

Application to Participate

NESCSO invites you to apply to participate in the *New England States MMIS Services and Module Demonstrations*. The purpose of this event is to provide State Government employees from Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, and Maine with the opportunity to learn about services and modules that support the modernization of their Medicaid Enterprise Systems.

The event will take place on: **April 22 -24, 2019**

It will be held at: **Hilton Back Bay 40 Dalton St, Boston, MA 02115**

We are seeking responses from firms that offer the following services and/or modules:

SERVICES
Systems Integration
Independent Verification and Validation
Project Management
User Acceptance Testing

MODULES
Claims and Encounter Data Processing
Financial Management
Care Management
Pharmacy Benefit Management
Prior Authorization/Utilization Review
Enterprise Data Storage Platform
Data Analytics
Provider Services and Management
Member Services and Management
Third Party Liability
Program Integrity/Fraud, Waste, and Abuse
Electronic Visit Verification

Responses are due by: **Friday, January 25, 2019 no later than 5:00 PM Eastern.**

All responses are to be sent via e-mail in Word and PDF form to:

David.Huffman@nescso.org and Elena.Nicolella@nescso.org

Selected firms will be notified via e-mail by **5:00 PM Eastern February 8, 2019.**

Please note there will be no fee charged to selected firms to participate in the Demonstrations.

If you have questions, please send them to David Huffman at David.Huffman@nescso.org

Answers to questions will be posted on www.nescso.org.

Application Instructions

The application has three sections:

1. Contact Information
2. Service Questions
3. Module Questions

Application Submission Page Limits:

Contact Information:		1 page
Per Service:	Response to Service Selection and 2.1:	1 page
	Response to 2.2 or 2.3:	1 page
	Response to 2.4:	1 page
Per Module:	Module Selection:	2 pages
	Responses to 3.1:	1 page
	Responses to 3.2 -3.14	3 pages

Section 1 Contact Information

Organization: _____

Contact _____

Name: _____

Title: _____

E-Mail Address: _____

Phone: _____

Please indicate if you will be submitting a response for Services, Modules, or Both

- Services
- Modules
- Both

Section 2 Services

We are interested in learning about the following services.
Please indicate which service(s) your firm offers and would like to present:
(More than one option may be selected.)

- Systems Integrator Services
- Independent Verification and Validation (IV&V)
- Project Management Services
- User Acceptance Testing

For each service selected above, please respond to the following questions:
(If more than one service has been selected, provide separate responses for each service.)

2.1 Please list no more than four (4) organizations (Federal, State, or local Government, private entities) for whom your firm has provided this service within the last three (3) years. Please include a contact name and e-mail.

Organization	Contact Name and E-mail	Contract Start Date

2.2 Please describe the top three risks or challenges you have found organizations face when pursuing a modular approach and maintaining legacy systems.

*(Firms providing User Acceptance Testing do not need to respond)
Limit response to 1 page; Font: Arial 12; Line Spacing: 1.5*

**2.3 For User Acceptance Testing Responders Only
Please describe your general approach to providing this service.**

Limit response to 1 page; Font: Arial 12; Line Spacing: 1.5

2.4 Please explain why your firm should be selected to present at the New England States MMIS Services and Module Demonstrations.

Limit response to 1 page; Font: Arial 12; Line Spacing: 1.5

Section 3 Modules

Please select the module or modules your firm offers and is interested in presenting. We have included brief descriptions of the functions the module might support. These descriptions are provided solely to give a general sense and should not be viewed as definitive. For example, if your firm has a module that provides a discrete function under Provider Management but not the full scope of Provider Management services, we would still be interested in hearing from you.

- Fee-for-Service Claims and MCO Encounter Data Processing**
This module supports the review and adjudication of claims paid directly to service providers (Fee-for-Service claims) as well as capitation payments to managed care organizations or accountable care organizations.
- Financial Management**
This module supports activities including management of Accounts Payable and Accounts Receivable, Financial Reporting, Budget, Projections and Rate Management.
- Care Management**
This module supports activities such as the assignment of case management providers to individuals or groups; the establishment of care management cases, enrollment, and all related tracking.
- Pharmacy Benefit Management**
This module supports the real-time processing of pharmacy claims, including drug-drug interaction review; retro drug utilization review; and pharmacy prior authorization.
- Prior Authorization/Utilization Review**
This module supports the processing of prior authorization requests and notification of status to providers.
- Enterprise Data Storage Platform**
This module is a data repository with an open data model to enable access from multiple programs.
- Data Analytics/Business Intelligence/ Decision Support**
This module enables the State to produce all Medicaid Administrative Reports; allow drill down capabilities for all data on all reports to the individual claim data for Surveillance and Utilization Review; and other financial reports. In addition, this module enables deeper data analysis and decision support.

