

	<h2>Request for Information</h2>
	<p><b>Housing and Health Opportunities (H2O) Services Third Party Administrator (TPA)</b></p> <p><b>#YH23-0125</b></p>

**Procurement Officer:**

**ISSUE DATE:** Wednesday, April 5, 2023

Name: Toni Cota  
 Title: Senior Procurement Officer  
 Email: [PROCUREMENT@azahcccs.gov](mailto:PROCUREMENT@azahcccs.gov)

**RFI NAME: Housing and Health Opportunities (H2O) Services Third Party Administrator (TPA) #YH23-0125**

**RESPONSE DUE DATE: Friday, May 5, 2023** no later than **3:00 pm** Arizona time

QUESTIONS CONCERNING THIS RFI SHALL BE SUBMITTED TO THE PROCUREMENT OFFICER VIA E-MAIL BY WEDNESDAY, APRIL 19, 2023, 3:00 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 submitted electronically to 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. OVERVIEW

### AHCCCS

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 February 1, 2023, AHCCCS provides coverage to approximately 2.5 million members in Arizona. In addition, AHCCCS administers several Non-TXIX programs through federal grant funds received from the Substance Abuse and Mental Health Services Administration (SAMHSA).

The program has a total fund budget for SFY 2023 of approximately \$18.5 million. Over 12 percent of the AHCCCS program's expenditures in SFY 2022 were through Fee For Service (FFS) 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>

AHCCCS has over 119,500 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>

### AHCCCS Housing and Health Opportunities (H2O) Demonstration

The Arizona Health Care Cost Containment System (AHCCCS) is requesting an amendment to the 1115 Research and Demonstration Waiver to seek waiver and expenditure authority to implement the AHCCCS Housing and Health Opportunities (H2O) demonstration. The goal of the AHCCCS H2O demonstration is to enhance and expand housing services and interventions for AHCCCS members who are homeless or at risk of becoming homeless. Under this demonstration proposal, the agency will seek to:

- Increase positive health and wellbeing outcomes for target populations including the stabilization of members' mental health conditions, reduction in substance use, improvement in the utilization of primary care and prevention services, and increased member satisfaction,
- Reduce the cost of care for individuals successfully housed through decreased utilization of crisis services, emergency department utilization, and inpatient hospitalization, and
- Reduce homelessness and improve skills to maintain housing stability.

The AHCCCS Housing and Health Opportunities (H2O) Demonstration targets individuals who are experiencing homelessness or at risk of homelessness and who have at least one or more of the following conditions or circumstances:

- Individuals with a Serious Mental Illness (SMI) designation,
- Individuals determined high risk or high cost based on service utilization or health history,
- Individuals with chronic health conditions and/or co-morbid conditions (e.g., end-stage renal disease, cirrhosis of the liver, HIV/AIDS, co-occurring mental health conditions, physical health conditions, and/or substance use disorder), and

# REQUEST FOR INFORMATION

- Individuals at high risk of experiencing homelessness upon release from a correctional facility).

Additional information may be found on the AHCCCS website:

<https://www.azahcccs.gov/Resources/Federal/HousingWaiverRequest.html>

## 2. PURPOSE of RFI and Background

AHCCCS is issuing this RFI to identify possible private, public, and/or non-profit organizations who may be qualified and willing to serve as the Third-Party Administrator (TPA) for the H2O services scheduled for implementation on October 1, 2023. Respondents may include, but are not limited to, MCOs, private companies providing “clearinghouse” services, organizations with advanced knowledge around housing services and Medicaid billing. It is the intent of AHCCCS in the administration of H2O services to:

- Increase provider enrollment for Community Based Organizations addressing Health Related Social Needs,
- Establish and verify member eligibility for H2O services, following AHCCCS guidelines,
- Coordinate services between MCOs and H2O-providers,
- Develop a streamlined process for H2O-providers to submit invoices and turn the invoices into Medicaid claims,
- Monitor and track the trajectory of member access and utilization of H2O services,
- Assist AHCCCS with maintaining compliance to implementation of H2O, and
- Provide Technical Assistance to H2O-Providers.

