

**H.R. 1 Community Engagement & AHCCCS Work Requirements
Communications
AHCCCS Task Order No. YH26-0082**

PREPARED FOR

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)

**Solicitation No. BPM007365
Statewide Marketing, Advertising and Public Relations Services**

**Prepared By:
ANDERSON Advertising & Public Relations
In Strategic Partnership with Accenture
5800 E. Thomas Road, Suite 100
Scottsdale, Arizona 85251**

06/02/2026

ANDERSON

June 2, 2026

Dear Tiffanie & Evaluation Committee,

On behalf of ANDERSON Advertising & Public Relations, I am pleased to submit our response to AHCCCS Task Order No. YH26-0082 for H.R. 1 Community Engagement & AHCCCS Work Requirements Communications.

When healthcare access hangs in the balance, every message matters. AHCCCS members across Arizona need to understand new work requirements that directly impact their eligibility, so there is no room for confusion — and no room for vague commitments. AHCCCS needs a partner that can tell you exactly what we will do, when we will do it, and how we will measure success.

Here is what ANDERSON will do for AHCCCS:

- In Phase 1, we will conduct 5 structured stakeholder listening sessions within the first 30 days, engaging 7 distinct stakeholder groups — including AHCCCS members, providers, MCOs, advocacy organizations, Tribal communities, community-based organizations, and internal AHCCCS teams — and deliver a written Stakeholder Input Plan to AHCCCS for approval within 10 business days of contract execution.
- In Phase 2, we will develop a plain-language message library covering all 6 required member communication topics, 4 audience-specific message variants, and toolkits for providers, health plans, and community partners — with all deliverables submitted to AHCCCS and CMS prior to the September 1 public launch.
- In Phase 3, beginning September 1, 2026, we will activate a coordinated statewide campaign across 8+ channels — including paid digital, social media, email, provider bulletins, earned media, community outreach, and web — with a published weekly deployment schedule and version-controlled content log provided to AHCCCS.
- In Phase 4, we will deliver monthly performance reports to designated AHCCCS stakeholders by the 10th of each month, including channel performance data, audience engagement metrics, KPI dashboard updates, and data-driven optimization recommendations.

As a current State contractor with 20+ years serving Arizona public agencies, we understand the operational discipline, CMS coordination requirements, and community responsiveness this task order demands. And as lifelong Arizonans, we take seriously the responsibility of helping members maintain their healthcare coverage.

We are ready to begin upon contract award.

Sincerely,



Ted Anderson
President & CEO
ANDERSON Advertising & Public Relations

Contract No. BPM007365
Primary Contact: Ted Anderson, 602.790.1144, ted@anderson-adv.com



EXECUTIVE SUMMARY

The implementation of H.R. 1 AHCCCS community engagement requirements is one of the most complex member communication challenges AHCCCS has faced — and ANDERSON is ready to execute it with discipline, measurable accountability, and a clear operational plan.

Here is exactly how we will meet your four objectives:

AWARENESS	We will reach AHCCCS members across key segments through coordinated paid media, digital, SMS, and community outreach — with channel-specific deployment beginning September 1, 2026.
UNDERSTANDING	We will develop a plain-language message library of 6 core member topics, adapted into 4 message variants and available in English, Spanish, and additional languages as determined by Phase 1 audience insights.
ACTION	Every communication will include a clear call-to-action with direct links to reporting tools, address update portals, and compliance resources. We will track action completion rates monthly and optimize based on data.
SUPPORT	We will deliver provider toolkits, health plan briefing packages, and community partner resources — coordinated through AHCCCS-owned distribution channels — equipping frontline staff to answer member questions accurately.

WE ARE **ANDERSON**

ANDERSON Advertising & Public Relations is a full-service agency headquartered in Scottsdale, Arizona, with more than 20 years of experience delivering complex public-sector communications for state agencies, healthcare organizations, and statewide initiatives. As a current State contractor under Solicitation No. BPM007365, we are operationally ready to begin upon contract award.

What Makes ANDERSON the Right Partner for This Task Order:

1 CURRENT STATE CONTRACTOR

Existing contract infrastructure means no onboarding delay. We understand AHCCCS approval workflows, reporting standards, and procurement documentation requirements.

2 INTEGRATED TEAM UNDER ONE ROOF

Strategy, creative, media, digital, PR, outreach, and analytics – no handoffs to external vendors for core deliverables. Faster turnarounds and consistent messaging.

3 ARIZONA-ROOTED, CULTURALLY FLUENT

Dedicated multicultural partners for Tribal outreach, Hispanic community engagement, and bilingual content ensure messaging reaches every audience AHCCCS serves.

4 ACCENTURE STRATEGIC ADVISORY

Our strategic partnership with Accenture brings public-sector social awareness advisory expertise and AHCCCS institutional knowledge to guide communications strategy.

PROJECT MANAGEMENT & GOVERNANCE

ANDERSON will implement a structured governance framework from day one. The following details exactly how we will manage this engagement.

