**Instructions to Respondents for the Completion of Exhibit A-4-a, Components (Technical Response):**

The Agency is seeking information to determine the ability of Respondents to provide a Core module solution as described in this ITN, to include development and ongoing operations and maintenance services.

All Respondents to this ITN shall utilize **Exhibit A-4-a, Submission Requirements and Evaluation Criteria Components (Technical Response),** for submission of its response and shall adhere to the instructions below for each Submission Requirement Component (SRC).

Respondents **shall not** include website links, embedded links and/or cross-references between SRCs unless otherwise instructed within a particular SRC.

Each SRC contains form fields. Population of the form fields with text will allow the form field to expand and cross pages. There is no character limit.

Attachments are acceptable for any SRC but must be referenced in the form field for the respective SRC and located behind each respective SRC response. Respondents shall name and label attachments to refer to respective SRCs by the SRC identifier number.

Agency evaluators will be instructed to evaluate the responses based on the narrative contained in the SRC form fields and the associated attachment(s), if applicable.

Each SRC response will be independently evaluated and awarded points based on the criteria and points scale using the Standard Evaluation Criteria Scale, below, unless otherwise identified in each SRC contained within **Exhibit A-4-a, Submission Requirements and Evaluation Criteria Components (Technical Response)**.

|  |
| --- |
| **STANDARD EVALUATION CRITERIA SCALE** |
| **Point Score** | **Evaluation** |
| 0 | The component was not addressed anywhere in the response submission. |
| 1 | The component contained significant deficiencies and omissions and lacked meaningful detail. |
| 2 | The component is below average. It met some of the minimum requirements but did not address all elements requested. |
| 3 | The component is average and met the minimum requirements with minimum detail. |
| 4 | The component is above average. It exceeded the minimum requirements and provided good detail. |
| 5 | The component is excellent. It exceeded the minimum requirements and contained exceptional content and detail. |

The SRCs in **Exhibit A-4-a, Submission Requirements and Evaluation Criteria Components (Technical Response)**, may not be retyped and/or modified and must be submitted in the original format.

Failure to submit SRC responses via **Exhibit A-4-a, Submission Requirements and Evaluation Criteria Components (Technical Response)**, may result in the rejection of the response.

**Exhibit A-4-a, Submission Requirements and Evaluation Criteria Components (Technical Response)**, is available for Respondents to download at:

[http://ahca.myflorida.com/procurements/index.shtml](http://ahca.myflorida.com/Procurements/index.shtml).

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**Respondent Name:**

**SRC #1 – TABLE OF CONTENTS**

The Respondent shall include a Table of Contents in its response. The Table of Contents shall contain section headings and subheadings along with corresponding page numbers. The Table of Contents page(s) shall be provided as the first page(s) of the Respondent’s Technical Response.

**Response**:

**Score: No points will be awarded for the Table of Contents.**

**SRC #2 – EXECUTIVE SUMMARY**

The Respondent shall include an Executive Summary, which demonstrates its overall understanding of the services described in this ITN and describes the prominent features of its Technical Response.

**Response:**

**Score: No points will be awarded for the Executive Summary.**

**Respondent Name:**

**SRC #3 – ORGANIZATIONAL STRUCTURE AND HISTORY**

The Respondent shall demonstrate its capability to provide the services specified in this ITN by describing its organizational structure and history. For responses including the use of proposed subcontractors, the same descriptions of organizational structure and history shall be provided for each subcontractor, including the organizational structure connecting the Respondent and each proposed subcontractor. At a minimum, the description shall include:

1. The Respondent's, and its proposed subcontractor’s, organizational structure, ownership, affiliations, and location(s)
2. The Respondent's, and its proposed subcontractor’s, corporate organizational chart, and a depiction of where the Core Solution services described in this ITN falls within the organizational structure
3. Background information on the Respondent’s corporation, and on its proposed subcontractor’s corporation(s), the size, and resources, to include:
	1. Name of Respondent and any subcontractor(s)
	2. Date established
	3. Ownership (public company, partnership, subsidiary, etc.)
	4. Corporation's Federal Employer Identification Number (FEIN) and Florida Corporate Charter Number
	5. Corporation's primary line of business
	6. Total number of employees

Attachments are limited to the following:

* Organizational chart of the Respondent and its subcontractor(s)
* List of the Respondent’s, and its proposed subcontractor’s, physical location(s)

**Response:**

**Score: No points will be awarded for Organizational Structure and History.**

**Respondent Name:**

**SRC #4 – RESPONDENT QUALIFICATIONS**

The Respondent shall demonstrate its capability to provide the services specified in **Attachment B-1, Scope of Services**, by describing its relevant experience with large healthcare systems, qualifications, and length of experience in providing technology and services similar in nature to those described in this ITN. The description shall include how these experiences will be applied to move the Agency forward, based on its own current Strategic Plan. Details of corporate experience (including any subcontractor experience and capabilities) shall include a list of all contracts related to services similar in nature to those described in this ITN within the last five (5) years, and shall include, at a minimum:

1. Relevant experience with designing, developing, implementing, hosting, and maintaining information technology and business solutions including claims and encounters processing, financial management (including capitation payments), and recipient data management.
2. Relevant experience with developing and implementing technology services and support, business operations for large healthcare systems including project and program management, business requirements elicitation and development, system testing, and system implementation.
3. Capability to work in parallel on multiple projects, with multiple vendors, and maintain timelines while effectively working as a single, distributed team to meet State and federal requirements.
4. How the Respondent’s, and any subcontractor’s, qualifications and experience prepare the Respondent to move the Agency forward based on the goals, objectives, and guiding principles specified within the Agency’s Strategic Plan.
5. Any relevant experience the Respondent has with obtaining CMS certification for overall operations.