## 3. REQUIREMENTS

A general Scope of the vendor will include:

3.1 Familiarity with AHCCCS practices including AHCCCS H2O Demonstration, Medicaid Billing and Fraud, Waste, and Abuse.

### 3.2 Training

3.2.1 Provide initial and ongoing H2O-provider TA/training related to the H2O project.

TA/training to include but not be limited to the following topics:

3.2.1.1 H2O-provider Onboarding: Provider enrollment, billing, service delivery and policy implementation.

3.2.1.2 Training for H2O-providers around Evidence Based Practice including SAMHSA Fidelity for Permanent Supportive Housing, Motivational Interviewing, Trauma Informed Care, Critical Time Intervention, and others as the need indicates.

3.2.1.3 Utilization of the state’s Learning Management System for H2O-providers to access trainings. Must use the competency evaluation processes already established.

### 3.3 Data

3.3.1 Provide ongoing data collection, coordination, analysis, and reporting related to the H2O project objectives: activities include but are not limited to collecting and running data analytics for data exchanges between H2O-providers; data sharing activities and analysis of information between the Homeless Management

# REQUEST FOR INFORMATION

Information System (HMIS), Medicaid claims data, the Health Information Exchange (HIE), and/or other referral platform; running data analytics to report on the H2O members served, trends, and opportunities for improved outcomes. This includes running data on the training provided to identify needs, gaps, and opportunities for improvement.

- 3.3.2 Provide ongoing analysis of data sets in order to evaluate achievement of outcomes throughout the demonstration period.
- 3.4 Claims Clearinghouse
  - 3.4.1 Act as a claims clearinghouse for H2O-providers to submit claims to AHCCCS for H2O members. The invoicing process for H2O-providers will need to be similar to grant reimbursement structures. The TPA will need to turn invoices into Medicaid claims, using a billing crosswalk that will be developed by AHCCCS.
  - 3.4.2 Services include six months of Rental Assistance, six months of Per Diem rate in Enhanced Shelter, Outreach, and Housing Support Services.
- 3.5 Member Eligibility and Monitoring
  - 3.5.1 Establish H2O Eligibility for members using AHCCCS parameters and data.
  - 3.5.2 Validate member eligibility and authorization for services.
  - 3.5.3 Provide assistance with determining H2O program member eligibility and ongoing member monitoring activities.
  - 3.5.4 Track member utilization of H2O services to ensure members do not exceed maximum service limits.
  - 3.5.5 Establish provider monitoring process to address concerns related to Fraud, Waste, and Abuse.
- 3.6 Collaboration
  - 3.6.1 Act as a centralized contact for AHCCCS and H2O-providers.
  - 3.6.2 Provide outreach and engagement to Community Based Organizations and establish contracts for the implementation of H2O services throughout the state.
  - 3.6.3 Provide communication and coordination efforts to MCOs and H2O Providers.

## 4. INFORMATION REQUESTED

If a vendor is interested in responding to any or all of the areas identified, AHCCCS is requesting the following detailed written response:

### 4.1 Familiarity with AHCCCS Requirements and Processes

- 4.1.1 Describe the organization's familiarity with:
  - 4.1.1.1 The AHCCCS H2O Demonstration.
  - 4.1.1.2 AHCCCS Medicaid Billing practices.
  - 4.1.1.3 AHCCCS Fraud, Waste, and Abuse requirements.

### 4.2 Training

- 4.2.1 Describe the organization's experience and success in performing the training activities identified under the General Scope; include the populations served.
- 4.2.2 Describe the organization's standard reporting tools, metrics, or strategies utilized to monitor program performance, identify areas of improvement, and inform federal, state,

# REQUEST FOR INFORMATION

or other stakeholders about the quality of the performance of the programs you administer.