MEETING CADENCE

MEETING TYPE	FREQUENCY	PARTICIPANTS	PURPOSE & OUTPUT
Weekly Status Update	Every Monday, 9:00 AM	ANDERSON + AHCCCS	Deliverable status, upcoming deadlines, issue log review. Output: written status recap sent within 24 hours.
Monthly Stakeholder Briefing	First Thursday of each month	AHCCCS Leadership, ANDERSON, Accenture Advisor	Performance dashboard review, optimization decisions, phase planning. Output: Monthly Performance Report submitted by the 10th.
Quarterly Strategic Review	End of each quarter	AHCCCS Leadership + ANDERSON, Accenture Advisor	Comprehensive review of campaign impact, budget utilization, strategy adjustments, and next-phase planning.

KEY DOCUMENTS WE WILL PRODUCE

- Stakeholder Input Plan — submitted to AHCCCS within 10 business days of contract execution for approval before any engagement begins
- Master Content Calendar — updated weekly, showing all scheduled publications across all channels with responsible party and approval status
- Version-Controlled Content Log — every asset tracked with version number, approval date, and publish date; maintained in shared project management system accessible to AHCCCS
- Monthly Performance Report — delivered by the 10th of each month; includes KPI dashboard, channel analytics, audience engagement summary, and 3 optimization recommendations
- Publication Compliance Report — submitted with each content deployment; confirms accessibility validation, language compliance, and approval documentation
- Issue Log — maintained continuously; any deviation from plan documented with root cause, resolution, and timeline impact within 24 hours

APPROVAL WORKFLOW

All content follows a structured 4-step approval process before publication:



ANDERSON INTERNAL REVIEW—

Creative Director and Account Lead sign off. Accessibility and plain-language compliance checked against WCAG 2.2 AA and AHCCCS brand standards.



AHCCCS COMMUNICATIONS REVIEW—

Submitted to AHCCCS with a 5-business-day review window unless a shorter turnaround is mutually agreed for time-sensitive content.



CMS COORDINATION (AS APPLICABLE) —

We will prepare CMS submission packages and track approval status, keeping AHCCCS informed at each stage.



PUBLICATION & DOCUMENTATION —

Upon final approval, content is published per the Master Content Calendar and logged in the Version Control system within 24 hours.



EXPERIENCE & CAPACITY

AHCCCS is evaluating three things in this section: the firm's experience with this type of project, the experience of the key personnel assigned, and the firm's capacity to perform. Here is our direct answer to each.

FIRM EXPERIENCE — WHAT WE HAVE DONE

ANDERSON has spent more than 20 years executing complex public-sector communications in Arizona. These have included statewide health campaigns, behavioral change initiatives, multicultural outreach programs, and task-order engagements requiring structured approvals, CMS-adjacent compliance, and measurable accountability. This is not adjacent experience. It is directly relevant experience.

The following capabilities are not theoretical — each reflects active practice on prior and current engagements:

CAPABILITY	HOW WE HAVE APPLIED IT	RELEVANCE TO THIS TASK ORDER
Public-Sector Task Order Management	Operated under statewide contract structures requiring structured approvals, version control, proof of performance documentation, and procurement-compliant invoicing.	AHCCCS requires a contractor who already understands state contracting protocols — no learning curve on our end.
Behavioral Change Communications	Developed campaigns designed to drive specific member actions — not just awareness — including enrollment, renewal, and compliance behaviors for healthcare audiences.	H.R. 1 requires members to take action (report activities, update addresses, comply with renewals). Awareness alone is not the goal.
Multi-Audience Stakeholder Engagement	Managed simultaneous communications across member, provider, partner, and internal stakeholder audiences — with audience-specific messaging and channel strategies.	This task order requires coordinated outreach to 6+ distinct audience groups with different needs, literacy levels, and communication channels.
Multicultural & Multilingual Outreach	Executed outreach programs for Tribal communities, Hispanic households, and rural populations — with native-speaker content development, not machine translation.	Arizona's AHCCCS population includes significant Tribal, Spanish-speaking, and rural segments who require culturally competent — not just translated — communications.
CMS-Adjacent Compliance Campaigns	Supported communications for federally regulated healthcare programs requiring message accuracy, regulatory alignment, and audit-ready documentation.	All Phase 2 deliverables require CMS review and approval. We understand the discipline of federal compliance communication.
Crisis & Rapid-Response Communications	Managed communications during high-visibility public health situations requiring rapid message updates, media monitoring, and stakeholder confidence management.	H.R. 1 implementation carries misinformation and member anxiety risk. We have managed similar high-stakes public communications environments.
Integrated Campaign Execution	Planned and executed campaigns across paid digital, social, email, SMS, earned media, community outreach, and print — under one coordinated team.	This task order requires 8+ simultaneous channel deployments. Integrated execution under one roof prevents the message inconsistency that comes from managing multiple vendors.