**Response:**

**Respondent Name:**

**SRC #4 Evaluation Criteria:**

1. The adequacy of the Respondent’s capability and approach to meet the requirements described in this ITN, based on the relative experience in the performance of current or previous contracts for which it is/was the lead vendor on any projects similar in size, scope, and complexity to the Core Project in the past five (5) years.
2. The adequacy of the Respondent's relevant experience with large healthcare systems.
3. The adequacy of the Respondent’s experience and demonstrated capability to work in parallel to perform project and program management, business requirements elicitation and development, systems testing, and systems implementation.

1. The adequacy of the Respondent’s and any subcontractor’s qualifications and experience to move the Agency forward based on the goals, objectives, and guiding principles as described within the Agency’s Strategic Plan and to limit the potential for vendor lock-in and conflict of interest for future Agency acquisitions.
2. The adequacy of the Respondent's relevant experience with obtaining CMS certification.

**Score:** **This section is worth a maximum of 25 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #5 – CUSTOMER EXPERIENCE**

The Respondent shall demonstrate its capability to integrate its proposed Core Solution with other Agency and vendor systems where the end-user has a consistent and unified digital user experience across all modules. In addition, the Respondent shall demonstrate its capability to continuously improve the experience of customers, including recipients, providers, and other Stakeholders. The Respondent shall provide an overview of its experience in improving customer experience and using tools (i.e., customer experience blueprint, customer journey maps) to continuously improve the customer experience.

**Score:** **No points will be awarded for Customer Experience.** The response will be reviewed by the Agency and may be addressed with the respondent in the negotiation phase of the ITN, at the Agency’s discretion.

**Response:**

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**Respondent Name:**

**SRC #6 – SANCTIONS**

The Respondent shall list and describe any sanctions levied against the Respondent, its affiliates, its subsidiaries, its parent company, the affiliates and subsidiaries of its parent company, its affiliate’s subsidiaries and subcontractors (handling subcontracts related to consultant services when the subcontracts are for $250,000.00 or more annually), within the five (5) years preceding the date of its response to this ITN. Sanctions shall include those imposed by a state or federal entity in relation to a contract under which the Respondent provided health care system implementation and operations services or government services contracts in excess of one million dollars ($1,000,000.00). Sanctions shall include financial consequences, damages, liquidated damages, or other amounts paid by the Respondent in a settlement of a contract dispute.

Information requested for each sanction shall be provided by the Respondent for administrative and non-administrative sanctions. An administrative sanction means the issue pertains to timeliness or the use of an incorrect format (i.e., report, deliverable, or another required item submitted late or submitted in the wrong format). A non-administrative sanction means the issue pertains to performance in accordance with the contract scope of services (i.e., incomplete, or inaccurate deliverable or services).

**Response:**

**SRC #6 Evaluation Criteria:**

1. The extent to which sanctions were due to issues with performance (non-administrative) in accordance with the contract scope of services, versus administrative issues.
2. The severity of the sanction(s) from **minor** (dollar amounts less than $10,000.00 or resolution time less than 90 calendar days) to **significant** ((dollar amounts above $10,000.00 or resolution time longer than 90 calendar days or numerous sanctions (more than one sanction among two or more contracts)).

**Score: This section is worth a maximum of 10 raw points with each of the above criteria being worth a maximum of 5 points each.**

**Respondent Name:**

**For Item 1:**

1. 5 points if no sanctions.
2. 4 points if sanction(s) were related only to **administrative issues**.
3. 3 points if **non-administrative** sanction(s) were all **minor** and there were fewer than four (4) incidents.
4. 2 points if **non-administrative** sanctions were all **minor** but four (4) or more incidents.
5. 1 point if any **significant administrative** sanction.
6. 0 points if any **significant non-administrative** sanction.

**For Item 2:**

1. 5 points if no sanctions.
2. 4 points if sanction(s) were **minor** and there were fewer than four (4) incidents.
3. 3 points if sanctions were all **minor** but four (4) or more incidents.
4. 2 points if up to two (2) **significant** sanction(s); or more than two (2) contracts with multiple sanctions.
5. 1 point if more than two (2) **significant** sanctions but fewer than five (5); or more than two (2) but fewer than five (5) contracts with multiple sanctions.
6. 0 points if performance falls below the above limits.

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**Respondent Name:**

**SRC #7: SECURITY RISK RATING SCORE SCAN**

In accordance with **Attachment** **B-1, Scope of Services,** **Section E., Special Provisions, subsection 7, Information Technology, Item 7.1, Development Requirements, sub-item ee.**, the Agency will conduct an initial IT security risk rating score scan on the Respondent through an IT security risk rating service, at the Agency's expense, to enable the Agency to effectively measure and mitigate the successful Respondent’s security risks. The Respondent shall work with the Agency’s security risk rating service provider to define the relevant Respondent assets providing Agency services.

**Response:**

**SRC #7** **Evaluation Criteria:**

The adequacy of the Respondent’s IT security risk rating score by determining whether the Respondent has received:

* 1. A score in the top 90-100% of the scan recommendations.
	2. A score in the top 80-89% of the scan recommendations.
	3. A score in the top 70-79% of the scan recommendations.
	4. A score in the top 60-69% of the scan recommendations.
	5. A score in the top 50-59% of the scan recommendations.
	6. A score in the lower 0-49% of the scan recommendations.

**Respondent Name:**

**Score: This Section is worth a maximum of 5 raw points as outlined below:**

1. 5 points for a score in the top 90-100% of the scan recommendations.
2. 4 points for a score in the top 80-89% of the scan recommendations.
3. 3 points for a score in the top 70-79% of the scan recommendations.
4. 2 points for a score in the top 60-69% of the scan recommendations.
5. 1 point for a score in the top 50-59% of the scan recommendations.
6. 0 points for a score in the lower 0-49% of the scan recommendations.

