

11.11 ATTACHMENT 11 – KEY STAFF REFERENCE FORM

Instructions:

For each Key Staff role, provide two (2) Individual References from two different Projects cited in the **Attachment 10, Part 2 - Key Staff Minimum Qualification Table**, unless only one (1) project is used that meet the MQs identified in this RFP. If only one (1) cited project meets the MQs, then two references from that project are required. Each Individual Reference must clearly identify the Customer/Client Reference individual and that individual's Agency, Department, Organization or Company where Key Staff performed the experience.

The Individual references must be submitted within the Business Proposal as defined within RFP Section 6 - Proposal Structure and Submission including signature of the customer/client reference.

References:

Provide two customer/client references from customers/clients who have first-hand knowledge of the job skills, experience, and abilities cited in the résumé.

The Consortium reserves the right to contact individuals, entities, or organizations who have had contracts or relationships with the Key Staff proposed for this effort, whether or not they are identified as references, to verify that the person has successfully performed their contractual obligations on other similar projects.

Table 1 - Key Staff Reference Form

KEY STAFF REFERENCE FORM	
Key Staff Name: Shonna Clark	
Part 1 – Reference's Information	
This information should match the information provided in Attachment 10 – Key Staff Resumes/Qualifications .	
Customer/Client Reference Name:	Kimberly Hagan
Customer/Client Reference Title	Director of Member Services
Agency, Department, Organization or Company where Staff member performed:	Division of TennCare
Project Title on which Staff member performed	TennCare Digital Adoption
Reference Phone Number:	[REDACTED]
Reference E-mail Address:	[REDACTED]

Instruction for References: The Contractor Staff above has listed you as a reference and is requesting for you to complete this Staff Reference Form. Please provide your comments and the appropriate rating based on your experience with the proposed Staff.

- Step 1:** Complete Columns 1-2 in Part 2 by marking “yes” or “no” and providing an explanation if needed.
- Step 2:** Complete Part 3 and provide your performance ratings.
- Step 3:** At the bottom of the page, print your name, your company’s name, then sign and date.
- Step 4:** Return the completed, signed Staff Reference Form to Contractor.

Part 2 – The Reference Must Complete This Table.	
COLUMN 1	COLUMN 2
Did the Contractor provide you with a copy of the completed Attachment 10 – Key Staff Resumes /Qualifications for the Contractor's Staff named at the top of this page prior to your completion of this form?	Did the Contractor's Staff named at the top of this page perform the services described in Attachment 10 – Key Staff Resumes /Qualifications , including the functions as described and the time period provided on the project(s) that lists you as a contact?
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If "No" checked, explain here.)

Part 3 – The Reference Must Complete This Table.
The Reference shall complete performance and abilities statements for the proposed candidate and overall performance rating.
Performance and Ability Statements
<p>1. Describe the performance of the Contractor's Staff during this engagement.</p> <p>Shonna has served as the project lead for our TennCare Digital Adoption campaign since February 2023. Shonna and her team successfully lead a digital marketing campaign aimed at nudging people to the TennCare Connect portal to create an account and renew their Medicaid coverage online. During the PHE unwind, the team supported the submission of over 43,000 renewal applications and the creation of over 93,000 online accounts.</p>
<p>2. Describe the ability of the Contractor's Staff to perform the contractually, required work in a timely manner.</p> <p>Shonna and her staff have delivered against the contract on time and schedule and within budget. If any issues arose, the team would come up with a solution to mitigate with little impact to the campaign.</p>
<p>3. Describe the verbal and written communication skills of the Contractor's Staff.</p> <p>Shonna and her team conduct regular status and campaign report meetings with our staff and clearly articulate project activities, status and upcoming dates of importance as well as the latest campaign metrics and optimizations. Written communication is also very clear and action oriented.</p>
<p>4. Describe the ability of the Contractor's Staff to engage in positive working relationships with other coworkers.</p>

Part 3 – The Reference Must Complete This Table.	
The Reference shall complete performance and abilities statements for the proposed candidate and overall performance rating.	
Shonna and the staff are always professional and courteous to our staff and her own. They easily collaborate with us and with the other Deloitte project teams.	
5. Describe the knowledge of the Contractor's Staff in the required areas of expertise.	The Deloitte team is very knowledgeable in digital marketing and have successfully executed their campaign as well as recommended any optimizations when needed to improve performance. When our team has had questions about campaign execution, performance or in general about the campaign platforms, the team has helped us understand processes, policies, and metrics so we can feel comfortable about the work they are doing.
6. How well did the Contractor handled engagement with end users and User input.	While the team did not engage with the public, Shonna and her staff incorporated feedback from both the Deloitte and State Security and Policy teams, as well as other Deloitte workstreams, into their campaign plan, execution, and optimizations to best reach the campaign's target audience (TennCare members) while following required protocol.
7. Would you rehire this person?	Yes.
8. Optional Comments:	
On a scale of 1-10, with 1 being the lowest and 10 being the highest, how would you rate this individual's overall performance?	
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By signing this form, the Reference is certifying that all information provided on this form is correct.

Kimberly Hagan

Division of TennCare

Name of Reference (print)

Name of Company Reference (print)



7/24/24

Date