“KNOW THE RED FLAGS”

AHCCCS TRIBAL COMMUNITY SOCIAL AWARENESS CAMPAIGN

CASE STUDY FROM STRATEGIC PARTNER, ACCENTURE



STRATEGY



ACCOUNT PLANNING
& MANAGEMENT



MEDIA



DIGITAL



CREATIVE

THE CHALLENGE

AHCCCS needed to reach Arizona’s 22 Tribal communities with a sensitive, high-stakes public health message — rebuilding trust after a period of strained relationships while simultaneously educating Tribal members and frontline health workers about the warning signs of AHCCCS fraud. This required a communications approach built on genuine partnership, cultural respect, and earned credibility — not broadcast advertising.

WHAT WAS DONE

The campaign launched on Missing & Murdered Indigenous Peoples Awareness Day — a deliberate, culturally intentional choice that demonstrated AHCCCS’s genuine commitment rather than a routine agency announcement.

The campaign was co-designed in direct partnership with 13 stakeholder organizations — including Tribes, Native health clinics, community programs, and the Office of the Governor — ensuring messages were built with Tribal communities, not simply distributed to them. Messaging was targeted to two distinct audiences: Tribal members (fraud awareness and where to find legitimate health resources) and frontline clinic workers (red flag identification and reporting pathways).

CHANNELS DEPLOYED

Physical — printed materials in health clinics and community spaces across 22 Tribal communities

Digital — targeted display and social media ads geographically concentrated in Northern Arizona

Social media — organic and paid content across platforms

Earned media — press outreach resulting in coverage by 12 News Phoenix and the Arizona Republic

Partner network — 13 organizational partners amplifying messaging through owned channels

Resources landing page — dedicated destination for fraud reporting and legitimate health resource navigation

“KNOW THE RED FLAGS”

AHCCCS TRIBAL COMMUNITY SOCIAL AWARENESS CAMPAIGN

CAMPAIGN OBJECTIVES



RAISE AWARENESS

DEMONSTRATE AHCCCS'S COMMITMENT TO ELIMINATING FRAUD AND SUPPORTING TRIBAL COMMUNITIES WITH THE RIGHT RESOURCES — POSITIONING AHCCCS AS AN ALLY, NOT AN AUTHORITY.



EDUCATE AUDIENCES

HELP TRIBAL MEMBERS RECOGNIZE THE WARNING SIGNS OF AHCCCS FRAUD TO PROTECT THEMSELVES AND THEIR COMMUNITIES, AND CLEARLY COMMUNICATE WHERE TO ACCESS LEGITIMATE HEALTH RESOURCES.



STRENGTHEN RELATIONSHIPS

REBUILD TRUST BETWEEN AHCCCS AND TRIBAL COMMUNITIES BY ACKNOWLEDGING PAST CHALLENGES AND ENGAGING TRUSTED TRIBAL PARTNERS AS CO-AUTHORS OF THE CAMPAIGN — NOT JUST DISTRIBUTION CHANNELS.

RESULTS



2.83M

TOTAL IMPRESSIONS
50% FROM NORTHERN AZ



.22%

CLICK-THROUGH RATE VS. .17%
BENCHMARK



2

EARNED MEDIA PLACEMENTS
12 NEWS PHOENIX & ARIZONA REPUBLIC



13

COMMITTED PARTNERS
TRIBES, CLINICS, AGENCIES

GEOGRAPHIC PRECISION

50% of all campaign impressions were delivered in Northern Arizona — the Navajo and Hopi Nation service areas — demonstrating our ability to target and reach geographically specific, underserved populations within a statewide campaign footprint.

“KNOW THE RED FLAGS”

AHCCCS TRIBAL COMMUNITY SOCIAL AWARENESS CAMPAIGN

WHY THIS IS DIRECTLY RELEVANT TO TASK ORDER YH26-0082

WHAT THIS TASK ORDER REQUIRES	WHAT THIS CASE STUDY PROVES WE CAN DO
Tribal community outreach across all 22 Arizona Tribes	This engagement executed a statewide Tribal campaign with geographic targeting to specific Nation service areas — with 13 Tribal and community partners engaged as co-stakeholders.
Stakeholder co-design, not just stakeholder notification	“Know the Red Flags” was built in direct partnership with Tribes, health plans, and the Governor’s Office — the same stakeholder engagement model required in Phase 1 of this task order.
Sensitive behavioral communications requiring trust	Rebuilding AHCCCS-Tribal trust is a higher-stakes communications challenge than H.R. 1 compliance awareness — the campaign delivered measurable reach and above-benchmark engagement in that environment.
Multi-channel deployment with earned, owned, and paid tactics	The campaign executed physical, digital, social, earned media, and partner-network channels simultaneously — the same integrated model required for this task order.
AHCCCS brand standards and approval workflows	This campaign was executed under existing AHCCCS contract infrastructure — the team already knows how AHCCCS approves, deploys, and documents public-facing communications.

NORTH COUNTRY HEALTHCARE

DO AND CHEW WHAT YOU LOVE

WHAT WE DID



STRATEGY



ACCOUNT PLANNING
& MANAGEMENT



MEDIA



DIGITAL



CREATIVE

SITUATION

North Country HealthCare is the primary community health center in Northern Arizona, providing affordable, accessible care to even the most remote parts of the state. Their long-standing message of “Keeping Northern Arizona Healthy so You Can Do What You Love” had been at the core of their brand for years, and had started losing traction. ANDERSON proposed a revamped approach to both the creative and media strategy that would be evergreen-first but flexible enough to highlight their other service lines.

