

State of New Hampshire
Department of Health and Human Services

ELECTRONIC VISIT VERIFICATION (EVV) SYSTEM

RFP-2022-DLTSS-05-ELECT

Vendor Conference (*Not Mandatory*)
January 4, 2022

Dial In: +1 603-931-4944 United States, Concord, NH
Phone Conference ID: 944 448 2#

Disclaimer

This presentation includes brief descriptions of the RFP specifications and requirements but does not fully elaborate on all required elements. As a result, this presentation does not supersede what is stated in the RFP or its appendices. Proposers are responsible for ensuring that their proposal is complete and accurate according to the information and requirements contained in the full RFP.

Disclaimer

While questions may be asked during this presentation, the Department is not obligated to answer questions during the presentation. As indicated in the RFP, any questions answered verbally will be non-binding. Questions provided in writing in accordance with the RFP will be answered, in writing, by the Department.

Agenda

- Welcome
- Introductions
- Vendor Conference General Information
- Procurement Activities
 - Schedule of Events
 - Terms and Conditions
 - Proposal Format
 - Vendor Question and Answer Period
 - Evaluation Process
- RFP Overview
 - Background
 - Project Scope
 - Project Duration
- Vendor Question and Answer Period

State Project Team

Executive Sponsor – Henry Lipman, Medicaid Director

Executive Sponsor - Nancy Rollins, Interim Director, Div. of Long Term
Supports and Services

BEAS Bureau Chief – Wendi Aultman

BDS Bureau Chief – Sandy Hunt

Business Lead/IT Manager – Kerri King

Medicaid Administrator – Jane Hybsch

Improvement and Integrity Administrator – Karen Carleton

MMIS Director - Roger Boissonneau

MMIS Senior Business Systems Analyst - Jim Gedeon

MMIS Technology Manager - Kenneth Gagne

MMIS Business Systems Analyst-Thomas Desrosiers

Vendor Conference General Information

The purpose of this voluntary vendor conference is to provide an informal forum for potential proposers to ask questions and gain clarifications on the RFP requirements:

- Agency will provide an overview of the goals and objectives of the RFP;
- State guidelines for proposal submission and requirements for any resulting contract will be discussed;
- State responses to questions during the vendor conference are considered informal and nonbinding;
- Vendors may ask questions verbally, however, formal questions with binding responses must be submitted in writing.

Please hold questions until the Question/Answer periods

Background

The New Hampshire Department of Health and Human Services is soliciting proposals for the provision of an Electronic Visit Verification System (EVV) for all Medicaid personal care services (PCS) and home health services (HHCS) that require an in-home visit by a provider. EVV for these services is required by Section 1903 of the Social Security Act (42 U.S.C. 1396b), also known as the 21st Century Cures Act. The Department is required to implement EVV for in-home personal care services to bring the Department into compliance with the 21st Century Cures Act.

Background

Goals and objectives for the EVV system are:

- Ensuring individuals receive the services that they are authorized to receive in order to stay healthy and safe in the community;
- Complying with the requirements within the 21st Century Cures Act;
- Providing data to support quality improvement and program efficiencies;
- Viewing of utilization and services provided in real time;
- Improving quality of care for Medicaid recipients;
- Reducing unauthorized services, billing errors, and improve payment accuracy; and
- Providing additional auditing tools to reduce fraud, waste and abuse.

Procurement Schedule*

SCHEDULE OF EVENTS	
EVENT	DATE & TIME (ET)
RFP Released to Vendors / Inquiry Period Begins	December 14, 2021
Notification to the State if Representatives Plan to Attend the Vendor Conference (Mandatory)	December 27, 2021
Vendor Conference (Optional)	January 4, 2022 1:00 PM ET
Vendor Inquiry Period Ends (Final Inquiries due)	January 4, 2022 11:59 PM ET
Final State Responses to Vendor Inquiries	January 20, 2022
Final Date and Time for Proposal Submission	February 3, 2022 11:59 PM
Invitations for Oral Presentations	February 11, 2022
Vendor Presentations/Discussion Sessions/Interviews	February 15-17, 2022
Estimated Date of Vendor Selection	February 18, 2022
Anticipated Governor and Council Approval	April 20, 2022
Anticipated Effective Contract Date	April 20, 2022

