### **Introduction**

Missouri Consolidated Health Care Plan (MCHCP) provides the health benefit program for most State of Missouri employees, retirees, and their dependents covering over 88,000 members (lives). An additional 1,200 non-state local government members are covered through their public entity employer.

This document constitutes a request for sealed proposals from qualified organizations to provide the services listed below. MCHCP intends to award one contract to the bidder who can provide all the following services:

- <u>Health Care Decision Support System (DSS)</u> The contractor will combine medical, pharmacy, dental, and vision claims, as well as on-site health center encounters, health risk assessment data, eligibility data, and any future data as needed into a single analytically-ready database accessible by MCHCP via a secure web connection.
- <u>Consumer Plan Selection Tool</u> The contractor shall provide, at the option of MCHCP, an online application that enables members to view historic claims cost and utilization information for themselves and their dependents and to incorporate that information to compare available plan choices to support the open enrollment decision-making process. The system must also support new members during open enrollment and new members added throughout the year, to estimate their future costs so those without historical claims experience can also compare plan choices. The system must be accessible through single sign-on from MCHCP's website.
- <u>Voluntary Data Share Agreement (VDSA) Reporting</u> The contractor shall provide, at the option of MCHCP, a service whereby the contractor enters into a VDSA with the Centers for Medicare & Medicaid Services (CMS) in order to conduct monthly data matching for Medicare eligibility and to transmit results to MCHCP.

MCHCP currently has a DSS contract in place with Merative. The current contract has been in effect for eight years and expires December 31, 2024. MCHCP has contracted with Merative since 2003.

MCHCP desires to contract per the attached specifications. Proposal submission requirements are stated throughout this document. There will be no public openings of submitted bids and proposals will remain confidential until such time as designated by the MCHCP Board of Trustees or its designee.

#### Minimum Bidder Requirements

- The bidder must have at least five years' experience in converting and standardizing raw claim, encounter, health assessment, dental, vision, and eligibility data to provide accessible healthcare management information. The contractor must have experience in accepting data from the following plan types: Medical (PPO, HDHP, and Medicare Advantage), PBM, dental, vision, onsite health center, and health assessment vendors.
- The bidder shall currently be providing health care decision support services to at least 2 million (2,000,000) total covered lives in employer organizations.
- The bidder must currently be providing the same or similar tool being proposed to MCHCP to at least three large employers, two of which must have more than 40,000 subscribers and one which

must have at least 50,000 subscribers. One of these employers must be a public sector state employer.

- The bidder must offer this product in such a manner that MCHCP has no responsibility for the database, the decision support software, or the technical infrastructure and associated processes and procedures.
- The database must be accessible through the web and must be secure.
- The bidder must commit to maintain HIPAA compliance for the life of the contract and as long as the data is maintained by the contractor. The bidder must comply with all state and federal laws and regulations concerning data confidentiality and security.
- Bidders shall not be permitted to increase their proposed costs after submission except with agreement by MCHCP.
- All deadlines outlined are necessary to meet the timeline for this contract award. MCHCP may reject any submissions after respective deadlines have passed. All bidder documents and complete proposals must be received by the proposal deadline of July 2, 2024, as outlined in the timeline of events for this RFP. Late proposals will not be accepted. MCHCP reserves the right to modify a deadline or extend a deadline for all bidders at its discretion.

## **Background Information**

Missouri Consolidated Health Care Plan (MCHCP) is governed by the provisions of Chapter 103 of the Revised Statutes of Missouri (RSMo). Under the law, MCHCP is directed to procure health care benefits for most state employees. The law also authorizes non-state public entities to participate in the plan. Rules and regulations governing the plan can be found by following this link: http://www.sos.mo.gov/adrules/csr/current/22csr/22csr.asp.

MCHCP currently contracts with Merative for a data warehouse and decision support system.

Current state health plan membership is over 88,000 covered persons. Total health benefit costs for 2025 are projected to be over \$600 million.

Current total public entity membership is over 1,200 covered persons. Total health benefit costs for 2025 are projected to be over \$11 million.

Current (2024) data suppliers can be found in Attachment 1. MCHCP will provide the eligibility file to the contractor on a monthly basis. The data fields available in the eligibility file can be found in Attachment 2.

The following attachments are available to provide historical data and information and may be accessed through Optavise:

- Attachment 1 MCHCP data suppliers
- Attachment 2 MCHCP eligibility file fields
- Attachment 3 Cost points illustration
- Exhibit B Scope of Work

• Exhibit C - General Provisions

The following exhibits must be completed, signed, and uploaded to Optavise:

- Exhibit A-1 Intent to Bid (due 5 p.m. CT, June 14, 2024)
- Exhibit A-2 Proposed Bidder Modifications (due 5 p.m. CT, July 2, 2024)
- Exhibit A-3 Confirmation Document (due 5 p.m. CT, July 2, 2024)
- Exhibit A-4 Contractor Certification (due 5 p.m. CT, July 2, 2024)
- Exhibit A-5 MBE/WBE Intent to Participate Document (due 5 p.m. CT, July 2, 2024)

The following exhibits must be reviewed and the bidder provide any suggested red-lined changes to the documents using Microsoft Word Track Changes functionality. Changes proposed may or may not be accepted by MCHCP.

- Exhibit A-6 Sample Contract (due 5 p.m. CT, July 2, 2024)
- Exhibit A-7 Business Associate Agreement (due 5 p.m. CT, July 2, 2024)

## Assumptions and Considerations

Please submit your proposal using the Optavise online submission tool no later than **Tuesday**, July 2, 2024, 5 p.m. CT (6 p.m. ET). Due to the limited timeframe for proposal analysis and program implementation, no individual deadline extensions will be granted.

The board of trustees has final responsibility for all MCHCP contracts. Responses to the RFP and all proposals will remain confidential until awarded by the MCHCP Board of Trustees or its designee or until all proposals are rejected.

Do not contact MCHCP directly regarding this RFP. Questions about the technical procedures for participating in this online RFP process should be addressed to Optavise. Any questions concerning the content of the RFP should be submitted via the messaging tool of the Optavise website.

## **Proposal Instructions**

### NOTE: READ THESE INSTRUCTIONS COMPLETELY PRIOR TO RESPONDING TO THE RFP

To be considered, you must respond to all sections of this RFP. Bidders are strongly encouraged to read the entire RFP prior to the submission of a proposal. The bidder must comply with all stated requirements. Bidders are expected to provide complete and concise answers to all questions. Your responses to all questions must be based on your current proven capabilities. You should describe your future capabilities only as a supplement to your current capabilities.

Proposals must be valid until October 1, 2024. If a contract is awarded, prices shall remain firm for the specified contract period.

A proposal may only be modified or withdrawn by signed, written notice which has been received by MCHCP prior to the official filing date and time specified.