To do this, ANDERSON developed a reinvigorated umbrella campaign that would be activated through a full-funnel strategic launch. This campaign needed to accomplish a number of things:

1. Increase website traffic
2. Drive appointment requests
3. Position North Country HealthCare as the go-to resource for full holistic care
4. Reengage and excite a dormant audience

SOLUTION

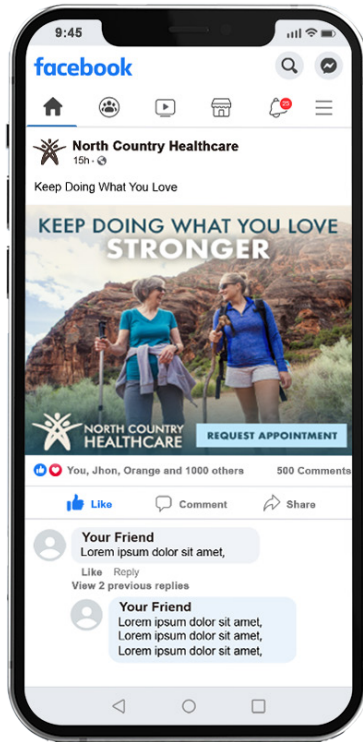
While North Country HealthCare was not looking to fully re-concept, we needed to develop visuals that would directly connect their core message to their audience. ANDERSON evolved the “Do What You Love” platform with refreshed creative, relatable imagery, and a full-funnel media strategy designed to connect healthcare services directly to everyday life.

The campaign shifted away from illustration-based creative in favor of authentic, active visuals that helped audiences see themselves in the messaging. Service-line extensions, including Pediatric Dentistry’s “Chew What You Love,” allowed the campaign to maintain a cohesive identity while tailoring messaging to specific healthcare needs.

To support awareness and patient acquisition goals, ANDERSON implemented a diversified media strategy using audience behavior, location, and healthcare-interest targeting to reach patients across digital and traditional channels throughout the care journey.

NORTH COUNTRY HEALTHCARE

DO AND CHEW WHAT YOU LOVE



Facebook Ads

RESULTS



290%

ROI FROM PAID MEDIA EFFORTS YOY



159%

INCREASE IN PATIENT APPOINTMENT
REQUEST FORMS YOY



11%

INCREASE IN CLICKS YOY



16%

INCREASE IN IMPRESSIONS YOY

YOUR TEAM

AHCCCS will be supported by a senior-led, integrated team. Every person listed below is assigned to this task order specifically, with defined roles and availability.

TEAM MEMBER	ROLE	RESPONSIBILITIES ON THIS TASK
TED ANDERSON 30+YRS	President & CEO	Executive oversight, client leadership, final strategic direction, escalation contact for AHCCCS leadership
JULIA CORBETT 10+ YRS ACCENTURE STRATEGIC PARTNER	Strategy & Social Awareness Advisor	Social awareness strategy counsel, AHCCCS institutional knowledge, public-sector advisory
CAMMY WAGNER 30+ YRS	Strategic Advisor	Strategic counsel, public-sector communications guidance, Accenture partnership coordination
SARA CODY 15+ YRS	Creative Director	Oversees all creative deliverables, accessibility compliance sign-off, bilingual content review
MATT GRODSKY 10+ YRS	VP, Strategic Comms Director	Leads stakeholder communications, manages Phase 1 listening sessions, public affairs, earned media strategy
AUSTIN KREITLER 6+ YRS	Integrated Media Supervisor	Paid media planning and buying, digital campaign execution, analytics and optimization reporting
BRETT HARMS 10+ YRS	Project Manager	Owns Master Content Calendar, weekly status reporting, approval tracking, version control log
JESSICA GONZALEZ 15+ YRS	PR Account Executive	Community outreach coordination, media relations, provider engagement
JENNY MOSS 30+ YRS	Copywriter	Plain-language message library, member-facing copy, provider toolkits, FAQs
MIGUEL MEDRANO SUBCONTRACTOR	Tribal & Hispanic Outreach Partner	Phase 1 Tribal listening sessions, culturally responsive messaging review, Tribal toolkit development

CAPACITY TO PERFORM

ANDERSON has the staff and partners, infrastructure, and operational capacity to begin this engagement immediately upon contract execution and sustain it through the full task order duration.

- **Available to start:** Our core project team is available for assignment to this task order upon award. No key personnel are at capacity conflicts that would delay Phase 1 initiation.
- **Integrated team model:** Because strategy, creative, media, digital, PR, and outreach operate under one roof, we do not depend on subcontractor availability for core deliverables — reducing schedule risk and approval turnaround time.
- **Subcontractor readiness:** Miguel Medrano (Tribal/Hispanic outreach) and Mara Margailan/Productions 52 (bilingual content) are confirmed as available and have been briefed on this engagement. No new partner onboarding is required.
- **Current State contractor:** Existing contract infrastructure under Solicitation No. BPM007365 means procurement, invoicing, and compliance processes are already established — no setup delay.
- **Scalable capacity:** Should scope expand or accelerate, ANDERSON has the bench depth to add copywriting, design, digital, and outreach resources without disrupting the core account team or management structure.

