



# Gold Coast Health Plan<sup>SM</sup>

A Public Entity

RE: Request for Proposal Number GCHP09192022

Gold Coast Health Plan ("GCHP") is interested in establishing an agreement with a contractor for Provider and Member Portal Software ("Software"), and is inviting qualified corporations, partnerships, companies, and other Firms (individually, a "Proposer", and collectively, the "Proposers") to submit proposals responsive to this Request for Proposal ("RFP"). This RFP establishes the project background, business requirements and expectations required for Proposers to submit a proposal (individually, a "Proposal", and collectively, the "Proposals").

A Proposal must be in accordance with the following:

## **1. INSTRUCTIONS:**

- 1.1.** This RFP is not an offer to contract but rather an attempt to establish a common framework within which an agreement may be reached. Each Proposal submitted by a Proposer to this RFP represents a firm offer to contract on the terms and conditions described in this RFP and Proposer's response. This RFP is for special services and advice as set forth in section 53060 of the Government Code, and GCHP reserves the right to award the contract described in this RFP in any manner authorized by section 53060 of the Government Code.
- 1.2.** This solicitation shall not be construed as a requirements or supply contract. GCHP shall not have any obligation hereunder to purchase any products or services from the selected Proposer.
- 1.3.** All Proposals become the property of the GCHP and will not be returned to the responding Proposer unless otherwise determined by GCHP in its sole discretion.

1.4. Any costs incurred by the responding Proposer for developing a proposal are the sole responsibility of the responding Proposer and GCHP shall have no obligation to compensate any responding Proposer for any costs incurred in responding to this RFP. If GCHP should determine that in-person interviews are necessary, interviews will be held at the GCHP’s offices and any costs associated with such interviews will be the responsibility of the responding Proposer.

**1.5. Time Schedule**

Below is the tentative time schedule for this RFP.

Event	Date	Time (If applicable)
RFP Released	9/19/2022	
Questions Due	9/26/2022	5:00pm. PT
Questions Answered via Bidders Conference	10/5/2022	TBD
Intent to Propose Notification Due By	10/7/2022	5:00pm. PT
Proposal Due Date	<b>10/17/2022*</b>	<b>5:00pm. PT</b>
Short List Established and Contractual Discussions Begin	11/7/2022	
Short List – Product Demo	11/18/2022	Scheduled for the week of the 11/14

\* Note: GCHP may issue you a full Security Risk Assessment.

All questions must be submitted in writing. Submit your questions to the procurement contact listed below, (Section 1.7) via email. Copies of all questions will be distributed to all persons who have submitted Intent to Propose as set forth below (“Prospective Proposers”), without any identification of the inquiring person. GCHP will answer each question at the scheduled Bidders Conference. Questions received after Question Due Date will not be answered.

**1.6. Intent to Propose**

Prospective Proposers are asked to notify the procurement contact of this RFP of their intention to submit a Proposal (“Intent to Propose”). Failure to notify GCHP of your Intent to Propose will not affect the acceptance of any Proposal.

Complete the form provided, **Attachment 6**, the Letter of Intent to Propose, by the date listed in section 1.5 “Time schedule” by e-mailing it to: [bbushey@goldchp.org](mailto:bbushey@goldchp.org).

**1.7. Procurement Contract**

The procurement contact is below. All communications and Proposals must be submitted to the procurement contact. Proposals and questions should be submitted via email to:

Bob Bushey  
Procurement Officer  
bbushey@goldchp.org  
805-437-5717

### **1.8. Length of Proposal**

Due to the length of the evaluation, approval, and procurement process at GCHP, Proposals are required to be valid for a minimum of 120 days. A proposal may not be modified, withdrawn or canceled by the Proposer for a one hundred twenty (120) day period following the deadline for the submission of the proposal. The Proposer agrees to this condition by submission of the Proposal.

### **1.9. Letter of Transmittal**

Proposers shall include a letter of transmittal that bears the signature of an authorized representative of the Proposer's company. The letter of transmittal will also include the name(s) of the individual(s) authorized to negotiate with GCHP as well as the names of sales representatives appointed by the Proposer, and the name of the Proposer's Project Manager.

### **1.10. Conflict Of Interest**

1.10.1. The successful Proposer will be required to certify, to the best of its knowledge, that its Proposal and any awarded contract is not in violation of any provisions of applicable laws related to conflicts of interest, and that it is familiar with such laws, including by way of illustration and not by limitation, Section 87100 et seq. and Section 1090 et seq. of the Government Code of the State of California. A conflict-of-interest certification is attached as **Attachment 3** and shall be submitted with the Proposal.

1.10.2. Individuals who will perform work for GCHP on behalf of the successful Proposer might be deemed public officials under state conflict of interest laws. If so, such individuals will be required to submit a Statement of Economic Interests, California Fair Political Practices Commission Form 700, in accordance with the law and GCHP's Conflict of Interest Code.

### **1.11. Experience/References**

Each Proposer must provide the names of at least three (3) references that have recently contracted it for similar services to be performed pursuant to this RFP. GCHP may contact the identified references and evaluate the Proposer's demonstrated successful implementation of negotiated scope, solution requirements, pricing approach, service delivery approach and results, transition approach and results, staffing, flexibility, agility, innovation/continuous improvement, governance, cultural fit, and ongoing relationship requirements. For each reference listed, provide the following. Use **Attachment 4** with your response.

Company name

Company address

Person to contact

Telephone number of contact

### **1.12. Proposal is a Public Record**

All information submitted by a responding Proposer to GCHP is governed by the California Public Records Act (“CPRA”). Proposals will remain confidential during the procurement process to the furthest extent permitted by law, but only until such time as determined by GCHP in its sole discretion. If Proposer views certain information in its Proposal as confidential information that is proprietary or “trade secret” or otherwise exempt from disclosure under the CPRA, it shall provide GCHP with both a redacted and unredacted version of its Proposal with the rationale for the redactions. GCHP makes no guarantee that any or all of a Proposal will be kept confidential, even if the Proposal is marked “confidential,” “proprietary,” etc.

By submitting a redacted Proposal, the Proposer agrees that if in response to a CPRA request, GCHP reviews the proposed redactions and does not agree that the redacted information falls within any CPRA exemptions, then Proposer will indemnify, defend and hold GCHP harmless in any CPRA action, lawsuit or administrative proceeding seeking to force GCHP to disclose such purported confidential information identified by Proposer. If Proposer objects to this indemnification, then GCHP will disclose information under the CPRA in accordance with the legal requirements of the CPRA and GCHP’s interpretations thereof.

### **1.13. Reservation of Rights**

GCHP reserves the right to do the following at any time, at GCHP’s sole discretion:

- 1.13.1. Reject any and all proposals or cancel this RFP.
- 1.13.2. Waive or correct any or inadvertent defect, irregularity, informality or technical error in any proposal or the RFP procedure.
- 1.13.3. Request that certain or all Proposers supplement or modify all or certain aspects of their respective Proposals or other materials submitted and/or provide additional information
- 1.13.4. Procure any services specified in this RFP by other means.
- 1.13.5. Modify the specifications or requirements for services in this RFP, or the required contents or format of the proposals prior to the due date.
- 1.13.6. Extend the deadlines specified in this RFP, including the deadline for accepting Proposals.
- 1.13.7. Negotiate with any, all, or none of the Proposers.

- 1.13.8. Terminate negotiations with a Proposer without liability and negotiate with other Proposers.
- 1.13.9. Award a Contract to any Proposer, including a Proposer other than the Proposer offering the lowest price.
- 1.13.10. GCHP reserves the right to eliminate a proposal from consideration if the Proposer's Security Risk Assessment reveals an unacceptable level risk for the proposed contract. An unacceptable level of risk shall be in the sole discretion of GCHP and may be based on a single risk factor or the cumulative effect of multiple risk factors. In such case, GCHP will notify the Proposer of the specific risk factor(s) resulting in the elimination. The Proposer will have three business days from GCHP's notice of elimination to submit a protest. The protest shall contain all relevant evidence that Proposer intends to present to prove that GCHP's assessment of the risk is in error. GCHP's determination of the protest shall be final. Nothing herein prevents GCHP from considering any particular Proposal or weighting the risk factors as part of the qualitative analysis, regardless of risk level.