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**Respondent Name:**

**SRC #8 – PROJECT MANAGEMENT AND SERVICE DELIVERY APPROACH**

The Respondent shall present its project management and service delivery approach and explain how it reflects industry best practices in service delivery excellence. The Respondent shall demonstrate its capabilities in working with third-party organizational standards by developing an approach that complies with the Agency's FX Project Management Standards included in the **Core Proposal Library**.

The Respondent shall describe its proposed approach to **PD-1: Project Management Plan** (includes the Core Vendor Resource Management Plan) and provide a draft PD-2: Project Schedule, as described in **Attachment B-1, Scope of Services, Exhibit B-1-a, Deliverables and Performance Standards**.

The proposed draft Project Schedule should show the Respondent’s thorough understanding of the services required in this ITN, and the capability to successfully complete each deliverable. The draft Project Schedule shall include a high-level project timeline for successful management and completion of the project, as well as identify major project phases with consideration to **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 8, Transition/Design, Development, and Implementation (DDI), Item 8.2., Implementation Plan**, and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix**. The draft Project Schedule must include timeframes and durations for key milestones and deliverables.

The Respondent shall demonstrate the following:

1. Approach to following project management best practices to ensure adherence to the **P-2: FX Project Management Standards**, including, but not limited to:

1. Communications management
2. Risk and issue management
3. Change management
4. Scope management
5. Schedule management
6. Requirements management
7. Quality management
8. Status reporting
9. Human resource management

2. Experience following third party standards (such as the FX Program standards included in the **Core Proposal Library**).

3. Experience implementing the System Development Life Cycle (SDLC) for multi-component configurable and customizable technology platforms.

**Respondent Name:**

1. Experience in, and approach to, successful delivery of services and solutions in a multi-vendor and multi-agency environment.
2. Ability to effectively manage multiple teams that would include the Respondent, subcontractor(s), and Agency Core staff.
3. Ability to implement and provide services and solutions to be adapted to accomplish the Core Objectives and FX Guiding Principles outlined in **Attachment B-1, Scope of Services, Section A., Services to be Provided, subsection 3, General Overview, Items 3.2, Overview of the FX Transformation** and **3.5, Core Module Objectives**.

**Response:**

**SRC #8 Evaluation Criteria:**

1. The adequacy of the Respondent’s proposed approach to project management and service delivery, and its alignment with FX Project Management Standards, including demonstrated understanding and approach to the System Development Life Cycle (SDLC) for a multi-component configurable and customizable technology platform.

2. The adequacy of the Respondent’s draft Project Schedule to demonstrate a high-level project timeline for successful management and capability to successfully complete each deliverable.

3. The adequacy of the Respondent's experience following third party standards (such as the FX Program standards included in the **Core Proposal Library**).

4. The adequacy of the Respondent’s experience and demonstrated ability to successfully deliver in a multi-vendor and multi-agency environment.

5. The demonstrated ability of the Respondent to effectively manage multiple teams including Core Vendor, subcontractor and Agency staff.

**Score:** **This Section is worth a maximum of 25 raw points with each of the above criteria being worth a maximum of 5 points each.**

**Respondent Name:**

**SRC #9 – DISASTER RECOVERY AND BUSINESS CONTINUITY**

1. The Respondent shall demonstrate its capability and approach to meeting the disaster recovery and business continuity requirements described in the referenced subsections, below, of **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions**, and **Exhibit B-3-a, Requirements Matrix.**
2. Subsection 9.3, Disaster Recovery and Business Continuity
3. Subsection 11.1, Operations and Maintenance Phase Requirements
4. Subsection 15, Facilities and Service Location(s)

**Response:**

**SRC #9 Evaluation Criteria:**

For both technology and services, the adequacy of the Respondent’s ability to:

1. Maintain and annually test a Contingency Plan (for Disaster Recovery and Business continuity) for the Core Solution with the FX Technical Management Strategy.
2. Support the Agency’s Enterprise Contingency Plan and coordination of related activities.
3. Provide backup procedures, hot sites, redundancy, and support to prevent and accommodate the disruption of systems and communications.
4. Minimize downtime and disruption of services.
5. Provide timely failover.
6. Create effective policies and procedures to implement a recovery, as well as business continuation services.

**Score:** **This Section is worth a maximum of 30 raw points with each of the above criteria being worth a maximum of 5 points each.**

**Respondent Name:**

**SRC #10 – CORE PLATFORM SOLUTION (TECHNOLOGY)**

The Respondent shall demonstrate its capability and approach to meeting the requirements described in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 9, Core Platform Solution (Technology)**, and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix**, including, but not limited to, ensuring its Core Solution provides all the required technology components and specified options, and all components are integrated into one common solution. In addition, the Respondent shall complete and submit with its response to this SRC, **Attachment B-1, Exhibit B-4, Core Technology Matrix**, to provide its proposed solution components.

**Response:**

**SRC #10 Evaluation Criteria:**

The adequacy of the Respondent's demonstrated ability to:

1. Provide hosting services to meet the Agency’s requirements and support optimal performance of the Core Solution.
2. Provide a Core solution that includes adequate quality management capabilities.
3. Provide a Core solution with relevant business operations technologies.

