



RFP Services: Consulting Services

RFP Number: 8070001092

OHCA Contracting Officer: Susan Geyer

OHCA Email: Procurement@okhca.org always reference RFP number in subject line.

Section A. Scope of Work

Calendar of Events

All dates are estimates and subject to change.

ACTIVITY	DATE
RFP available on OHCA website/email Bidders	Monday, April 22, 2019
RFP Questions Due by 3:00 p.m. CST	Monday, May 6, 2019
RFP answers available on website by 3:00 P.M. CST	Monday, May 20, 2019
Proposals Due to OHCA by 3:00 p.m. CST	Monday, June 3, 2019
Interviews (optional)	Week of June 24, 2019
Award of Contract	July 2019
Operations Begin	At award of contract

A.1 GENERAL INFORMATION

1. Introduction
 - a. Oklahoma Health Care Authority (OHCA) is issuing this Request for Proposal (RFP) for contractors to provide consultation to the OHCA on various Medicaid issues.
2. Contract Overview
 - a. OHCA may award contracts to more than one bidder.
 - b. Though multiple awards are possible, OHCA seeks to minimize the number of awards to reduce the number of implementations, ensure the work can be

effectively divided among contractors, ensure the funding is available to support ongoing contractor operations, and there is enough work for each contractor to perform.

3. Goals

OHCA's goals are to:

- a. Provide expert opinions, recommendations, and information relevant to OHCA;
- b. Obtain expertise from contractors related to best practices from both public and private health care sectors to enhance OHCA's operations and services;
- c. Perform comprehensive analysis, feasibility, determination of budget impact/dynamics, and evaluation of current and potential OHCA initiatives and programs;
- d. Be flexible to meet state and federal policy changes;
- e. Contract in a manner that is expandable in the future for possible additional users and agencies;
- f. Contract with vendors who are collaborative with OHCA staff with respect for the staffing limitations within OHCA and their other commitments; and,
- g. Develop a professional and collegial relationship with the Contractor.

4. Mandatory Provisions

The bidder shall have a minimum of three years' experience performing services for Medicaid agencies;

5. Budget

- a. The budget for this RFP shall not exceed \$2,000,000.00 from the Contract Award Date through June 30, 2020.
- b. The not-to-exceed amount for subsequent options to renew shall be established by Attachment 6 Price Proposal. Renewals shall not exceed the not-to-exceed listed in Section A.1.5.a above.

6. Payment Structure

- a. In consideration for the satisfactory performance of the Scope of Work, OHCA shall pay Contractor in accordance with its Cost Proposal up to the established not-to-exceed amount.
- b. Before beginning work on any project under this contract, OHCA shall submit to Contractor (s) a Project Request. Contractor shall submit a written response to the Project Request along with the fixed number of hours to be billed at the established hourly rate. This statement of work and the number of hours shall be approved by OHCA before work begins. On a monthly basis Contractor shall invoice the OHCA for the hours completed during the prior month; the total amount billed shall not exceed the total fixed amount for each individual Project Request.
- c. In the event that OHCA or the Contractor requests changes to a particular Project that affect the number of hours required to complete the project, OHCA and the Contractor shall agree in writing on a revised Project Request before any work begins related to such changes.

7. Definitions specific to this RFP

- a. Deliverable - Specific tangible or intangible products or services produced as a result of the Project Request. Deliverables may be a project, a report, a document, a test, a meeting, and other relevant outputs. Deliverables may be a single output

- completed within a month or may be composed of multiple smaller deliverables that are completed within specified timeframe that extends beyond a month.
- b. Governance – the established policies, and continuous monitoring of their proper implementation, by the members of the governing body of this contract. It includes the mechanisms required to balance the powers of the members (with the associated accountability), and their primary duty of enhancing the effectiveness and viability of the contract related to OHCA’s goals and objectives.
 - c. Milestone – Specific progress point(s) or task(s) that must be reached to achieve progress on the Project critical path. The milestone is a measurement of progress toward the deliverable.
 - d. Project Request – the formal contract document OHCA uses to request services from one or more contractor attained through this RFP. Project Requests may be awarded to one or more contractors, and shall be signed by both OHCA and the awarded contractor(s) prior to work being performed. Project Requests may be authorized for a single State Fiscal Year (SFY) or for multiple SFYs.
 - e. Project – the temporary endeavor authorized in a Project Request undertaken to create a unique product, service, or result. This may include a project to deliver one or more business products according to a specified business case.

