

Manage Contractor Information

CO Contractor Information Management	
Manage Contractor Information	
Item	Details
Description	<p>The Manage Contractor Information business process is responsible for managing all operational aspects of the Contractor (e.g., managed care, at-risk mental health or dental care, primary care physician, Recovery Audit Contractor (RAC)) data store. This business process receives a request for addition, deletion, or modification to Contractor information, validates the request, and applies the instruction.</p> <p>NOTE: Requires billing agents, clearinghouses, or other alternate payees (as defined by the Secretary) to register with Medicaid agency.</p>
Trigger Event	<p>Environment-based Trigger Events to include but not limited to:</p> <ul style="list-style-type: none"> • Receive request to create, inquire, delete, or modify contractor information from authorized individuals via email, mail, facsimile, telephone or web. • Receive request to verify contractor information from authorized external parties.
Result	<ul style="list-style-type: none"> • The State Medicaid Agency (SMA) creates, inquires on, deletes, or modifies contractor information. • Alert sent to notify Health Insurance Marketplace of provider network modification information. • Alert sent to notify insurance affordability program of provider network modification. • Alert to Manage Contractor Communication business process to notify contractor of relevant modifications. • Tracking information as needed for measuring performance and business activity monitoring.
Business Process Steps	<ol style="list-style-type: none"> 1. START: Receive request from authorized individuals or agencies to create, inquire, delete or modify contractor information. 2. Agency logs request for contractor information. 3. Validate information submitted is correct and as complete as possible. Information complies with syntax criteria and requestor has completed all required fields. 4. Validate authorization of requestor to acquire contractor information. 5. Find appropriate contractor. 6. Create, inquire, delete or modify relevant contractor information. 7. Send alert to notify Health Insurance Marketplace of provider network modification. 8. Send alert to notify insurance affordability program of provider network modification. 9. Send alert to Manage Contractor Communication business process to notify

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	provider of relevant modifications. 10. END: The SMA creates, inquires on, deletes, or modifies contractor information.
Shared Data	Contractor data store including contract information
Predecessor	<i>Manage Contract</i> <i>Close Out Contract</i>
Successor	<i>Perform Contractor Outreach</i> <i>Manage Contractor Grievance and Appeal</i> <i>Manage Contractor Communication</i> <i>Manage Data</i>
Constraints	Information requirements and data structures for the contractor data store may differ from state to state.
Failures	<ul style="list-style-type: none"> The SMA cannot find contractor information. The SMA cannot respond to a request (e.g., cannot change tax ID because it would change the contracted entity). Validation failed (e.g., address is not a legal address). Contract provides incomplete information (e.g., missing required information elements).
Performance Measures	<ul style="list-style-type: none"> Timeliness to complete process = within ____ days Accuracy with which changes are applied = ____% Consistency of decisions and disposition = ____% Error rate = ____% or less

Inquire Contractor Information

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Description	The <i>Inquire Contractor Information</i> business process receives requests for contract (e.g., managed care, at-risk mental health or dental care, Primary Care Physician (PCP)) verification from authorized providers, programs or business associates, performs the inquiry, and prepares the response for the Send Outbound Transaction .

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Trigger Event	<p>Interaction-based Trigger Events to include but not limited to:</p> <ul style="list-style-type: none"> • Receive contract verification request from Receive Inbound Transaction.
Result	<ul style="list-style-type: none"> • Contract verification response sent to requestor. • Tracking information as needed for measuring performance and business activity monitoring.
Business Process Steps	<ol style="list-style-type: none"> 1. START: Receive contract verification request. 2. Validate information submitted is correct and as complete as possible. Information complies with syntax criteria and requestor has completed all required fields. 3. Validate that the provided information is authentic. 4. Agency logs contract verification request. 5. Determine request status as initial or duplicate. 6. Query contractor data store for requested information. 7. Agency logs contract verification response. 8. END: Send contract verification response to requestor.
Shared Data	Contractor data store including contract information
Predecessor	Receive Inbound Transaction
Successor	Send Outbound Transaction Manage Contractor Information
Constraints	The State Medicaid Agency (SMA) determines what information to share.
Failures	<ul style="list-style-type: none"> • The SMA is unable to find contractor information. • The SMA is unable to respond to a request. • Validation failed. • Requestor provides incomplete information (e.g., missing required information elements).
Performance Measures	<ul style="list-style-type: none"> • Time to verify Contractor information and generate response information: e.g., Real Time response = within __ seconds, Batch Response = within __ hours • Response Accuracy = __% • Error rate = __% or less