**Score:** **This Section is worth a maximum of 15 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #11 – CORE SERVICES SOLUTION (CLAIMS AND ENCOUNTERS)**

The Respondent shall demonstrate its proposed approach to providing a Core Services Solution addressing all requirements specified in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsections 10.1 through 10.6**. **and 10.11.** At a minimum, the Respondent shall demonstrate its experience and proposed approach to:

1. Providing a Core Services Solution that will adjudicate fee-for-service (FFS) claims for Medicaid reimbursement, including the following services:

* 1. Electronic Data Interchange (EDI) and web portal claims submission and outbound transactions using HIPAA mandated X12 standards.
	2. Configurable business rules to manage edit and audit disposition criteria and status.
	3. Plan match, coverage, reimbursement rules and methodologies associated with claim pricing.
	4. Calculating the allowed amount and application of payment deductions and cost sharing requirements, based on client, and claim criteria.
	5. Responding to submitter on claim disposition through an electronic Explanation of Benefits (EOB) or other applicable X12 transactions.
	6. Transaction adjustment processes with automated and ad-hoc functions to support retroactive rate changes, procedure or diagnosis code revisions, benefit plan updates, audit activities.
	7. Functionality to interface with the Agency’s Utilization Management Vendor for service authorizations and referrals and the outsourced TPL Vendor for cost avoidance and recoupment activities.
	8. Manage reference information that supports the core business areas for processing claims.

2. Providing a Core Services Solution that will process managed care encounters, including the following services:

* 1. EDI submission and outbound transactions using HIPAA mandated X12 standards.
	2. Configurable business rules separate from claims processing to manage criteria.
	3. Plan match, coverage, reimbursement rules and methodologies associated with encounter shadow pricing.
	4. Shadow price calculation based on recipient and claim criteria, allowed amount and application of payment deductions and cost sharing requirements, including the capture of actual plan paid amount.
	5. Responding to submitter on encounter disposition through an electronic Explanation of Benefits (EOB) or other applicable X12 transactions.
	6. Functionality to interface the Agency’s Pharmacy Benefit Management Vendor to accept and process pharmacy encounters.

**Response:**

**SRC #11 Evaluation Criteria:**

The adequacy of the Respondent’s relevant experience with and proposed approach to:

1. Designing, developing, implementing, and maintaining a claims processing and adjudication solution that can process a large volume of transactions.
2. Designing, developing, implementing, and maintaining an EDI and web-portal claims submission and outbound transaction service.
3. Designing configurable business rules to manage edit and audit disposition criteria.
4. Claim pricing methodologies, reimbursement rules, and plan and coverage match criteria.
5. Calculating the allowed amount and application of payment deductions and cost sharing requirements.
6. An electronic Explanation of Benefits (EOB) or other applicable X12 transactions responding to submitters on claim and encounter disposition.
7. Transaction adjustment processes with automated and ad-hoc functions to support retroactive rate changes, procedure or diagnosis code revisions, benefit plan updates, audit activities.
8. Developing, implementing, and maintaining an interface with the Agency’s Utilization Management Vendor for service authorizations and referrals and the outsourced Third-Party Liability (TPL) Vendor for cost avoidance and recoupment activities.
9. Managing reference information that supports the core business areas for processing claims.
10. Designing, developing, implementing, and maintaining an encounter processing solution that can process a large volume of transactions.
11. Designing, developing, implementing, and maintaining an EDI for encounter submission and outbound transaction service.
12. Designing configurable business rules specific to encounters.
13. Shadow pricing methodologies and calculation.
14. Developing, implementing, and maintaining, an interface the Agency’s Pharmacy Benefit Management Vendor to accept and process pharmacy encounters

**Score:** **This Section is worth a maximum of 70 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #12 – CORE SERVICES SOLUTION (CAPITATION PROCESS)**

The Respondent shall demonstrate its proposed approach to providing a Core Services Solution addressing all requirements specified in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 10.10, Capitation Payments**. At a minimum, the Respondent shall demonstrate its experience and proposed approach to:

1. Providing a Core Services Solution that will support the capitation process (currently known as the “monthly magic” process), including:
	1. Maintaining and updating capitation rates for each rate cell. Capitation rate determination based upon pre-defined rate tables with beginning and ending effective dates.
	2. Maintenance of a rate structure hierarchy, including the ability for special conditions to trigger a specialized capitation rate.
	3. Capitation payment based on the rate cell that the recipient falls into (based on but not limited to, date, age, gender, aid category).
	4. Configurable business rules to apply capitation recoupments during the capitation cycle.
	5. Automatic generation of a capitation or capitation adjustment based on updated enrollment or recipient demographics.
	6. Process for performing capitation rate reprocessing.
	7. Process to report capitation payment on ASC X12N 820 as required by HIPAA.
	8. Generating enrollment rosters for each managed care plan in a HIPAA (834) format that reconciles with each plan’s 820 file.
	9. Generating monthly capitation payments (e.g., prospective, retro-active, manual, real-time, etc.) on a defined frequency.

**Response:**

**SRC #12 Evaluation Criteria:**

The adequacy of the Respondent’s relevant experience with and proposed approach to:

1. Processing large volumes of capitation payment transactions.
2. Maintaining and updating capitation rates for each rate cell.
3. Determining capitation rates based upon pre-defined rate tables.
4. Maintaining rate structure hierarchy, including the ability for special conditions to trigger a specialized capitation rate.
5. Generation of a capitation payment based on the rate cell that the recipient falls.
6. Configuring business rules to apply capitation recoupments during the capitation cycle.
7. Generating capitation or capitation adjustments based on updated enrollment or recipient demographics.
8. Capitation rate reprocessing.
9. Reporting capitation payment on ASC X12N 820.
10. Generating enrollment rosters for each managed care plan in a HIPAA (834) format that reconciles with each plan’s 820 file
11. Generating monthly capitation payments (e.g., prospective, retro-active, manual, real-time, etc.) on a defined frequency.

