



Bureau of Health Services Financing

REQUEST FOR INFORMATION

for

Independent Verification and Validation Services

RFI #: 3000019352

Proposal Due Date/Time: August 19, 2022

Release Date: June 16, 2022

THIS IS A REQUEST FOR INFORMATION (RFI) ONLY: This RFI is issued solely for information and planning purposes; it does not constitute a Request for Proposal, application, proposal abstract, or other solicitation. This RFI does not commit the State to contract for any supplies or services or make a grant award. Further, the State is not seeking proposals through this RFI and will not accept unsolicited proposals. Respondents are advised that the State will not pay for any information or administrative costs incurred in response to this RFI; all costs associated with responding to this RFI will solely at the interested party's expense.

Information obtained as a result of this RFI may be used to the State for program planning on a non-attribution basis. All submission materials become State property and will not be returned. The State will accept requests from any interested party to keep the information in its submission confidential and will agree to confidentiality if appropriate in accordance with state and federal law. In all other cases, the State may publicly post a summary of the comments received.

Only information which is in the nature of legitimate trade secrets or non-published financial data may be deemed proprietary or confidential. Any material within a response to this RFI identified as such must be clearly marked and will be handled in accordance with the Louisiana Public Records Act. R.S. 44:1-4 and applicable rules and regulations. Any response marked as confidential or proprietary in its entirety may be rejected without further consideration or recourse.

TABLE OF CONTENTS

1	SUMMARY	3
1.1	Purpose of RFI.....	3
1.2	Background.....	3
1.2.1	Medicaid Module Procurement Progress.....	3
1.3	Project Overview	4
2	ADMINISTRATIVE INFORMATION.....	4
2.1	RFI Coordinator.....	4
2.2	Schedule of Events.....	4
2.3	Response Content	5
2.3.1	Executive Summary	5
2.3.2	Background and Experience	5
2.3.3	Cost Structure	5
2.4	Response Instructions	5
2.4.1	Response Submittal	5
2.5	Additional Instructions and Notifications to Responders	5
2.5.1	RFI Addenda/Cancellation	5
2.5.2	Ownership of Response.....	6
2.5.3	Cost of Preparation.....	6
3	QUESTIONS.....	7
A.	Overview.....	7
B.	Strategic Planning & Risk Management	7
C.	Procurement Support/Vendor Management.....	8
D.	Testing & Implementation.....	8
E.	CMS Certification.....	8
F.	Innovation.....	8

1 SUMMARY

In accordance with federal law and Centers for Medicare & Medicaid Services (CMS) guidance, Louisiana Medicaid must transition its current consolidated single vendor platform to a Medicaid Enterprise System (MES), a coordinated set of individually sourced solutions. To this end, Louisiana is interested in pursuing innovative strategies to enhance its Independent Verification and Validation (IV&V) services. The Louisiana Department of Health (LDH) seeks public input on the services of an IV&V vendor that will work with multiple MES projects. The IV&V vendor will verify that LDH chosen solutions meet specific program requirements and CMS certification standards.

1.1 PURPOSE OF RFI

LDH is seeking information from vendors, stakeholders, and other entities who have input on improving IV&V services. This Request for Information (RFI) is focused on meeting CMS certification requirements, assistance with Medicaid Information Technology Architecture State Self Assessment and competitive procurements, modularity implementation, cost structure, improved collaboration, and overall system/process improvement.

1.2 BACKGROUND

Title XIX of the Social Security Act (Act) authorizes Federal grants to states to implement the medical assistance program (Medicaid) to provide health coverage for low-income adults, children, pregnant women, elderly adults, and people with disabilities. The Children’s Health Insurance Program (CHIP), authorized by Title XXI of the Act, provides federal matching funds to states to expand health insurance coverage for children above states’ Medicaid eligibility levels, through Medicaid and/or separate CHIP programs. Medicaid and CHIP are funded by both the Federal and State government and cover a wide range of services, including physicians, hospitals, nursing homes, and home and community-based services.

Although the Federal government establishes the general rules for Medicaid and CHIP, specific requirements are established by each state. LDH is the single state agency designated to administer or supervise the administration of the State Medicaid program and the Louisiana Children’s Health Insurance Program (LaCHIP) in accordance with Federal regulations. The Bureau of Health Services Financing (BHSF), otherwise known as Medicaid, is the agency within LDH that is responsible for administering the Louisiana Medicaid Program.

1.2.1 Medicaid Module Procurement Progress

The chart below outlines the State’s current procurement and implementation status for proposed MES Modules. Gainwell Technologies currently serves as the fiscal intermediary for Louisiana Medicaid over the consolidated solution. LDH’s current IV&V vendor is PCG.

