

MARYLAND HEALTH CARE COMMISSION

BID BOARD NOTICE

Procurement ID Number: MHCC 13-005

Issue Date: June 14, 2012

Title: Health Information Exchange (HIE) Promotion Activities for Maryland Medicaid's Health Information Technology Advanced Planning Document (HIT IAPD) Update

I. Purpose

The Maryland Health Care Commission (MHCC or Commission) in collaboration with the Maryland Medical Assistance Program (Medicaid) intends to select a contractor on a time and materials basis to assist in the development of Appendix D¹ of the Health Information Technology Implementation Advanced Planning Document (HIT IAPD) for Maryland's State Medicaid Health Information Technology Plan (SMHP). Each state seeking to participate in the Medicaid electronic health record (EHR) Incentive Program must complete and submit to the Centers for Medicare & Medicaid Services (CMS) for approval an HIT IAPD requesting funding for the administration of its incentive program. Medicaid's HIT IAPD was submitted to CMS and approved September 19, 2011. Annually, Medicaid must submit an update to the HIT IAPD. Through the update, Medicaid seeks to request administrative funds from CMS to support health information exchange (HIE) as part of the Medicaid EHR Incentive Program. This Bid Board Notice seeks to identify a contractor that can assist in the development of Appendix D to the update that will enable Medicaid to leverage the HIE to directly support the Medicaid EHR Incentive Program. The supplement must result in affirmative answers to questions posed in the Appendix D Checklist.

Section 4201 of the American Recovery and Reinvestment Act of 2009 (the Recovery Act), established the Medicare and Medicaid EHR Incentive Program. The Recovery Act provides 100 percent Federal financial participation (FFP) to states for incentive payments to eligible Medicaid providers who adopt and meaningfully use a certified EHR and 90 percent FFP for administrative expenses related to the program. Allowable administrative expenses include expenses related to the State's effort to promote the adoption of HIE and serve as a direct accelerant to the success of the State's Medicaid EHR Incentive Program. HIE is an essential foundation for the success and sustainability of meaningful health care system improvements. Various state initiatives are underway to increase EHR adoption and implement a statewide HIE. The Chesapeake Regional Information System for Our Patients (CRISP) is the statewide HIE for Maryland. Currently, all of the 46 Maryland acute care hospitals are sending data through the state designated HIE; the statewide HIE is well positioned to facilitate the Medicaid EHR Incentive Program.

II. Requirements

¹ Health Information Technology Implementation Advanced Planning Document (HIT IAPD) Template, OMB Approval Number: 0938-1088, available at: http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/downloads/Medicaid_HIT_IAPD_Template.pdf.

The contractor is expected to have an understanding of: (1) the *CMS Medicare and Medicaid EHR Incentive Program, Final Rule*² and the *Medicare and Medicaid Programs; Electronic Health Record Incentive Program – Stage 2, Proposed Rule*³; (2) the requirements for an HIT IAPD (see fn.1); and (3) other states' HIT IAPDs, where funding for HIE activities was requested and approved by CMS.

In coordination with Medicaid, the MHCC, and the statewide HIE, the contractor must minimally complete the following activities:

1. Propose select HIE adoption activities that provide direct support to the overarching goals related to expanding health information technology and the success of the Maryland Medicaid EHR Incentive program (program) consistent with the Centers for Medicare & Medicaid Services (CMS) guidance around the use of administrative funds to related to electronic health information exchange as part of the program. Guidance includes CMS's State Medicaid Director's Letter #11-004. The contractor will present and discuss these proposals with MHCC, CRISP, and Maryland Medicaid before proceeding with the remaining items in the Scope of Work. Activities for consideration under the scope of work should include but are not limited to:
 - a. Develop and maintain a Medicaid provider directory;
 - b. Connect eligible Medicaid providers to the statewide HIE;
 - c. Develop an approach to electronically submit clinical quality measures to Medicaid using HIE;
 - d. Enable Medicaid providers to submit data to various public health registries;
 - e. Enable secure electronic messaging for Medicaid providers to communicate with patients;
 - f. Increase Medicaid provider awareness and education of meaningful use requirements related to electronic health information exchange; and
 - g. Provide Medicaid patients with the ability to view online, download, and electronically transmit their health information.
2. Develop a funding proposal for use of Federal financial participation funds under the program that could support the proposed electronic health information exchange adoption activities. The funding proposal must:
 - a. Be developed on a cost basis and demonstrate a 90/10 funding match requirement for the requested amount using the "Fair Share Principle;"
 - b. Draw from CMS guidance and currently approved 90/10 funding match proposals accepted by CMS from other states; and
 - c. Be written in the format required by CMS for HIT IAPD Updates, including affirmative responses to the Appendix D Checklist.
3. The work of the contractor is due in August and will be used to supplement the annual update to the HIT IAPD that Medicaid plans to submit to CMS before September 19, 2012. The contract shall write the supplement, which must:
 - a. Be complete enough to be included directly into the State's HIT IAPD Update;

² Available at: <http://edocket.access.gpo.gov/2010/pdf/2010-17207.pdf>.

³ Available at: <http://www.gpo.gov/fdsys/pkg/FR-2012-03-07/pdf/2012-4443.pdf>.