### **Clarification of Requirements**

It is assumed that bidders have read the entire RFP prior to the submission of a proposal and, unless otherwise noted by the bidder, a submission of a proposal and any applicable amendment(s) indicates that the bidder will meet all requirements stated herein.

The bidder is advised that the only official position of MCHCP is that position which is stated in writing and issued by MCHCP as a RFP and any amendments and/or clarifications thereto. No other means of communication, whether oral or written, shall be construed as a formal or official response or statement.

#### Contract Term

The initial agreement is for the period of January 1, 2025, through December 31, 2027, with up to five additional one-year contracts renewable at the sole option of the MCHCP Board of Trustees.

#### Schedule of Events

The timeline for the procurement is provided below. No pre-bid conference has been scheduled.

Activity	Timing
Online RFP Released	Monday, June 10, 2024
	8 a.m. CT (9 a.m. ET)
Intent to Bid Document Due	Friday, June 14, 2024
	5 p.m. CT (6 p.m. ET)
Question Submission Deadline	Friday, June 14, 2024
	5 p.m. CT (6 p.m. ET)
MCHCP Responses to Submitted Questions	Thursday, June 20, 2024
	5 p.m. CT (6 p.m. ET)
All Questionnaires and Pricing Due	Tuesday, July 2, 2024
	5 p.m. CT (6 p.m. ET)

Finalist Demonstrations/Site Visits	Late July, 2024
Final Vendor Selection/Contract Award	Late August, 2024
Implementation	August-December, 2024
Effective Date	January 1, 2025

## **Questions**

During this bidding opportunity, MCHCP will be using the online messaging module of the Optavise application for all official answers to questions from bidders, amendments to the RFP, exchange of information and notification of awards. It is the bidder's responsibility to notify MCHCP of any change in contact information of the bidder. During the bidding process you will be notified via the messaging module of the posting of any new bid-related information.

All questions regarding specifications, requirements, competitive procurement process, etc., must be in writing and submitted through the online messaging module of the Optavise application by **Friday**, **June 14, 2024, 5 p.m. CT (6 p.m. ET)**. Questions received after June 14 will be answered and posted through the messaging module as time permits, but there is no guarantee of a response to these questions. For step-by-step instructions, please refer to the *Downloads* section of the Optavise application and click on *User Guides*.

Questions deemed universally applicable will be answered in writing and shared with all vendors who have indicated they are quoting. The team will respond to your questions via the messaging module, with a summary of all questions and answers provided by **Thursday, June 20, 2024.** 

Bidders or their representatives may not contact other MCHCP employees or any member of the MCHCP Board of Trustees regarding this bidding opportunity or the contents of this RFP. If any such contact is discovered to have occurred, it may result in the immediate disqualification of the bidder from further consideration.

## Proposal Deadline

ALL questionnaires and pricing proposals must be submitted no later than **5 p.m. CT (6 p.m. ET), Tuesday,** July **2, 2024.** 

#### **Disclaimers**

MCHCP will not be liable under any circumstances for any expenses incurred by any respondent in connection with the selection process.

### **Confidentiality and Proprietary Materials**

Pursuant to Section 610.021 RSMo, proposals and related documents shall not be available for public review until a contract has been awarded or all proposals are rejected. MCHCP maintains copies of all proposals and related documents.

MCHCP is a governmental body under Missouri Sunshine Law (Chapter 610 RSMo). Section 610.011 requires that all provisions be "liberally construed and their exceptions strictly construed to promote" the public policy that records are open unless otherwise provided by law. Regardless of any claim by a bidder as to material being proprietary and not subject to copying or distribution, or how a bidder characterizes any information provided in its proposal, all material submitted by the bidder in conjunction with the RFP is subject to release after the award of a contract in relation to a request for public records under the Missouri Sunshine Law (see Chapter 610 of the Missouri Revised Statutes). Only information expressly permitted by the provisions of Missouri's Sunshine Law to be closed – strictly construed – will be redacted by MCHCP from any public request submitted to MCHCP after an award is made. Bidders should presume information provided to MCHCP in a proposal will be public following the award of the bid and made available upon request in accordance with the provisions of state law.

### **Evaluation Process**

Any apparent clerical error may be corrected by the bidder before contract award. Upon discovering an apparent clerical error, MCHCP shall contact the bidder and request written clarification of the intended proposal. The correction shall be made in the notice of award. Examples of apparent clerical errors are: 1) misplacement of a decimal point; and 2) obvious mistake in designation of unit.

Any pricing information submitted by a bidder must be disclosed on the pricing pages as designated in this RFP. Any pricing information which appears elsewhere in the bidder's proposal shall not be considered by MCHCP.

Awards shall only be made to the bidder(s) whose proposal(s) complies with all mandatory specifications and requirements of the RFP. MCHCP reserves the right to evaluate all offers and based upon that evaluation to limit the number of contract awards or reject any and all offers.

MCHCP reserves the right to request written clarification of any portion of the bidder's response to verify the intent of the bidder. The bidder is cautioned, however, that its response shall be subject to acceptance or rejection without further clarification.

MCHCP reserves the right to consider historic information and fact, whether gained from the bidder's proposal, question and answer conferences, references, or any other source, in the evaluation process. The bidder is cautioned that it is the bidder's sole responsibility to submit information related to the evaluation categories and that MCHCP is under no obligation to solicit such information if it is not included with the bidder's proposal. Failure of the bidder to submit such information may cause an adverse impact on the evaluation of the bidder's proposal.

After determining that a proposal satisfies the mandatory requirements stated in the RFP, the comparative assessment of the relative benefits and deficiencies of the proposal in relationship to the published evaluation criteria shall be made by using subjective judgment. The award of a contract resulting from this RFP shall be based on the lowest and best proposal received in accordance with the evaluation criteria stated below:

### **Evaluation Criteria**

### Non-financial:

Section 3:	Organization Background and Staffing	25 points	
Section 4:	System and General Capabilities	50 points	
Section 5:			
Section 6:	Security and User Access	100 points	
Section 7:	Data Consolidation and Quality Review	50 points	
Section 8:	Reporting	50 points	
Section 9:	Implementation, Training and Client Support	25 points	
Section 10:	Analytic Services	30 points	
Section 11:	Voluntary Data Share Agreement (VDSA) Services	20 points	
Section 12:	Consumer Plan Selection Tool	20 points	
Section 13:	tion 13: Performance Guarantees		
	Subtotal – Non-financial points	500 points	
Bonus P	oints – Section 14: MBE/WBE Participation Commitment	10 points	
<u>Financia</u>	<u>l:</u>		
Price		400 points	
<u>Finalist I</u>	Evaluation:		
References			
Product	150 points		

MCHCP will limit the number of finalists to the bidders receiving 80 percent (400 points) of the possible 500 non-financial points available or the top two bidders if less than two bidders receive 80 percent of the possible 500 non-financial points.