*Procurement schedule is subject to change

Minimum RFP Requirements

- A signed Transmittal Letter is included with the proposal.
- Proposal must satisfy requirements of Cures Act
- Completed Business/Technical Requirements and Deliverables Appendix.
- Experience managing a similar EVV project.
- Detailed description of company and staff experience.
- Vendor Price Proposal

Proposal Format

- Format standards are designed to assure effective comparability between vendor proposals.
- Topics for evaluation are clearly identified to enable vendors to focus proposals.
- Adherence to format standards is essential.

Proposal Format

Transmittal Letter

Be sure to include the Transmittal Form Letter.

Executive Summary

Opportunity to provide context for the proposal

Provides an overview and approach to fulfilling deliverables

Proposal Narrative, Project Approach, and Technical Response

- Answer all Topics in Appendix C, Topics for Mandatory Responses
- Cite the relevant section, subsection, and paragraph number, as appropriate
- Provide an electronic Word version of the proposal narrative
- Include required appendices, including Appendix G, EVV Requirements Matrix.

Proposal Format

Staffing and Resumes

Submit staffing plan and resumes

License, Certificates and Permits

Affiliations – Conflict of Interest

Cost/Pricing Proposal Contents

Costs will only be considered for qualified Vendors meeting the minimum RFP requirements.

Use of worksheet formats provided in Appendix D is essential to assure comparability

Must be submitted separately from the Technical RFP proposal details.

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 - Objectives
 - Goals
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Evaluation Process

Planned evaluation steps include:

- Initial Screening for Compliance with Minimum Standards
- Preliminary Team Evaluation of Proposals
- Conduct Oral Interviews, and
- Final Team Evaluation

After Final Team Evaluation is completed, the Department will:

- Notify the Selected Vendor
- Finalize the Contract

Evaluation Process

Total Maximum Point Value: 500 Points

Evaluation of Proposals will be based on four (4) areas:

Technical Proposal

Vendor Software Solution	150 Points
Vendor's Technical, Service and Project Management Experience	100 Points
Total Technical Proposal Points Available	<u>250 Points</u>

Vendor Company	<u>50 Points</u>
Vendor Staffing Qualifications	<u>50 Points</u>

Cost Proposal

Quoted Project Price	150 Points
Total Cost Proposal Points Available	<u>150 Points</u>

Total Points Available	<u>500 Points</u>
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Note: The State will consider comments from references throughout the evaluation process.
Based on preliminary evaluations of Proposals, Vendors will be identified for oral interviews/presentations.

Evaluation Process

Cost/Price Proposal – The Cost Proposal must be labeled clearly and submitted separately from the Technical Proposal. The following formula will be used to assign points for cost:

$$\text{Vendor's Price Score} = (\text{Lowest Proposed Price} / \text{Vendor's Proposed Price}) \times 150 \text{ Points}$$

For the purpose of this formula, the Lowest Proposed Cost is defined as the lowest cost proposed by a vendor on Appendix E, Pricing, Table E-1.1, Total Line who fulfills the following minimum requirements:

- a) Submits a signed Transmittal Letter,
- b) Vendor must achieve 250 minimum points in the preliminary scoring of the Vendor's Technical Proposal.

Evaluation Process

Oral interviews will be:

- At the request of the State;
- A maximum of 2 hours in duration;
- Based on a standard set of interview questions prepared by the State; and
- Designed to clarify information provided in Proposals

Scores will be based on all information provided and acquired throughout the procurement process, including any oral presentations.

Project Background

Section 12006(a) of the 21st Century Cures Act mandates that states implement an Electronic Visit Verification System (EVV) to track:

- All Medicaid personal care services (PCS) provided under sections 1905(a)(24), 1915(c), 1915(i), 1915(j), 1915(k), and Section 1115
- All home health care services (HHCS) that require an in-home visit by a provider under 1905(a)(7) of the Social Security Act or a waiver.

