined as the total number of calls that were completely resolved during the course of the first inbound call initiated by the consumer and do not require a callback from Contractor or the Exchange to resolve the issue minus the total number of calls that were reopened to resolve the same issue or prior request by consumer divided by the total numbers of all consumer calls received by Contractor CSR's in a rolling fifteen (15) business day period.

229. Please define or elaborate on what is meant by "proactive Exchange consumer support."

Answer: Being proactive in identifying and preventing potential problems/trends.

230. Please define or clarify what is meant by "IVR periodic call list."

Answer: The ability to identify abandoned callers and call them back.

231. The RFI references a 25% maximum turnover rate. What is Access Health's formula used for calculating the turnover rate

Answer: Turnover rate is defined as the number of CSRs who left their job (involuntarily) with Contractor (or its staffing subcontractors) more than thirty (30) days after the completion of initial training during the measurement period divided by the total number of CSRs recorded as working on the Exchange account at any point during the measurement period multiplied by (one hundred) 100.

232. Please provide historical staff turnover rates by year and month, if possible.

Answer: This information is not available.

233. What channels do you envision adding, if any, for example social media and group text/sms and calling

Answer: None at this time.

234. Will Access Health enable vendors to provide TTY services exclusively through a Relay Service?

Answer: Further discussions would be required regarding a vendor using a Relay Service exclusively.

235. What is the expected RFP timeline including issuing, responding, awarding, and go-live?

Answer: See response to #38.

236. How satisfied are you with the incumbent?

Answer: At this stage, we are only interested in collecting information from Respondents which will inform our future decisions.

237. How satisfied are you with the per call pricing model?

   Answer: We are open to considering any pricing proposal that provides high-level service and value.

238. What is the current per contact price broken down by channel?

   Answer: See response to question #3.

239. Current Hours of Operations?
   i.   Desired/future expansion of Hours of Ops or After-Hours Services?

   Answer: See response to question #55.

240. Current Contact Types (inbound voice, outbound voice, email, chat, portal, social, other)?
   i.   Desired/future expansion of contact types?

   Answer: See response to question #198.

241. Platforms currently used by the contact center.
   i.   How does the vendor access these platforms?

   Answer: The Call Center utilizes the Integrated Eligibility System, (HIX), the Oracle Service Cloud Customer Relationship Management System and their own platforms for taking calls, IVR, reporting, etc.

242. Contact Arrival Patterns – Please provide a sample week or month of contact arrival patterns (intraday) for staff modeling.

   Answer: This information is not available.

243. Self Service – How many contacts are resolved in the IVR or web portal vs live agent channel(s)?

   Answer: This information is not available.

244. What are current Service Levels / KPIs? What is the performance to KPIs by current vendor?

   Answer: See Requirements Traceability Matrix, KPI'S/ Performance Guarantees, 3.5.

   i.   Any changes anticipated to Service Level/KPIs?

   Answer: Not at this time.

245. Operations: What is working today that the State wishes to retain?
   i.   Ops: What is not working that the State wishes to change or upgrade? Can the current provider make these changes?
   Answer: See response to question #64.

246. Selection Criteria: What are the top criteria that will compel the State to make a change in vendors?

      i.   List priorities in order please: KPI performance, Compliance, Technology/Innovation to improve CSAT, Price, Other(s).

      Answer: At this stage, we are only interested in collecting information from Respondents which will inform our future decisions.