The bidder's proposed participation of MBE/WBE firms in meeting the targets of the RFP will be considered in the evaluation process. A maximum MBE/WBE participation points of 10 points will be awarded based on the participation amount proposed by the bidder. Awarded MBE/WBE participation points will be added to the non-financial points earned by the bidder and will be included to determine if a bidder meets the 80 percent threshold to obtain finalist status.

## Minority Business Enterprise (MBE)/Women Business Enterprise (WBE) Participation

The bidder should secure participation of certified MBEs and WBEs in providing products/services required in this RFP. The targets of participation recommended by the State of Missouri are 10% MBE and 5% WBE of the total dollar value of the contract.

- a) These targets can be met by a qualified MBE/WBE vendor themselves and/or through the use of qualified subcontractors, suppliers, joint ventures, or other arrangements that afford meaningful opportunities for MBE/WBE participation.
- b) The services performed or the products provided by MBE/WBEs must provide a commercially useful function related to the delivery of the contractually-required service/product in a manner that will constitute an added value to the contract and shall be performed/provided exclusive to the performance of the contract. Therefore, if the services performed or the products provided by MBE/WBEs is utilized, to any extent, in the bidder's obligations outside of the contract, it shall not be considered a valid added value to the contract and shall not qualify as participation in accordance with this clause.
- c) In order to be considered as meeting these targets, the MBE/WBEs must be "qualified" by the proposal opening date (date the proposal is due). See below for a definition of a qualified MBE/WBE.
- d) If the bidder is proposing MBE/WBE participation, in order to receive evaluation consideration for MBE/WBE participation, the bidder must provide the following information with the proposal.
  - a. Participation Commitment If the bidder is proposing MBE/WBE participation, the vendor must complete Section 14 of the DSS Questionnaire (MBE-WBE Participation Commitment), by listing each proposed MBE and WBE, the committed percentage of participation for each MBE and WBE, and the commercially useful products/services to be provided by the listed MBE and WBE. If the vendor submitting the proposal is a qualified MBE and/or WBE, the vendor must include the vendor in the appropriate table.
  - b. Documentation of Intent to Participate The bidder must either provide a properly completed Exhibit A-5, Documentation of Intent to Participate Form, signed and dated no earlier than the RFP issuance date by each MBE and WBE proposed or must provide a letter of intent signed and dated no earlier than the RFP issuance date by each MBE and WBE proposed which: (1) must describe the products/services the MBE/WBE will provide and (2) should include evidence that the MBE/WBE is qualified, as defined herein (i.e., the MBE/WBE Certification Number or a copy of MBE/WBE certificate issued by the Missouri OEO). If the bidder submitting the proposal is a qualified MBE and/or WBE, the bidder is not required to complete Exhibit A-5, Documentation of Intent to Participate Form or provide a recently dated letter of intent.
- e) Commitment If the bidder's proposal is awarded, the percentage level of MBE/WBE participation committed to by the bidder on Exhibit A-5, Participation Commitment, shall be interpreted as a contractual requirement.

### Definition -- Qualified MBE/WBE:

In order to be considered a qualified MBE or WBE for purposes of this RFP, the MBE/WBE must be certified by the State of Missouri, Office of Administration, Office of Equal Opportunity (OEO) by the proposal opening date.

MBE or WBE means a business that is a sole proprietorship, partnership, joint venture, or corporation in which at least fifty-one percent (51%) of the ownership interest is held by minorities or women and the management and daily business operations of which are controlled by one or more minorities or women who own it.

Minority is defined as belonging to one of the following racial minority groups: African Americans, Native Americans, Hispanic Americans, Asian Americans, American Indians, Eskimos, Aleuts, and other groups that may be recognized by the Office of Advocacy, United States Small Business Administration, Washington, D.C.

Resources - A listing of several resources that are available to assist bidders in their efforts to identify and secure the participation of qualified MBEs and WBEs is available at the website shown below or by contacting the Office of Equal Opportunity (OEO) at:

Office of Administration, Office of Equal Opportunity (OEO) Harry S Truman Bldg., Room 630, P.O. Box 809, Jefferson City, MO 65102-0809 Phone: (877) 259-2963 or (573) 751-8130 Fax: (573) 522-8078 Web site: <u>http://oeo.mo.gov</u>

### Pricing

The bidder must provide a firm, fixed pricing arrangement for providing the services described in this RFP.

The bidder is also required to complete the Performance Guarantee section of the questionnaire, indicating the total amount the bidder is willing to put at risk for these performance standards. The bidder must designate a minimum of 5 percent of total monthly fees for the implementation standard, and 20 percent of the total monthly fees for the remaining performance standards. The bidder may designate a maximum amount for any one standard. The bidder may also propose additional performance standards. MCHCP reserves the right to negotiate each standard prior to finalizing the contract.

Any cost and/or pricing data submitted or related to the bidder's proposal including any cost and/or pricing data related to contractual extension options shall be subject to evaluation if deemed by MCHCP to be in the best interest of members of the Plan.

In determining pricing points, MCHCP will consider the potential five-year cost of the project including the full not-to-exceed prices for Years 2-5 of the contract. The five-year cost includes the total monthly fees for the entire five years. MCHCP will also assume one additional data feed per year in determining the

total five-year project cost. The proposed five-year cost for Voluntary Data Share Agreement (VDSA) services and the Consumer Plan Selection Tool will also be included in the total five-year cost.

In addition, the maximum pricing points that may be earned will be relative to the amount of non-pricing points received. The bidder with the most non-price points will be eligible to receive the full 400 points allowed for pricing. All other bidders will be eligible to receive a relative amount of price points based on the relative difference of the non-price points among the bidders. An illustration is provided in Attachment 3.

# **Finalist Interview**

After an initial screening process, a technical question and answer conference, product demonstration, and/or interview may be conducted, if deemed necessary by MCHCP, to clarify or verify the bidder's proposal and to develop a comprehensive assessment of the proposal. MCHCP may ask additional questions and/or conduct a site visit of the bidder's service center or other appropriate location.

## Negotiation and Contract Award

The bidder is advised that under the provisions of this RFP, MCHCP reserves the right to conduct negotiations of the proposals received or to award a contract without negotiations. If such negotiations are conducted, the following conditions shall apply:

- Negotiations may be conducted in person, in writing, or by telephone.
- Negotiations will only be conducted with bidders who provide potentially acceptable proposals. MCHCP reserves the right to limit negotiations to those bidders which received the highest rankings during the initial evaluation phase. All bidders involved in the negotiation process will be invited to submit a best and final offer.
- Terms, conditions, prices, methodology, or other features of the bidder's proposal may be subject to negotiation and subsequent revision. As part of the negotiations, the bidder may be required to submit supporting financial, pricing, and other data in order to allow a detailed evaluation of the feasibility, reasonableness, and acceptability of the proposal.
- The mandatory requirements of the RFP shall not be negotiable and shall remain unchanged unless MCHCP determines that a change in such requirements is in the best interest of MCHCP and its members.
- Bidder understands that the terms of any negotiation are confidential until an award is made or all proposals are rejected.