Project Background

Personal Care Services (PCS)

- Medicaid covers PCS for eligible individuals through Medicaid State Plan options and/or through Medicaid waiver and demonstration authorities approved by CMS.
- Consists of services supporting Activities of Daily Living (ADL), such as movement, bathing, dressing, toileting, transferring, and personal hygiene.
- Offers support for Instrumental Activities of Daily Living (IADL), such as meal preparation, money management, shopping, and telephone use.

Home Health Care Services (HHCS)

- Medicaid covers HHCS for eligible individuals as a mandatory benefit through the Medicaid State Plan and/or through a waiver as an extended state plan service approved by CMS.
- This is known as the home health benefit, and CMS is equating HHCS as described in the 21st Century CURES Act with the longstanding home health benefit mentioned at section 1905(a)(7) of the Social Security Act.

Project Background

In the NH Department of Health and Human Services, these eligible services are administered and authorized through State Plan Medicaid under the Office of Medicaid, and four 1915(c) Waivers in the Division Of Long Term Supports and Services:

- Bureau of Elderly and Adult Services-Choices for Independence Waiver for the elderly and chronically ill.
- Bureau of Developmental Services- In Home Support (IHIS), Developmental Disabilities (DD), and Acquired Brain Disorder Waivers (ABD).
- State Plan Medicaid services are provided by Managed Care Organizations (MCO). Currently there are three MCOs.

Project Background

EVV Systems Must Verify:

- **Type** of service performed;
- **Individual receiving** the service;
- **Date** of the service;
- **Location** of service delivery;
- **Individual providing** the service;
- **Time** the service begins and ends.

New Hampshire has chosen to implement a “hybrid” EVV system architecture

- Providers can utilize their own EVV compliant system if available
- Providers can use the central Department EVV system
- All data will be interfaced with the Department’s EVV aggregator

Project Objectives

The purpose of this RFP engagement is to:

- Implement an EVV system for all Medicaid personal care services (PCS) and home health services (HHCS) that require an in-home visit by a provider.
 - Hybrid/Open EVV model with one EVV contractor.
 - Two components — Data collection and data aggregation.
- Monitor and report on key performance indicators and obtain CMS outcomes-based certification.
- Train Department staff and provider users
- Provide ongoing support for providers

Project Background

Internal and External Stakeholder Input Required

- Community providers and associations across the State of NH.
- Family caregivers and individuals receiving PCS/HHCS.
- Department staff (BEAS, BDS, Medicaid, & Program Integrity)
- NH DoIT Medicaid Management Information System (MMIS) program staff

Project Scope

- **EVV Scheduling, Billing, and Compliance Capabilities** – Provide audited visit verification that prevents provider abuse or inappropriate billing/payment by collecting recipient and direct service worker information electronically at the beginning and end of services provided in the home and other settings.
- **Claims Filing Related Services** – Provide aggregator functionality to verify visits against billed claims and authorizations before processing for payment by the MMIS or MCOs.
- **Reports** – The EVV system must be able to provide standard and ad hoc reports to the Department, case management/area agencies, provider agencies, and managed care organizations.
- **Interfaces to/from the MMIS/MCOs** – The system must interface daily with the MMIS/MCOs to potentially exchange member, provider, service authorization, and claims information.

Implementation Schedule

- Vendor should propose a reasonable duration for EVV implementation.
- The Department would like to implement the EVV system by January 1, 2023.
- Target Contract Effective Date is April 20, 2022.

Question and Answer Period

Stipulations that apply to this segment include:

- All of today's responses are preliminary and are not binding; final responses will be in writing.
- All questions must be received by January 4, 2022 11:59 PM ET.
- Official written responses to all questions will be published on or before January 20, 2022.
- Responses to some questions may be deferred today pending further review.

Thanks for attending!

- Be sure to email us (**dean.b.fancy@dhhs.nh.gov**) with any questions by January 4, 2022 11:59 PM ET