#### **1.14. Supplier Diversity**

Supplier diversity is a high priority at GCHP. It is our business practice to create and maintain an environment in which traditionally underrepresented, minority- and women-owned businesses have an equal opportunity for building and maintaining a relationship with GCHP. In considering the Proposals, GCHP will not discriminate against, or grant preferential treatment to, any individual or group on the basis of age, sex, sexual identity or preference, race, color, ancestry, national origin, religious creed, physical or mental disability, medical condition, marital status, ethnicity, protected by applicable law.

Each Proposer shall certify in its Proposal that in performing work or providing services, it will not discriminate in its contracting, hiring or employment practices because of age, sex, sexual identity or preference, race, color, ancestry, national origin, religious creed, physical or mental disability, medical condition, marital status, ethnicity, or any other characteristic protected by applicable law. Proposer shall also certify in its proposal that it will comply with applicable federal and California anti-discrimination laws, including but not limited to the California Fair Employment and Housing Act, beginning with Section 12900 of the California Government Code.

## **2. OVERVIEW**

### **2.1. Gold Coast Health Plan**

Gold Coast Health Plan is an independent public entity created by Ventura County Ordinance and authorized through Federal Legislation; however, Gold Coast Health Plan is not a county agency. The Ventura County Board of Supervisors approved implementation of a County Organized Health System (COHS) model, transitioning from fee-for-service Medi-Cal to managed care, on June 2, 2009. The purpose of Gold Coast Health Plan is to serve Medi-Cal beneficiaries, enhance the quality of healthcare, provide greater access, improve service and provide choice.

Gold Coast Health Plan proudly serves more than 220,000 Medi-Cal beneficiaries living in Ventura County, Calif. We are an independent public entity governed by the Ventura County Medi-Cal Managed Care Commission and are dedicated to serving our members. The commission is comprised of locally elected officials, Providers, hospitals, clinics, the county healthcare

agency and a consumer advocate. Our *Member-first focus* centers on the delivery of exceptional service to our beneficiaries by enhancing the quality of healthcare, providing greater access and improving member choice.

From its inception, Medi-Cal has experienced increasing program costs, primarily as a result of spiraling growth in the caseload, utilization of service, and hospital costs. A Medi-Cal Reform Plan was enacted by statute in October 1971 (Chapter 577, Statutes of 1971) with the objective of developing an equitable statewide eligibility system, a uniform schedule of benefits for those eligible within a strong system of utilization and quality controls, and an improved system of health care delivery and health care financing for the program.

Modifications to the program are continually occurring because of federal and State legislation, departmental regulations, and other efforts to improve the program. Proposer should be aware that Proposer’s responsibility will include the planned and orderly implementation of the applicable provisions of all state and federal legislation and regulations whenever they may occur within the life of the contract.

## 2.2. Project Background

2.2.1. This RFP is for work and services that are one portion of the Enterprise Transformation Project. This RFP being issued is to source the marketplace for new modernized Provider, Member and Broker Portals. This presentation layer will be expected to interface with all the different GCHP designated system to support visibility of information as well as provide the user with self-service options (Provider = check claim status, Member = See my benefits, Broker = Group administration and Commissions).

2.2.2. Following the health plan industry’s standard practice of regularly evaluating capabilities and performance against the nationwide market of system and service providers, GCHP will be activating a comprehensive procurement of technologies and services. GCHP intends to implement these solutions by July 1, 2024. This RFP being issued is to source the marketplace for the purchase and implementation of a Core Claims Processing Software. The Software will be expected to facilitate the full processing life cycle for Benefits, Member, Claims, Encounters, Claims Payments, Capitulations and Provider. Reference **Attachment 8**, System and Support Model, for further supporting overview of the future state, **Attachment 9**, Application Architecture, and **Attachment 10**, GCHP’s organizational structure for further supporting documentation.

GCHP currently has a contract for services with a single service provider that covers all core technology as well as Business Processing Outsourcing (“BPO”) services that is set to expire at the end of June 2024. GCHP is embarking on a comprehensive Enterprise Transformation project and is set to issue a series of RFPs to evaluate and select the most qualified service provider for each of the following areas:

<b>RFP 1</b>	EDI services
<b>RFP 2</b>	Core Claims Processing Software
<b>RFP 3</b>	Medical Management software
<b>RFP 4</b>	Provider and Member Portal software

<b>RFP 5</b>	BPO (Claims processing services)
<b>RFP 6</b>	Mailroom and Claims Editing services
<b>RFP 7</b>	Print and Fulfillment services
<b>RFP 8</b>	Call Center Software/Technology

The approximate timeline for these RFPs is as shown below:

- RFP's 2,3 and 4. RFP issue date early to mid-September. Commission approval, December 2022
- RFP's 1. RFP issue date of mid-September, Commission approval, January 2023
- RFP's 5, 6, 7 & 8. RFP issue date of mid-January 2023, Commission approval, April 2023

### **3. QUALITATIVE REQUIREMENTS**

Section 3 of this RFP contains all of the Software requirements. These requirements have been categorized as “Mandatory”, and “Preferred”.

“Mandatory” requirements shall be considered as “absolute” and should be met in full. Proposals will not be considered for further evaluation unless every mandatory requirement is met in full, the failure to satisfy all mandatory requirements will render the Proposal non-responsive and non-responsible. For each paragraph number listed in this section, Proposers must confirm their ability to meet the requirement by indicating they can “comply” or “not comply”. Proposers must also indicate if the requirement will be met using the following abbreviations’= **S**=Standard, and **C**= Available with Customization and then provide a detailed response describing “how” they meet the requirement.

“Preferred” requirements are to be considered as “highly desirable”, but do not have to be met in full. GCHP will evaluate a Proposer’s responses to these requirements in relation to those of all other Proposers. For each paragraph number listed in this section, Proposer’s must indicate if the requirement will be met using the following abbreviations’ **S**= Standard and **C**= Available with Customization and then provide a detailed response describing “how” they meet the requirement

GCHP intends to evaluate Proposals by ranking the Proposals in order of being most advantageous to the GCHP at GCHP’s sole discretion with price and other factors considered, including but not limited to, the Proposers’ qualifications, experience, capabilities, record of performance, references, proposed staffing, availability of key personnel, location and ability to provide services in Ventura and/or California, responsiveness and diversity outreach and efforts. GCHP intends to evaluate Proposals in a holistic manner, giving weight to price and other factors to the extent that they reflect upon GCHP’s assessment of the reasonable likelihood that a Proposer would be able to successfully render the services in a reliable manner satisfactory to GCHP. GCHP may require Proposers to demonstrate that their product(s) functions as is represented in proposals and is usable and suitable for the purposes described in this RFP, and GCHP may evaluate and consider factors such as ease of use, functionality, ability to integrate with

GCHP's technology eco-system and capabilities, and others as evidenced in the demonstration. GCHP reserves the right to evaluate the Proposals in any manner permitted by law.

**NOTE:** For ease of response, please use **Attachment 12** for your response to Section 3:

### **3.1. Mandatory Requirements**

#### **3.1.1. Member Portal**

##### **3.1.1.1. Registration**

- 3.1.1.1.1. The Software must have the ability to ensure connectivity and any interaction by members & providers is done securely.
- 3.1.1.1.2. The Software must be able to register (Self Service /Admin).
- 3.1.1.1.3. The Software must be able to Update login credential.
- 3.1.1.1.4. The Software must be able to support login help - Forgot Username + Password (24/7/365).
- 3.1.1.1.5. The Software must be able to support registration adds or updates and submit confirmation notifications.
- 3.1.1.1.6. The Software must allow configuration of role-based permissions.
- 3.1.1.1.7. The Software must automatically log a user out of the portal based on decided/configurable time.
- 3.1.1.1.8. The Software must be able to capture consent & communication preferences.