Any award of a contract resulting from this RFP will be made only by written authorization from MCHCP.

## **Renewal of Contract**

The initial agreement commences when the contract is signed through December 31, 2027, with five additional one year renewals available at the sole option of the MCHCP Board of Trustees.

Proposed pricing arrangements for CY2026 through CY2029, not to exceed the allowed maximum, shall be submitted to MCHCP prior to May 15 for the following plan year. Pricing for Years CY2030 through CY2032 will be negotiated, and shall be submitted to MCHCP prior to May 15 for the following plan year.

# Using Optavise

The 2025 MCHCP Decision Support System (DSS) RFP contains 2 broad categories of items that you will need to work on via the Optavise application:

- 1) Items Requiring a Response:
  - a. Pricing Forms (e.g., Decision Support System Pricing) are online input forms to collect your pricing proposal as requested by MCHCP. These pricing forms also calculate based on the rates you input.
  - b. Questionnaires (e.g., Decision Support System Questionnaire) are also online forms to collect your responses to questions about your capabilities.
  - c) Response Documents (e.g., Exhibit A-1 Intent to Bid) are attachment files (e.g., MS Word or Excel) that are posted to the Optavise website. They should be downloaded, completed and/or signed by your organization, and then posted/uploaded back to the Optavise application. When you upload your response, from the drop-down menu, identify each uploaded document as a *Response* document and associate it to the appropriate document by name. For step-by-step instructions, please refer to the *How to Download and Attach Files* User Guide located in the *Downloads* section on the application homepage.

## 2) <u>Reference Files from MCHCP</u>:

a) Documents (e.g., Exhibit B – Scope of Work) that you should download and read completely before submitting your RFP response.

These components can be found in the Optavise application under the 2025 MCHCP Decision Support System (DSS) RFP on the Event Details page of the application.

Note that as you use the Optavise application to respond to this RFP, User Guides are accessible throughout the application by simply clicking on the help icon or from the *Downloads* area of the Optavise application homepage. For help with data entry and navigation throughout the application, you can contact the Optavise staff:

- Phone: 800-979-9351
- E-mail: <u>systemsupport@optavise.com</u>

## **Responding to Questionnaires**

We have posted two forms for your response:

- Decision Support System Questionnaire
- Mandatory Contract Provisions Questionnaire

The questionnaires need to be completed and submitted to Optavise by **Tuesday, July 2, 2024, 5 p.m. CT** (6 p.m. ET).

The questionnaires are located within the *Items Requiring a Response* tab. This tab contains the items you and your team are required to access and respond to. For step-by-step instructions, please refer to the *How to Submit a Questionnaire* User Guide located in the *Downloads* section of the Optavise application homepage. You have the option to "respond online" or through two different off-line (or desktop) tools.

## **Completing Pricing Worksheets**

The financial worksheet (Decision Support System Pricing) may be accessed in *Items Requiring a Response*. The *Pricing* or *Bid* contains worksheets to collect fee quotations based on the products and services requested in this RFP. For step-by-step instructions, please refer to the *How to Submit a Bid* User Guide located in the *Downloads* section of the Optavise application homepage. Please be certain to complete all worksheets.

**The final bid deadline is Tuesday, July 2, 2024, 5:00 p.m. CT (6:00 p.m. ET)**. Further detail on how to submit your bids is outlined in the Submitting Bids section of these Instructions.

# Notes Regarding Pricing

DSS pricing quotes should assume:

- Implementation to begin immediately following contract award, with system in full production by January 1, 2025.
- Submitted prices for CY2025 shall be firm, while prices for CY2026 through CY2029 shall be submitted as "not-to-exceed" amounts. Years 6-8 (CY2030 through CY2032) will be negotiated.
- Proposed prices are subject to negotiation prior to the award of a contract by MCHCP. Refer to this Instructions document for detailed pricing worksheet instructions.
- Renewals are solely at the option of MCHCP. Renewal prices are due by May 15 for the following year, and are subject to negotiation.

# Submitting Bids

The pricing function allows you to work on a bid submission in draft form. You can enter your rates and *Save* without submitting your proposal to Optavise. Save frequently to avoid losing work. When you have

finished entering your rates, *Save* and then *Calculate*. If you have missed any required fields, you will be notified with an error message. If there are no errors, you can *Submit* your proposal through Optavise.

Once you have submitted your bid, you can make adjustments at any time up until the bids are due. Simply select the pricing/bid and choose *Edit* to make changes. Follow the steps above to save, calculate, and re-submit.

Please refer to the following list of instructions <u>before</u> attempting to input/submit a bid:

- Enter your rates well in advance of the required bid date. Please do NOT wait until the last minute to work on the pricing model worksheet because your bids must comply with the automated rules and data validation checks that have been implemented by MCHCP.
- Partial data entries can be saved; however, the validation rules (error checking) will not be run against your data until you complete the worksheet and either *Calculate* or *Submit* your data.
- To check that your data have been accurately entered for all worksheets, you should press the *Calculate* button at the top of the page. If your input complies with the validation rules, the rates will be calculated and totaled. Otherwise, the calculation and validation rules will not properly execute even if you press the *Calculate* button.
- You will be able to view your final rate submission prior to submitting to Optavise.
- If your data are accurate and complete, click on the *Submit Bid* icon to submit your bid to Optavise.
- Data that are submitted incorrectly will receive error messages when calculated or submitted.
- All data fields that are marked as a number or currency must be filled with a numerical value or 0. Blanks and text such as "n/a" are not permitted. If you attempt to *Submit* or *Calculate* your data with incomplete fields, you will receive an error message.
- Be sure to save your data often. Periodic saves will prevent you from losing data in the event the application times-out. For security purposes the system will automatically log you out after a specified time if there is no activity.

# **RFP Checklist**

Prior to the July 2 close date, please be sure you have completed and/or reviewed each of the documents listed below.

Туре	Document Name
Questionnaire	Decision Support System Questionnaire
Questionnaire	Mandatory Contract Provisions Questionnaire
Pricing/Bid	Decision Support System Pricing
Response	Exhibit A-1 Intent to Bid.docx DUE: June 14, 2024

Туре	Document Name
Response	Exhibit A-2 Proposed Bidder Modifications.docx
Response	Exhibit A-3 Confirmation Document.docx
Response	Exhibit A-4 Contractor Certification.docx
Response	Exhibit A-5 MBE-WBE Intent to Participate Document.docx
Response	Exhibit A-6 Sample Contract.docx
Response	Exhibit A-7 Business Associate Agreement.docx
Reference	Introduction and Instructions – 2025 MCHCP Decision Support System RFP.pdf
Reference	Exhibit B – Scope of Work.docx
Reference	Exhibit C – General Provisions.docx
Reference	Attachment 1 – MCHCP data suppliers.xlsx
Reference	Attachment 2 – MCHCP eligibility file fields.xlsx
Reference	Attachment 3 – Cost points illustration.xlsx

### **Contact Information**

We understand that content and technical questions may arise. All questions regarding this document and the selection process must be submitted through the online messaging module of the Optavise application by **Friday, June 14, 2024, 5 p.m. CT (6 p.m. ET)**.