A.2 PROJECT/PROGRAM OVERVIEW

1. OHCA overview

OHCA is the state agency that administers the Oklahoma Medicaid Program known as SoonerCare. Medicaid is a federal and state entitlement program that provides funding for medical benefits to certain low-income individuals who have inadequate or no health insurance coverage. Medicaid guarantees coverage for basic health and long-term care services based upon income and/or resources. Created by Title XIX of the Social Security Act of 1965, Medicaid is administered at the federal level by the Centers for Medicare and Medicaid Services (CMS) within the Department of Health and Human Services (HHS). CMS established and monitors certain requirements concerning funding, eligibility standards, scope and quality of medical services. States have the flexibility to determine some aspects of their own program, such as setting Provider (an individual or entity contracted with OHCA to provide healthcare services to enrolled Members) reimbursement rates and determining the eligibility requirements and benefits offered within certain federal parameters.

2. Project information

- a. The OHCA has been involved in many strategic efforts to accomplish the agency’s mission, while focusing on seven overarching goals. The seven goals are centered on responsible financing, responsive programs, member engagement, satisfaction and quality, effective enrollment, administrative excellence, and collaboration. All OHCA Medicaid programs are guided by one or more agency goals.
- b. The OHCA is responsible for the planning, development, implementation, monitoring and evaluation of Medicaid programs. The agency strives to utilize current, best practice and expert information to craft and mold programs. The engagement of consultants has historically provided the agency with such information, when agency goals and objectives require it.

- c. A few programs that have benefitted from consultant expertise include but are not limited to:
 - i. Programs of All-inclusive Care for the Elderly (PACE);
 - ii. Quality measures;
 - iii. Health Management Program;
 - iv. Chronic Care Unit (CCU);
 - v. Quality Improvement Plan (QIP);
 - vi. Redesign and evaluation of SoonerCare Patient Centered Medical Home (PCMH);
 - vii. Evaluation of the Pain Management Program and SoonerCare 1115 Waiver;
 - viii. Actuary services for Non-Emergency Transportation (NET); and,
 - ix. State Plan Amendment assistance and rate setting.
- d. A few areas the OHCA is interested in receiving additional expert consultation include recommending guiding principles surrounding the following:
 - i. Utilization management;
 - ii. Value based purchasing;
 - iii. Data vulnerability and return on investment efforts;
 - iv. Audits; and,
 - v. Complex Request for Proposals (RFP).
- e. The OHCA has also utilized federal grant opportunities to pursue certain initiatives. Often the grant requires an independent evaluation of the initiative. The OHCA is interested in evaluation of various grant initiatives with focus on access, cost, and quality.

A.3 CONTRACT GOVERNANCE

OHCA and the Contractor both have key roles for a successful Contract. OHCA takes an active role during Contract implementation. A Governance process that includes OHCA and the Contractor is the most successful.

1. OHCA Roles and Responsibilities

The OHCA will coordinate the overall project management responsibilities including availability of OHCA resources required to support the Contract. During the entire lifecycle of the Contract, the OHCA will:

- a. Define the goals and objectives of the Contract and services throughout implementation and ongoing operations;
- b. Review the draft deliverables and final deliverables developed by the Contractor and provide feedback, request changes, and provide final review until the OHCA is satisfied with the resulting deliverable;
- c. Review, approve, or reject final deliverables developed and revised by the Contractor; and,
- d. Provide access to OHCA management and Subject Matter Experts (SMEs) for the approval of the deliverables required to meet the goals and objectives of the Project Request.

