



## About HMS

Healthcare Management Solutions, LLC (HMS) is not just a company...we're a cause, lived out by our people and partners every day. We deliver a unique combination of healthcare experience and innovative IT capabilities, enabling customers to achieve new levels of efficiency and effectiveness.

## Clinical Compliance and Quality Services

Our team of front-line surveyors assess facility compliance with Medicare Conditions of Participation while conducting over 500 yearly onsite inspections for initial, recertification, complaint, and life safety code surveys of long-term care (LTC) and non-long-term care (NLTC) facility types, including:

- Skilled Nursing Facilities (Nursing Homes)
- End-Stage Renal Disease (ESRD)
- Hospice
- Home Health Agencies
- Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)
- Hospitals (all types)
- Outpatient Physical Therapy/Outpatient Speech Pathology
- Comprehensive Outpatient Rehabilitation Facilities (CORFs)
- Rural Health Clinics
- Ambulatory Surgical Centers (ASCs)
- Portable X-ray

These onsite surveys ensure facilities are providing quality services to and ensuring the safety of patients and residents throughout the U.S. and its territories.

## Management Consulting

Our management consultants evaluate state survey agency (SA) practices and organizational issues and assist in restructuring or enhancing their survey programs. These SA subject matter experts have years of experience in SA program management, SA training program development, application development, quality assurance, data analysis, legal review, compliance monitoring, IT consulting, surveying, CMS systems administration, and many other areas.

## Health Plan Compliance Review

We review the Qualified Health Plans (QHPs) offered on Healthcare.gov for compliance with regulations that govern enrollment and disenrollment processes and periods, health plan application and notices, handling of complaints, network adequacy standards, privacy and security requirements, rate setting, and benefit information.

## Health IT Services

We work closely with our customers to identify opportunities where efficiencies can be gained through implementation of IT solutions. Our knowledge and experience within the industry, coupled with our strong process methodologies, allow our team to recommend and implement commercial and/or custom solutions that provide cost and time savings for our customers.

# Medicare Premium Exception Reconciliation

We investigate and resolve automated system exceptions associated with the Medicare beneficiary enrollments, direct billing, or third-party transactions on behalf of CMS. Exceptions are reconciled in accordance with the Code of Federal Regulation and CMS guidance to ensure beneficiaries are not incorrectly disenrolled from Medicare.

## Data Collection, Analysis, and Reporting

We design data analysis studies, create tools and protocols for data collection, collect primary data, identify sources for secondary data, and analyze the data. We streamline processes for Accrediting Organizations and medical countermeasures reporting through customized software solutions and COTS modifications.

## Software Development

Our development processes have been appraised at a Capability Maturity Model Integration (CMMI) – Development Maturity Level 3. Our process methodology includes a variety of templates, standards, and checklists to ensure quality and consistency when managing projects and is leveraged on every project to assess feasibility, cost, effectiveness, and benefits of implementing custom solutions where commercial off-the-shelf (COTS) tools are not applicable. We also leverage development, testing, and staging environments for application testing and deployments. We do SharePoint and SharePoint workflow development and customization and Salesforce development and customization.

## Testing

We are also adept at conducting independent verification & validation of systems, applications, integration efforts, documentation and artifacts, processes, systems configuration, deployment operations, design architectures including ICDs, and data related activities such as reconciliation or migration endeavors. As a part of our IV&V testing activities, a variety of approaches are used including regression tests, user acceptance testing, smoke tests, unit testing, integration tests, and performance assessments. In addition, we incorporate automated testing strategies to streamline regression testing activities related to critical path tests, frequently executed tests, data reconciliation, and/or other repetitive scripts that provide assurance to the overall quality of our products.

## Clinical Quality Data Validity and Reliability Testing

CMS subscribes to models of paying for care based on quality rather than volume. To support this effort, we perform data validation on large, clinical quality datasets. CMS uses these datasets to determine payment adjustments to providers. We also create a sample, request and review supporting documentation and medical records for the sampled data and compare our results with the dataset to determine error rates.

## Contact Us

### William Turner

Chief Strategy Officer  
PH: 304.368.0288  
Cell: 813.351.0350  
Email: WTurner@hcmsllc.com

### Leah Heimbach

President  
PH: 304.368.0288  
Cell: 304.290.1960  
Email: LHeimbach@hcmsllc.com

**DUNS #:** 127149784

**Website:** www.hcmsllc.com

**Email:** Proposals@hcmsllc.com

**Address:** 1000 Technology Drive,  
Suite 1310, Fairmont, WV 26554

### GSA-PSS and IT 70

**PSS:** GS-00F-295CA  
**IT:** GS-35F-0001Y

### CMS SPARC WOSB

**Contract #:**  
HHSM5002016000371

### CIOSP3 SB

**Contract #:**  
75N98120D00145

### PSC IDIQ

**Contract #:**  
HHSP-233-2015-001081