For technical questions related to the use of Optavise, please contact the Optavise customer support team at <a href="mailto:systemsupport@optavise.com">systemsupport@optavise.com</a>, or call the Customer Support Line at 800-979-9351.

#### EXHIBIT B SCOPE OF WORK

- B1. **Purpose:** The contractor shall provide a decision support system that integrates claim level data from multiple sources with enrollment information into a database capable of being queried by MCHCP.
  - B1.1 **Claim Level Data:** The contractor must be capable of converting and standardizing raw data from multiple sources into a database that can be queried by MCHCP to assist in answering the following types of questions. Types of data include, but are not limited to, medical, pharmacy, dental and vision claims; health assessment results; onsite health center encounters; and eligibility data.
    - B1.1.1 How does MCHCP experience compare to other benchmarks both commercial employers and governmental employers especially other state employers?
    - B1.1.2 Is the plan performing optimally in the areas of cost, quality, and member access?
    - B1.1.3 How is the plan performing over time in relation to accepted utilization and expense criteria? What are the causes of these trends?
    - B1.1.4 What is the expected or actual impact of new or existing programs?
    - B1.1.5 What are the primary clinical reasons people are receiving benefits? What are the high cost and high utilization areas?
  - B1.2 **Full Responsibility**: The contractor must offer this product in such a manner that MCHCP has no responsibility for the database, the decision support software, or the technical infrastructure and associated processes and procedures. The contractor shall proactively identify and correct any data anomalies or gaps in data.
  - B1.3 Analytical Products and Support: The contractor shall be able to provide a full range of analytical products and support, including, but not limited to, claims expense and utilization analysis, benchmarking against valid comparable standards, plan and program evaluation, financial management, and utilization analysis at the provider and clinical level. The contractor shall provide an annual minimum consulting retainer of 168 hours that MCHCP can utilize for special projects or to offset costs for implementing a new or replacement data source. Unused hours shall roll over to the next year.
  - B1.4 **Web-based Information and Access:** The contractor shall provide secure, user-friendly, web-based access to the warehouse system that allows for ad hoc report generation with graphic presentation ability. The system must be able to integrate claims information (PPO, HDHP, Medicare Advantage, PBM, dental and vision), health clinic encounter data, health assessment (HA) results, eligibility information and other types of data as it is identified.
  - B1.5 **Database Requirements:** The contractor shall create a five-year historical database using the available information from all data suppliers. Once data ages out of the database, the contractor shall archive the data and retain the capability for the data to be retrieved upon

request. The contractor shall provide MCHCP direct access to act on and manipulate, compare, consolidate, view, analyze and report the data, with the capability to summarize and compare services provided to members or by providers based on selection criteria specified by MCHCP using any combination of data dimensions. The system must allow for independent analysis and study. The contractor shall perform the following:

- B1.5.1 Maintain a comparative database embedded within the system to allow for benchmarking. At a minimum, this benchmark data must include national, regional, and industry-specific norms. A public sector norm is required.
- B1.5.2 Construct inpatient admissions and inpatient and outpatient episodes of care, linking all claims to a related episode. Episodes of care capabilities are required and included in the base price.
- B1.5.3 Provide quality of care measurement and readmission analysis capabilities using established key indicators of quality.
- B1.5.4 Provide the ability to define and access subsets of the full database based on any data variable with drill-down capabilities to the level of individual participant, provider or claim line.
- B1.5.5 Provide the ability to query the most recent five years of data and with the capability to report claims data by date of service and by date of payment.
- B1.5.6 Provide health risk scoring capabilities that, at a minimum, measure population illness burden and stratify populations upon a continuum. The health risk scoring tool must be seamlessly located within the data warehouse.
- B1.5.7 Provide the ability to display information in tables, graphs and charts and provide a wide range of selectable choices to view, array, compare, and report aggregate, sub-aggregate, and summary information.
- B1.6 **Reports**: The contractor shall electronically array and store data to allow for the generation of standard reports on a periodic basis as well as the capability to create and generate ad hoc reports on-line.
  - B1.6.1 The contractor shall provide access to a series of standard management reports that analyze underlying utilization and cost patterns.
  - B1.6.2 Query and reporting results must be downloadable to a format that can be manipulated (e.g. Excel) with nearly immediate (on-demand) access and no programming expertise needed.
  - B1.6.3 The contractor shall provide the ability to create sets of reports that can be scheduled to run following each monthly database update and at user-defined times.

- B1.6.4 The contractor shall provide assistance and expertise in converting MCHCP's current reporting templates for use in the contractor's system.
- B.1.7 **Training and Support:** The contractor shall provide adequate initial and ongoing training and support for up to four MCHCP employees and up to two external users and shall be able to provide the necessary technical support to make full use of the information in strategic decision making. The contractor must provide ongoing system support and training following implementation. A designated analyst with extensive experience must be included as part of the account team.
- B1.8 **Monthly Data Feeds**: The contractor shall develop data interfaces which are mutually acceptable to the contractor, the data suppliers, and MCHCP. The process will include the method of transmission, content, and frequency. The contractor shall accept monthly data feeds from each of MCHCP's data suppliers and clean the data prior to importing into the central data warehouse. The data will be electronically stored on the contractor's system and will serve as a centralized data repository from which both standard and ad hoc reports may be generated. The contractor shall maintain clear communication with MCHCP regarding data suppliers' submission dates and compliance levels. The contractor must communicate interface requirements to data suppliers in the event MCHCP changes or adds data suppliers.
- B1.9 **Data Extract Files:** Upon request, the contractor shall provide a data extract file to MCHCP or its designee in an agreed upon format and layout.

## B2. Implementation

B2.1 MCHCP expects to begin implementation immediately following contract award, with the system being in full production no later than January 1, 2025. There must be no break in service from the current contractor.

## B3. Rights in Data/Turnover Requirements

- B3.1 All technical communications and records originated or prepared by the contractor pursuant to this agreement including papers, reports, charts, and other documentation, but not including contractor's administrative communications and records relating to this agreement shall be delivered to and shall become the exclusive property of MCHCP.
- B3.2 Six (6) months prior to the end of the contract period, the contractor shall deliver to MCHCP a turnover work plan acceptable to MCHCP. This work plan shall address all requirements and activities necessary to complete the termination and turnover process. In addition to addressing the activities associated with the turnover process, the work plan shall include a work schedule of tasks to be performed during the turnover period and a narrative which describes each task/activity on the work schedule. The work plan must be provided within 30 days of notification of contract termination. Failure to provide an acceptable turnover work plan will incur liquidated damages as provided in the performance standards.
- B3.3 The contractor shall turn over to MCHCP's new decision support system vendor, the most recent five years of raw data received from each of MCHCP's data suppliers.