ANDERSON is not proposing to build a team or develop capabilities for this task order.

- We are bringing an operational team and partners with demonstrated experience, confirmed availability, existing contract infrastructure, and a clear plan of execution — ready to begin upon contract award.

METHODOLOGY & APPROACH



PHASE 1

— STAKEHOLDER INPUT & DISCOVERY

Phase 1 begins on Day 1 of contract execution. Our goal is to deliver AHCCCS a completed Stakeholder Input Plan within 10 business days and a full Insights Summary Report within 45 days.

WHAT WE WILL DO — SPECIFICALLY

- Conduct 5 structured listening sessions within the first 30 days, each 60–90 minutes, facilitated by ANDERSON - scheduled and coordinated in advance with AHCCCS to align on participants, format, and timing
- Engage up to 7 distinct stakeholder groups — coordinating with AHCCCS at kickoff to confirm the most effective engagement approach for each audience. Where direct engagement is feasible, ANDERSON will facilitate structured sessions with:
 - **(1) AHCCCS members and caregivers**
 - **(2) AHCCCS providers**
 - **(3) Managed Care Organizations (MCOs)**
 - **(4) Advocacy organizations**
 - **(5) Tribal community representatives**
 - **(6) Community-based organizations and workforce agencies, and**
 - **(7) Internal AHCCCS leadership and program teams.**

Where direct access is limited — particularly for members, providers, MCOs, and Tribal representatives — ANDERSON will leverage existing AHCCCS member research, prior surveys, and AHCCCS-provided data as primary inputs, supplemented by engagement with advocacy organizations and community partners who interact directly with those populations.

- Use a mix of qualitative and quantitative research inputs to develop a complete picture of target audiences — including but not limited to existing AHCCCS member research, prior surveys, stakeholder listening sessions, and external secondary research — coordinated with AHCCCS at kickoff to confirm the most effective and accessible inputs for each audience segment.
- Facilitate 2 virtual listening sessions for statewide provider and MCO audiences, accommodating participants who cannot attend in person
- Conduct a communications audit of all existing AHCCCS member-facing materials related to eligibility, renewal, and coverage — reviewing tone, accessibility, language, and channel effectiveness — completed within 15 business days
- Analyze all session findings and survey data and deliver an Insights Summary Report identifying recurring themes, audience barriers, communication preferences, and risk areas — submitted to AHCCCS within 45 days of contract execution



PHASE 1

— STAKEHOLDER INPUT & DISCOVERY

PHASE 1 DELIVERABLES & TIMELINE

DELIVERABLE	DUE TO AHCCCS	DESCRIPTION
Stakeholder Input Plan	Day 10 of contract execution	Detailed plan of engagement methods, participant groups, timelines, and tools — submitted for AHCCCS approval before any engagement begins
Communications Audit Summary	Day 15 of contract execution	Review of existing AHCCCS materials; identifies gaps, tone alignment, and reuse opportunities
Stakeholder Engagement Summary	Day 35 of contract execution	Documentation of all session activity, participation counts, methodology, and attendance
Insights Summary Report	Day 45 of contract execution	Analysis of findings, recurring themes, audience barriers, and key communication needs
Next Steps Recommendations	Day 45 of contract execution	Actionable recommendations for Phase 2 messaging and channel strategy



PHASE 2

— PLANNING & MESSAGE DEVELOPMENT

Phase 2 begins upon AHCCCS approval of Phase 1 deliverables, expected in late August 2026. All Phase 2 deliverables will be submitted to AHCCCS for review and approval with sufficient time for AHCCCS and CMS review before the September 1 public launch. ANDERSON will flag any CMS review timing risk immediately and propose mitigation options to protect the launch date.

MEMBER-FACING MESSAGE LIBRARY

We will develop a plain-language message library covering all 6 required member communication topics:

- **What the community engagement (work) requirement is and who it applies to**
- **Who is impacted by 6-month renewals**
- **Who must comply with community engagement requirements**
- **What activities qualify for community engagement compliance and how exemptions work**
- **How and where to report community engagement activities**
- **The importance of maintaining current contact information and how to update it**

Each topic will have 4 message variants: (1) Awareness phase, (2) Pre-implementation reminders, (3) Active compliance period, and (4) Renewal and redetermination touchpoints. All messages will be written at a 6th-grade reading level and reviewed by AHCCCS call-center staff for accuracy.