##### **3.1.1.2. Home**

- 3.1.1.2.1. The Software must be able to display member information.
- 3.1.1.2.2. The Software must display enrollment plan name with hyperlink to detailed plan benefits with tier information.
- 3.1.1.2.3. The Software must be able to capture, record, update, save & allow a user to print information as designated GCHP's process.
- 3.1.1.2.4. The Software's permissions settings must allow a user to configure which designees have display or edit functionality.
- 3.1.1.2.5. The Software must display GCHP member collateral and allow the member to save, download and print the materials.
- 3.1.1.2.6. The Software must have the ability to customize presentation of the information on the screens.
- 3.1.1.2.7. The Software must support Enterprise Application Integration through such technologies as: TIBCO, MuleSoft, Kafka, etc. that allow integration with external and internal capabilities such as: Portals, Call Center, etc.).



### **3.1.1.3. EOP/EOB**

3.1.1.3.1. The Software must be able to display Eligibility & Benefits information (like EOB, SOC etc.) with hyperlink to detailed plan benefits with Tier information.

3.1.1.3.2. The Software must allow the user to save, download print EOP and EOB's.

### **3.1.1.4. COB**

3.1.1.4.1. The Software must be able to display COB details with hyperlink to detailed OHI benefits.

3.1.1.4.2. The Software must allow a user to save, download & print COB information.

### **3.1.1.5. Provider**

3.1.1.5.1. The Software must be able to display primary care physician information.

3.1.1.5.2. The Software must allow users to search for providers on GCHPs Online Provider directory

3.1.1.5.3. The Software must allow a member to change their primary care physician.

3.1.1.5.4. The Software must have the ability to assign primary care physicians and clinic level.

3.1.1.5.5. The Software must have ability to configure member level restriction/security permissions based on GCHP's rules.

3.1.1.5.6. The Software must be able to perform any provider inquiry. (In-Network or Out of Network Providers Available).

3.1.1.5.7. The Software must be able to display provider information change history.

3.1.1.5.8. The Software must be allow a user to download and print the Provider historical information.

### **3.1.1.6. Authorization & Referrals**

3.1.1.6.1. The Software must be able to support any inquiry functionality.

3.1.1.6.2. The Software must allow a user to upload/download supportive documents for authorizations and referrals.

3.1.1.6.3. The Software must allow a user to check status on authorizations and referrals.

3.1.1.6.4. The Software must allow a user to view, save, download & print authorizations and referrals.

3.1.1.6.5. The Software must be able to support self-referrals.

3.1.1.6.6. The Software must be able to track the history of authorizations and referrals.

### **3.1.1.7. Claims**

3.1.1.7.1. The Software must be able to provide/support claim(s) functionality.

3.1.1.7.2. The Software must be able to view recent claims sorted by newest first.

3.1.1.7.3. The Software must be able to easily display claim details including individual services along with billed, allowed, member responsibility, not covered, and paid amounts etc.

3.1.1.7.4. The Software must be able to display and view claims history..

### **3.1.1.8. Attachments**

3.1.1.8.1. The Software must be able to upload/download document(s).

3.1.1.8.2. The Software must be able to track history of attachments.

### **3.1.1.9. Material Request**

3.1.1.9.1. The Software must be able to support material request functionality i.e., ID cards, welcome letters, supportive documents etc.

3.1.1.9.2. The Software must be able to support the real time submission of a material request to a designated GCHP vendor to satisfy fulfillment.

- 3.1.1.9.3. The Software must be able to support links to outside websites.
- 3.1.1.9.4. The Software must allow a user to view, download & print any requested materials.
- 3.1.1.9.5. The software must have the ability to email documents.
- 3.1.1.9.6. The Software must be able to track material request audit history.
- 3.1.1.10. Grievance & Appeal**
  - 3.1.1.10.1. The Software must be able to support capturing and recording issues and or discrepancies for Grievance and Appeals.
  - 3.1.1.10.2. The Software must be able to capture member grievance and appeals information via a web form and send to systems designated by GCHP.
  - 3.1.1.10.3. The Software must be able to notify GCHP on submission of grievance(s) & appeal(s).
  - 3.1.1.10.4. The Software must allow a user to check the status of a grievance or appeal.
  - 3.1.1.10.5. The Software must allow a user to view, save & print grievance & appeals.
  - 3.1.1.10.6. The Software must be able to track grievance & appeal history.
- 3.1.1.11. Messaging Center**
  - 3.1.1.11.1. The Software must be able to support messaging Center functionality.
  - 3.1.1.11.2. The Software must be able to support notification functionality i.e., payment due, provider's response, medical records available etc.
  - 3.1.1.11.3. The Software must be able to support announcement functionality.
  - 3.1.1.11.4. The Software must be able to support live communication functionality between a Member and GCHP's Agent(s).
  - 3.1.1.11.5. The Software must be able to support & track messaging history functionality (i.e., view, save & print as designated by GCHP process).
- 3.1.1.12. Alert**
  - 3.1.1.12.1. The Software must be able to support member alerts.
  - 3.1.1.12.2. The Software must be able to easily display the details of an Alert
- 3.1.1.13. Audit**
  - 3.1.1.13.1. The Software must be able to support/provide audit functionality.
  - 3.1.1.13.2. The Software must be able to track user date & timestamp for view, adds, changes, updates, upload/download, cancels & deletions an any transaction.
- 3.1.1.14. Language**
  - 3.1.1.14.1. The Software must be able to support multiple languages.
  - 3.1.1.14.2. The Software must be able to support format changing functionality i.e., changing font size.
- 3.1.1.15. Administration**
  - 3.1.1.15.1. The Software must be able to capture member level information.
  - 3.1.1.15.2. The Software must have the ability to generate usability statistics to monitor adoption and traffic.
- 3.1.1.16. Medical Management System**
  - 3.1.1.16.1. The Software must have the ability to interface with the Medical Management system to display Member 360 information.

**3.1.1.17. Interoperability.**

3.1.1.17.1. The Software must have the ability to support interoperability requirements.

**3.1.1.18. Service Engagement Automation**

3.1.1.18.1. The Software must offer service engagement automation for Live Chat and Mobile Apps.

**3.1.2. Provider Portal**

**3.1.2.1. Registration**

3.1.2.1.1. The Software access and connectivity and any interaction by providers must be done securely.

3.1.2.1.2. The Software must have self-service functionality to register users and make any updates.

3.1.2.1.3. The Software must have the ability to send alerts if the provider submits any updates, in order to approve and progress the change.

3.1.2.1.4. The Software must be able to support/provide login recovery options.

3.1.2.1.5. The user must be able to access any joint-venture health plans/programs within Medi-Cal or other line of business based on the GCHP configured role-based permissions.

3.1.2.1.6. The Software must be able to configure parent/child security hierarchy.

3.1.2.1.7. The Software must be able to integrate or interface with GCHP & any GCHP defined external system.

3.1.2.1.8. The Software must have the ability to interface with CRM (Customer Management Software)

3.1.2.1.9. The Software must automatically log a user out of the portal based on configurable time threshold as defined by GCHP.

**3.1.2.2. Home**

3.1.2.2.1. The Software must have the ability to customize the presentation of the information on the screens.

3.1.2.2.2. The Software must have the ability to allow users to view, save, download and print any alerts or announcements from GCHP.

3.1.2.2.3. The Software must provide visibility to real time status dashboards.

3.1.2.2.4. The Software must support Enterprise Application Integration through such technologies as: TIBCO, MuleSoft, Kafka, etc. that allow integration with external and internal capabilities such as: Portals, Call Center, Medical Management, Claims, etc.).

**3.1.2.3. Authorization & Referrals**

3.1.2.3.1. The Software must be able to support/provide authorization & referrals.

3.1.2.3.2. The Software must be able to interface with an external system for the Auth/Referrals lifecycle.

3.1.2.3.3. The Software must have the ability to submit a request (pass) a date range of services and frequency when submitting an authorization.

3.1.2.3.4. The Software must have data validation rules to prevent invalid codes from being entered.

3.1.2.3.5. The Software must have the ability to display a member's PCP when submitting an authorization/referral.

3.1.2.3.6. The Software must allow the user to view, request, create, search, copy, save and track authorizations & referrals.