Manage Contractor Communication

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Description	<p>The Manage Contractor Communication business process receives requests for information, appointments, and assistance from contractors (e.g., managed care, at-risk mental health or dental care, primary care physician) such as inquiries related to modifications in Medicaid Program policies and procedures, introduction of new programs, modifications to existing programs, public health alerts, and contract amendments, etc. This business process includes the log, research, development, approval, and delivery of routine or ad hoc messages. The State Medicaid Agency (SMA) communicates a variety of methods such as email, mail, publication, mobile device, facsimile, telephone, web or Electronic Data Interchange (EDI).</p> <p>NOTE: The Manage Contractor Communication business process handles current contractors by providing assistance and responses to <u>individual entities</u>, i.e., bi-directional communication. The Perform Contractor Outreach business process targets both prospective and current contractor populations for distribution of information regarding programs, policies, and other issues.</p> <p>Other examples of communications include:</p> <ul style="list-style-type: none"> • Pay for performance communications – performance measures could affect capitation payments or other reimbursements. • Incentives to improve encounter information quality and submission rates.
Trigger Event	<p>Interaction-based Trigger Events to include but not limited to:</p> <ul style="list-style-type: none"> • Receive request from other business processes to develop and produce communications for contractors such as notifications from Manage Contractor Information business process. <p>Environment-based Trigger Events to include but not limited to:</p> <ul style="list-style-type: none"> • Receive an inquiry from contractor. • Request to send information packages. • Request for assistance, such as a request for training or modify contractor information. • Periodic timetable (e.g., monthly) is due to send information (e.g., within 24 hours of new contract award and periodic communications such as newsletters or other agency communications).
Result	<ul style="list-style-type: none"> • Contractor receives appropriate assistance, communications, and/or information packages. • Tracking information as needed for measuring performance and business activity monitoring.

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Business Process Steps	<ol style="list-style-type: none"> 1. START: Receive request for communication. 2. Validate information submitted is correct and as complete as possible. Information complies with syntax criteria and requestor has completed all required fields. 3. Validate that the provided information is authentic. 4. Agency logs request for communication. 5. Determine content and method of communication (e.g., email, mail, publication, mobile device, facsimile, telephone, web, or EDI). 6. Prepare content that is linguistically, culturally, and competency appropriate for the communication in agreed upon format. 7. Review and approve communication. 8. Generate communication in agreed upon format. 9. Agency logs communication message. 10. END: Evaluate the efficacy of the communication (e.g., customer satisfaction, first time resolution rate).
Shared Data	<p>Contractor data store including contract information</p> <p>Plan data store including health benefit information</p>
Predecessor	<p>Receive Inbound Transaction</p> <p>Award Contract</p> <p>Manage Contract</p> <p>Close Out Contract</p> <p>Manage Contractor Information</p> <p>Inquire Contractor Information</p> <p>Manage Contractor Grievance and Appeal</p> <p>Maintain State Plan</p> <p>Manage Health Plan Information</p> <p>Manage Health Benefit Information</p> <p>Manage Performance Measures</p>
Successor	<p>Send Outbound Transaction</p> <p>Manage Performance Measures</p>
Constraints	<p>Communications will vary by state, by type of contractor, and by type of communication.</p> <p>Contractor may have communication barriers such as lack of internet or phone</p>

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	access. Contractor is unable to access needed or requested information.
Failures	<ul style="list-style-type: none"> The SMA is unable to provide linguistically, culturally, or competency appropriate information. Delivery failures due to erroneous contact information or lack of contact information.
Performance Measures	<ul style="list-style-type: none"> Time to complete response: By phone __ minutes; by email __ hours; by mail __ days Accuracy of communications = __% Communications successfully delivered = __%

