AHCCCS Arizona Health Care Cost Containment System	**Request for Information** **#YH19-0058 MMIS Planning**

Procurement Officer: **ISSUE DATE:**   January 7, 2019

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OFFICE ADDRESS: AHCCCS
      Procurement Office
      701 E. Jefferson, MD 5700
      Phoenix, AZ 85034

RFI NAME: MMIS Planning

REPSONSE DUE DATE: February 5, 2019 no later than **3:00 pm** AZ time

QUESTIONS CONCERNING THIS RFI SHALL BE SUBMITTED TO THE PROCUREMENT OFFICER VIA E-MAIL BY **January 16, 2019**, 5:00 PM ARIZONA TIME ON THE Q &A FORM PROVIDED WITH THIS RFI. ANSWERS TO QUESTIONS WILL BE POSTED ON THE AHCCCS WEBSITE FOR THE BENEFIT OF ALL POTENTIAL RESPONDENTS.

Responses to this RFI must be in the actual possession of AHCCCS on or prior to the time and date indicated above.

This is a Request for Information ("RFI") only and as such will NOT result in any award of contract.

AHCCCS is in the information gathering stage and no decisions have been made concerning the agency's intent to issue a formal Request for Proposal. Responding to this RFI is appreciated and will NOT prohibit the respondents from responding to any future procurements.

Persons with a disability may request a reasonable accommodation, such as a sign language interpreter, by contacting the appropriate Procurement Agency. Requests should be made as early as possible to allow time to arrange the accommodation. A person requiring special accommodations may contact the person responsible for this request as identified below.

REQUEST FOR INFORMATION

1. **AHCCCS OVERVIEW**

   AHCCCS is the single state Medicaid agency for the State of Arizona. In that capacity it is responsible for operating the Title XIX and Title XXI programs through the State's 1115 Research and Demonstration Waiver, which was granted by the Centers for Medicare and Medicaid Services (CMS), U.S. Department of Health and Human Services. As of May 1, 2018, AHCCCS provides coverage to approximately 1.85 million members in Arizona. Arizona's Medicaid program has been delivered primarily as a managed care program with a relatively small residual, fee-for-service (FFS) component. Additional information may be found on the AHCCCS website reporting page: https://azahcccs.gov/Resources/Reports/population.html.

   Over 85% of the AHCCCS program's expenditures in SFY 2017 were through managed care programs. AHCCCS contracts with Managed Care Organizations (MCOs) that are responsible for providing Acute, Long Term Care, and Behavioral Health Services. A list of contracted plans can be found here: https://azweb.statemedicaid.us/HealthPlanLinksNet/HPLinks.aspx

   The program has a total fund budget for SFY 2019 of approximately $14.1 billion. AHCCCS has over 70,000 active providers in Arizona, such as individual medical and behavioral health practitioners, therapy disciplines, institutions, durable medical equipment companies and transportation entities. Additional information may be found on the AHCCCS website reporting page: https://www.azahcccs.gov/Resources/Reports/federal.html

   Through an Inter-State Agreement, AHCCCS supports processing for the Hawaii Medicaid program (Med-QUEST). Med-QUEST provides coverage to approximately 360,000 members. Over 90% of the Med-QUEST program's expenditures in SFY 2016 were through managed care programs. Med-QUEST contracts with Managed Care Organizations (MCOs) that are responsible for providing Acute, Long Term Care, and Behavioral Health Services. Med-QUEST has approximately 8,100 active providers in Hawaii, such as individual medical and behavioral health practitioners, therapy disciplines, institutions, durable medical equipment companies and transportation entities.

2. **PURPOSE of RFI**

   AHCCCS is leading this joint undertaking with Med-QUEST to issue this RFI to begin the process of updating a 30-year-old Pre-Paid Medicaid Management Information System (MMIS) shared by both states through modular system development and integration. The purpose of this RFI is to solicit input from qualified interested parties, which may be used as input in the development of an RFP for development of a roadmap to achieve this update process.

   This RFI, is seeking ideas and feedback for the procurement of a vendor/consultant to provide such a roadmap. The roadmap should be holistic, looking at technological, budgetary, staffing and business process challenges the states will face as they convert from a single, monolithic mainframe system into the modular approach advocated by CMS. The output roadmap would be used to develop the states' Medicaid Enterprise Certification Lifecyle documentation with CMS, such as the MMIS Concept of Operations, Advanced Planning Documents, Requirements and Design Documents, and so forth. It will also be used to guide the states in their annual budget requests, resource planning, and other project planning activities.

Ideally, ideas submitted in response to this RFI may be incorporated by AHCCCS into a future RFP for development of a roadmap.

3. **BACKGROUND AND REQUIREMENTS**
   3.1. Current MMIS

AHCCCS is the developer and operator of its MMIS. The MMIS was built on 1980s technology (CA IDEAL using CA DATACOM database) and took more than five years to design, develop and implement. The MMIS first went live in 1990 and has been modified throughout the years to accommodate changes in Medicaid and Arizona's approach to healthcare for its members. In 200X, Arizona and Hawaii entered into an agreement where Arizona would provide MMIS services for Hawaii.

The MMIS consists of the following functions (modules) that are part of the mainframe architecture:

- Financials
- Reference
- Provider
- Case Management
- Prior Authorization
- Claims
- Encounter and Reinsurance processing
- Recipient
- Eligibility and Enrollment
- Data Warehouse
- EDI
- SFTP
- Web processes

The MMIS currently operates out of the IBM cloud under a contract managed by the Arizona Department of Administration. Given the age of the technology, AHCCCS is finding it increasingly difficult to maintain and enhance to meet the states' growing business needs.