3.1.2.3.7. The Software must be able to display & manage prior authorizations and referrals.

3.1.2.3.8. The Software must allow the user to upload/download support documentation, & check status to support/provide authorization/referral functionality.

- 3.1.2.3.9. The Software must allow a user to look up access for any members in the plan to submit an auth/referrals.
- 3.1.2.3.10. The Software must allow the user to look up access for any providers in the plan to submit an authorizations/referral.
- 3.1.2.3.11. The Software must be able to print authorization and NOA [notice of action letters (Approval and Denial letters)] letters.
- 3.1.2.3.12. The Software must be able to notify GCHP on submission of authorizations/referrals.

#### **3.1.2.4. Member's Eligibility & Benefits**

- 3.1.2.4.1. The Software must allow the user to validate/verify member's eligibility & benefits information (apply to all members).
- 3.1.2.4.2. The Software must allow the user to view and report a provider's patient panel (assigned member rosters for site).
- 3.1.2.4.3. The Software must allow the user to view the provider's patient panel status (acceptance status).
- 3.1.2.4.4. The Software must have the ability to capture and display when a provider/provider site is not accepting new patients.

#### **3.1.2.5. Claims**

- 3.1.2.5.1. The Software must allow the user to view remittances & EOB/EOPs.
- 3.1.2.5.2. The Software must be able to display payments information.
- 3.1.2.5.3. The Software must provide the ability to display claims status tracking.
- 3.1.2.5.4. The Software must provide ability to view the claims reconciliation details.
- 3.1.2.5.5. The Software must provide ability to view overpayment.
- 3.1.2.5.6. The Software must be able to display member specific information (ex. COB, OHI, SOC etc.)
- 3.1.2.5.7. The Software must have the ability to capture claim transactions and submit the claims through the portal to the core system.
- 3.1.2.5.8. The Software must be able to easily display claim details including individual services along with billed, allowed, member responsibility, not covered, and paid amounts etc.
- 3.1.2.5.9. The Software must have data validation rules to prevent invalid codes from being entered.
- 3.1.2.5.10. The Software must have the ability to upload and download attachments to support/provide Claims Review/Adjustment functionality.
- 3.1.2.5.11. The Software must allow user to be able to update claims, send/attached supportive documentation, & check status to support/provide Claims Review/Adjustment functionality.
- 3.1.2.5.12. The Software must be able to display Accumulators.

#### **3.1.2.6. Administration**

- 3.1.2.6.1. The Software must allow administrators to set view and edit permissions for their site.

#### **3.1.2.7. Reports**

- 3.1.2.7.1. The Software must have reporting functionality and the ability to integrate with other external systems in order to produce reports viewable online.
- 3.1.2.7.2. The Software must allow the user to print, save & schedule the reports.

#### **3.1.2.8. Alerts**

- 3.1.2.8.1. The Software must be able to support/provide the alert functionality.

3.1.2.8.2. The Software must be able to support/provide communications functionality from the provider to the member(s).

**3.1.2.9. Provider Dispute Resolution (PDR), Provider Grievance Resolution (PGR) & Appeals**

3.1.2.9.1. The Software must be able to support providers dispute, grievance & appeals functionality.

3.1.2.9.2. The Software must be able to notify GCHP on submission of providers dispute, grievance & appeals.

3.1.2.9.3. The Software must have the ability to capture provider dispute, grievance and medical appeals information and pass to external systems via a web form.

3.1.2.9.4. The Software must be able to upload/download supportive documentation to the dispute/grievance/appeals request.

3.1.2.9.5. The Software must capture the date time stamp of any disputes, grievance & appeals received/send.

3.1.2.9.6. The Software must have the ability to submit, process and store/save.

**3.1.2.10. Audit**

3.1.2.10.1. The Software must have the ability to track and display any changes including submissions made.

3.1.2.10.2. The Software must have the ability to log all user activity in the audit log including date/time stamp, data elements changed/viewed, and updates made.

**3.1.2.11. Data**

3.1.2.11.1. The Software must have the ability to allow providers to view their own provider data.

3.1.2.11.2. The Software must have the ability for a provider to attest to the accuracy of their data.

3.1.2.11.3. The Software must be able to notify GCHP on submission of attestation.

3.1.2.11.4. The Software must be able to view Provider Network details through Provider Portal.

3.1.2.11.5. The Software must be able to view member's Medical records (role & permission based).

3.1.2.11.6. The Software must have the ability to interface with the network provider system.

**3.1.2.12. Service Engagement Automation**

3.1.2.12.1. The Software must offer service engagement automation for Live Chat and Mobile Apps.

**3.2. Preferred Requirements**

**3.2.1. Proposer Overview**

3.2.1.1. **Business Type Description** - List all that apply that describe your business.

- Corporation
- Partnership
- Joint Venture
- Publicly Held
- Limited Liability Corporation (LLC)
- Non-Profit
- Other, please specify

**3.2.1.2. Proposer Stability**

3.2.1.2.1. List any recent events which may reasonably have a material impact on Proposer's stability, ongoing operational status, or organizational structure.

- 3.2.1.2.2. Indicate the length of time that Proposer has been providing claims processing technology for health plans.
- 3.2.1.2.3. Provide details of your product investments, roadmap and release schedule. How are client requirements incorporated into these roadmaps.
- 3.2.1.2.4. Describe how your Software solution and product roadmap incorporates new and emerging technologies.

### **3.2.1.3. Experience/References**

- 3.2.1.3.1. Describe your knowledge and capabilities regarding the California Department of Health Care Services (“DHCS”) regulatory environment, including specific examples of working within the parameters of DHCS regulations, where applicable.
- 3.2.1.3.2. Describe your experience with the Medicaid/Medi-Cal product line.
- 3.2.1.3.3. Describe your knowledge and capabilities regarding the Centers for Medicare and Medicaid Services (“CMS”) regulatory environment, including specific examples of working within the parameters of CMS regulations, where applicable.
- 3.2.1.3.4. Describe your experience with the Medicare/D-SNP product line.
- 3.2.1.3.5. Describe your experience with working with smaller health plans with membership under five-hundred thousand (500,000) members.
- 3.2.1.3.6. Provide the approximate total number of employees.
- 3.2.1.3.7. Provide employee turnover rate by month for previous 12 months.
- 3.2.1.3.8. Provide an overview of how you support customers in Southern CA, including but not limited to the number of offices, number of employees, etc.
- 3.2.1.3.9. Provide your strategic plan to staff up for the volume increase under this contract.
- 3.2.1.3.10. Provide information on the offices that would be dedicated/assigned to GCHP for operational and customer support.
- 3.2.1.3.11. Attach resumes and other supporting details regarding the account management team projected to be assigned to GCHP. Provide the organizational chart with relevant job titles, contact numbers and email addresses.

### **3.2.2. Technical Requirements**

- 3.2.2.1. Describe which secure cryptography protocol is offered.
- 3.2.2.2. Describe the balance and controls processes used to monitor the flow of data in and out of the platform.
- 3.2.2.3. Does your Software have messaging alert capability?
- 3.2.2.4. Does the platform support role-based permissions and access at the individual field level, screen level and function level?
- 3.2.2.5. Which workflow technology is used by the platform?
- 3.2.2.6. Which Rules engine is used (proprietary or third-party product)?
- 3.2.2.7. Which Event Management capabilities are offered?
- 3.2.2.8. Which Enterprise Application Integration (EAI) technologies are supported by the platform. (TIBCO, MuleSoft, Kafka, etc.)?