Perform Contractor Outreach

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Perform Contractor Outreach	
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Description	<p>The Perform Contractor Outreach business process is responsible for sending information such as public health alerts, new programs, and/or modifications in the Medicaid Program policies and procedures.</p> <p>For prospective contractors (e.g., managed care, at-risk mental health or dental care, primary care physician), States Medicaid Agency (SMA) develops contractor outreach information for prospective contractors identified by analyzing Medicaid business needs.</p> <p>For currently enrolled contractors, information may relate to public health alerts, public service announcements, and other objectives.</p> <p>The SMA communicates contractor outreach information by a variety of methods such as email, mail, publication, mobile device, facsimile, telephone, web or Electronic Data Interchange (EDI). The SMA produces, distributes, tracks, and archives all contractor outreach communications according to state rules.</p>
Trigger Event	<p>Environment-based Trigger Events to include but not limited to:</p> <ul style="list-style-type: none"> Executive Management decision to: <ul style="list-style-type: none"> Fill gaps in health care service and administrative coverage. Solicit updated/new administrative and technical functions. Introduce new programs requiring new types of health or administrative service. Change to existing policies and procedures. Respond to critical need in a specific target population. Identify new populations in need of service (e.g., new immigrant

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	<p>communities).</p> <ul style="list-style-type: none"> • State transition-based trigger events: <ul style="list-style-type: none"> ◦ Alert received from Manage Health Plan Information business process of addition or modification. ◦ Alert received from Manage Health Benefit Information business process of addition or modification.
Result	<ul style="list-style-type: none"> • Agency produces outreach communications (e.g., mailing brochure, web page, email, kiosk, radio, billboard, and TV advertisements) and distributes to targeted contractors. Agency may also conduct face-to-face meetings. • Tracking information as needed for measuring performance and business activity monitoring.
Business Process Steps	<ol style="list-style-type: none"> 1. START: Receive request for outreach materials or communication. 2. Target population identified and defined by analyzing information, performance measures, feedback from community, and policy directives. 3. Approve, deny, or modify decisions to develop outreach communications. 4. Determine content and method of communication (e.g., email, mail, publication, mobile device, facsimile, telephone, web or EDI). 5. Determine performance measures. 6. Prepare content that is linguistically, culturally, and competency appropriate for the communication in agreed upon format. 7. Review and approve communication. 8. Generate communication in agreed upon format. 9. Agency logs communication message. 10. END: Evaluate the efficacy of the communication (e.g., customer satisfaction, first time resolution rate)
Shared Data	<p>Contractor data store including provider network information</p> <p>Plan data store including policy information</p> <p>Health Benefits data store including benefit package and benefits information</p> <p>Performance Measures data store including agency's objectives (e.g., Consumer Assessment of Healthcare Providers and Systems (CAPHS) and Healthcare Effectiveness Data and Information Set (HEDIS) information)</p>
Predecessor	<p>Manage Performance Measures</p> <p>Identify Utilization Anomalies</p> <p>Maintain State Plan</p> <p>Manage Health Plan Information</p>

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	Manage Health Benefit Information
Successor	Send Outbound Transaction Manage Contractor Communication Manage Performance Measures
Constraints	<p>Communications and information packages will address the needs of the targeted population. Materials will be linguistically and culturally appropriate, legally compliant, appropriate to the targeted group, and meet financial guidelines (re: cost to produce and distribute). Other constraints may be agency priority, availability of resources, and accuracy of contractor contact information.</p> <p>Contractor may have communication barriers such as lack of internet or phone access. Contractor is unable to access needed or requested information.</p>
Failures	<ul style="list-style-type: none"> • Unable to identify target population based on desired criteria. • Management denies permission for outreach activity. • The SMA cancels health plan or health benefit. • Delivery failures due to erroneous contact information.
Performance Measures	<ul style="list-style-type: none"> • Time to complete process of developing outreach materials = ___ days • Accuracy of outreach materials = ___ % • Successful delivery rate to targeted individuals = ___ % • Effectiveness of the communication – Outreach results in achieving specified goals

Manage Contractor Grievance and Appeal

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Description	<p>The Manage Contractor Grievance and Appeal business process handles contractor (e.g., managed care, at-risk mental health or dental care, primary care physician) appeals* of adverse decisions or communications of a grievance. The Manage Contractor Communication business process initiates a grievance or appeal. The State Medicaid Agency (SMA) logs and tracks the grievance or appeal; it triages to appropriate reviewers; it researches it; it may request additional information; it schedules and conducts a hearing in accordance with legal requirements; and it makes a ruling based upon the evidence presented. Staff documents and distributes results of the hearings, and adds relevant documents to the contractor's information. Agency formally notifies contractor of the decision.</p> <p>This business process supports the Manage Performance Measures business</p>