2. Table 1 describes OHCA's Key Staff and Roles and Responsibilities

Table 1 OHCA Key Staff and Roles & Responsibilities

PROJECT TITLE	ROLES AND RESPONSIBILITIES
Program Monitor	<ul style="list-style-type: none"> ▪ Primary point of contact for Contract administration and first tier for disputes.
Contract Coordinator	<ul style="list-style-type: none"> ▪ Point of contact for Contract administration and first tier for disputes.
Professional Services Contracts Manager	<ul style="list-style-type: none"> ▪ Point of contact for second tier Contract dispute resolution.
Program Manager	<ul style="list-style-type: none"> ▪ Provides daily management of the project and design, development, and project implementation activities, as well as the project’s maintenance and operational phase; ▪ Authorized to make day-to-day project decisions; ▪ Responsible for managing the OHCA teamwork activities consistent with the approved work plan; and, ▪ Responsible for identifying resource requirements, coordinating use of personnel resources, identifying issues and solving problems, and facilitating implementation of the Project.

3. Contractor Staffing, and Roles and Responsibilities

The Contractor shall provide:

- a. All staff necessary to perform the services required under this RFP;
- b. The following Key Personnel:
 - i. A Project Director (PD) with day to day responsibility for the services required under this RFP. The Project Director does not have to be permanently located in Oklahoma City, but must be regularly present in Oklahoma City during implementation of this program and must attend meetings in Oklahoma City as needed;
 - ii. A Project Manager
- c. Contractor shall not change the designation of the Key Personnel without prior approval through formal correspondence from OHCA. (The Contractor may use its expertise and experience to propose other types of staff – OHCA at its sole discretion may decide to accept a proposed staff category.)
- d. Table 2 Contractor Key Personnel Roles and Responsibilities describes the key

project positions, their corresponding roles project responsibilities, and minimum qualifications for each. Other positions may be proposed at the Contractor’s discretion.

Table 2 Contractor Key Roles and Responsibilities

TITLE	ROLES AND RESPONSIBILITIES	QUALIFICATIONS
Project Director	<ul style="list-style-type: none"> ▪ Primary point of contact with the OHCA’s Program Manager and Contract Coordinator for activities related to contract administration, overall project management and scheduling, correspondence between the OHCA and the Contractor, dispute resolution, and status reporting to the OHCA for the duration of the contract. ▪ Authorized to commit the resources of the Contractor in matters about the implementation performance of the Contract. ▪ Responsible for ensuring all Contractor-required resources identified by project manager are staffed on time. ▪ Responsible for addressing any issues that cannot be resolved with the Contractor’s project manager. 	<ul style="list-style-type: none"> ▪ Minimum of 3 years of direct project oversight. ▪ Special consideration may be given to those who have Medicaid experience.
Project Manager	<ul style="list-style-type: none"> ▪ Provide management of the project and serve as the chief liaison to the OHCA for design, development, and project implementation activities, as well as the project’s maintenance and operational phase. ▪ Authorized to make day-to-day project decisions. ▪ Responsible for facilitating the project by using the project management processes, organizing the project, and managing the teamwork activities consistent with the approved work plan. ▪ Responsible for scheduling and reporting project activities, 	<ul style="list-style-type: none"> ▪ Minimum of 3 years of project management experience for a government or private sector health care payer, including experience in a state similar in scope and size. ▪ Possess current Project Management professional certification, e.g., Project Management Institute (PMI), etc.

TITLE	ROLES AND RESPONSIBILITIES	QUALIFICATIONS
	<p>identifying resource requirements well in advance, coordinating use of personnel resources, identifying issues and solving problems, and facilitating implementation of the services.</p> <ul style="list-style-type: none"> ▪ Shall host status meetings, milestone meetings, as well as interim meetings as needed. Will assign Contractor staff to those meetings as appropriate. Will provide an agenda and develop minutes for each meeting. ▪ Provide expert guidance ensuring that OHCA policy and business rules are correctly implemented in the Project Deliverable(s). ▪ Advise the OHCA regarding best practices and recommends modifications to business processes to improve the overall program. 	