- 3.2.2.9. Does your Software support real-time data stream from portal systems/databases to an external data warehouse vs. batch file processing?
- 3.2.2.10. Does your Software have the ability to schedule and generate customized reporting?
- 3.2.2.11. Does your Software have the ability to produce dashboard views? Are they customizable?
- 3.2.2.12. What is your product release schedule?
- 3.2.2.13. Which technology is used for your User Interface HTML, etc.
- 3.2.2.14. Do you have the ability to provide and support multiple environments?
- 3.2.2.15. Does your platform support the following lines of business? MediCal, Medicare, D-SNP.
- 3.2.2.16. Does your platform support Value Based Payments?
- 3.2.2.17. Does your platform support Prop. 56 payments?
- 3.2.2.18. Does your platform support an encapsulated rules engine that can be utilized by other external Software? (i.e., claims business rules exposed to portal, etc.)?
- 3.2.2.19. Does your Software have audit tracking capabilities? If yes, please explain what information is stored and for what conditions the information is logged. Please also explain how long the information is retained.
- 3.2.2.20. Describe how your Software receives, stores and displays attachment information? Is the user able to download and print the information? (Claims attachments associated to an 837, etc.)
- 3.2.2.21. Does your Software support the ability to store note types, customize sorting, filtering and searchability on notes?
- 3.2.2.22. Does your Software use any 3rd party products for transactional processing? If so, please identify any 3rd party products used by the platform (i.e., Claims Pricing, Address Standardization, Medical Edits, Claims Grouping, etc.)?
- 3.2.2.23. Does the platform support FHIR standards?
- 3.2.2.24. Describe any limitations that will prevent GCHP from obtaining technology and Software specifications (i.e., architecture diagrams, data models, etc).
- 3.2.2.25. Confirm that all database Software's supporting user/member data shall use standardized encryption techniques that meet or exceed DoD requirements (SHA-2, AES256).
- 3.2.2.26. Confirm that GCHP Administrative logons shall support SAML Single Sign-on.
- 3.2.2.27. Confirm that all Member logons shall support Multi-Factor Authentication.
- 3.2.2.28. Confirm that Member logons shall have the ability to support SAML Single Sign-on.
- 3.2.2.29. Which database technologies are supported by the platform (Relational vs. NoSQL) Oracle, Mongo, etc. and Which versions are supported?
- 3.2.2.30. Does your software support Web Analytics like Google Analytics or Adobe Analytics?
- 3.2.2.31. Describe your Web technology stack.
- 3.2.2.32. Training, Warranty and Support**
  - 3.2.2.32.1. Training**
    - 3.2.2.32.1.1. Describe what training and documentation is available. Address both functional and technical training availability.
    - 3.2.2.32.1.2. Is on-site training available?

- 3.2.2.32.1.3. Is e-learning training available?
- 3.2.2.32.1.4. Is online documentation available?

#### **3.2.2.32.2. Warranty**

- 3.2.2.32.2.1. Describe your Software warranty, including all conditions, recourses, exclusions and time frames.
- 3.2.2.32.2.2. Describe any warranties offered on other services and products included with the Software.
- 3.2.2.32.2.3. For what period of time are major and minor product upgrades included in the purchase price of the product?
- 3.2.2.32.2.4. What is the (average) frequency of new releases and upgrades?
- 3.2.2.32.2.5. How does the installation of upgrades affect Software operation?
- 3.2.2.32.2.6. What is your support policy on older Software releases?
- 3.2.2.32.2.7. List any planned enhancements with planned release dates.
- 3.2.2.32.2.8. Do upgrades include regulatory requirement changes? Does this affect the frequency of upgrade releases?
- 3.2.2.32.2.9. Is any customization automatically included in any upgrades?
- 3.2.2.32.2.10. Does customization incur additional annual maintenance costs?
- 3.2.2.32.2.11. Describe the process and estimate the time required to install subsequent releases/versions of your product.

#### **3.2.2.32.3. Support**

- 3.2.2.32.3.1. What is your post implementation annual on-going support services? Inclusions/exclusions?
- 3.2.2.32.3.2. Describe your hotline support program (that is, help desk and problem-resolution procedures).
- 3.2.2.32.3.3. Is technical support offered on a 24 hour per day, 7 days per week, 365 days per year basis. (24x7x365).
- 3.2.2.32.3.4. Are there support models and options?
- 3.2.2.32.3.5. Describe your Software error classifications, (class 1, class 2, class 3 etc.).
- 3.2.2.32.3.6. Describe your support remedies for each error classification in 3.2.2.32.3.6 above.
- 3.2.2.32.3.7. When running on Proposers configured equipment, provide your Software's "Response Time". Response Time means with respect to a given transaction, the clock time (measured in seconds and tenth of seconds) elapsed between, i) the moment when a terminal operator presses the send or transmit key on a terminal, thereby requesting certain processing services from the Software, and ii) the moment at which the output processing so requested is successfully completed and displayed at the terminal.
- 3.2.2.32.3.8. Please describe how you generally provide exit Transition Services to enable the services to continue without interruption and facilitate an orderly transfer of the services to Customer and/or Customer's designee.



### **3.2.3. IT Security**

3.2.3.1. Please provide a contact name and email address for receipt of the full Security Risk Assessment noted in Section 1.5.

3.2.3.2. Do you possess an independent audit for any one of the following?

**(Select all that apply)**

- SOC Type II (SSAE16)
- HITRUST
- HIPAA
- HITECH
- ISO 27001
- ISO 27017/18 (Cloud Services)
- PCI-DSS (Payment Card)
- Sarbanes-Oxley
- None

3.2.3.3. Is there an Information Security Policy and does it include?

**(Select all that apply)**

- Information Asset Security Policy
- Data Classification Policy
- Information Security Awareness Policy
- Physical Security Policy
- Acceptable Use Policy
- Access Control Policy
- Authentication Policy
- Risk Management Policy
- Incident Management Policy
- Patch Management Policy
- Change Control Policy
- Anti-Malware Policy
- Remote Access Policy
- User Workstation Security Policy
- Personal Computers Policy (BYoD)
- Server Security Policy
- Network Device Policy
- Backup and Restore Policy

- Logging and Events Policy
- DR / BCP Policy
- Data Separation Policy
- Encryption and Key Management Policy
- Technology Equipment Disposal Policy
- Clean Desk Policy
- No Policy

3.2.3.4. Do you build your Information Security Policies around any one of the following frameworks or standards?  
(Select all that apply)

- HIPAA Privacy/Security Rule (Standards)
- NIST (Framework & Standards)
- ISO 2700x (Standards)
- AICPA's Trust Services (SOC2)
- SANS Critical Security Controls (Standards)
- COBIT (Framework)
- OWASP (Framework)
- None

3.2.3.5. Is your Information Security Policy used in all environments (ex., corporate, production, development, etc.)?

- Yes
- No

3.2.3.6. Do your services include the handling, collection, or processing of any PHI (protected health information) or PII (personally identifiable information)?

- PHI
- PII
- Both

3.2.3.7. What type of PHI or PII records are used?

**(Select all that apply)**

- Date of Birth
- Phone/Fax Numbers
- Email Address
- Social Security Number
- Medical Records Number
- Claim Number (Medical)
- Member Identification Number
- Health Plan Beneficiary Number

- License Number(s) (ex. Medical, Drivers, Birth)
- Biometric Identifiers
- Photographs (Medical or Face/Body)
- Medical Condition Information
- None

3.2.3.8. Do you encrypt sensitive data at rest?

**(Select all that apply)**

- HTTPS
- SMTPS
- SSH
- SFTP
- VPN (IPSec)
- No

3.2.3.9. Do you encrypt sensitive data in transit?

**(Select all that apply)**

- HTTPS
- SMTPS
- SSH
- SFTP
- VPN (IPSec)
- No

3.2.3.10. Do your business-services operate in a;

**(Select all that apply)**

- Dedicated and privately-owned data center
- Multi-tenant collocation data center
- Cloud environment
- Hybrid solution ex. partial on-prem and partial cloud
- Partnered with another 2nd or 3rd party service
- None

3.2.3.11. How is the application, service, or data accessed?

HTTP Website

**(Select all that apply)**

- HTTPS Website
- Citrix or RemoteApps
- VPN (IPSec)