Module	Incumbent Vendor	Awardee Vendor	Phase
Patient Access & Interoperability	N/A	Gainwell & 1Up	Implementation
Health Information Exchange Orchestrator	N/A	Louisiana Health Care Quality Forum	Implementation
Member Management	Maximus	TBD	RFP under review
Third Party Liability	Health Management Systems Inc. (HMS)	HMS	Implementation

Electronic Visit Verification	Statistical Resources, Inc. (SRI)	TBD	Proposals under review
Claims & Encounters and Financial Management	Gainwell	TBD	NASPO under review
Data Warehouse & Analytics	Gainwell	TBD	RFI posted
Care Management	Gainwell	TBD	RFI in draft
Provider Management	Gainwell	TBD	RFI in draft

1.3 PROJECT OVERVIEW

The objective of IV&V services is to provide complex evaluations and reviews of all MES components. These services are a part of gaining CMS certification which guarantees enhanced federal funding. The IV&V vendor participates with the State, CMS, and the project vendors during project initiation and throughout the course of the project in defining a realistic schedule and validation for each MES component. The MES will be comprised of various functional modules that align with applicable Federal and State laws, rules, regulations, policies, and subregulatory guidance, with each module being implemented in a phased or staggered approach.

IV&V services are provided through one or more designated vendor(s). The IV&V vendor will evaluate and make recommendations about the state artifacts that are required for certification. CMS has transitioned to a certification process that evaluates how well Medicaid information technology systems support desired business outcomes. This streamlined, outcomes-based approach, or “Outcomes-Based Certification (OBC),” is designed to ensure systems that receive federal financial participation are meeting the business needs of the State and of CMS. This is a significant process change from the Medicaid Enterprise Certification Toolkit or other older certification approaches. LDH intends to pursue OBC for the current planned MES modules.

2 ADMINISTRATIVE INFORMATION

2.1 RFI COORDINATOR

Requests for copies of the RFI must be directed to the RFI Coordinator listed below:

Shera Underwood
Medicaid.Modularity@la.gov

This RFI has been posted to LaPAC and the LDH Website, which can be found at the following links:

LaPAC: <https://wwwcfprd.doa.louisiana.gov/osp/lapac/pubMain.cfm>

LDH Website: <https://ldh.la.gov/index.cfm/newsroom/category/46>

2.2 SCHEDULE OF EVENTS

LDH reserves the right to deviate from this Schedule of Events at any time and without notice.

Activity/Event	Date
Public Notice of RFI	June 16, 2022
Question & Answer Period	June 16 - July 11, 2022

Deadline for LDH Response	July 28, 2022
Deadline for Final Response to RFI	August 19, 2022

2.3 RESPONSE CONTENT

Limit the Executive Summary, Background and Experience, and Cost Structure sections as defined as the sections below. The entirety of the response should not exceed thirty (30) pages, excluding cover letter.

2.3.1 Executive Summary

This section should serve to introduce the vendor or stakeholder. At a minimum, it should include administrative information including the name of the responder’s point of contact, phone number, email address, and any other pertinent contact information. Limit this section to no more than one (1) page.

2.3.2 Background and Experience

Responders should give a brief description of the company history, organizational structure, and number of years in business. Responders should also describe their experience with projects of this type and any experience gained from working with other states or corporations / governmental entities of comparable size and diversity, and especially highlight any prior experience working with Medicaid programs. Stakeholders should describe their connection to and history with Medicaid and what changes should be addressed in the project that would be most impactful to them. Limit this section to no more than two (2) pages.

2.3.3 Cost Structure

For informational purposes, outline the cost models frequently utilized for IV&V services. Cost models should allow flexibility for program changes or technology upgrades in planned and future work. Discuss any success seen using hybrid or shared risk models, or any innovative approaches to cost structure that should be considered prior to selecting a procurement strategy. Limit this section to no more than five (5) pages.

2.4 RESPONSE INSTRUCTIONS

2.4.1 Response Submittal

Responders interested in providing information requested by this RFI must submit responses, not to exceed thirty (30) pages in length, no later than the deadline for response to the RFI as stated in the Schedule of Events. The responses must be received by electronic copy only to Medicaid.Modularity@la.gov on or before the date and time specified in the Schedule of Events. Email submission is the only acceptable method of delivery. Fax, mail, and courier delivery shall not be acceptable. Responses received after the deadline or corrupted files may not be reviewed.

2.5 ADDITIONAL INSTRUCTIONS AND NOTIFICATIONS TO RESPONDERS

2.5.1 RFI Addenda/Cancellation

LDH reserves the right to revise any part of this RFI by issuing an addendum(a) to the RFI at any time. Issuance of this RFI, or subsequent addendum(a), if any, does not constitute a commitment by LDH or the State to issue an

RFP or any other process resulting in award of a contract of any type or form. In addition, LDH may cancel this RFI at any time, without incurring any liability from responders or potential responders.