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	<p>process by providing information about the types of grievances and appeals it handles; grievance and appeals issues; parties that file or are the target of the grievances and appeals; and the dispositions. This information used to discern program improvement opportunities, which may reduce the issues that give rise to grievances and appeals.</p> <p>Based on the appeal business process, if a contractor wins an appeal that impacts or clarifies a Medicaid State Plan, health plan, or health benefit this process sends that information to Maintain State Plan, Manage Health Plan Information or Manage Health Benefit Information business processes to modify the relevant policy or procedure. Disposition could result in legislative change requirements that will be communicated to lawmakers.</p> <p>NOTE: States may define grievance and appeal differently, perhaps because of state laws.</p> <p>*This business process supports grievances and appeals for both prospective and current contractors. A non-enrolled contractor can file a grievance or appeal, for example, when agency does not award a contract to contractor. Protests received from prospective contractors are addressed in the Award Contract business process</p>
Trigger Event	<p>Environment-based Trigger Events to include but not limited to:</p> <ul style="list-style-type: none"> • Receive grievance or appeal alert from Manage Contractor Information business process. • Receive grievance or appeal alert from Award Contract business process.
Result	<ul style="list-style-type: none"> • Alert to send notification of final disposition of grievance or appeal to the contractor. • If applicable, alert sent to Establish Compliance Incident business process for further investigation. • If applicable, alert sent to Maintain State Plan business process to modify the relevant policy or procedure. • If applicable, alert sent to Manage Health Plan Information business process to modify the relevant policy or procedure. • If applicable, alert sent to Manage Health Benefit Information business process to modify the relevant policy or procedure. • Tracking information as needed for measuring performance and business activity monitoring.
Business Process Steps	<ol style="list-style-type: none"> 1. START: Receive grievance or appeal. 2. Agency logs grievance or appeal. 3. Validate information submitted is correct and as complete as possible. Information complies with syntax criteria and submitter has completed all required fields.

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	<p>4. Validate that the provided information is authentic.</p> <p>5. If appropriate, request additional documentation.</p> <p>6. Determine status as initial, second, expedited or other status as designated by the state.</p> <p>7. Triage to appropriate personnel for review.</p> <p>8. Perform research and analysis.</p> <p>9. If appropriate, schedule hearing within required time limit.</p> <p>10. If appropriate, conduct hearing within required time limit.</p> <p>11. Determine disposition.</p> <p>12. If applicable, send alert to Establish Compliance Incident business process for further investigation.</p> <p>13. If applicable, alert sent to Maintain State Plan business process to modify the relevant policy or procedure.</p> <p>14. If applicable, alert sent to Manage Health Plan Information business process to modify the relevant policy or procedure.</p> <p>15. If applicable, alert sent to Manage Health Benefit Information business process to modify the relevant policy or procedure.</p> <p>16. END: Send alert to notify contractor of disposition determination.</p> <p>NOTE: Some of the above steps may be iterative and a grievance or appeals case may take many months to finalize.</p>
Shared Data	<p>Contractor data store including provider network and contract information</p> <p>Grievance and Appeal data store including case history information</p> <p>Claims data store including claims and premium Information</p>
Predecessor	<p>Manage Contractor Information</p> <p>Award Contract</p>
Successor	<p>Manage Contractor Communication</p> <p>Maintain State Plan</p> <p>Manage Health Plan Information</p> <p>Manage Performance Measures</p> <p>Establish Compliance Incident</p>
Constraints	States have different requirements for evidence and the process for conducting the grievance/appeals cases. They have different rules for assigning outcome status and state specific consequences.

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Failures	<ul style="list-style-type: none"> • Grievance and appeal supporting documentation is incomplete. • The SMA cannot schedule or conduct hearing in the required period. • Contractor withdraws grievance or appeal. • Unable to process grievance or appeal per federal or state law.
Performance Measures	<ul style="list-style-type: none"> • Time to complete process: normal grievance/appeal = ___ days; second appeal = ___ days; expedited appeal = ___ hours • Accuracy of decisions = ___ % • Consistency of decisions and disposition = ___ % • Error rate = ___ % or less

