



**NOTICE OF COMPETITIVE SOLICITATION**

**HCA Solicitation #2022HCA36**

**SOLICITATION TITLE: Accountable Care Program**

**SOLICITATION POSTING DATE: 6/1/2023**

**RESPONSE DUE DATE: 8/28/2023**

Find the full solicitation on [Washington’s Electronic Business Solution \(WEBS\)](#). Vendors not registered in WEBS will not receive updates or amendments to the solicitation, which may put them at a disadvantage.

**Estimated Schedule of Procurement Activities**

Issue Request for Proposals	June 1, 2023
Pre-Proposal Conference	June 15, 2023
Letters of Intent to Bid Due to HCA	June 20, 2023
Bidders’ Round 1 Questions Due to HCA	June 29, 2023 – 2:00 pm PT
HCA Answers to Round 1 Questions Posted*	July 18, 2023
Bidders’ Round 2 Questions Due to HCA	July 27, 2023 – 2:00 pm PT
HCA Answers to Round 2 Questions Posted*	August 10, 2023
Interested Subcontractor Responses Due	August 14, 2023
Interested Subcontractor List Posted*	August 15, 2023
Complaints Due	August 21, 2023
Proposals Due	August 28, 2023 – 2:00 pm PT
Evaluate Proposals*	August 29 – December 7, 2023
Conduct Oral Interviews with Finalists	November 27 – December 6, 2023
Announce Apparent Successful Bidder (ASB) via WEBS*	January 4, 2024
Debrief Request Deadline ( <i>3 Business Days after the ASB announcement</i> )	January 9, 2024
Negotiate Contract	January – December, 2024

Begin Contract Work (Implementation)	October 2024
Open Enrollment for Plan Year 2026	November – December, 2025
Accountable Care Program Plan Option Benefits Start Date	January 1, 2026

## Purpose and Objectives

The Washington State Health Care Authority, hereafter called “HCA,” is initiating this Request for Proposals (RFP) to solicit Proposals for one or more clinically integrated health care organizations and/or accountable care organizations to provide an Accountable Care Program (ACP) Plan option for non-Medicare eligible Members, **effective January 1, 2026**. The ACP Plan option will be offered to non-Medicare Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) Program Subscribers and their dependents.

Successful Bidder(s) will provide an ACP Plan option with access to an adequate provider network in a minimum of two (2) counties in the state of Washington, with preference given to Proposals that cover higher numbers of Washington counties served, provide continuity by covering counties that currently serve UMP Plus Members, and increase access by covering counties that are not covered by other Bidder(s). During the contract period, by mutual contract amendment, Accountable Care Networks (ACNs) are encouraged to grow provider networks in additional counties on an annual basis, thereby expanding the possible population of PEBB and SEBB Members able to enroll in the ACP.

Successful Bidder(s) will have demonstrated the ability and capacity to meet HCA’s requirements for the ACP Plan option, including entering into a binding agreement built on financial and quality performance incentives and disincentives, implementing effective care delivery models, providing coordinated high-quality care, and aligning health system reimbursement and financial incentives. In addition, successful Bidder(s) will have demonstrated strong IT infrastructure and interoperability to support the secure, organized exchange of patient data among participating providers.

It is possible that during the term of any Contract resulting from this RFP that HCA may be required by law or provided the opportunity to manage, operate, or administer other programs, or that the current PEBB and SEBB Programs may merge together or be split into additional groups (Future Programs). It is possible that (i) one (1) or more of the existing programs will be replaced with a Future Program, and/or (ii) that some Members are required to transition from an existing program to a Future Program, or (iii) that persons or populations who are not currently Members will become eligible for coverage from a program managed, operated, or administered by HCA. All potential bidders are on notice that the scope of this RFP covers not only an ACP Plan option in the SEBB and PEBB Programs, but also covers any Future Programs that may be created and added. It is the intent of HCA that the ACP Plans described in this RFP and in any resulting Contract may be made available to any eligible Member of any Future Program without performing an additional procurement. Therefore, all references to PEBB or SEBB include any Future Program that includes other Washington State Members.

HCA intends to award one or more Contract(s) to provide the services described in this RFP.

## Minimum Qualifications

The following are the minimum qualifications for Bidders:

- A. Licensed to do business in the state of Washington or provide a commitment that it will become licensed in Washington within 30 calendar days of being selected as an ASB.
- B. Must comply with all state and federal laws, statutes, and regulations including HIPAA, HITECH and OCIO Security Standard 141.10. (See Attachment 2, OCIO Data Security Standard 141.10.)
- C. Must be able to pass a Security Design Review prior to May 1, 2025. An example checklist is provided in Attachment 3, Office of Cyber Security (OCS) Security Design Review.

- D. Must (alone or with partners) have an established, comprehensive, clinically integrated health care network and/or accountable care organization:
  - i) Offering a broad spectrum of primary, specialty, and hospital care assuring high-quality delivery of all HCA's covered physical and behavioral health services;
  - ii) In a minimum of two (2) Washington State counties;
  - iii) With Network Adequacy, including the capacity to serve at least 40,000 overall Public Employee Benefit Board (PEBB) and School Employee Benefit Board (SEBB) Program Members; and
  - iv) With a single, unified vision and leadership structure, with commitment of senior leaders, and backed by the needed resources to implement the vision.
- E. Must perform all services within the United States, including but not limited to data storage, customer service, and claims adjudication.
- F. Must currently provide clinical management services, including utilization management, complex case management, chronic condition management, and consumer support services.
- G. Must agree to enter into a binding agreement to initiate and execute Care Transformation requirements as described in the Scope of Work section entitled Care Transformation Projects, Including the Bree Collaborative Implementation Projects.
- H. Must agree to enter into a binding agreement with HCA for both the PEBB and SEBB defined populations that uses a patient classification methodology to organize the population of UMP Plus Members into categories using the 3M CRGs (as described in Exhibit F-1, ACP Financial Model), and calculates any applicable deficits or savings based on these classifications, for only Subgroups Two and Three, annually during Financial Reconciliation.
- I. Must have or agree to obtain contractual agreements and Data Sharing Agreements to work with HCA's current UMP TPA (Regence BlueShield) and UMP pharmacy benefit Plan Supplier (Moda Health). **Note:** Regence BlueShield and Moda Health will continue to perform all present administrative services (e.g., managing provider network, administration of claims, data reporting, etc.).

**Solicitation Coordinator**

Name	<b>Sean Gregory</b>
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**WEBS Commodity Codes:**

- 953-52 Insurance & Insurance Services (not otherwise classified)
- 918-78 Medical Consulting
- 958-56 Health Care Management Services (including managed care services)
- 918-69 Insurance Consulting
- 958-61 Insurance and Risk management services
- 948-74 Professional Medical Services
- 953-48 Health/Hospitalization
- 948-07 Administration Services, Health
- 948-47 Health Care Center Services
- 948-48 Health Care Services (not otherwise classified)

Submit any questions or concerns regarding this solicitation to the Solicitation Coordinator shown above.