- Secure SFTP/SSH/SCP
  - FTP
  - Encrypted Email
  - Unencrypted Email
- 3.2.3.12. Do you have a formal vulnerability management program?
- Yes
  - No
- 3.2.3.13. How frequent are you exercising your vulnerability management program?
- Weekly
  - Monthly
  - Quarterly
  - Annually
- 3.2.3.14. Do you have a process to remediate any known or discovered vulnerabilities?
- Yes. (Please explain the expected timeframes for remediation)
  - No
- 3.2.3.15. Are there entitlement and/or user access controls for use of the product?
- Yes, Entitlements are required for the application
  - No, Entitlements are not required for the application
- 3.2.3.16. Are entitlements and/or user access controls.
- (Select all that apply)**
- Controlled by third parties
  - Controlled by an automatic provisioning process
  - Controls restricted by Role-Based Access Controls (RBAC)
  - Least Access Principle Used
  - Access restricted by Firewall
  - N/A
- 3.2.3.17. Are any services or development processes sub-contracted?
- Yes
  - No
- 3.2.3.18. If sub-contractors are used, are they held to the same accountability and follow your security policies as your employees?
- Yes
  - No
- 3.2.3.19. Who developed the application?
- (Select all that apply)**

- Off-the-shelf Software,
  - Internally (home-grown)
  - Open source
  - Other (Please Explain)
  - N/A
- 3.2.3.20. Is there a Business Continuity/Disaster Recovery (BC/DR) program?
- Yes
  - No
- 3.2.3.21. Is the Business Continuity and/or Disaster Recovery program tested at least annually?
- Yes
  - No
- 3.2.3.22. Do you provide Service Level Agreements (SLA) for your service? If so, what options are available (please describe in text box).
- Yes (Please describe options available)
  - No
- 3.2.3.23. Do you offer support services? Are they.
- (Select all that apply)**
- In-house staff
  - Subcontracted
  - Based in the USA
  - Based offshore
  - Support dedicated to a single individual
  - Support goes in queue for next available representative
  - No Support Services

### **3.2.4. Implementation Approach**

#### **3.2.4.1. Overview**

- 3.2.4.1.1. Provide an overview of your company's program management organizational structure as described in the proposal and how the work will be performed.
- 3.2.4.1.2. Provide a task-level description of your firm's proposed implementation approach. For each project stage, estimate the requirements your approach will place on GCHP staff. Please detail the roles, responsibilities, and accountability for each project stage.
- 3.2.4.1.3. What is the proposed implementation services program structure and organizational model? Will you be directly providing these services, or do you propose to use a third-party service provider for implementation? For clarity, please verify that your implementation services scope minimally covers all items requested in Section 3 and highlight any additional scope or services that you will provide to GCHP.

- 3.2.4.1.4. Provide details of your plans for supporting GCHP immediately following implementation cut-over/go-live to ensure stable system operation and a smooth user-experience. What is the structure, staffing, and duration of such immediate post-implementation support? For clarity, this support is separate from any annual on-going support services.
- 3.2.4.1.5. What is your plan to manage turnover in staff, including turnover in any key personnel assigned to GCHP?
- 3.2.4.2. **Proposed Staffing and Project Management**
  - 3.2.4.2.1. Present a description of the qualifications of individuals with whom you plan to staff the project, a delineation of their roles and responsibilities, a discussion of the location (on-shore or off-shore) from which you expect to manage and staff the project, and a discussion of how you expect to communicate and work with GCHP's personnel throughout the project.
  - 3.2.4.2.2. In the event Proposer anticipates utilizing subcontractors in the performance of any contract issued pursuant to this RFP, such subcontractor must be identified. Further, Proposer must fully define the scope of work to be performed by such subcontractor with an accompanying overview description of Proposer's intended contractual relationship with, and plan for managing the performance of, such subcontractor.
- 3.2.4.3. **Key Personnel**
  - 3.2.4.3.1. Include the actual resumes of the key personnel to be assigned to this project, not just samples.
  - 3.2.4.3.2. What is the duration of the commitment of key personnel to GCHP?
- 3.2.4.4. **Proposed Schedule**
  - 3.2.4.4.1. Provide a project plan and timeline outlining critical milestones necessary to meet any stated deadlines.

### 3.3. Functional Preferred Requirements

#### 3.3.1. Member Portal

##### 3.3.1.1. Customer

3.3.1.1.1. The Software shall be able to set up customer entities to generate bills and financial information for finance.

##### 3.3.1.2. Member

3.3.1.2.1. The Software shall capture enrollment requests from Brokers (and other entities).

3.3.1.2.2. The Software shall be able to support premium payment functionality and any delinquency rules.

3.3.1.2.3. The Software shall be able to offer service engagement automation for IOT, and Live Text. (IOT, Live Chat, Mobile Apps, Live Text and Portals).

3.3.1.2.4. The Software shall have the ability to service virtual care session.

3.3.1.2.5. The Software shall be able to provide a member cost estimator capability to comply with transparency & coverage act.

3.3.1.2.6. The Software shall be able to display any instructions to enroll.

##### 3.3.1.3. Data/Results

3.3.1.3.1. The Software shall be able to view, save & print the medical records/results like lab data, immunizations data, clinical care data etc. by designated GCHP's process.

3.3.1.3.2. The Software shall be able to support/provide Health information History

##### 3.3.1.4. Material Request

3.3.1.4.1. The Software shall be able to view, download and print digital ID card.

### **3.3.1.5. Member Web App**

3.3.1.5.1. The Software shall be able to support multiple operating systems.

### **3.3.1.6. Medical Management System**

3.3.1.6.1. The Software shall have the ability to capture a member's request to set up an appointment to meet with GCHP Health Services Authorization & Referrals.

3.3.1.6.2. The Software shall be able to send a request from the portal to the provider for authorization & referrals.

### **3.3.1.7. Claims**

3.3.1.7.1. The Software shall be able to display accumulators.

3.3.1.7.2. The Software shall be able to display claims billing history.

## **3.3.2. Provider Portal**

### **3.3.2.1. Claims**

3.3.2.1.1. The Software shall be able to display payment status (payments, adjustments, refunds & voids).

### **3.3.2.2. Medical Management System**

3.3.2.2.1. The Software shall have the ability to capture provider's request (appointment) to meet with GCHP Health Services.

3.3.2.2.2. The Software shall be able to offer service engagement automation for IOT and Live Text.

3.3.2.2.3. The Software shall have the ability to service virtual care sessions.

3.3.2.2.4. The Software shall have the ability to capture transactions submitted by non-standard Providers like ECM/CS.

3.3.2.2.5. The Software shall make the non-standard Provider (like ECM/CS) transaction information available to the processing system.

3.3.2.2.6. The Software shall have ability to provide non-standard provider (like ECM/CS) self-service functionality for claims submissions, corrections, Prior Authorizations, additional information and to research claims and payments.

## **3.3.3. Broker Portal**

3.3.3.1. The Software shall have easy-to-use self-service tools for employers & brokers perform new member enrollment, open membership enrollment, and member messaging.

3.3.3.2. The Software shall have the ability to view bills, make roster adjustments, view estimated impact of adjustments, and make payments.

3.3.3.3. The Software shall have the ability to manage groups' health accounts.

3.3.3.4. The Software shall have the ability to generate reporting for individual groups & book(s) of business.

3.3.3.5. The Software shall have the ability to provide access GCHP's sales materials.

3.3.3.6. The Software shall have the ability to display on demand real time stats on groups and covered lives.

3.3.3.7. The Software shall provide URL links to enroll clients (individuals and employers).

3.3.3.8. The Software shall provide agent ID to tie clients & groups together.

3.3.3.9. The Software shall provide ability to view/print quarterly statements if receiving referral payment.

3.3.3.10. The Software shall have SSO capability.

3.3.3.11. The Software shall be able to gain in-depth insights and analytics across multiple line of business, along with commission payment information, resources, and more in a single, convenient platform.