Section 3 Modules (cont.)

Provider Management

This module supports the process for provider application and enrollment; allows for on-line entry of provider enrollment applications and supplemental documents; on-line verification of enrollment status; monitors license expiration, renewals, background checks, etc.

Member Service and Management

This module supports member services such as enrollment, member queries regarding services.

Third Party Liability

This module supports the identification of and recovery from third-party resources and estates.

Program Integrity/ Fraud Waste and Abuse

This module supports the investigation of complaints; pre-payment queries, Payment Error Rate Measurement activities and may also include Surveillance and Utilization Review functions.

Electronic Visit Verification

This module tracks the duration, location and services provided outside of a clinical setting. Data captured includes procedure codes, the ability to analyze services by beneficiary and by services provider, and supports prior authorization or interfaces with a prior authorization module.

Section 3 Modules (cont.)

The following questions will help us identify the modules about which we would like to learn more. All questions apply to each module you would like considered. If you are proposing three (3) modules, please submit three (3) sets of responses. The questions are based on the PSTG/HSITAG document, *Considerations for Achieving the Objectives of Modularity* (<https://www.pstq.org/resources>) Please use no more than one (1) page per module to respond to Question 3.1. Font: Arial 12; Line Spacing: 1.5. Please use no more than three (3) pages per module to respond to questions 3.2 –3.14.

3.1 At a high level, please identify and describe the functions that are included within this module. Limit response to this question to one (1) page; Font: Arial 12; Line Spacing: 1.5

The remaining questions (3.2 -3.14) should be answered in no more than three (3) pages. It is possible some questions will not be applicable; in those cases, please indicate N/A.

3.2 If this module has been implemented as part of a certified MMIS, list the State (s) and the year in which the MMIS was last certified.

3.3 Does this module support non-MMIS solutions, including other public programs or commercial solutions? If yes, please provide a brief description.

3.4 What deployment options do you offer for this module?

- Software as a Service (SaaS)
- On-Premise at the State
- Hosted at Company Data Center
- Hosted by Certified Third Party or a Cloud Provider
- Other - Please explain

3.5 What is the typical time-frame for implementation of this module?

- Less than 6 months
- 6-12 months
- 12-18 months
- Greater than 18 months

3.6 Does your company support the conversion of legacy data to a format that is compatible with this module? Please provide a brief explanation.

3.7 Does the module have a separate user management component or does it integrate with an identify management and a single sign-on solution?

Section 3 Modules (cont.)

- 3.8 Does this module use a rules engine? If yes, does the module require a specific rules engine?**
- 3.9 Does this module have on demand/ad hoc reporting capabilities? If yes, is the module capable of interfacing with an external reporting package or enterprise data warehouse? If No, please explain what reporting functionality is included.**
- 3.10 How often do you release updates/enhancements for this module, not including bug fixes or minor patches?**
- Monthly
 - Quarterly
 - Bi- annually
 - Annually
 - Other (please specify)
- 3.11 How does this module integrate with other modules?**
- Web services
 - Data files
 - APIs (please indicate the standard used)
 - Other (please describe)
- 3.12 What standards does your module use to publish interface definitions?**
- Supports standard interface definitions (e.g. FHIR, X12, HL7)
 - Uses proprietary (or customized) interface definitions
 - Through exposed web services
 - Other (please specify)
- 3.13 Please indicate any other systems with which this module is currently interfacing:**
- Health Insurance Exchange
 - Health Information Exchange
 - Public Health Agency
 - Human Service Agency
 - Community Organizations Providing Outreach, Care Coordination, Referral or Other Local Services
 - Electronic Health Records
 - Other - Please explain
- 3.14 Is this module conducive to being procured as a bundle with others? If yes, please explain.**