- 4.2.3 Describe the program, systems, processes used to track and monitor training completion and compliance requirements.

## 4.3 Data

- 4.3.1 Describe the organization's experience in performing the data activities identified under the General scope including:

- 4.3.1.1 Data collection, coordination, and analysis.

- 4.3.1.2 Data exchange activities between providers, state agencies, and MCOs.

- 4.3.2 Describe the organization's use, if applicable, of:

- 4.3.2.1 The Homeless Management Information System (HMIS).

- 4.3.2.2 The Arizona Health Information Exchange (HIE).

- 4.3.2.3 AHCCCS' Pre-Paid Medical Management Information System (*PMMIS*) including the resulting data file exchanges.

- 4.3.2.4 AHCCCS Online.

## 4.4 Claims Clearinghouse

- 4.4.1 Describe the organization's experience and success with acting as a health insurance claims biller/clearinghouse. Include experience:

- 4.4.1.1 Developing and utilizing a process for providers to submit invoices and turn the invoices into Medicaid claims.

- 4.4.1.2 Providing billing guidance and TA to providers and states.

- 4.4.1.3 Providing regular files to state agencies to manage member eligibility status.

- 4.4.1.4 Providing regular electronic files of encounters to state agencies of claims processed.

- 4.4.2 Describe the organization's capacity to process payment within 10 days or less.

## 4.5 Member Eligibility and Monitoring

- 4.5.1 Describe the organization's experience utilizing data systems to establish and validate member eligibility.

- 4.5.2 Describe the organization's capacity to monitor receipt of services and provide authorization for services to multiple providers.

- 4.5.3 Describe the organization's experience and process for monitoring provider compliance and addressing concerns related to Fraud, Waste, and Abuse.

## 4.6 Collaboration

- 4.6.1 Describe the organization's experience collaborating with state agencies and MCOs.

- 4.6.2 Describe the organization's experience working with fee for service programs, including the American Indian Health Program (AIHP), Tribal Regional Behavioral Health Authorities (TRBHAs) and Tribal ALTCS.

- 4.6.3 Describe the organization's experience working with Tribal Nations, including the Indian Health Service (IHS) and Tribal 638 facilities and other tribally run organizations in Arizona. If the vendor does not have experience, describe steps that will be taken to ensure all staff working on this project will receive training on how to work effectively with tribally run organizations.

# REQUEST FOR INFORMATION

## 4.7 Challenges or Barriers

4.7.1 Identify any challenges or barriers to consider for all items presented in this RFI.

## 4.8 Subcontracting Arrangements

4.8.1 Identify if the organization would be willing to pursue subcontracting or partnering with another vendor for any of the activities noted in this RFI in order to make available **one entity** that encompasses the entire scope of this RFI.

## 4.9 Financial/Cost

- 4.9.1 Provide complete cost details. Include information on the costs associated with any tool or technology and the operational costs.
- 4.9.2 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.
- 4.9.3 Clearly state all assumptions underlying your pricing responses (e.g., charge basis, charge variances and sensitivities).

## 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. AHCCCS appreciates your attempt to limit your response to **15 pages** and any additional attachments relevant to the RFI response.
- 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 email attachment to the listed at [PROCUREMENT@azahcccs.gov](mailto:PROCUREMENT@azahcccs.gov). Please indicate the RFI number and your company name in the subject line of your email.
- 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.

## 7. CONFIDENTIAL/PROPRIETARY INFORMATION

- 7.1 AHCCCS may share RFI responses with the Centers for Medicare and Medicaid Services (CMS).

# REQUEST FOR INFORMATION

7.2 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.

7.3 Please do not submit anything considered “proprietary” or “confidential”.

7.4 Information received by AHCCCS becomes the property of AHCCCS and will not be returned to the sender.

## **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. DISCLAIMER/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



**END OF DOCUMENT**

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