CHANNEL-SPECIFIC CONTENT DEVELOPMENT

We will develop content formatted and optimized for each of the following channels:

- **AHCCCS website: Dedicated H.R. 1 landing page with step-by-step compliance guide, FAQ section, and links to HEAplus reporting tools**
- **Member portals (HEAplus): Portal-formatted message inserts and compliance prompts**
- **Email: 6 email templates — one per core topic — with plain-language calls-to-action**
- **Mail inserts and notices: Print-ready inserts formatted to AHCCCS mailing standards**
- **Social media: Content calendar with 30 days of posts at launch across Facebook, X/Twitter, and LinkedIn — segmented by audience**
- **FAQs and quick-reference guides: Printable 1-page guides covering the 10 most common member questions**
- **Earned media: 2 press release drafts and media pitch outlines for statewide launch coverage**



PHASE 2

— PLANNING & MESSAGE DEVELOPMENT CONT.

PROVIDER & PARTNER TOOLKITS

We will develop 2 toolkits — a General Partner Toolkit for providers, health plans, and community-based organizations, and a dedicated Tribal Community Toolkit developed specifically for Tribal nation representatives and Tribal health programs. The General Partner Toolkit will contain:

- **Overview of H.R. 1 community engagement requirements — plain-language summary of what the requirements are, who is impacted, key compliance deadlines, and the provider's role in supporting member compliance**
- **Member-ready talking points for frontline staff — concise, plain-language responses to the most common member questions, written at a 6th-grade reading level and reviewed for accuracy against AHCCCS guidance**
- **Referral pathway guide — step-by-step resource identifying qualifying community engagement activities, workforce and education programs, and exemption pathways — with direct links to HEAplus reporting tools**
- **Printable FAQ sheet — covering the 10 most common member questions, formatted for posting in patient-facing areas, waiting rooms, and clinic spaces**
- **Email template — ready-to-send outreach template for providers, health plans, and CBOs to communicate directly with their own patient and member lists, formatted for easy customization**

The Tribal Community Toolkit will be developed separately, with culturally adapted content, messaging, and resources specific to Arizona's 22 Tribal communities — co-developed with Tribal partners identified through Phase 1 engagement and reviewed by our multicultural outreach team before submission to AHCCCS for approval. It will not be a translation of the General Toolkit but a purpose-built resource reflecting Tribal governance structures, communication protocols, and community-specific health resources.

ANDERSON will work with AHCCCS to develop a toolkit distribution plan — with distribution typically facilitated through AHCCCS-owned channels, including the AHCCCS website and direct outreach to providers, health plans, and community partners.



PHASE 3

— PUBLICATION, IMPLEMENTATION & COMPLIANCE

Beginning September 1, 2026, ANDERSON will execute the approved communication plan across all channels. All content will have been approved by AHCCCS and, where applicable, CMS before this date.

PUBLICATION CALENDAR & SEQUENCING

We will publish a Master Content Calendar by August 25, 2026, showing every planned publication for September through December 2026 — including the channel, content type, date, responsible party, and approval status. The calendar will be updated weekly and shared with AHCCCS every Monday with the weekly status update.

Deployment will follow this sequencing, with specific timing confirmed in the Master Content Calendar developed in Phase 2 and approved by AHCCCS prior to launch::

- **Website landing page goes live, member email campaign launches**
- **Social media campaign activates across Facebook, X/Twitter, and LinkedIn**
- **Earned media outreach, press releases distributed**
- **Mail inserts released through AHCCCS mailing program in coordination with AHCCCS distribution processes**
- **Ongoing: Monthly email reminders and social posting per the approved content calendar**

DEPLOYMENT TRACKING & DOCUMENTATION

- **Every piece of content published will be logged in the Version Control system within 24 hours of deployment, including: what was published, the channel, the publish date and time, the approved version number, and the AHCCCS approval documentation reference**
- **A Distribution Compliance Report will be submitted to AHCCCS within 5 business days of each major deployment milestone, confirming all assets were published as planned, accessibility validation was completed, and distribution reach data is available**
- **An Issue Log will be maintained and shared weekly. Any deployment delay or deviation will be documented with cause, resolution plan, and revised timeline within 24 hours of identification**

PHASE 4

— MONITORING, OPTIMIZATION & REPORTING

ANDERSON WILL DELIVER STRUCTURED, CONSISTENT REPORTING THROUGHOUT THE ENGAGEMENT. HERE IS EXACTLY WHAT AHCCCS WILL RECEIVE, AND WHEN:

REPORT	DELIVERED BY	DELIVERED TO	WHAT IT INCLUDES
Weekly Status Update	Every Monday EOD	AHCCCS Project Lead	Deliverable status, upcoming deadlines, issue log, content calendar updates
Monthly Performance Report	10th of each month	AHCCCS Project Lead + Leadership	KPI dashboard, channel analytics (reach, engagement, click-through), audience insights, 3 optimization recommendations, budget summary
Distribution Compliance Report	Within 5 days of each major deployment	AHCCCS Procurement & Comms	Confirmation all assets published as planned, accessibility validation results, reach data
Quarterly Strategic Review Deck	End of each quarter	AHCCCS Leadership	Full campaign performance, budget reconciliation, strategic pivots, next-quarter
Real-Time Alert (as needed)	Within 4 business hours	AHCCCS Project Lead	Notification if sentiment drops >15%, misinformation detected, or deployment issue occurs — with recommended rapid-response actions

A/B TESTING PLAN

Beginning in September 2026, we will run structured A/B tests on a monthly basis to optimize key communication elements. Each month we will test at least 2 variables from the following:

- **Email subject lines — testing urgency vs. informational framing (e.g., ‘Update your address now’ vs. ‘How to keep your coverage’)**
- **Social media creative — testing static graphics vs. short-form video; English vs. bilingual formats**
- **Call-to-action language — testing action verbs, link placement, and button colors on landing pages**

Test results will be reported in the Monthly Performance Report with a recommendation for which version to scale. AHCCCS will be consulted before any messaging pivot based on test findings.

