

**EXHIBIT A-2**

**Statement of Work Template**

Original  Amended

**STATEMENT OF WORK FOR IT CONTINGENT WORKERS  
BETWEEN  
STATE OF MISSISSIPPI, Division of Medicaid  
AND  
GUIDESOFT, INC., d/b/a KNOWLEDGE SERVICES**

3/24/2023

Grant Banks  
Mississippi Division of Medicaid  
550 High St. Suite 1000 Jackson, MS 39201

Authorization for work performed pursuant to this Statement of Work ("SOW") is granted under the terms of the Master Consulting Services Agreement between GuideSoft, Inc. d/b/a Knowledge Services and Mississippi Department of Information Technology Services.

- **Knowledge Services Posting Number:** 114096
- **IT Contingent Worker Name:** Stefanie Bryant
- **Vendor Name:** SWB Consulting
- **Position Title:** SME
- **Regular Hourly Bill Rate:** \$125.00
- **OT Hourly Bill Rate (if applicable):** \$125.00
- **Original Number of Hours to be worked:** 6,240 hours, not to exceed 2,080 per FY
- **Amendment 1: Number of hours to be worked:** Click or tap here to enter text.
- **Amendment 2: Number of hours to be worked:** Click or tap here to enter text.
- **Amendment 3: Number of hours to be worked:** Click or tap here to enter text.
- **Original Total Cost of SOW: (Not to exceed)** \$780,000 total, not to exceed \$260,000 per FY
- **Amendment 1: Total Cost of SOW: (Not to exceed)** Click or tap here to enter text.
- **Amendment 2: Total Cost of SOW: (Not to exceed)** Click or tap here to enter text.
- **Amendment 3: Total Cost of SOW: (Not to exceed)** Click or tap here to enter text.
- **Start Date of Service:** 4/3/2023
- **Original End Date of Service:** 4/3/2026
- **Amendment 1: End Date of Service:** Click or tap to enter a date.
- **Amendment 2: End Date of Service:** Click or tap to enter a date.
- **Amendment 3: End Date of Service:** Click or tap to enter a date.
- **Work Location:** 550 High St. Suite 1000  
Jackson, MS 39201

Vendor hereby acknowledges and agrees that Vendor's Contingent Worker (Contingent Worker) to perform under this SOW is based on that Contingent Worker's skill and expertise to efficiently supplement DOM staffing needs. As such, Vendor hereby agrees to prioritize all job duties enumerated within this SOW as the Contingent Worker's primary employment obligation. In response to this SOW and prior to DOM's acceptance and approval of Contingent Worker, Vendor shall provide DOM advance written notice disclosing any outside work that Contingent Worker is currently performing and/or intends to perform for clients other than DOM during the active term of this SOW. DOM shall review Vendor's notice of Contingent Worker's outside work to screen for conflicts of interest and provide a written response indicating DOM's approval or disapproval of the outside work.

In the event of DOM's disapproval of Contingent Worker's outside work, the Purchase Order and/or SOW under which the Contingent Worker is retained for service shall be subject to termination pursuant to Article 13 of the Knowledge Services Master Agreement if Vendor elects to assign Contingent Worker to perform the outside work.

For the faithful performance of the terms of this Statement of Work, the parties hereto have caused this Statement of Work to be executed by their undersigned authorized representatives.

**Mississippi Department of Division of Medicaid**

Drew Snyder  
Authorized Signature

Drew Snyder  
Printed Name

Executive Director  
Title

4/14/2023 | 8:51:32 AM CDT  
Date

**GuideSoft Inc., d/b/a Knowledge Services**

Katie Belange  
Katie Belange (Mar 27, 2023 14:55 EDT)  
Authorized Signature

Katie Belange  
Printed Name

Corporate Counsel  
Title

Mar 27, 2023  
Date

**Vendor: SWB Consulting**

Stephanie W Bryant  
Authorized Signature

Stephanie W Bryant  
Printed Name

Owner  
Title

3/27/2023  
Date



## STATE OF MISSISSIPPI JOB POSTING QUESTIONNAIRE – REQUEST A CONTRACTOR

Email completed form and direct questions to the SOMS MSP Team: Doreen DeLancy doreend@knowledgeservices.com

