Procurement Officer: Alice McLain
Procurement Manager
Telephone: 602-417-4749
Email: Alice.McLain@azahcccs.gov

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

RFI NAME: Provider Management System

RESPONSE DUE DATE: July 17, 2017 no later than 3:00 pm AZ time

QUESTIONS CONCERNING THIS RFI SHALL BE SUBMITTED TO THE PROCUREMENT OFFICER VIA E-MAIL BY JUNE 30, 2017 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.
1. **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, 2017, AHCCCS provides coverage to approximately 1.9 million members in Arizona. In addition to the Arizona Medicaid program, AHCCCS processes claims for several non-Medicaid programs including the Arizona Department of Corrections.

Over 86.7% of the AHCCCS program’s expenditures in SFY 2016 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 2017 of approximately $12.2 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 and Background**

AHCCCS is leading this joint undertaking with Med-QUEST to issue this RFI to streamline and reduce the burden of the enrollment process for providers. Streamlining the enrollment process will ensure compliance with Medicaid requirements for program participation and 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 one overarching provider enrollment management system to bring Arizona and Hawaii providers into state and federal compliance.

This RFI, is seeking ideas and feedback for the procurement of a provider management system (herein sometimes called the “System”). This System should consolidate multiple provider enrollment applications currently in use into a single enrollment process that electronically collects and processes information needed to support provider screening, enrollment, verification, registration, and potentially credentialing.
The intent of consolidating and streamlining the provider enrollment process is to reduce the processing time and duplication of work by AHCCCS, Med-QUEST, and providers by allowing providers to submit data once, whether the provider is enrolling or revalidating, in one program or in multiple state-supported programs. In addition, because much of the same information is collected both by AHCCCS or Med-QUEST (for registering and enrolling providers) and its contracted managed care entities (for provider credentialing), AHCCCS envisions that the System will have the capacity to share some provider enrollment data with managed care credentialing entities. Sharing this data allows for streamlining the enrollment and credentialing process and further reduces the provider’s administrative burden.

The System must meet all Arizona, Hawaii, and federal provider enrollment requirements specific to each state program. Additionally, the System will provide a platform to supply and receive required information to the various components of the MMIS, including but not limited to the users of the MMIS.

The most recent provider registration numbers for AHCCCS and Med-QUEST are listed below:

<table>
<thead>
<tr>
<th></th>
<th>AHCCCS</th>
<th>Med-QUEST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Number of Active Providers as of May 2017</td>
<td>70,256</td>
<td>8,101</td>
</tr>
<tr>
<td>Newly registered providers in calendar year 2016</td>
<td>10,086</td>
<td></td>
</tr>
<tr>
<td>Terminated providers in calendar year 2016</td>
<td>5,726</td>
<td></td>
</tr>
<tr>
<td>Number of Providers Revalidated Annually</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>3,952</td>
<td>N/A</td>
</tr>
<tr>
<td>2014</td>
<td>3,145</td>
<td>N/A</td>
</tr>
<tr>
<td>2015</td>
<td>3,354</td>
<td>N/A</td>
</tr>
<tr>
<td>2016</td>
<td>3,816</td>
<td>N/A</td>
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</table>

Ideally, ideas submitted in response to this RFI may be incorporated by AHCCCS into a future RFP for a provider management system to be made available through an AHCCCS contract.

3. REQUIREMENTS

AHCCCS is requesting information from interested parties regarding the procurement of a provider management system. The System must meet the following minimum requirements separately for both states. Based in part on the information received in response to this RFI, further refinement and detail requirements for the system are expected.

3.1 Overall Requirements

1. System will provide a single electronic access point for submission and processing of provider enrollment information in support of state healthcare programs, including but not limited to, the Medicaid Program,
   a. System will support multiple electronic interfaces.
   b. System will allow for manual entry of a paper submission of provider information.
   c. System will perform independently of the Arizona and Hawaii MMIS, but will interface with existing MMIS.
d. In addition to interfacing with existing MMIS, the system will allow for modifications and upgrades to the MMIS platform.

e. System will utilize functional and configurable databases for categorizing provider program, type, and specialty allowing for ease of expansion.

f. System will be compliant with CMS Medicaid Information Technology Architecture (MITA) requirements.

2. System will support enrollment in multiple programs and provider types through submission of a single application.

3. System will act as a central repository for collecting, updating, and sharing provider data while allowing electronic access to the state, state healthcare programs, and Managed Care Organizations.

a. System will provide a robust reporting functionality and allow for ad-hoc reporting.

b. System will provide a mechanism for providers, clients, and state staff to search provider data with multiple options for sorting, filtering, etc.

4. System will interface with multiple licensing and certification entities to collect and verify licensure, certification information and other verification sources. The system must be capable of retrieving and using data stored in multiple formats.

5. System will guide a provider through the completion of an application and prompt the provider to submit all necessary supporting information and documentation based on programs in which the provider will participate.