**Score: This Section is worth a maximum of 55 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #13 – CORE SERVICES SOLUTION (FINANCIAL MANAGEMENT)**

The Respondent shall demonstrate its proposed approach to providing a Core Services Solution addressing all requirements specified in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsections 10.7, Fiscal Management** and **10.10, Capitation Payments**. At a minimum, the Respondent shall demonstrate its experience and proposed approach to:

1. Providing a Core Services Solution that will support all Medicaid financial activity including, but not limited to, capitation payments and FFS claims, including the following services:
	1. Financial payment activity to ensure accurate calculation and disbursement of various capitation payments (health and dental plans, Provider Service Network (PSN), Capitation Non-Emergency Transaction (CNET) and Dual Special Needs Plan (DSNP), Incentive Payments, Premium Payments, and No Emergency Transport Payments)).
	2. Process to managing the payment of claims in a financial cycle.
	3. Generating detailed remittance advice (e.g., paid claims, denied claims, reason, and remark codes) for each payee that reflects all financial activity in a payment cycle.
	4. Process and controls to manage associated financial activities (e.g., accounts payable, accounts receivable, cash receipts, bank reconciliations).
	5. Producing accurate annual 1099 forms in accordance with IRS specifications for all providers and vendors that reflect all payments and adjustments made through the financial system (e.g., claims, adjustments, voids, and any other financial transactions).
	6. Managing the payment processes for Medicare programs (e.g., buy-in, claw back, Part D) related to Agency Healthcare Program.
	7. Processes to suspend, terminate, withhold, or continue processing payments to providers under investigation.
	8. Interfacing with the Agency’s financial systems and banking vendor to report and reconcile financial activities.

**Response:**

**Respondent Name:**

**SRC #13 Evaluation Criteria:**

The adequacy of the Respondent’s relevant experience with and proposed approach to:

1. Processing large volumes of financial transactions.
2. Generally accepted accounting principles and controls related to all financial activities.
3. Managing the payment of claims in a financial cycle.
4. Generating detailed remittance advice (e.g., paid claims, denied claims, reason, and remark codes) for each Payee that reflects all financial activity in a payment cycle.
5. Financial payment activity to ensure accurate calculation and disbursement of various capitation payments.
6. Process and controls to manage associated financial activities (e.g., Accounts Payable, Accounts Receivable, Cash Receipts, Bank Reconciliations).
7. Producing annual 1099 forms in accordance with IRS specifications for all providers and vendors that reflect all payments and adjustments made through the financial systems.
8. Managing the payment processes for Medicare programs.
9. Suspending, terminating, withholding, or continuing processing payments to providers under investigation.
10. Developing, implementing, and maintaining an interface with the Agency’s financial systems and banking vendor to report and reconcile financial activities.

**Score: This Section is worth a maximum of 50 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #14 – CORE SERVICES SOLUTION (FEDERAL AND FINANCIAL REPORTING)**

The Respondent shall demonstrate its proposed approach to providing a Core Services Solution addressing all requirements in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsections 10.8, Federal Reporting** and **10.9, Financial Reporting**. At a minimum, the Respondent shall demonstrate its experience and proposed approach to:

1. Providing a Core Services Solutions reporting capabilities in coordination with the EDW Vendor to comply with federal reporting requirements, including the following services:
	1. Collecting and grouping required data to facilitate the execution of federally mandated reports.
	2. Interfacing with the EDW Vendor to store the required data in the EDW Vendor’s Operational Data Store (ODS).
	3. Supplying the accurate and necessary data to the EDW Vendor for Transformed Medicaid Statistical Information (TMSIS), Management and Administrative Reporting (MAR) and Surveillance and Utilization Review (SUR) reports.
	4. Processing to ensure the quality of data submitted and remediation activities for corrections.
2. Providing a Core Services Solutions reporting capabilities throughout the adjudication process for claims and encounters, reimbursement, and financial management, including the following services:
	1. Collecting required data for each process associated with claim and encounter adjudication.
	2. Interfacing with the EDW Vendor to store the required data in the EDW Vendor’s Operational Data Store (ODS).
	3. Producing standard financial management reports including of provider payments by expenditure categories, provider receivables, and bank reconciliation.
	4. Process to ensure the quality of data submitted and remediation activities for corrections.

**Response:**

**Respondent Name:**

**SRC #14 Evaluation Criteria:**

The adequacy of the Respondent’s relevant experience with and proposed approach to:

1. Collecting and grouping required data to facilitate the execution of federally mandated reports.
2. Developing, implementing, and maintaining an interface with the EDW Vendor to store required data in the EDW Vendor’s Operational Data Store (ODS).
3. Financial payment activity to ensure accurate calculation and disbursement of various capitation payments.
4. Process and controls to supply accurate and necessary data to the EDW Vendor for Transformed Medicaid Statistical Information (TMSIS), Management and Administrative Reporting (MAR) and Surveillance and Utilization Review (SUR) reports.
5. Ensuring the quality of data submitted and remediation activities.
6. Collecting required data for each process associated with claim and encounter adjudication.
7. Producing standard financial management reports including of provider payments by expenditure categories, provider receivables, and bank reconciliation.

**Score:** **This Section is worth a maximum of 35 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #15 – CORE SERVICES SOLUTION (RECIPIENT MANAGEMENT)**

The Respondent shall demonstrate its proposed approach to providing a Core Services Solution addressing all requirements in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 10.11, Recipient Management**. At a minimum, the Respondent shall demonstrate its experience and proposed approach to:

1. Providing a Core Services Solution that will receive, maintain, and reconcile recipient eligibility and enrollment information to support Core and other enterprise business functions, including the following services:
2. Interfacing with partner agencies (e.g., DCF, SSA, CMS, FHKC, etc.) to receive eligibility information on recipients.
3. Process to maintain eligibility files for benefit plan assignment, to support claims and encounter processing, eligibility inquiries, calculate provider and plan reimbursement, cost sharing, managed care plan assignment, and to facilitate utilization review and analysis.
4. Process to ensure that Medicaid recipients entitled to Medicare Buy-in receive their benefits.
5. Reconciliation processes to ensure the integrity of the data and to support other Core business functions that utilize recipient data.
6. Assignment algorithms for mandatory managed care enrollment.
7. Coordination with the UOC Vendor to provide recipient eligibility and enrollment support services.