Direct: 601.432.8123 Cell: 678.502.0617 CC: MSMSP@knowledgeservices.com

dotStaff Job Posting ID#: **Provided by Knowledge Services**

### 1. Position Overview

Posting Title	Medicaid Eligibility and Enrollment (E&E) Subject Matter Expert (SME)		# of Positions	2
Desired Career Level	SME		Education Level	Bachelors
Contract Start Date	Select Date	<input checked="" type="radio"/> ASAP	Contract End Date	4/1/2026
Project Name	Enter text here		Requesting Agency	MS Division of Medicaid
Work Location	Sillers Building and Remote			
Remote Option	Preference will be given to candidates who can work 40 hours a week at the DOM office, located in Jackson MS, for the duration of the contract. Alternatively, candidates who travel will be considered, however, they will be required to be in the office, in Jackson, MS, every other week, for the duration of the contract. If candidates are traveling, please propose fully loaded rate.			

### 2. Position Information

Shift Start Time	8	AM	Shift End Time	5	PM
Schedule Required	Mon - Fri <input checked="" type="checkbox"/>	Other (Please specify)	Enter text here		
Hours per Week	40	Overtime?	Occasional Overtime	Answer "yes" even if OT will be rare.	
On-Call Required	Yes	On-Call Details	See posting details		
Expenses Reimbursed	No	Travel	No	Travel Frequency	Occasional; In/Out of state
Criminal Background Check/Drug Screen Requirement	Waive Background Check/Drug Screen				
If "other" please explain	Enter text here				

### 3. Position Description and Job Skill Set

Description of the job functions the contractor will be expected to perform.

The Medicaid Eligibility and Enrollment (E&E) Subject Matter Expert (SME) will work with the Division of Medicaid (DOM) E&E team on procuring, implementing, upgrading, and maintenance of the DOM E&E systems.

The E&E SME will:

- Review and comment on project deliverables for completeness and content as assigned.
- Participates in Joint Application Design (JAD) sessions, Detailed Designed reviews, Agile sessions, project status meetings and any other Medicaid project meetings as necessary.
- Assist with tracking identified issues and verifying resolution.
- Work with the Systems Integrator and DOM Project Management to meet Medicaid Enrollment and Eligibility Outcome Based Certification as needed.
- Provide technical expertise to procurement, implementations, upgrades, and the continuous maintenance of the E&E systems;
- Assist in the integration of the E&E with other internal and external systems, services, and trading partners;
- Work to develop and document strategies to utilize standards for the integration with, and operation of, the E&E systems;
- Assist in the development of requirements for procurement of the E&E, E&E components, and related E&E services, tools, etc.
- Assist in development of test cases used for User Acceptance Testing (UAT) for changes in the E&E systems and related modules as well as assist in the UAT as needed by performing tests, analyzing and documenting defects and issues

-Work with other State of Mississippi Agencies and programs to ensure data freely flows between associated systems and services;  
 -Document and report status, opportunities, findings, and risks to DOM management as well as State and federal partners (Centers for Medicare and Medicaid Services, CMS), etc.  
 -Work closely with the DOM E&E project team on the technical and operational aspects of the DOME E&E and related systems (Enterprise Service Bus, ESB, etc.).

**Required Skills/Experience**

Provide the **minimum** required skills and/or experience the contractor must possess to qualify for this position. These requirements will be transferred to the Score Sheet and candidates without these requirements reflected on their resume will NOT be presented to the manager for consideration.

-4+ years experience with Eligibility systems, tools, and services  
 -3 years of working on IT projects that have critical timelines and deadlines and working with vendors to achieve these milestones as much as possible. Must have ability to adapt and overcome challenges of tight schedules.  
 -2 years experience facilitating meetings and discussions with both technical and non-technical staff  
 -1 years experience with E&E rules, requirements, and standards, such as the Affordable Care Act, the Centers for Medicare and Medicaid Services (CMS), Modified Adjusted Gross Income (MAGI) and non-MAGI Medicaid, Qualified Health Plans, Advance Premium Tax Credit (APTC), etc.  
 -1 years experience with technical integration of E&E systems with other payer and trading partner IT systems, including using standards-based Application Programming Interfaces (APIs)

**Preferred/Not Required**

Provide any skills/experience that would be helpful for the candidate to possess but **not** required. *Examples: Previous supervisory experience, WebLogic experience helpful, etc.*

-3 years experience working with E&E systems that utilize an Enterprise Service Bus (ESB)  
 -3 years of documenting and reporting project status and risks to management  
 -2 years experience with identity resolution systems, such as a Master Person Index (MPI)  
 -Knowledge of other State benefit programs (WIC, SNAP, etc.)