In addition, AHCCCS is currently in the process of adding a Provider Management module (awarded to CNSI under procurement YH18-0033) and an Electronic Visit Verification module (under procurement YH19-0025). These modules are intended to operate outside the mainframe environment, with appropriate integrations/data exchanges and will ultimately need integration with other modules as they are procured.

3.2. CMS Modular Vision
With its State Medicaid Director's Letter #16-010, CMS further clarified its 7 Standards and Conditions where a modular approach to replacing existing MMIS technology is encouraged and required in order for states to receive enhanced funding for system replacement. However, there is no single approach to MMIS systems and modules, or how best to transition from an existing, monolithic approach to a modular system.

AHCCCS and Hawaii have begun implementing part of this vision through their deployment of a Data Warehouse in 2005. The States are currently in the process of replacing the Provider Management processes with a module purchased from CNSI in 2018. That implementation is due to go live in late summer 2019.

4. **INFORMATION REQUESTED***:*

AHCCCS is seeking written feedback/responses on the following proposals/questions:

4.1. What, at a high level, should a good roadmap include?
4.2. How much does it cost to produce a roadmap as described?
4.3. Once developed, what review cycle would you recommend for the roadmap?
4.4. How does the agency modularize the existing mainframe processes? (Claims, Encounters, etc)
4.5. How would you define a "module" in the MMIS?
4.6. Where would you see MITA and this roadmap overlapping/intersecting, if at all?
4.7. What new technology and additional services will need to be integrated and included in a roadmap (i.e. system integrator)?
4.8. What timeline might be required to produce a roadmap as described?
4.9. What type of staffing commitment will be required of the agency for contributing to the roadmap?
4.10. What development methodology would you recommend to develop a roadmap?
4.11. How does the inclusion of Hawaii complicate or support the roadmap development?
4.12. What lessons learned or common pitfalls have you experienced in developing any technology/business process replacement roadmap?
4.13. What specific experiences in developing a roadmap for Medicaid module replacement does your firm have and what were the lessons learned from those experiences?
4.14. What strategy would you use for including staffing augmentation and business process changes in the roadmap?
4.15. What strategy would you use for managing multiple contracts in both development and operations?

4.16. Financial/Total Cost of Ownership

4.16.1. Provide complete operational and implementation cost details. Information should be provided on the costs associated with any tool or technology and the operational costs. Specify if the solution must be purchased versus rented.

4.16.2. Provide, to the extent possible, an estimated cost model to purchase, implement, and operate your described solution including unit costs based on key variables such as data users, source systems, interfaces, and the pricing scales based on those key variables.

4.16.3. Respondents must clearly state all assumptions underlying your pricing responses (i.e., charge basis, charge variances and sensitivities, etc.).

5. **CONTENTS OF YOUR RESPONSE**
   If you are interested in responding to any or all of the areas identified above, AHCCCS is requesting the following

   5.1. **Detailed Written Response** to any/all areas listed above.

   5.2. **Presentations/ Demonstrations**:   Respondents may have the opportunity, if desired, to schedule a 60-minute presentation with select AHCCCS management. Please indicate your willingness to schedule an in-person presentation. Should this opportunity become available, AHCCCS will contact you with dates and times that are convenient for both parties. AHCCCS reserves the right to decide if presentations will be scheduled for some or any of the respondents.

   5.3. **A completed Attachment A,** Respondent's Information, which includes contact information, including name, title, mailing address, email address, authorized signature, and phone number of the contact person for questions relating to the RFI.

6. **HOW TO RESPOND**

   6.1. Submit one (1) electronic copy of the RFI response via
       6.1.1.   CD; or
       6.1.2.   Email attachment.

   6.2. Submit your response no later than the time indicated on the front page of this RFI. Please take into consideration the Arizona time zone.

   6.3. Submit your response electronically (or by mail/physically) to the procurement officer listed on the front page of this RFI.

7. **CONFIDENTIAL/PROPRIETARY INFORMATION:**

   7.1. To the extent allowed by law, information contained in a response to a request for information shall be considered confidential until a formal procurement process is concluded or for two (2) years, whichever occurs first. This RFI and responses to the RFI are subject to the Arizona Public Records law and as such, are open to public inspection after this time.

   7.2. Detailed Legal Analysis: If a Respondent believes that a specific portion of its response contains information that should be withheld from public inspection due to confidentiality, the Respondent shall submit to the Procurement officer a detailed legal analysis, prepared by legal counsel, which sets forth the bases for the requested non-disclosure and the specific harm or prejudice which may arise if disclosed. The analysis shall be presented to the Procurement Officer at the same time as the bid, proposal, offer, specification or protest.

   7.3. Redacted Version of Response: If any pieces of your response are being requested to be kept confidential, and withheld from public viewing, please submit an additional redacted copy of the proposal ON A SEPARATE CD. This will ensure that our office is crystal clear on which

version of your response is acceptable for public viewing as opposed to the version that contains confidential information for AHCCCS viewing only.

      7.3.1.   An entire response shall <u>not</u> be identified as confidential; only those very limited and distinct portions which are considered by the Offeror as confidential may be identified as such.

      7.3.2.   In the event that AHCCCS receives a request for disclosure of the information, AHCCCS shall disclose the information in accordance with law. Prior to disclosure, AHCCCS will inform the Offeror of such request and provide the Offeror a period of time to take action it deems appropriate to support non-disclosure. The Offeror shall be responsible for any and all costs associated with the nondisclosure of the information.

8. REIMBURSEMENT:

AHCCCS will not reimburse any respondent for the cost of preparing and submitting a response to the RFI.

9. NO AWARD OF CONTRACT:

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Attachment A: Respondent's Contact Information

Company Name	
Address	
Federal Employer ID Number	

For Clarification of this Response Contact:

Name	
Title	
Phone	
Email	

Signature of Authorized Person	
Name	
Title	
Date	

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