Produce Solicitation

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Produce Solicitation	
Item	Details
Description	The Produce Solicitation business process gathers requirements, develops a solicitation (e.g., Request for Information (RFI), Request for Quotation (RFQ), or Request for Proposals (RFP)), receives approvals for the solicitation, and releases for response.
Trigger Event	Environment-based Trigger Events to include but not limited to: <ul style="list-style-type: none"> • A scheduled date for re-procurement of contract is due. • Request by Executive Management to procure or re-procure a contract.
Result	<ul style="list-style-type: none"> • The State Medicaid Agency (SMA) produces an Advance Planning Document (APD). • The SMA produces a solicitation for distribution. • Tracking information as needed for measuring performance and business activity monitoring.
Business Process Steps	<ol style="list-style-type: none"> 1. START: Receive directive to procure or re-procure contract. 2. Gather requirements for services. 3. Determine if CMS requires an APD. <ol style="list-style-type: none"> a. Produce APD. b. Modify APD as directed. c. Receive approval for APD.

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	<p>4. Develop solicitation for the services.</p> <p>5. Receive internal (state) and federal approvals for solicitation.</p> <p>6. Advertise solicitation.</p> <p>7. END: The SMA releases solicitation for response.</p>
Shared Data	<p>Plan data store including policy information</p> <p>Health Benefit data store including benefit package and benefit information</p> <p>Contractor data store including provider network</p> <p>Manage Performance Measures data store including agency objectives and business activity</p> <p>Information Technology (IT) Plan</p>
Predecessor	Manage Health Plan Information
Successor	Award Contract
Constraints	Each state decides what types of contracts to procure. States engage in a wide range of contracts. Statutes that provide the legal framework for procurements govern all States. Each state's statutes are different from all other States. Business process steps differ from state to state.
Failures	<ul style="list-style-type: none"> The SMA loses funding for the procurement. Insufficient responses to solicitation.
Performance Measures	<ul style="list-style-type: none"> Time to complete process = ____ months; ____ weeks Accuracy of information = ____ % Accessibility of information for creating solicitation = ____ months; ____ weeks Consistency of decisions and disposition = ____ % Error rate = ____% or less

Award Contract

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Description	The Award Contract business process utilizes requirements, advanced planning documents, requests for information, request for proposal, and sole source documents to request and receive proposals, verify proposal content against

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	<p>Request for Proposal (RFP) or sole source requirements, apply evaluation criteria, designate contractor/vendor, post award information, entertain protests, resolve protests, negotiate contracts, and notify parties. In some States, this business process makes a recommendation of award instead of the actual award itself.</p> <p>NOTE: The State Medicaid Agency (SMA) requires billing agents, clearinghouses, or other alternate payee (as defined by the Secretary) to register.</p>
Trigger Event	<p>Environment-based Trigger Events to include but not limited to:</p> <ul style="list-style-type: none"> • Receive respondent's proposal or approval for sole source.
Result	<ul style="list-style-type: none"> • Alert to send notification of award status to respondent. • The SMA negotiates contract with awarded contractor. • Tracking information as needed for measuring performance and business activity monitoring.
Business Process Steps	<ol style="list-style-type: none"> 1. START: Receive respondent's proposal (e.g., email, mail, web, or Electronic Data Interchange (EDI)). 2. Conduct collection of contractor information. 3. Validate information submitted is correct and as complete as possible. Information complies with syntax criteria and respondent has completed all required fields for the type of contractor. 4. If applicable, request additional information. 5. Validate information provided is authentic (e.g., corporate status). 6. Validate contractor network, resources, and other requirements and obtain appropriate approvals (i.e., state, federal). 7. Assign identification to the respondent. 8. Verify proposal content against RFP or sole source requirements. 9. Apply evaluation criteria to respondent's proposal. 10. Make determination of awarded contractor. 11. Post award information. 12. Send alert to notify respondent of award results (e.g., award/recommend, deny, or continue negotiations). 13. If applicable, send alert to Manage Contractor Grievance and Appeal business process to receive protests and disposition protests. 14. END: Negotiate contract with contractor, collect additional information required to complete a contract, negotiate, and assign rates or other form of payment.
Shared Data	Contractor data store including provider network and contract information
Predecessor	Receive Inbound Transaction

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Award Contract	
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	<i>Produce Solicitation</i>
Successor	Send Outbound Transaction Manage Contractor Communication Manage Contract Manage Contractor Grievance and Appeal
Constraints	The Contractor application will accommodate the full range of contractor types.
Failures	<ul style="list-style-type: none"> • Information does not comply with syntax criteria. • Not all required information provided. • Information provided not authenticated. • Parties are unable to negotiate contract (e.g., no agreement on rates). • The SMA loses funding. • Responder successfully protests an award.
Performance Measures	<ul style="list-style-type: none"> • Time to complete process = ____ months; ____ weeks • Accuracy of information = ____ % • Accessibility of information for creating solicitation = ____ months; ____ weeks • Consistency of decisions and disposition = ____ % • Error rate = ____% or less