- 3.3.3.12. The Software shall enable of establishing responsibilities for setting commission rates and to define the point at which commissions are considered to be earned by the broker.
- 3.3.3.13. The Software shall be able to support/provide audit functionality
- 3.3.3.14. The Software shall be able to track User date & timestamp for view, adds, changes, updates, upload/download, cancels & deletions an any transaction.
- 3.3.3.15. The Software shall have the ability search members by Group or Division, name, or other demographic information.
- 3.3.3.16. The Software shall allow for member information to be easily found, and include enrollment history, family information, and claims detail.
- 3.3.3.17. The Software shall allow the resulting claims list to be sorted and grouped in an easy-to-read format.
- 3.3.3.18. The Software shall be able to customize the presentation of information on screen.
- 3.3.3.19. The Software shall enable agents/brokers, and partners to share and collect data to deliver personalized quotes.
- 3.3.3.20. The Software shall allow users to easily view the details of an announcement by simply clicking on that announcement.
- 3.3.3.21. The Software shall allow robust self-service capabilities.
- 3.3.3.22. The Software shall allow comprehensive dashboards and reporting.
- 3.3.3.23. The Software shall provide real-time connectivity with Core Administration System.
- 3.3.3.24. The Software shall provide real-time Communication with GCHP staff thorough live chat.
- 3.3.3.25. The Software shall display ID card and plan details.
- 3.3.3.26. The Software shall have sort and filter options.
- 3.3.3.27. The Software shall be able to offer service engagement automation (IOT, Live Chat, Mobile Apps, Live Text and portals).
- 3.3.3.28. The Software shall have the ability to service virtual care session.

#### **3.3.4. Third Party/Vendor Portal**

- 3.3.4.1. The Software shall display encounter data & statistics (examples: volume submitted, completeness, accuracy, timelines & outstanding errors) on a Dashboard.
- 3.3.4.2. The Software shall capture encounter corrections and interface/integrate with external vendor systems.
- 3.3.4.3. The Software shall be able to offer service engagement automation for IOT and Live Text.
- 3.3.4.4. The Software shall have the ability to service virtual care sessions.
- 3.3.4.5. The Software shall have an ability to allow users to correct individual encounter errors through the portal.



**4. QUANTITATIVE REQUIREMENTS**

**4.1. Pricing**

- 4.1.1. Several contracts will be awarded by GCHP pertaining to this and other projects, which have been collectively called the “Enterprise Transformation” projects. Please indicate if you will provide a discount in your pricing if awarded more than one project and the amount and structure of such discount(s).
- 4.1.2. Proposers must provide itemized Software pricing in the form attached as **Attachment 5** . Proposers may propose either a perpetual, term, or SaaS model. Proposers will be responsible for hosting the Software and GCHP Data and as such will provide both any license fee and hosting fees requested separately if they are not bundled into the subscription price. GCHP will not host the Software internally. Software availability shall be 24 hours per day, 7 days per week and 365 days a year, (24x7x365) support services shall be quoted to meet this availability requirement.

**4.2. Implementation Pricing**

- 4.2.1. Proposer is expected to provide a fixed fee to fully implement the Software using the guidelines listed below:

Services	Responsibilities	
	Vendor	GCHP
Training users and super-users	X	
Setting the needed configuration options	X	X
Performing necessary testing and quality assurance tests		X
Verifying system performance	X	
Developing necessary reports	X	
Integrating your solution with appropriate data sources	X	X
Migrating necessary data	X	X
Extending additional post-implementation support needed for any system stabilization and user acceptance	X	
Providing access to a call center to address any on-going issues	X	
Establishing backup and other routine maintenance procedures	X	X
Establishing the on-going support model	X	X
Verifying other operational procedures	X	

**Reference further supporting documentation in Attachment 11, Data to Value Solution Responsibility Matrix.**

4.2.2. Please provide a list of key assumptions related to your implementation pricing.

4.2.3. Proposers must itemize implementation pricing in the form attached as **Attachment 5**.

#### **4.3. Miscellaneous Pricing**

4.3.1. Proposers must itemize all training for GCHP personnel and miscellaneous pricing including training, travel, data migration, post go-live support, ongoing T&M support.in the form attached as Attachment 5.

#### **4.4. Contract Terms & Conditions**

4.4.1. The term of the agreement is expected to be **five, (5) years**. Thereafter, the contract may be renewed annually. Contract renewals are subject to satisfactory performance, funding availability, and possibly approval by the Ventura County Medi-Cal Managed Care Commission (“VCMCC”).

4.4.2. Please provide a copy of your license or SaaS agreement for our review. The license or SaaS agreement is incorporated into the Master Services Agreement as an exhibit, as is the Scope of Work for implementation.

4.4.3. **Attachment 1a** to this RFP is GCHP’s Preferred Key Contract Terms for Licensing and SaaS Agreements. These terms outline key contractual clauses that presumptively should be incorporated into any license or SaaS agreement between the parties. Please review this document, and if you cannot accept these terms and conditions, please note the specific area(s) where you have concerns and the reasons. Failure to identify any such objection with your Proposal shall, at GCHP’s option, be deemed a waiver of such objection. If any of the terms and conditions that relate to the provision of the Software or services are non-standard and would increase the cost to GCHP, please note the specific area(s) that would be attainable only at increased cost. Failure to agree to the Preferred Key Contract Terms for Licensing and SaaS Agreements may result in the disqualification of any Proposal.

4.4.4. **Attachment 1b** to this RFP is GCHP’s Master Services Agreement. Please review this agreement and if you cannot accept these terms and conditions, please note the specific area(s) where you have concerns and recommend alternative wording that you would like considered with your proposal response. Failure to identify any such objection with your Proposal shall, at GCHP’s option, be deemed a waiver of such objection. Failure to agree to the Master Services Agreement may result in the disqualification of any Proposal.

4.4.5. **Attachment 1c** to this RFP is the implementation Statement of Work (“SOW”). This SOW template will be used to for the implementation of the Software. Please review this draft of the SOW and if you cannot accept these terms and conditions, please note the specific area(s) where you have concerns and recommend alternative wording that you would like considered with your proposal response. Failure to identify any such objection with your Proposal shall, at GCHP’s option, be deemed a waiver of such objection. Failure to agree to the implementation SOW Work may result in the disqualification of any Proposal.

- 4.4.6. **Attachment 1d** to this RFP is the list of service levels associated with the SaaS or license core functions, support, and hosting of the Software and GCHP Data. This attachment will become an exhibit to the SaaS or license order form/SOW. These **Attachment 1d** to the RFP will be incorporated into the MSA as Exhibit D - Service Level Methodology. . Please review these service levels and if you cannot accept these terms and conditions, please note the specific area(s) where you have concerns and recommend alternative wording that you would like considered with your proposal response. If any of the terms and conditions that relate to the provision of the Software are non-standard and would increase the cost to GCHP, please note the specific area(s) that would be attainable only at increased cost. Failure to identify any such objection with your Proposal shall, at GCHP's option, be deemed a waiver of such objection. Failure to agree to the service level exhibit may result in the disqualification of any Proposal.
- 4.4.7. **Attachment 2** to this RFP is GCHP's Business Associate Agreement. Please review this agreement and if you cannot accept these terms and conditions, please note the specific area(s) where you have concerns and recommend alternative wording that you would like considered with your proposal response. Failure to identify any such objection with your Proposal shall, at GCHP's option, be deemed a waiver of such objection. The Business Associate Agreement and many of its terms are mandated by DHCS. Failure to agree to the Business Associate Agreement may result in the disqualification of any Proposal.

## **5. NOTICES OF AWARD AND PROTEST PROCEDURE**

Upon the conclusion of negotiations with a Proposer that results in a proposed agreement for the contract solicited in this RFP that are acceptable to GCHP as to price and all other terms, GCHP shall issue notice of intent to award the contract solicited in this RFP to a Proposer and such notice shall be directed to each entity that submitted a Proposal

Within five business days of GCHP's issuance of a notice of intent to award the contract, any Proposer that has submitted a Proposal and believes that GCHP has incorrectly selected another Proposer for award may submit a written notice of protest. Such notice of protest must be received by GCHP on or before the fifth business day after GCHP's issuance of the notice of intent to award.

The notice of protest must include a written statement specifying with specificity each of the grounds asserted for the protest. The protest must be signed by an individual authorized to represent the proposer, and must cite the law, rule, procedure or RFP provision on which the protest is based. In addition, the protestor must specify facts and evidence sufficient for the GCHP to determine the validity of the protest.