		Beginner: 1-2 years	Intermediate: 3-5 years	Advanced: 5-7 years	SME: 7+ years
Skill Set	Skill Level <i>(See key code above)</i>	Required/Preferred		Notes	
<b>Operating Systems</b>					
Enter text here	Select	Select		Enter text here	
Enter text here	Select	Select		Enter text here	
Enter text here	Select	Select		Enter text here	
<b>Programming Language/Development Tools</b>					
Enter text here	Select	Select		Enter text here	
Enter text here	Select	Select		Enter text here	
Enter text here	Select	Select		Enter text here	

Beginner: 1-2 years    Intermediate: 3-5 years    Advanced: 5-7 years    SME: 7+ years			
Skill Set	Skill Level <i>(See key code above)</i>	Required/Preferred	Notes
<b>Hardware</b>			
Enter text here	Select	Select	Enter text here
Enter text here	Select	Select	Enter text here
Enter text here	Select	Select	Enter text here
<b>Database Systems/Database Tools</b>			
Enter text here	Select	Select	Enter text here
Enter text here	Select	Select	Enter text here
Enter text here	Select	Select	Enter text here
<b>Framework/SLD/Methodology</b>			
Enter text here	Select	Select	Enter text here
Enter text here	Select	Select	Enter text here
Enter text here	Select	Select	Enter text here
<b>QA/Testing – Approaches, Application</b>			
Enter text here	Select	Select	Enter text here
Enter text here	Select	Select	Enter text here
Enter text here	Select	Select	Enter text here

4. Scoring Method	
Criteria	Score Percentage <i>Must equal 100%</i>
Resume Score	20%
Interview Score	45%
Cost Score	35%
Enter text here	Enter text here
Enter text here	Enter text here

5. Manager Information	
Is this your first time using the MSP to acquire temporary labor?	No
<b>Requesting Manager</b>	
<b>Manager Name</b>	Stephen Oshinsky
<b>Manager Phone</b>	601-359-6305
<b>Manager E-mail</b>	Stephen.Oshinsky@medicaid.ms.gov
<b>Report-To Manager</b>	
	Enter text here
	Enter text here
	Enter text here

Access to Bids / Resumes		
Name	Phone	Email
Enter text here	Enter text here	Enter text here
Enter text here	Enter text here	Enter text here
Enter text here	Enter text here	Enter text here

Timesheet Approver: Primary		
Name	Phone	Email
Stephen Oshinsky	601-359-6305	Stephen.Oshinsky@medicaid.ms.gov

Back-up Time Approver(s)		
Jacob Black	601-359-5774	Jacob.Black@medicaid.ms.gov
Enter text here	Enter text here	Enter text here
Enter text here	Enter text here	Enter text here

**FIRST TIME USERS:**

First time users of the MSP service must complete the following sections. Please consult with your accounting department to ensure invoices are routed correctly and contain the information necessary for the state of Mississippi to submit payment.

6. Invoicing:	
Please provide the specific information that must be included on the invoice for the agency to bill successfully. Example: PO#, Department Code, Bill Code, Rebill Code, etc.	
1.	Enter text here
2.	Enter text here
3.	Enter text here
4.	Enter text here

7. Invoice Recipient and Contact Information				
<b>PRIMARY CONTACT</b> <i>(KS invoices arrive on Wednesdays via email on the bi-weekly basis)</i>				
<b>First Name</b>	Enter text here	<b>Last Name</b>	Enter text here	
<b>Phone #</b>	Enter text here	<b>Email</b>	Enter text here	
<b>Complete Agency Name</b>	Enter text here			
<b>Street Address/PO Box</b>	Enter text here	<b>Suite/Floor</b>	Enter text here	
<b>City</b>	Enter text here	<b>State</b>	Enter text here	<b>Zip</b> Enter text here
<b>ADDITIONAL ACCOUNTING CONTACTS</b> <i>(Please indicate whom should receive a copy of the invoices via email)</i>				
<b>Name</b>		<b>Phone</b>		<b>Email</b>
Enter text here		Enter text here		Enter text here
Enter text here		Enter text here		Enter text here
Enter text here		Enter text here		Enter text here
Enter text here		Enter text here		Enter text here

8. Purchase Order Management	
Please tell us when the funding is requested and the PO is created for the agency to fund the services.	
Choose an item.	
<b>If "Other" please provide details</b>	Enter text here
<b>Please use this section to provide any additional pertinent information regarding your accounting process you feel KS should know.</b>	Enter text here