- b. Effectively detail a proposal that can be incorporated into the HIT IAPD annual update, which makes a persuasive argument for CMS to include HIE funding as part of the administrative funds allocated for Maryland under the Medicaid EHR Incentive Program; and
- c. Is consistent the CMS requirements for the HIT IAPD update.

The work of the contractor is not considered complete until CMS approves of the contractor’s proposal as it is included in and submitted with the HIT IAPD update due in September 2012.

Alternatively, the responder may propose a different approach. The contractor has some latitude in deciding how to carry out the contract responsibilities and to make suggestions that will improve the project scope, particularly when it comes to suggesting the best method for a funding proposal for Maryland. Potential contractors must specify their expected approach in their response to this Bid Board Notice. Responders are encouraged to propose deliverable timeframes within their response to this Bid Board that reflects a shorter timeframe than detailed below. If a bidder proposes to subcontract tasks, such as information gathering, analysis, and document development, the contractor must clearly identify and provide a detailed description of how any subcontractor(s) will carry out its assigned tasks. The contractor **must** have familiarity with Maryland Medicaid EHR Incentive Program, the eligible providers and eligible hospitals in Maryland, CMS requirements and guidance on use of 90 percent FFP, and the HIE activities underway in Maryland. **Maryland Medicaid and the MHCC must approve all activities specific to each task prior to performance of the work, and approve all deliverables before the deliverable will be considered complete.**

Contract Deliverables & Due Dates

Key Deliverables	Due Date
Submit bi-weekly status reports on activities of the contractor	Ongoing
Participate in bi-weekly status meetings (in-person or telephone conference call) with the MHCC	Ongoing
Kick off meeting with the MHCC, CRISP, and Medicaid	7/6/12
Draft proposed select HIE adoption activities	7/13/12
Final propose select HIE adoption activities	7/20/12
Draft of funding proposal	7/27/12
Final funding proposal	8/3/12
Draft of HIT IAPD update Appendix D outline	7/27/12
Final HIT IAPD update Appendix D outline	8/3/12
Draft HIT IAPD update supplement	8/10/12
Final HIT IAPD update supplement	8/17/12

Note: Contract deliverables/due dates are tentative and subject to change at the discretion of the MHCC and are not listed within the table in any particular order.

Staffing Requirements

The contractor may propose to augment or revise the following list of required personnel. The contractor must demonstrate how its proposed staffing model will complete the tasks in a timely manner. Proposals must include an hourly rate for the work to be performed and an estimate of the total number of hours required to complete each task.

Staffing Design

Labor Categories	Description
Project Director	A senior level individual that will coordinate all aspects of the work, take responsibility for meeting the schedule of deliverables, and ensure the delivery of high quality work products. (Writing sample required).
Project Manager	A management level individual with experience in managing workgroups that can ensure broad participation and facilitate discussion among all participants. (Writing sample required).
Policy Analyst	A technical expert with at least five years of health information technology and report writing experience. (Writing sample required).

REFERENCES

As part of its proposal the contractor will be required to include references for similar work it has performed in health information technology activities and, if available, work performed specifically in relation to telemedicine.

TERM OF CONTRACT

The contract begins on **July 5, 2012** and ends on **October 30, 2012**. Contractor billing is required by the 15th of the month for the prior month and must include a description of the completed tasks in accordance with the Deliverable Schedule in Section II. All deliverables and work must be performed to the satisfaction of the MHCC for reimbursement approval.

ISSUING OFFICER

The Issuing Officer for this solicitation is Sharon Wiggins, Procurement Officer, Maryland Health Care Commission, 4160 Patterson Avenue, Baltimore, Maryland 21215.

SUBMISSION DEADLINE

To be eligible for consideration, an original and five copies of each proposal must be received by the Issuing Officer at the Commission office by 4:00 p.m. **June 22, 2012**. **All bids must include Federal Tax Identification Numbers.** Vendors mailing proposals should allow sufficient mail delivery time to ensure timely receipt by the Commission. Bids may also be submitted electronically to swiggins@mhcc.state.md.us by the specified date and time.

In order to receive a contract award, vendors must be registered on eMaryland Marketplace (eMM). Each bidder must indicate their eMM vendor number in the Transmittal Letter. Registration is free. Go to <https://ebidmarketplace.com/> and click on “Registration” to begin the process then follow the prompts.

PROCUREMENT METHOD

The procurement method for this solicitation is a Small Procurement as described in the Code of Maryland Regulations (COMAR) 21.05.07. **The maximum award allowed under these regulations is \$25,000.**

REQUIRED DOCUMENTS

1. Please provide a concise description of your approach to completing the tasks(10 pages or less).
2. Please include individual resumes, writing samples, and references for each of the personnel who are to be assigned if your organization is awarded the contract. (Appendices are not included in the page count.) Subcontractors, if any, must be identified, and a detailed description of their contributing role relative to the requirements of the proposal should be included in the proposal. Each resume should include the amount of experience the individual has completed relative to the work requested for this solicitation. Letters of intended commitment to work on the project from personnel must also be included.

TERMINATION CLAUSE

The State may terminate this contract at any time and for any reason. Bidders must acknowledge this statement in their response to this Bid Board Notice to be considered an acceptable response.

**MINORITY BUSINESS ENTERPRISES AND SMALL BUSINESSES
ARE ENCOURAGED TO RESPOND TO THIS SOLICITATION**