## B4. Voluntary Data Share Agreement (VDSA) Services

- B4.1 At MCHCP's option, the contractor shall manage the Voluntary Data Sharing Agreement (VDSA) exchange between MCHCP and the Centers for Medicare and Medicaid (CMS) Coordination of Benefits Contractor (COBC).
- B4.2 Based on the eligibility files submitted by MCHCP, the contractor shall submit a Medicare Secondary Payer (MSP) file to the CMS COBC of all MCHCP members aged 55 or older on a quarterly basis.
- B4.3 The contractor shall submit a Non-MSP file to the CMS COBC on a monthly basis of all members and submit the results provided by the CMS COBC to MCHCP in order to provide up-to-date Medicare entitlement information.

### B5. Consumer Plan Selection Tool

- B5.1 At MCHCP's option, the contractor shall provide an online application that enables employees to view their specific medical and prescription drug historic cost and utilization information for themselves and their dependents and plan choices to support the open enrollment decision-making process.
- B5.2 The application shall model costs and utilization and apply such to each of the plan design options available to members. The application must model historic claims experience and premium contributions to make the plan recommendation that is the most financially advantageous to the member.
- B5.3 The contractor shall provide results reporting and provide an impact analysis of the effectiveness of the tool to determine if members selected the recommended plan.
- B5.4 The tool must be accessible to members through single sign-on from MCHCP's website and available during open enrollment in the months of September and October of each year.
- B5.5 The tool must be accessible to new employees throughout the year.
- B6. **Electronic Transmission Protocols:** DSS and all subcontractors shall maintain encryption standards of 4096 bits or greater for RSA key pairs, and 256 bit session key strength for the encryption of confidential information and transmission over public communication infrastructure. Batch transfers of files will be performed using SFTP or FTPS with similar standards and refined as needed to best accommodate provider configurations (i.e. port assignment, access control, etc.).

#### B7. Payment Terms

B7.1 MCHCP shall promptly pay all monies due the contractor in a timely manner in accordance with the pricing awarded by the Board of Trustees. MCHCP will submit payment to the contractor within (10) days of receipt and approval of the monthly invoice. Payment will be made via automatic clearing house (ACH). MCHCP shall have a grace period of 10 days for payment. MCHCP shall put forth reasonable efforts to make payment by the required payment date.

- B7.1.1 The contractor shall submit its monthly invoice electronically. For MCHCP to monitor project performance, the invoice shall be divided by project with amount invoiced in accordance with pricing pages submitted by the contractor as part of the RFP. The total amount invoiced may not exceed the pricing for the calendar year.
- B7.1.2 Payment shall not be construed by the contractor as acceptance of the service performed by the contractor. MCHCP reserves the right to conduct further testing and inspection after payment, but within a reasonable time after performance, and to reject the service if such post-payment testing or inspection discloses a defect or failure to meet specifications. The contractor agrees that MCHCP may set off the amount of any obligation of the contractor to MCHCP against any payments due the contractor.

### B8. Renewal and Termination of Contract

- B8.1 The contract term is for a period of three (3) years from January 1, 2025, through December 31, 2027.
- B8.2 MCHCP has the sole right to renew the contract for five (5) additional one-year periods.
- B8.3 MCHCP reserves the right to terminate the contract without penalty or recourse by giving the contractor written notice of such termination at least 30 days prior to termination.

## EXHIBIT C GENERAL PROVISIONS

### C1. TERMINOLOGY AND DEFINITIONS

Whenever the following words and expressions appear in this Request for Proposal (RFP) document or any amendment thereto, the definition or meaning described below shall apply.

- C1.1 <u>Amendment</u> means a written, official modification to an RFP or to a contract.
- C1.2 **Bidder** means a person or organization who submitted an offer in response to this RFP.
- C1.3 **Breach** shall mean the acquisition, access, use or disclosure of PHI in a manner not permitted by the Privacy Rule that compromises the security or privacy of the PHI as defined, and subject to the exceptions set forth, in 45 C.F.R. 164.402.
- C1.4 <u>**Contract**</u> means a legal and binding agreement between two or more competent parties, in consideration for the procurement of services as described in this RFP.
- C1.5 <u>Contractor</u> means a person or organization who is a successful bidder as a result of an RFP and/or who enters into a contract or any subcontract of a successful bidder.
- C1.6 <u>**Employee**</u> means a benefit-eligible person employed by the state and present and future retirees from state employment who meet the plan eligibility requirements.
- C1.7 May means that a certain feature, component, or action is permissible, but not required.
- C1.8 <u>Member</u> means any person covered as either a subscriber or a dependent in accordance with the terms and conditions of the plan.
- C1.9 <u>Must</u> means that a certain feature, component, or action is a mandatory condition. Failure to provide or comply may result in a proposal being considered non-responsive.
- C1.10 **<u>Off-shore</u>** means outside of the United States.
- C1.11 **<u>Participant</u>** has the same meaning as the word member.
- C1.12 PHI shall mean Protected Health Information, as defined in 45 C.F.R. 160.103, as amended.
- C1.13 **Pricing Pages** apply to the form(s) on which the bidder must state the price(s) applicable for the services required in the RFP. The pricing pages must be completed and uploaded by the bidder prior to the specified proposal filing date and time.
- C1.14 **Privacy Regulations** shall mean the federal privacy regulations issued pursuant to the Health Insurance Portability and Accountability Act of 1996, as amended from time to time, codified at 45 C.F.R. Parts 160 and 164 (Subparts A & E).