All protests must be received by the due date. If a protest is mailed, the protestor bears the risk of non-delivery within the deadlines specified herein. Protests should be transmitted by a means that will objectively establish the date GCHP received the protest. Protests or notice of protests made orally (e.g., by telephone) will not be considered. Protests must be delivered to:

Bob Bushey  
Gold Coast Health Plan  
711 E. Daily Drive, Suite 106

Camarillo, CA 93010-6082

The Chief Executive Officer, or his or her designee, will respond to the protest within 30 calendar days of receipt of the protest. The determination of the Chief Executive Officer shall be final.

To the furthest extent permitted by law, strict compliance with the procedures and time limits set forth in this section are mandatory and are the Proposers' sole and exclusive remedy in connection with this section's subject matter. A Proposer's failure to comply with these procedures and time limits will constitute a waiver of any right to further pursue a protest, any legal action, or relief that arises out, relates to, or is incident to this RFP.

Attachment #, Name, or Documentation	Instructions	File
1a GCHP's Preferred Key Contract Terms for Licensing and SaaS Agreements, Attachment 1a	These are the key contract terms that should be included in any licensing or SaaS agreement.	<a href="https://www.goldcoasthealthplan.org/media/r/672cb05e57e34f498fd2fb677960cf1d/attachment-1a-gchp-preferred-key-contract-terms-for-licensing-and-saas-agreements-rev-9-21-2022-v43-c1.docx">https://www.goldcoasthealthplan.org/media/r/672cb05e57e34f498fd2fb677960cf1d/attachment-1a-gchp-preferred-key-contract-terms-for-licensing-and-saas-agreements-rev-9-21-2022-v43-c1.docx</a>
1b – Master Services Agreement, Attachment 1b	This is GCHP's standard service agreement template.	<a href="https://www.goldcoasthealthplan.org/media/r/ba41fc14e3ba4e5587642f5746b9cae8/attachment-1b-master-services-">https://www.goldcoasthealthplan.org/media/r/ba41fc14e3ba4e5587642f5746b9cae8/attachment-1b-master-services-</a>
1c – Statement of Work, Attachment 1c	This is GCHP's Implementation Services SOW draft.	<a href="https://www.goldcoasthealthplan.org/media/r/d5ee3b5c335f45b79850b1f8b989a356/attachment-1c-statement-of-work-final_9-1-22-">https://www.goldcoasthealthplan.org/media/r/d5ee3b5c335f45b79850b1f8b989a356/attachment-1c-statement-of-work-final_9-1-22-</a>
1d – Software Order Form Service Levels, Attachment 1d	This describes the service levels associated with the Software	<a href="https://www.goldcoasthealthplan.org/media/r/ef929e34b35d4624ac0845bb79169b19/attachment-1d-software-order-form-service-levels-c1.docx">https://www.goldcoasthealthplan.org/media/r/ef929e34b35d4624ac0845bb79169b19/attachment-1d-software-order-form-service-levels-c1.docx</a>
2 – Business Associate Agreement, Attachment 2	This is GCHP's standard Business Associate Agreement template.	<a href="https://www.goldcoasthealthplan.org/media/r/26714f302a1149f48dc3db56d7ff0d35/attachment-2-gchp-baa-template_dhcs-subcontractor-c1.docx">https://www.goldcoasthealthplan.org/media/r/26714f302a1149f48dc3db56d7ff0d35/attachment-2-gchp-baa-template_dhcs-subcontractor-c1.docx</a>

3 - Conflict of Interest Compliance Certificate, Attachment 3	Complete this form, sign it and return the signed copy with your RFP. <b>This is a required form.</b>	<a href="https://www.goldcoasthealthplan.org/media/r/7b240e7af6b64150823efbec0274af50/attachment-3-conflict-of-interest-certification-c1.docx">https://www.goldcoasthealthplan.org/media/r/7b240e7af6b64150823efbec0274af50/attachment-3-conflict-of-interest-certification-c1.docx</a>
4 - Client References, Attachment 4	Complete this form and return it with your proposal response.	<a href="https://www.goldcoasthealthplan.org/media/r/81b8912a1bf641a7b0c89f85b83b751b/attachment-4-references-c1.docx">https://www.goldcoasthealthplan.org/media/r/81b8912a1bf641a7b0c89f85b83b751b/attachment-4-references-c1.docx</a>
5 - Pricing Format, Attachment 5	Complete this form and return it with your proposal response.	<a href="https://www.goldcoasthealthplan.org/media/r/d7a6b9ffd14d4a72a0c53f9fc435c769/attachment-5-term-perpetual-and-saas-pricing-format-c1.xlsx">https://www.goldcoasthealthplan.org/media/r/d7a6b9ffd14d4a72a0c53f9fc435c769/attachment-5-term-perpetual-and-saas-pricing-format-c1.xlsx</a>
6 - Intent to Propose, Attachment 6	Complete this form, sign it and return the signed pdf copy to the Procurement Contact on or before 5:00pm 10/7/2022. <b>This is a required form.</b>	<a href="https://www.goldcoasthealthplan.org/media/r/e0011d3d5e1f461f8daf96801e6fda30/attachment-6-intent-to-propose-c1.doc">https://www.goldcoasthealthplan.org/media/r/e0011d3d5e1f461f8daf96801e6fda30/attachment-6-intent-to-propose-c1.doc</a>
7 – Question Template, Attachment 7	Use this template to submit all of your questions.	<a href="https://www.goldcoasthealthplan.org/media/r/c41037d3278e465bb05cfa1f469d0ee5/attachment-7-qa-template-c1.docx">https://www.goldcoasthealthplan.org/media/r/c41037d3278e465bb05cfa1f469d0ee5/attachment-7-qa-template-c1.docx</a>
8. – System and Support Model, Attachment 8	This slide will assist with understanding GCHP’s planned future state operating model.	<a href="https://www.goldcoasthealthplan.org/media/r/65ddcdf290024f10b25d0da178c6b7d3/attachment-8-system-and-support-model-c1.pptx">https://www.goldcoasthealthplan.org/media/r/65ddcdf290024f10b25d0da178c6b7d3/attachment-8-system-and-support-model-c1.pptx</a>

9. – Application Architecture, Attachment 9	This document will assist with understanding GCHP’s planned architectural standards.	<a href="https://www.goldcoasthealthplan.org/media/r/8d9a4ddebb8f495890272a6c2492e239/attachment-9-application-architecture.vsd">https://www.goldcoasthealthplan.org/media/r/8d9a4ddebb8f495890272a6c2492e239/attachment-9-application-architecture.vsd</a>
10. – GCHP’s organizational structure for further supporting documentation, Attachment 10	This document represents GCHP’s executive level organizational structure	<a href="https://www.goldcoasthealthplan.org/media/r/cf3a3e8a740d49d7bf0e0799aae4422e/attachment-10-gchp-org-chart-c1.docx">https://www.goldcoasthealthplan.org/media/r/cf3a3e8a740d49d7bf0e0799aae4422e/attachment-10-gchp-org-chart-c1.docx</a>
11. – Data to Value Solution Responsibility Matrix, Attachment 11	This document represents GCHP’s expectations of the roles and responsibilities that GCHP and Proposer will be accountable for during the implementation of the Software	<a href="https://www.goldcoasthealthplan.org/media/r/806079860f574adebc66d23fad4e4b6c/attachment-11-data-to-value-solution-responsibility-matrix - c1.xlsx">https://www.goldcoasthealthplan.org/media/r/806079860f574adebc66d23fad4e4b6c/attachment-11-data-to-value-solution-responsibility-matrix - c1.xlsx</a>
12. – Section 3 Response, Attachment 12	Use this document to submit your responses to section 3 of the RFP	<a href="https://www.goldcoasthealthplan.org/media/r/5cade465668d42f693a2b7705893a257/attachment-12-section-3-response-template-c1.xlsx">https://www.goldcoasthealthplan.org/media/r/5cade465668d42f693a2b7705893a257/attachment-12-section-3-response-template-c1.xlsx</a>