**Response:**

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**Respondent Name:**

**SRC #15 Evaluation Criteria:**

The adequacy of the Respondent’s relevant experience with and proposed approach to:

1. Developing, implementing, and maintaining interfaces with partner agencies to receive eligibility information on recipients.
2. Maintaining eligibility files that support benefit plan assignment, claims and encounter processing, eligibility inquiries, calculate provider and plan reimbursement, cost sharing, managed care plan assignment, and to facilitate utilization review and analysis.
3. Ensuring that Medicaid recipients entitled to Medicare Buy-in receive their benefits.
4. Reconciliation processes to ensure the integrity of the data and to support other Core business functions that utilize recipient data.
5. Developing, implementing, maintaining, and assigning algorithms for mandatory managed care enrollment.
6. Coordination with the UOC Vendor to provide recipient business services and support of eligibility and enrollment activities.

**Score:** **This Section is worth a maximum of 30 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #16 – PERFORMANCE STANDARDS AND REPORTING**

1. The Respondent shall demonstrate its experience, understanding and ability to provide an automated method or system/operations tools to provide reports of the quality measurements and performance monitoring dashboards for the post-implementation Core Solution services as specified in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 12, Reporting** and **Exhibit B-2, Operations and Maintenance Service Level Agreement**, and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix.** This shall include, at a minimum, the following:
2. Providing a Core performance reporting dashboard system and resulting generated reports to the Agency’s Contract Manager.
3. Providing real-time performance reporting dashboards for contracted performance standards and Service Level Metrics described in **Attachment B-1, Scope of Services, Exhibit B-2-b, Operations and Maintenance Service Level Metrics**.
4. Storing and reporting relevant data for ongoing and ad hoc reporting, including methods for conducting quality control.
Adhering to and reporting on Service Level Metrics provided in **Attachment B-1, Scope of Services, Exhibit B-2-b, Operations and Maintenance Service Level Metrics**.
5. The Respondent shall submit, with its response, samples of the following types of dashboard report exports:
	* 1. Staffing Report
		2. Executive Level Dashboard Report
		3. Contract Compliance / Service Level Metrics Dashboard

**Response:**

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**Respondent Name:**

**SRC #16 Evaluation Criteria:**

* 1. The adequacy of the Respondent’s relevant experience with and proposed approach to providing web-based reporting dashboard solutions and tools for performance reporting.
	2. The adequacy of the Respondent's proposed approach and demonstrated ability to meet the Service Level Metrics.
	3. The adequacy of the Respondent’s relevant experience and proposed approach to developing standard report dashboard extracts and ad hoc queries for the Core Solution.
	4. The adequacy of the Respondent’s sample dashboard reports to demonstrate a successful performance and status reporting approach (storing, data reporting, quality control, etc.) for the Core Solution.

**Score:** **This Section is worth a maximum of 20 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #17 – SECURITY**

1. The Respondent shall demonstrate its experience, capability, approach and proposed solution for the Security Life Cycle to include activities defined in certification and accreditation, risk assessment, and system security plan phases and to address the requirements in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection** **9.7, Security**, to:
2. Coordinate with stakeholders to develop and execute a Systems Security Plan, security controls, security assessments, and risk assessments, in compliance with all State and federal enterprise information security policies, standards, security initiatives, and regulations.
3. Develop and execute a Security Controls Test Plan that includes objectives, scope, misuse cases, testing type, entrance and exit criteria, schedule, testers, software tools, and test results.
4. Develop and execute a Security Test Plan for all shared infrastructure, connectivity and communications between the EDW Solution, the Integration Platform and the modules.
5. Conduct periodic Security Control Assessments to monitor ongoing effectiveness of implemented security controls and remediate those issues as determined by the Agency.
6. The Respondent shall describe its proposed plan and approach to resolving security breaches in relation to the Core Solution. The Respondent shall also describe any security breaches that have occurred within the last five (5) years and the remedies used for those breaches, if applicable. The described security breach(s) may pertain to more than one (1) system.

**Response:**

**Respondent Name:**

**SRC #17 Evaluation Criteria:**

1. The adequacy of the Respondent’s proposed approach and demonstrated ability to meet all federal, state, and Agency security requirements.
2. The adequacy of the Respondent’s proposed Core Solution in terms of including all security/vulnerability testing as outlined in **T-8: Enterprise Data Security Plan**, in the **Core Proposal Library**.
3. The demonstrated ability of the Respondent to provide a hosting environment that is FEDRAMP compliant.
4. The demonstrated capability of the Respondent to resolve security breach incidents.

**Score:** **This Section is worth a maximum of 20 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #18 – DELIVERABLE APPROACH**

1. The Respondent shall describe its relevant experience, proposed approach, and representative content, relative to the Core deliverables described in **Attachment B-1, Scope of Services, Exhibit B-1-a, Deliverables and Performance Standards**. Where proposed approaches and content for a deliverable are addressed by the Respondent in another SRC, the Respondent shall refer to the other SRC(s) within its response to SRC #18.
2. PD-1 Project Management Plan (Includes Vendor Resource Management Plan)
3. PD-2 Project Schedule
4. PD-3 High-Level Technical Design
5. PD-4 System Security Plan
6. PD-5 Requirements Management Plan
7. PD-6 Bill of Materials
8. PD-7 Completed Requirements Traceability Matrix
9. PD-8 System Design Document (Architecture Specifications)
10. PD-9 Implementation Plan/Software Release Plan
11. PD-10 Contingency Plan (for Disaster Recovery and Business Continuity)
12. PD-11 Test Plan
13. PD-12 Customer Experience Blueprint Integration
14. PD-13 Organizational Change Management Plan
15. PD-14 Training Approach and Plan
16. PD-15 Training Materials
17. PD-16 Training Delivery
18. PD-17 Operations and Maintenance Manual
19. PD-18 Production Readiness Review
20. PD-19 Post Implementation Report
21. PD-20 Warranty Completion Report
22. PD-21 Annual Operational Analysis (AOA)
23. PD-22 Vendor Turnover Plan

**Response:**

**Score:** **No points will be awarded for Deliverable Approach.** The response will be reviewed by the Agency and may be addressed with the respondent in the negotiation phase of the ITN, at the Agency’s discretion.