A.4 SCOPE OF WORK

1. The Contractor shall:
 - a. Provide policy impact analysis which:
 - i. May stem from federal, state, or OHCA directives or requests;
 - ii. May require development of State Plan Amendment(s) (SPA)/Waiver(s) proposals;
 - iii. Shall be based on cost, access, and quality.
 - b. Program evaluation which may:
 - i. Determine feasibility of program establishment and/or improvement;
 - ii. Establish repository of program feedback, and continuous quality improvement specifications;
 - iii. Require public and private entities be researched, and/or surveyed to determine best practices and lessons learned;
 - iv. Require that members, providers, and/or stakeholders be surveyed;
 - v. Analyze effectiveness of business process and workflow;
 - vi. Create evaluation design parameters; and,
 - vii. Involve the conduction of comprehensive program evaluation along with the provision of recommendations.
 - c. Financial analysis which may:
 - i. Provide budget neutrality associated with Medicaid waiver and/ or SPA efforts;

- ii. Perform cost impact analysis and/or program feasibility;
 - iii. Estimate cost savings and/or return on investment;
 - iv. Provide historical trends, growth, and/or projections;
 - v. Perform rate setting for new or existing programs; and,
 - vi. Conduct risk based audits.
 - d. Data vulnerability in areas such as eligibility, enrollment, utilization, and outcomes which may require:
 - i. Gap analysis of available data versus needed data;
 - ii. Creation of data acquisition plan.
 - e. Dissemination of the following types of information for the OHCA, state agencies, state elected leadership, stakeholders, national industry groups, CMS, and federal agencies:
 - i. Written- reports, issue briefs, peer reviewed journal articles;
 - ii. Technology- conference calls and webinars; and,
 - iii. Face to face- facilitate meetings, PowerPoint presentations, serve as expert regarding an information disseminated.
 - f. System Requirements
 - i. The contractors system must be sufficient to meet the service and reporting requirements of this RFP.

2. OHCA Responsibilities

OHCA shall:

- a. Provide the Contractor access to the Medicaid Management Information System (MMIS) for its employees and/or cooperate with the Contractor to establish an electronic file transfer process;
- b. Provide information on OHCA policy, eligibility, and other information requested by the Contractor;
- c. Review the criteria and protocols proposed by the Contractor for any conflict with OHCA standards or policies;
- d. Perform additional activities proposed by the Contractor and acceptable to OHCA;
- e. Provide up to 100 hours of training to Contractor's Project Manager and staff before operations start-up and up to 3 hours per month of updates thereafter.
- f. Designate an OHCA employee to serve as Program Monitor (PM). The PM will be responsible for overseeing the Contract, including overall project development, determination of policy, and monitoring of services. The OHCA will work in partnership with the Contractor to develop the primary responsibilities of OHCA;
- g. Provide Contractor with relevant eligibility, rates, and claims data for SoonerCare members and providers; and,
- h. Perform additional activities proposed by the Contractor and acceptable to OHCA.

A.5 REPORTING REQUIREMENTS

The Contractor will provide the OHCA with reporting as agreed upon in each Project Request for this contract

A.6 REQUIRED INSURANCE COVERAGE MINIMUM LIMITS, AS APPLICABLE

- 1. Commercial General Liability Limit(s)
 - a. Combined single limit: \$1,000,000.00

- b. Separate aggregate limit: \$1,000,000.00
- 2. Workers' Compensation Insurance
 - a. Per accident for bodily injury: \$1,000,000.00
 - b. Per bodily injury disease policy: \$1,000,000.00
 - c. Per disease per employee: \$1,000,000.00
- 3. Business Automobile Liability Insurance
 - a. Combined single limit per occurrence for bodily injury and property damage: \$500,000
 - b. Alternative acceptable limits:
 - i. bodily injury per person: \$250,000
 - ii. bodily injury per occurrence: \$500,000
 - iii. minimum for property damage liability per accident: \$100,000
- 4. Umbrella Liability
 - a. Per occurrence: \$1,000,000.00
 - b. Aggregate: \$1,000,000.00
- 5. Professional Errors and Omissions Insurance: \$1,000,000.00