**MULTICULTURAL,
ACCESSIBILITY &
COMMUNITY
ENGAGEMENT**



MULTICULTURAL, ACCESSIBILITY & COMMUNITY ENGAGEMENT

AHCCCS members require more than translated materials. It requires culturally competent communications designed with community insight — not just adapted from English originals. Here is exactly how we will achieve this:

LANGUAGE ACCESS APPROACH

- All member-facing materials will be developed natively in English and Spanish, with Spanish content developed with our multicultural outreach team - not machine translated.
- Phase 1 listening sessions will assess demand for additional languages; based on AHCCCS member demographics, we anticipate preparing additional adaptations in at least 2-3 additional languages (e.g., Navajo, Arabic, Somali) based on Phase 1 findings
- All materials will be reviewed by native speakers before submission for AHCCCS approval

TRIBAL COMMUNITY ENGAGEMENT

- Our multicultural outreach team will facilitate outreach to Tribal Nation representatives during Phase 1 listening sessions — collaborating on an ongoing basis with Tribal community partners to ensure communications are properly vetted through a Tribal lens, Tribal sovereignty is respected, and messaging is designed with Tribal input, not just distributed to Tribal communities.
- All Tribal-facing communications will go through an additional cultural review step before any deployment — no materials will be distributed to Tribal communities without explicit coordination with Tribal leadership contacts identified in Phase 1.
- As detailed in our Provider & Partner Toolkits section, a dedicated Tribal Community Toolkit will be developed separately from the General Partner Toolkit — purpose-built to reflect Tribal governance structures, communication protocols, and community-specific health resources identified through Phase 1 engagement.

ACCESSIBILITY STANDARDS

- All digital deliverables will be reviewed against WCAG 2.2 Level AA standards before submission to AHCCCS
- All video content will include closed captions and, where applicable, audio description tracks
- All print materials will be available in accessible PDF formats with proper tagging for screen readers
- Mobile optimization will be tested on both iOS and Android devices for all digital content before deployment
- An Accessibility Compliance Checklist will be completed and submitted with every creative deliverable as part of the approval package

PROJECT TIMELINE

ANDERSON is prepared to begin work immediately upon contract award. The timeline below reflects the sequence communicated by AHCCCS — with kickoff in July 2026 and all public-facing communications deploying no later than September 1, 2026, as required by the RFP.

All activities and deliverables are subject to CMS review and approval as applicable. ANDERSON will prepare CMS submission packages and track approval status throughout, keeping AHCCCS informed at each stage.



DATE	PHASE	MILESTONE	KEY DELIVERABLE/ OUTPUT
PRE-AWARD — AHCCCS EVALUATION PERIOD			
JUNE 2	SUBMISSION	ANDERSON response submitted to AHCCCS by 3:00 PM Arizona Time	Complete response package delivered electronically to procurement@azahcccs.gov
JUNE 2-30	EVALUATION	AHCCCS evaluation committee reviews responses	ANDERSON available to respond to any clarification questions within 24 hours
AWARD & PROJECT INITIATION			
JULY 2026	AWARD	Contract award and purchase order release	ANDERSON executes contract; project management system activated
WEEK 1 OF JULY 2026	KICKOFF	Project kickoff meeting — ANDERSON + AHCCCS leadership	Meeting agenda distributed 3 days prior; written kickoff summary delivered within 2 business days

DATE	PHASE	MILESTONE	KEY DELIVERABLE/OUTPUT
PHASE 1 – STAKEHOLDER INPUT & DISCOVERY (July 2026)			
JULY, DAY 10	PHASE 1	Stakeholder Input Plan submitted to AHCCCS for approval	Written plan covering engagement methods, participant groups, timelines, and tools – approved before any engagement begins
JULY, DAY 15	PHASE 1	Communications audit of existing AHCCCS member-facing materials complete	Audit summary identifying gaps, tone alignment, and reuse opportunities delivered
JULY - AUG	PHASE 1	5 stakeholder listening sessions conducted across 7 groups	Sessions include members/caregivers, providers, MCOs, advocacy orgs, Tribal reps, CBOs, and internal AHCCCS teams
JULY, DAY 30	PHASE 1	Stakeholder Engagement Summary delivered	Documents outreach activity, participation counts, and methodology
JULY, DAY 45	PHASE 1	Insights Summary Report + Next Steps Recommendations delivered	Findings, recurring themes, audience barriers, and Phase 2 messaging recommendations
PHASE 2 – PLANNING & MESSAGE DEVELOPMENT (August 2026)			
AUG 1-22	PHASE 2	Message library, creative concepts, channel content, and partner toolkits developed	6-topic plain-language message library; 4 message variants; content for 8+ channels; 3 partner toolkits
AUG 22	PHASE 2	All Phase 2 deliverables submitted to AHCCCS for approval	Includes CMS submission packages where applicable; ANDERSON responds to any revision requests within 48 hours
AUG 22-31	PHASE 2	AHCCCS + CMS review period	ANDERSON on standby for rapid revision turnaround to protect September 1 deadline