**Respondent Name:**

# SRC #19 - Optional Additional Innovation Opportunities

1. **General Opportunities –** The Respondent may include any additional innovations offered to the Agency that are not included in **Attachment B-1, Scope of Services**. The requirements described in **Attachment B-1, Scope of Services** are not intended to limit innovations, cost effective solutions, or creativity in preparing a response, which provides the Agency the best solution. Innovative ideas, product offerings, and new concepts other than those presented in this ITN can be considered by the Respondent. Responses to this SRC will not be scored and may, at the Agency’s discretion, be included in the Negotiations phase of this ITN.

The market for operations and business services is constantly changing, offering new or modified service delivery methods and technologies. The Agency is seeking a Core vendor that will utilize Agency-approved innovative methods and technologies to meet Core objectives and demonstrate tangible benefits.

Following are examples of areas where potential innovations may be of benefit:

1. Self service capabilities
2. 100% paperless service delivery
3. Leveraging process automation and Artificial Intelligence (AI)
4. Real-time decision-making tools and predictive analytics
5. Scalable staffing models
6. Virtual service delivery
7. Employee engagement
8. Knowledge management

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**Respondent Name:**

**Response**:

**Score: No points will be awarded for any proposed Optional Additional Innovation Opportunities.** The response will be reviewed by the Agency and may be addressed with the respondent in the negotiation phase of the ITN, at the Agency’s discretion.

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**Respondent Name:**

**SRC #20 – VENDOR STAFFING**

1. The Respondent shall describe its proposed baseline staffing solution as described in **Attachment B-1, Scope of Services, Section B.,** **Manner of Services Provisions, subsection 13, Staffing**, and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix**. The Respondent shall identify its proposed team, including Key Personnel, and describe how its team will implement and support operations during the Contract term.
2. The Respondent’s proposed baseline staffing solution shall include, but may not be limited to, the following:
3. Core Vendor staff organizational chart that identifies the number of Key Personnel and other staff dedicated to Core support, including FTE hours, roles, and hierarchies for all identified staff.
4. Qualifications and experience of the Core Vendor’s Key Personnel, including resumes with references, and job descriptions for each proposed team member. Key Personnel resumes must reflect prior experience and expertise as defined in subsection 13, Staffing.
5. Workforce management tool(s) used to assist with operational efficiency of Core Vendor staffing and scheduling.
6. Staff ratio for all functional areas of the Core and how this ratio will be defined and modified based on changes occurring during the Contract term due to additional FX modules going live.
7. Plan to mitigate the risk of staff turnover (and potential effect on quality of service and continuity of operations) during the Contract term. The Core Vendor shall provide specific examples from past or current experience to describe how it has managed similar challenges.

**Response:**

**Score: No points will be awarded for Vendor Staffing.** The response will be reviewed by the Agency and may be addressed with the respondent in the negotiation phase of the ITN, at the Agency’s discretion.

**Respondent Name:**

**SRC #21 – FACILITIES AND SERVICE LOCATION(S)**

The Respondent shall identify its proposed service location(s) and describe its proposed approach/criteria used to identify and select its proposed facility location(s), within the State of Florida, for Core Vendor staff providing services as described in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 13, Staffing**, including the facility location(s) for technical solution support and Key Personnel. The Respondent shall include specific proposed locations ((full street address(es)), with special consideration of proximity to the Agency. The Respondent shall describe its approach to establishing locations that satisfy the requirements in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 15, Facilities and Service Location(s)**.

**Response:**

**SRC #21 Evaluation Criteria:**

1. The adequacy of the Respondent's selection criteria/approach for its proposed facility location selection(s).
2. The adequacy of the Respondent's proposed facility location in terms of its proximity to Tallahassee and other Agency headquarter cities in Florida, and the benefits of the proposed locations to the State of Florida.

3. The adequacy of the Respondent's demonstrated ability to meet the facility requirements specified in this ITN.

**Score:** **This Section is worth a maximum of 15 raw points with each of the above criteria being worth a maximum of 5 points each.**

**Respondent Name:**

**SRC #22 – TURNOVER PLANNING**

The Respondent shall demonstrate its capability to fulfill the turnover and project close out requirements described in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 16, Vendor Turnover**, and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix**. The Respondent shall submit a sample Turnover Plan specifying how the Respondent will provide assistance in turning over all artifacts in its possession, as it relates to the resulting Contract, in the event of Contract expiration or termination for any reason. The Respondent shall include a detailed description of its proposed processes and approach to turnover planning, including:

1. Providing the Turnover Plan deliverable to the Agency within the agreed-upon timeframe.
2. An overview of the support the Respondent will provide for the turnover activities described in this ITN.
3. Identifying and submitting all records, files, methodologies, data, and any supplemental documentation that the Agency would require to continue services.
4. Resources and training that would be required by the Agency or another FX Vendor to take over operation of the project.
5. Coordinating tasks and activities with the incoming Core Vendor, upon Agency request.
6. Providing the Agency with a turnover results report documenting completion of all tasks at each step of the turnover plan.