- C1.15 **Proposal Filing Date and Time** and similar expressions mean the exact deadline required by the RFP for the receipt of proposals by the Optavise system.
- C1.16 **<u>Provider</u>** means a physician, hospital, medical agency, specialist or other duly licensed health care facility or practitioner certified or otherwise authorized to furnish health care services pursuant to the law of the jurisdiction in which care or treatment is received. A doctor/physician as defined in 22 CSR 10-2010(22). Other providers include but are not limited to:
  - C1.16.1 Audiologist (AUD or PhD);
  - C1.16.2 Certified Addiction Counselor for Substance Abuse (CAC);
  - C1.16.3 Certified Nurse Midwife (CNM) when acting within the scope of his/her license in the state in which s/he practices and performing a service which would be payable under this plan when performed by a physician;
  - C1.16.4 Certified Social Worker or Masters in Social Work (MSW)
  - C1.16.5 Chiropractor;
  - C1.16.6 Licensed Clinical Social Worker
  - C1.16.7 Licensed Professional Counselor (LPC);
  - C1.16.8 Licensed Psychologist (LP);
  - C1.16.9 Nurse Practitioner (NP);
  - C1.16.10 Physician Assistant (PA);
  - C1.16.11 Occupational Therapist;
  - C1.16.12 Physical Therapist;
  - C1.16.13 Speech Therapist;
  - C1.16.14 Registered Nurse Anesthetist (CRNA);
  - C1.16.15 Registered Nurse Practitioner (ARNP); or
  - C1.16.16 Therapist with a PhD or Master's Degree in Psychology or Counseling.
- C1.17 **<u>Request for Proposal (RFP)</u>** means the solicitation document issued by MCHCP to potential bidders for the purchase of services as described in the document. The definition includes these Terms and Conditions as well as all Pricing Pages, Exhibits, Attachments, and Amendments thereto.
- C1.18 **<u>Respondent</u>** means any party responding in any way to this RFP.
- C1.19 **<u>Retiree</u>** means a former employee who, at the time of termination of employment, met the eligibility requirements as outlined in subsection 22 CSR 10-2.020(2)(B) and is currently receiving a monthly retirement benefit from a retirement system listed in such rule.
- C1.20 **RSMo (Revised Statutes of Missouri)** refers to the body of laws enacted by the Legislature, which govern the operations of all agencies of the State of Missouri. Chapter 103 of the statutes is the primary chapter governing the operations of MCHCP.
- C1.21 **<u>Shall</u>** has the same meaning as the word must.
- C1.22 **Should** means that certain feature, component and/or action is desirable but not mandatory.
- C1.23 **Subscriber** means the person who elects coverage under the plan.

## C2. GENERAL BIDDING PROVISIONS

C2.1 It shall be the bidder's responsibility to ask questions, request changes or clarification, or otherwise advise MCHCP if any language, specifications, or requirements of an RFP appear to be ambiguous, contradictory, and/or arbitrary, or appear to inadvertently restrict or limit the requirements stated in the RFP to a single source. Any and all communication from bidders regarding specifications, requirements, competitive procurement process, etc., must be directed to MCHCP via the messaging tool on the Optavise web site, as indicated on the last page of the *Introduction and Instructions* document of the RFP. Such communication must be received no later than Friday, June 14, 2024, 5 p.m. CT (6 p.m. ET).

Every attempt shall be made to ensure that the bidder receives an adequate and prompt response. However, to maintain a fair and equitable procurement process, all bidders will be advised, via the issuance of an amendment or other official notification to the RFP, of any relevant or pertinent information related to the procurement. Therefore, bidders are advised that unless specified elsewhere in the RFP, any questions received by MCHCP after the date noted above might not be answered.

It is the responsibility of the bidder to identify and explain any part of their response that does not conform to the requested services described in this document. Without documentation provided by the bidder, it is assumed by MCHCP that the bidder can provide all services as described in this document.

- C2.2 Bidders are cautioned that the only official position of MCHCP is that position which is stated in writing and issued by MCHCP in the RFP or an amendment thereto. No other means of communication, whether oral or written, shall be construed as a formal or official response or statement.
- C2.3 MCHCP monitors all procurement activities to detect any possibility of deliberate restraint of competition, collusion among bidders, price-fixing by bidders, or any other anticompetitive conduct by bidders, which appears to violate state and federal antitrust laws. Any suspected violation shall be referred to the Missouri Attorney General's Office for appropriate action.
- C2.4 No contract shall be considered to have been entered into by MCHCP until the contract has been awarded by the MCHCP Board of Trustees and all material terms have been finalized. The contract is expected to be finalized and signed by a duly authorized representative of Contractor in less than fifteen (15) days from MCHCP's initial contact to negotiate a contract. An award will not be made until all contract terms have been accepted.

## C3. PREPARATION OF PROPOSALS

- C3.1 Bidders must examine the entire RFP carefully. Failure to do so shall be at the bidder's risk.
- C3.2 Unless otherwise specifically stated in the RFP, all specifications and requirements constitute minimum requirements. All proposals must meet or exceed the stated specifications and requirements.

C3.3 Unless otherwise specifically stated in the RFP, any manufacturer's names, trade names, brand names, and/or information listed in a specification and/or requirement are for informational purposes only and are not intended to limit competition. Proposals that do not comply with the requirements and specifications are subject to rejection without clarification.

## C4. DISCLOSURE OF MATERIAL EVENTS

- C4.1 The bidder agrees that from the date of the bidder's response to this RFP through the date for which a contract is awarded, the bidder shall immediately disclose to MCHCP:
  - C4.1.1 Any material adverse change to the financial status or condition of the bidder;
  - C4.1.2 Any merger, sale or other material change of ownership of the bidder;
  - C4.1.3 Any conflict of interest or potential conflict of interest between the bidder's engagement with MCHCP and the work, services or products that the bidder is providing or proposes to provide to any current or prospective customer; and
  - C4.1.4 (1) Any material investigation of the bidder by a federal or state agency or self-regulatory organization; (2) Any material complaint against the bidder filed with a federal or state agency or self-regulatory organization; (3) Any material proceeding naming the bidder before any federal or state agency or self-regulatory organization; (4) Any material criminal or civil action in state or federal court naming the bidder as a defendant; (5) Any material fine, penalty, censure or other disciplinary action taken against the bidder by any federal or state agency or self-regulatory organization; (6) Any material judgment or award of damages imposed on or against the bidder as a result of any material criminal or civil action in which the bidder was a party; or (7) Any other matter material to the services rendered by the bidder pursuant to this RFP.
    - C4.1.4.1 For the purposes of this paragraph, "material" means of a nature, or of sufficient monetary value, or concerning a subject which a reasonable party in the position of and comparable to MCHCP would consider relevant and important in assessing the relationship and services contemplated by this RFP. It is further understood that in fulfilling its ongoing responsibilities under this paragraph, the bidder is obligated to make its best faith efforts to disclose only those relevant matters which come to the attention of or should have been known by the bidder's personnel involved in the engagement covered by this RFP and/or which come to the attention of or should have been known by any individual or office of the bidder designated by the bidder to monitor and report such matters.
- C4.2 Upon learning of any such actions, MCHCP reserves the right, at its sole discretion, to either reject the proposal or continue evaluating the proposal.

## C5. COMPLIANCE WITH APPLICABLE FEDERAL LAWS

- C5.1 In connection with the furnishing of equipment, supplies, and/or services under the contract, the contractor and all subcontractors shall comply with all applicable requirements and provisions of the Health Insurance Portability and Accountability Act (HIPAA) and The Patient Protection and Affordable Care Act (PPACA), as amended.
- C5.2 Any bidder offering to provide services must be able to sign a Business Associate Agreement (BAA) (see Exhibit A-7) due to the provisions of HIPAA. Any requested changes shall be noted and returned with the RFP. The changes are accepted only upon MCHCP signing a revised BAA after contract award.
- C5.3 Upon awarding of the contract by the Board, the BAA shall be signed by both parties within five (5) working days of the request to sign, or the award of the contract may be rescinded.