6. System will allow a provider to have electronic access to check application and enrollment status and will have the ability to communicate process deficiencies to providers via electronic mail.

7. System will provide a triggering and notification process for providers to update and confirm enrollment changes received through outside entities.

8. System will identify and provide electronic and paper notifications to providers regarding supporting documentation to enroll, revalidate, or remain enrolled in state programs, including but not limited to certifications, licenses renewals.

9. System will allow a provider the ability to update their profile address(es) to interface with MMIS.

10. System will support PCI compliant electronic payments for Provider Enrollment Fees

11. System will allow provider the ability to upload supporting documentation in various document formats.

3.2 Flexibility of Vendor

1. The respondent will provide systems training for state and claims administrator staff in alignment with the implementation schedule in a format and at times as determined by both states.

2. The respondent will assist and participate with the state in conducting education, training, and communications during implementation and transition to the new provider enrollment management system, and going forward as needed to support System changes.

3. System will provide a robust and customizable online help tool for internal and external users.

4. The System must support policies that are reasonable and appropriate to protect data from improper access, tampering or unauthorized disclosure and to ensure compliance with applicable laws and regulations. Such policies will include administrative procedures, physical security measures, and technical security services that are reasonable necessary to assure the confidentiality, integrity, and the availability of the data.
3.3 Financial/Total Cost of Ownership
This RFI does not constitute a solicitation for proposals, a commitment to conduct procurement, or an offer of a contract or prospective contract; AHCCCS will not award a contract as a result of this RFI. AHCCCS will not be liable for any costs incurred by respondents in the preparation and submission of information in response to this RFI.

Information received by AHCCCS becomes the property of AHCCCS and will not be returned to the sender. There will be no acknowledgement by AHCCCS of receipt of the information. Acceptance of responses to this RFI imposes no obligations of any kind upon AHCCCS.

4. INFORMATION REQUESTED:
If a vendor is interested in responding to any or all of the areas identified, AHCCCS and Med-QUEST are requesting the following detailed written response:

4.1 How would the respondent provide a solution for this System including on-going maintenance and software updates?

4.2 What issues related to the management of provider information or an overall enrollment concept has not been addressed in this RFI?

4.3 What should both programs consider and address while planning for this System, as identified in the RFI?

4.4 How would the respondent recommend transition of the providers from MMIS to the new System?

4.5 Provide detailed information with regard to the type of electronic interfaces that can be built to validate information with a variety of potential data partners.

4.6 How would a respondent update the System to reflect federal requirements for providers and new mandates that arise? Describe any barriers to complying with any state and federal laws.

4.7 Provide examples of similar systems that have been implemented in other State Medicaid programs and descriptions of the experience in those states along with relevant data, including processing timeframes, customer satisfaction, and data verification.

4.8 How could the System incorporate the provider credentialing process managed by the managed care entities through a single database program?

4.9 Provide a cost and timeline estimate for fulfilling the requirements of implementing a System as outlined in this RFI. Provide separate cost and timeline estimates for additional features such as credentialing and functions provided in the response.

4.10 What issues and challenges has the respondent experienced when interfacing their solution with mainframe systems?
5. CONTENTS OF YOUR RESPONSE
   If you are interested in responding to this RFI, AHCCCS is requesting the following:

   5.1 Detailed Written Response: to any or all of the areas listed above. Response should be no more than twelve pages, clearly legible, sequentially page-numbered and include the respondent’s name and RFI number at the top of each page.

   5.2 Presentations/Demonstrations: AHCCCS may request that the respondents schedule a 90-minute presentation with select AHCCCS and Med-QUEST 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 electronically (or by mail/physically) to the procurement officer listed on the front of this RFI via
      6.1.1 CD; or
      6.1.2 Email attachment.

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

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. AHCCCS reserves the right to use outside consultants to assist staff in reviewing this request for information. A Procurement Disclosure Statement (PDS) is signed by all reviewers to ensure that the legal mandate to maintain strict security and confidentiality of the information is met. 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 basis 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 a response are being requested to be kept confidential, and withheld from public viewing, an additional redacted copy of the proposal on a
separate CD or in a separate document is required. This will ensure that no confidential information is advertently shared publicly as opposed to the version that contains confidential information for AHCCCS viewing only.

7.3.1 An entire response shall not be identified as confidential; only those very limited and distinct portions which are considered by the respondent 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 the law. Prior to disclosure, AHCCCS will inform the respondent of such request and provide the respondent a period of time to take action it deems appropriate to support non-disclosure. The respondent 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 or for travel costs associated with presenting the demo.

9. NO AWARD OF CONTRACT:
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 procurement.
# Attachment A: Respondent’s Contact Information

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<tr>
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<tr>
<td>Address</td>
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<td>Federal Employer ID Number</td>
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For Clarification of this Response Contact:

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<td>Title</td>
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Signature of Authorized Person

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