Manage Contract

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Description	The Manage Contract business process receives the contract award information, implements contract-monitoring procedures, updates contract if needed, and continues to monitor the terms of the contract throughout its duration.
Trigger Event	Environment-based Trigger Events to include but not limited to: <ul style="list-style-type: none"> • Receive negotiated contract information from Award Contract business process. • Periodic timetable (e.g., yearly) is due for contract review. • External event (e.g., policy, budget modification) necessitates contract amendment.

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	<ul style="list-style-type: none"> • Receive contract modifications (e.g., create, updated, or delete). • Receive terminate contract information from Close Out Contract business process.
Result	<ul style="list-style-type: none"> • Modified negotiated contract. • If applicable, alert sent to Manage Contractor Information business process with modification information. • Alert to send notification to contractor of modification to contract. • Tracking information as needed for measuring performance and business activity monitoring.
Business Process Steps	<ol style="list-style-type: none"> 1. START: Receive contract award information from the Award Contract business process or contract update information from the Manage Contractor Communication business process. 2. Implement contract or modifications to contract. 3. If applicable, update contract with amendments. 4. If applicable, send alert to Manage Contractor Information business process with modified information. 5. END: Send alert to Manage Contractor Communication business process to notify contractor of modifications.
Shared Data	Contractor Information Data Store
Predecessor	Award Contract Close Out Contract
Successor	Manage Contractor Communication Manage Contractor Information
Constraints	Business rules and/or policies may differ by state.
Failures	<ul style="list-style-type: none"> • The State Medicaid Agency (SMA) loses funding. • Responder successfully protests an award. • The SMA fails to negotiate terms of contract or modification. • Information does not comply with syntax criteria. • Not all required information provided. • Information provided not authenticated.
Performance Measures	<ul style="list-style-type: none"> • Time to complete process = ____ months; ____ weeks • Accuracy of information = ____ %

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	<ul style="list-style-type: none"> • Accessibility of information for creating solicitation = ___ months; ___ weeks • Consistency of decisions and disposition = ___ % • Error rate = ___% or less

Close Out Contract

CO Contract Management	
Close Out Contract	
Item	Details
Description	The Close Out Contract business process begins with an expired contract or an order to terminate a contract. The business process ensures the obligations of the current contract are complete and the turnover to the new contractor proceeds according to contractual obligations.
Trigger Event	<p>Interaction-based Trigger Events to include but not limited to:</p> <ul style="list-style-type: none"> • Receive alert from Determine Adverse Action Incident business process to cease activities with contractor. <p>Environment-based Trigger Events to include but not limited to:</p> <ul style="list-style-type: none"> • Contract reaches the end of its effective period.
Result	<ul style="list-style-type: none"> • The contract closes. • Alert sent to notify contractor of termination of contract. • Tracking information as needed for measuring performance and business activity monitoring.
Business Process Steps	<ol style="list-style-type: none"> 1. START: Receive expired contract or instruction to terminate a contract. 2. Validate information submitted is correct and as complete as possible. Information complies with syntax criteria and submitter has completed all required fields. 3. If applicable, request additional information. 4. Validate information provided is authentic. 5. Identify all requirements for termination of contract. 6. Monitor closure activities. 7. Officially terminate contract. 8. END: Send alert to notify contractor of termination of contract.
Shared Data	Contractor data store including contract information

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Predecessor	<p><i>Award Contract</i></p> <p><i>Determine Adverse Action Incident</i></p>
Successor	<p><i>Manage Contractor Communication</i></p> <p><i>Manage Contractor Information</i></p>
Constraints	Each state may have its own requirements for contract termination.
Failures	<ul style="list-style-type: none"> • The State Medicaid Agency (SMA) receives incomplete termination instructions. • Contractor data store contains invalid information.
Performance Measures	<ul style="list-style-type: none"> • Time to complete process = ____ months; ____ weeks • Accuracy of information = ____ % • Accessibility of information for terminating contract = ____ months; ____ weeks • Consistency of decisions and disposition = ____ % • Error rate = ____% or less