DATE	PHASE	MILESTONE	KEY DELIVERABLE/ OUTPUT
PHASE 2 — PLANNING & MESSAGE DEVELOPMENT (August 2026)			
AUG 25	PHASE 2	Master Content Calendar finalized and shared with AHCCCS	Full September–December publication schedule with channel, content type, date, and approval status
AUG 25–31	PHASE 2	Toolkit distribution plan finalized with AHCCCS	Written distribution plan approved by AHCCCS, confirming channels, timing, and responsible parties for toolkit deployment.
PHASE 3 — STATEWIDE LAUNCH & IMPLEMENTATION (September 1, 2026+)			
SEPT 1	LAUNCH	Statewide communications deploy — all channels activated	Website live, email campaign launches, social media activates, earned media releases
SEPT, WK 1–2	PHASE 3	Social media campaign active across Facebook, X/Twitter, LinkedIn	30-day content calendar executing; audience-segmented posts per platform strategy
SEPT, WK 2–3	PHASE 3	Mail inserts released through AHCCCS mailing program	Print-ready inserts formatted to AHCCCS mailing standards
SEPT 5	PHASE 3	First weekly status update delivered to AHCCCS Project Lead	Deliverable status, deployment log, issue log, upcoming week schedule
ONGOING	PHASE 3	Weekly status updates every Monday; deployment tracking log updated within 24 hrs of each publication	Version-controlled content log; Distribution Compliance Reports within 5 business days of each major deployment

DATE	PHASE	MILESTONE	KEY DELIVERABLE/ OUTPUT
PHASE 4 – MONITORING, OPTIMIZATION & REPORTING (September 2026 – Task Order Duration)			
OCT 10	PHASE 4	First Monthly Performance Report delivered to AHCCCS	KPI dashboard, channel analytics, audience engagement summary, 3 optimization recommendations, budget summary
MONTHLY	PHASE 4	Monthly Performance Reports delivered by the 10th of each month	Ongoing through task order duration; delivered to AHCCCS Project Lead and Leadership
MONTHLY	PHASE 4	A/B test results reported; optimization actions implemented with AHCCCS approval	Minimum 2 variables tested per month; results in Monthly Performance Report
QUARTERLY	PHASE 4	Quarterly Strategic Review – AHCCCS Leadership + ANDERSON Executive Team	Full campaign performance, budget reconciliation, strategic pivots, next-quarter plan
QUARTERLY	PHASE 4	Real-time media monitoring and sentiment tracking; rapid-response alerts as needed	Alert to AHCCCS Project Lead within 4 business hours if sentiment drops >15% or misinformation is detected

Preferred Invoice Schedule

Monthly invoices submitted by the 5th of each month for the prior month’s deliverables and services. Each invoice will include: Statewide Contract number, Task Order number, Purchase Order number, description of services performed with hours worked, name of AHCCCS contact, dates of service, and authorized signature.

Invoices submitted electronically to: AHCCCSDBFAdminPayables@azahcccs.gov

CMS Approval Note

All activities, deliverables, and timelines are subject to CMS review and approval. The timeline above reflects our planned schedule assuming standard CMS review cycles. ANDERSON will prepare all CMS submission packages, track approval status, and maintain AHCCCS visibility at every stage. Should CMS timelines affect Phase 2 completion, ANDERSON will immediately communicate the impact on the September 1 launch date and propose mitigation options.

PRICING PROPOSAL

Our pricing is structured by phase to provide AHCCCS with maximum flexibility and budget visibility. All pricing reflects current statewide contract rates and includes all costs associated with service provision.

PHASE	PROFESSIONAL SERVICES	MEDIA/PRODUCTION	TOTAL
Phase 1: Stakeholder	\$34,000	\$0	\$34,000
Phase 2: Planning & Development	\$73,600	\$35,000	\$108,600
Phase 3: Implementation (Sept-Dec)	\$81,750	\$375,000	\$456,750
Phase 4: Monitoring (Monthly)	\$72,200	\$75,000	\$102,200
TOTAL	\$216,550	\$485,000	\$701,550

All professional services include ANDERSON agency services and Accenture strategic advisory, with Accenture billed at \$250/hour.

Our proposed budget of \$701,550 covers Phases 1-3 plus 2 months of Phase 4 monitoring, with the remaining \$48,450 of the \$750,000 contract ceiling held in reserve for extended Phase 4 support, media optimization, and contingency.

Media mark-up calculated based on Net Media Cost per contract terms. All pricing inclusive of project management, accessibility compliance, and multilingual adaptation.