# Attachment 1 Monthly Data Feeds to Merative 2024

Data Supplier Contracted Services		Data Provided	
Anthem	Third party administrator	Medical claims	
Anthem	Third party administrator	Value-based relationship data	
UnitedHealthcare	Fully-insured group Medicare Advantage Plan	Medical claims	
Delta Dental of MO	Fully-insured dental plan	Dental claims	
MetLife	Fully-insured dental plan	Run-out Dental claims (last file to be sent January, 2025)	
National Vision Administrators (NVA)	Fully-insured vision plan	Vision claims	
Express Scripts	Pharmacy Benefit Manager	Pharmacy claims - commercial plan	
Express Scripts	Pharmacy Benefit Manager	Pharmacy claims - EGWP	
Marathon Health	Onsite health center	Encounter data	
МСНСР		Eligibility data	
МСНСР		Health assessment data (9 files per year)	

### Attachment 2 MCHCP Eligibilty File Fields 2024

Field Name	Field Description	Туре	Length	Position
ACCTID	Account ID	CHARACTER	8	1-8
BUSUNIT	Business Unit	CHARACTER	4	9-12
INDCDEN	Dental Coverage Indicator	CHARACTER	1	13
INDCDRUG	Drug Coverage Indicator	CHARACTER	1	14
INDCHEAR	Hearing Coverage Indicator	CHARACTER	1	15
INDCMED	Medical Coverage Indicator	CHARACTER	1	16
INDCMHSA	Mental Health/Substance Abuse Coverage Indicator	CHARACTER	1	17
INDCVIS	Vision Coverage Indicator	CHARACTER	1	18
TIERCDE	Coverage Tier Code (e.g. Employee Only, Family, etc.)	CHARACTER	2	19-20
BRTDAT	Member's date of birth	CHARACTER	10	21-30
TRMDAT	Termination date	CHARACTER	10	31-40
EFFDAT	Effective date	CHARACTER	10	41-50
STATCDE	Employee status code (active, retired, etc.)	CHARACTER	1	51
SSNPSN	Employee SSN	CHARACTER	9	52-60
SEXPSN	Member gender	CHARACTER	1	61
NWID	Network ID	CHARACTER	3	62-64
PCPID	PCP ID	CHARACTER	13	65-77
РСРТҮРЕ	PCP type	CHARACTER	1	78
PLAN	Plan Code (PPO 300, PPO 600, etc.)	CHARACTER	14	79-92
GRPCDE	Group Code (i.e. data supplier)	CHARACTER	5	93-97
RELCDE	Relationship code (e.g. employee, spouse, child)	CHARACTER	1	98
SALARY	Salary indicator	CHARACTER	1	99
UNION	Union indicator	CHARACTER	1	100
ZIPCDE	Zip code	CHARACTER	5	101-105
ELGDAT	Eligibility date	CHARACTER	10	101-105
SYSTYPE	System type (state, public entity)	CHARACTER	10	116
GROUP	Group name	CHARACTER	10	117-126
ACCTNO	•	CHARACTER	4	117-120
AGENCY	Account number		3	
	Agency code	CHARACTER	3	131-133
	Region code	CHARACTER	4	134-135
SUBRGN	Subregion code	CHARACTER		136-139
	Live county	CHARACTER	3	140-142
WRKCNY	Work county	CHARACTER	3	143-145
ELECTCNY	Election county	CHARACTER	3	146-148
CDEMDR	Medicare indicator	CHARACTER	1	149
STSMED	Medical status	CHARACTER	3	150-152
FINANCE	Financing (fully-insured, self-insured)	CHARACTER	2	153-154
PREMSTD	Plan type (PPO, HDHP, etc.)	CHARACTER	4	155-158
MBRCONTR	Member contribution	NUMERIC	6,2	159-164
PLANPMT	Medical portion of premium	NUMERIC	6,2	165-170
HSAPREM	Employer contribution to HSA	NUMERIC	7,2	171-177
RXPREM	Rx portion of premium	NUMERIC	7,2	178-184
TOTMEDRX	Medical and Rx portion of premium	NUMERIC	7,2	185-191
ADMINFEE	Admin fee portion of premium	NUMERIC	7,2	192-198
SSNMBR	Member SSN	CHARACTER	9	199-207
LNMPSN	Last name	CHARACTER	15	208-222
FNMPSN	First name	CHARACTER	15	223-237
INCLVL	Wellness incentive level	CHARACTER	1	238
CHILDCNT	Number of children covered	NUMERIC	2,0	239-240
SSNSUB	Subscriber SSN	NUMERIC	9,0	241-249
TOBINC	Tobacco incentive level	CHARACTER	1	250
VISPLAN	Vision plan code	CHARACTER	6	251-256
VISLVL	Vision plan coverage level	CHARACTER	4	257-260
VISCONTR	Vision member contribution	NUMERIC	10,2	261-270
VISPREM	Total vision premium	NUMERIC	10,2	271-280
VHESTATUS	Variable hour employee status	CHARACTER	1	281

# Attachment 3 Cost Points Illustration

Bidders will be evaluated and awarded a maximum of 900 total points in the areas of price points (400 maximum) and non-price points (500 maximum). Bidders must earn at least 80 percent of the nonprice points (i.e. 400 points) in order to qualify for further evaluation. The amount of price points that a bidder will be eligible to earn is relative to its non-price point evaluation. In other words, the better a given bidder rates compared to other bidders in the non-price points section, the more price points that bidder is eligible to earn.

#### See example below:

Step 1:

Scenario:	Price points: 400 points
	Non-Price points: 500 points

Non-Price Point Calculations

А	В	С
Bidder	Non-price points	Price
1	480	\$200 \$150
2	440	\$150
3	390	\$125

#### **Price Point Calculations**

Step 2:	А	D	E	F	G
		% of Price Points	Price Points	% of Eligible Price	Price Points
	Bidder	Eligible to Earn	Eligible to Earn	Points Earned	Earned
	1	100%	400.0	62.5%	250.0
	2	91.7%	366.7	83.3%	305.6
	3	81.3%	325.0	100%	325.0

#### **Final Scores**

Step 3:	А	Н
		Total Points
	Bidder	Earned
	1	730.0
	2	745.6
	3	715.0

#### Notes:

- A Bidder identification.
- B The number of non-price points earned.

C The total dollar figure bidder supplied in pricing model. This includes the Base Fees, VDSA services, Consumer Plan Selection Tool, and the cost for Additional Feeds.

- D The bidder's non-price points divided by the non-price points of the bidder with the greatest non-price points.
- E "D" multiplied by 400 (price points). Based on relative non-price point performance, this figure is the maximum amount of price points the bidder may earn.
- F The lowest priced offer divided by "C". This is the percentage of "Price Points Eligible to Earn" ("E") that a bidder will receive.
- G "E" multiplied by "F". This is the actual price points earned.
- H "B" plus "G". This is the total non-price points and price points earned.