2.5.2 Ownership of Response

The materials submitted in response to the RFI shall become the property of the State.

2.5.3 Cost of Preparation

LDH shall not be liable to any responders or potential responders for any costs incurred in developing a response, preparing for discussions (if any are held), or any other costs that may be incurred by a responder or potential responder in to responding to this RFI.

3 QUESTIONS

Respondents are encouraged to provide complete responses to the questions below and identify the specific question they are responding to in their submission. Please note that a response to every question is not necessary or required. Additionally, respondents may identify and comment on other issues that they believe are important for the Louisiana Department of Health to consider in procuring IV&V services. Whenever possible, respondents are asked to draw their responses from objective, empirical, and actionable evidence and to cite this evidence within their responses.

A. OVERVIEW

1. Provide a snapshot/summary of key IV&V services and roles/staffing you provide as it relates to the following:
 - a. Strategic Planning
 - i. Strategy and Roadmap Support; Timing of New Initiatives; Enhanced Funding Opportunities; APD Support including problem(s) needs assessment; feasibility study; alternatives analysis; cost benefit analysis; and Key Performance Indicator (KPI) Development.
 - b. Procurement
 - i. Requirements Gathering & Review; Statement of Work Review; and Vendor Proposal Evaluation Assistance.
 - c. Implementation Planning
 - i. Operations Validation; Project Schedule/Plan Review; Project Management Discipline Verification; and Performance Measurement.
 - d. Design & Development
 - i. Project Controls Verification; Human Factor Analysis; Quality & Performance Assessment; Work Product & Formal Deliverable Review; Business Goals (Objectives/Requirements) Assessment; Project Status Assessment; External Management (Oversight Group Interface); Operational Readiness Assessment; and Agile Enablement.
 - e. Deployment/Release
 - i. Go Live Assessment; User Documentation Evaluation; Training Evaluation; Configuration Audit; and CMS Certification.
 - f. Operations/Maintenance
 - i. O&M Plan and Procedures Review; and Performance Measurement and Improvement.
2. What are the key performance indicators and outcomes for an IV&V vendor and how should performance be measured? How does IV&V measure and demonstrate to the State that value is being added within IV&V services and modularity projects?

B. STRATEGIC PLANNING & RISK MANAGEMENT

3. CMS requires IV&V vendors “review and make recommendations on both the management of the project, both State and vendor, and the technical aspects of the project.” What’s the best practice process to ensure the recommendations are timely and provide value to the State?
 - a. How do you evaluate data to determine if the State has been accurate with timeline estimates?

- b. How do you notify States of your observations, validate them, and recommend next steps based on your observations?
- 4. In your experience, how frequently did IV&V services result in a report of findings and recommendations? What findings were most and least frequent?

C. PROCUREMENT SUPPORT/VENDOR MANAGEMENT

- 5. How do you assist state agencies with developing requirements for modules and/or associated RFPs?
- 6. What does successful Strategic Vendor Management look like?
- 7. How do you develop performance metrics to track project completion against milestones set by the State?

D. TESTING & IMPLEMENTATION

- 8. How does Agile delivery of a project change your approach?
 - a. Do you see any benefits/drawbacks of using Agile?
 - b. What other project delivery methodologies have you worked with that have resulted in successful implementations? What were the benefits/drawbacks of that methodology?
- 9. What tools or systems are considered industry standard and commonly used to identify risk of failure, major delay, or cost overrun in Medicaid technology projects?
 - a. How do you identify that a project is at risk of missing deadlines, failure, major delay, or cost overrun? How do you notify the state and partner to resolve?
 - b. What early interventions or corrective actions have been successful in other states?
 - c. How do you assess a state's risk management and capacity planning for Medicaid technology projects?
 - d. How do you supplement or coach change to practices already in place?

E. CMS CERTIFICATION

- 10. What challenges do you foresee as states transition to Outcomes-Based Certification or Streamlined Modular Certification?

F. INNOVATION

- 11. What innovation and technology improvements contribute to year-over-year improved beneficiary outcomes, and cost savings to Medicaid programs?
- 12. Describe what a successful IV&V relationship looks like to you and how you've implemented the policies and procedures necessary to maintain it over the term of the contract.
- 13. What strategic services do you offer that is underutilized by states and would add value to planning and implementation? What services would you like states to develop or include in IV&V contracts in the future?
- 14. States are commonly straddling outdated technologies across multiple systems, limited budgets and short timelines for mandated improvements. How do you assist states with determining the best path forward and realizing outcomes that connect to real improvement for Medicaid beneficiaries, providers, and other stakeholders?
- 15. Provide any additional information that may be relevant for the State's consideration pertaining to the IV&V vendor and innovative approaches to IV&V services.