**Response:**

**Score:** **No points will be awarded for Turnover Planning.** The response will be reviewed by the Agency and may be addressed with the respondent in the negotiation phase of the ITN, at the Agency’s discretion.**Respondent Name:**

**SRC #23 – OPERATIONS AND MAINTENANCE**

1. The Respondent shall demonstrate its proposed approach and capability to maintain the day-to-day functions of the implemented Core Solution and support the Core technical and business operations specified in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 11, Operations and Maintenance** using best practices. At a minimum, the description shall include the Respondent’s proposed approach to providing ongoing Core services and support of the Core Solution, per the requirements specified in **Attachment B, Scope of Services, Exhibit B-3-a, Requirements Matrix**. The description shall include, at a minimum:

1. The Respondent’s proposed Core Solution maintenance, defect management correction, configuration updates, enhancements, best practices solutions, scheduled maintenance, testing, and release management processes and approaches.
2. The Respondent’s proposed approach to developing and implementing a training plan to successfully meet the requirements specified in this ITN.
3. The Respondent’s proposed approach to providing the Core Solution warranty to successfully meet the requirements specified in this ITN.
4. The Respondent’s proposed incident management approach and process.
5. The Respondent’s proposed process and approach to disposition activities for any systems decommissioned during the Contract term.
6. The Respondent shall provide a sample Operations and Maintenance Manual that demonstrates its proposed approach to developing this manual.

**Response:**

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**Respondent Name:**

**SRC #23 Evaluation Criteria:**

1. The adequacy of the Respondent's Core Operations and Maintenance approach in terms of meeting the requirements specified in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 11, Operations and Maintenance**,and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix**.
2. The adequacy of the Respondent’s approach to ongoing Core Solution maintenance activities, including defect management, testing, solution configuration management, integration, and change process.
3. The adequacy of the Respondent’s training approach.
4. The adequacy of the Respondent’s proposed approach to providing warranty activities.
5. The adequacy of the Respondent’s proposed Operations and Maintenance Manual sample.
6. The adequacy of the Respondent’s Incident Management approach and process.
7. The adequacy of the Respondent’s proposed approach to staffing, managing and assisting with system disposition activities.

**Score:** **This Section is worth a maximum of 35 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #24 – IMPLEMENTATION AND TRANSITION APPROACH**

1. The Respondent shall demonstrate its experience successfully transitioning technology and business services solutions from an incumbent vendor for services similar in nature to those described in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 8, Transition / Design, Development, and Implementation**, and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix**. At a minimum, the Respondent shall demonstrate the following:
2. Experience implementing large, complex, multi-stage technology and services projects in a multi-vendor environment, using an innovative, best practices approach.
3. Approach to effective Organizational Change Management per the requirements in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection** **8.3, FX Organizational Change Management (OCM)**.
4. Capability and approach to successful staff training and knowledge management.
5. The extent to which the Respondent’s approach integrates the Agency’s implementation assumptions.

**Response:**

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**Respondent Name:**

**SRC #24 Evaluation Criteria:**

1. The adequacy of the Respondent's demonstrated experience with and articulation of successful business services and technology transition practices and outcomes, as well as best practices and experience implementing large, complex, multi-stage technology and services projects in a multi-vendor environment, using an innovative best practices approach.
2. The adequacy of the Respondent's proposed approach to Organizational Change Management and demonstrated ability to meet the requirements in **Attachment B-1, Scope of Services, Section B., Manner of Services Provisions, subsection 8.3, FX Organizational Change Management (OCM)**, and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix**.
3. The adequacy of the Respondent’s approach to staff training and knowledge management, including its ability to work with subcontractor vendors.
4. The adequacy of the Respondent’s approach to integrating the Agency’s implementation assumptions.

**Score: This Section is worth a maximum of 20 raw points with each of the above criteria being worth a maximum of 5 points each.**

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**Respondent Name:**

**SRC #25 – GENERAL CORE PRODUCT DEMO**

The Respondent shall provide a high-level preview of its proposed Core Solution that introduces the Agency to the Core Solution’s base functionality. The Respondent shall submit with its response: one (1) thumb drive containing one (1) or more high-level, recorded product demos of its end-to-end, integrated solution that demonstrates functionality relevant to that required by the Agency for the Core operations, as specified in **Attachment B-1, Scope of Services**. The demo(s) shall be limited to a total of 20 minutes in length, and may include video demonstrations of workflows, screen shots, and other content as deemed appropriate to demonstrate the ability of the Respondent’s proposed solution to meet the Agency’s Core business and technical requirements specified in **Attachment B-1, Scope of Services**. Failure of the Respondent to submit the above-described information in the specified format will result in an evaluation score of zero points.

NOTE: The Agency intends to request additional, detailed solution demonstrations during the Negotiations phase of this ITN.

Examples of demo scenarios the Respondent may consider include, but are not limited to, the following:

1. Encounter processing
2. Financial payment (capitation and FFS)
3. Capitation rate cell assignment
4. Banking processes and reconciliation
5. Claim adjudication from start to end
6. Process for retroactive adjustments to claims
7. Claims attachments and mass changes/mass adjustments
8. Recipient file maintenance
9. Reference file maintenance

**Response:**

**SRC #25 Evaluation Criteria:**

1. The adequacy of the Core Solution’s demonstrated functionality in terms of how well it relates to the Agency’s Core business process needs, as described in **Attachment B-1, Scope of Services**, and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix**.
2. The adequacy of the Core Solution’s demonstrated functionality in terms of how well it meets the Core technical requirements of the Agency, as described in **Attachment B, Scope of Services**, and any applicable requirements specified in **Exhibit B-3-a, Requirements Matrix**.
3. The Core Solution’s demonstrated ease of use, intuitiveness, and navigation.

**Score: This Section is worth a maximum of 15 raw points with each of the above criteria being worth a maximum of 5 points each.**