

Request for Proposals (RFP)

Credentialing and Re- Credentialing for California County Behavioral Health Plans

Applications due by 5:00 p.m. April 21, 2023

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1 RFP Summary

The California Mental Health Services Authority (CalMHSA), a Joint Powers Authority (JPA), serves California Counties and Cities as an independent administrative and fiscal intergovernmental structure for jointly developing, funding, and implementing mental health services and educational programs at the state, regional, and local levels. (See Gov. Code §6500 et seq.)

To support California County Mental Health Plans (MHPs), Drug Medi-Cal Organized Delivery System (DMC-ODS) Plans, and Drug Medi-Cal (DMC) State Plans, herein referred to as County Plans, to comply with the Centers for Medicare and Medicaid Services (CMS) and the Department of Health Care Services (DHCS) uniform provider credentialing and re-credentialing requirements, CalMHSA is seeking through this RFP to procure for credentialing and re-credentialing services with a Credentialing Verification Organization (CVO) that is NCQA certified and/or URAC accredited.

This request does not commit CalMHSA to contract for any supply or service whatsoever. In addition, respondents are advised that CalMHSA will not pay for any information or administrative costs incurred in response to this RFP; all costs associated with responding to this RFP will be solely at the interested party's expense. Not responding to this RFP does not preclude participation in any future RFP, if any is issued.

2 Project Scope of Work

CalMHSA, as a direct partner to several County Plans, strives to continually enhance, innovate, and add value to the services we provide to our partners and communities. To the end, CalMHSA seeks a CVO with experience and capacity to perform provider credentialing and re-credentialing services for County Plans in compliance with applicable state and federal law and regulations, as well as DHCS requirements, including applicable Information Notices.

The primary goals of County Plan providers' credentialing and re-credentialing services include:

CREDENTIALING/RE-CREDENTIALING REQUIREMENTS

As per DHCS Mental Health and Substance Use Disorder Services (MHSUDS) Information Notice (IN) Number 18-019: Provider Credentialing and Re-Credentialing for MHPs and DMC-ODS Counties and DHCS Behavioral Health IN Number 22-070: Parity Requirements for DMC State Plan Counties; County Plans are required to conform to the following statewide uniform provider credentialing and re-credentialing requirements, established pursuant to Title 42 of the Code of Regulations, Part 438.214.

- A. Credentialing and re-credentialing activities may be delegated to a professional Credentialing Verification Organization (CVO) that complies with all applicable state and federal law and DHCS regulations, including applicable INs.

- B. Have a uniform credentialing and re-credentialing written policy and procedure that addresses mental health and substance use disorder services providers for initial credentialing and re-credentialing of County Plan providers.
- C. Have a signed and dated attestation statement for each County Plan provider as part of the credentialing and re-credentialing application attesting to the following:
 - i. Any limitations or inabilities that affect the provider's ability to perform any of the position's essential functions, with or without accommodation.
 - ii. A history of loss of license or felony convictions.
 - iii. A history of loss or limitations of privileges or disciplinary activity.
 - iv. A lack of present illegal drug use.
 - v. The application's accuracy and completeness.
- D. Have in place a credentialing and re-credentialing process that ensures that all County Plan providers are appropriately qualified in accordance with current legal, professional, and technical standards, and that each one is properly licensed, registered, waived, and/or certified as required by state and federal law, based on provider type. County Plan provider types include licensed, registered, or waived mental health providers, licensed practitioners of the healing arts (LPHAs), and registered or certified substance use disorder (SUD) counselors.
- E. The credentialing and re-credentialing process must ensure that all County Plan providers are in good standing with the Medi-Cal/Medicaid program and are not excluded from participation in Federal health care programs, such as Medicare or Medi-Cal/Medicaid.
- F. The credentialing and re-credentialing process must include verifying and documenting the following items through a primary source, for each provider, as applicable, based on provider type:
 - i. Appropriate license and/or board certification or registration.
 - ii. Evidence of graduation or completion of any required education.
 - iii. Proof of completion of any relevant medical residency and/or specialty training.
 - iv. Satisfaction of any applicable continuing education requirements.
- G. The credentialing and re-credentialing process must include verifying and documenting the following items, NOT through a primary source, for each provider, as applicable, based on provider type:
 - i. Work history.
 - ii. Hospital and clinic privileges in good standing.

- iii. History of any suspension or curtailment of hospital and clinic privileges.
 - iv. Current Drug Enforcement Administration (DEA) identification number.
 - v. National Provider Identifier (NPI) number.
 - vi. Current malpractice insurance in adequate amount.
 - vii. History of liability claims against the provider.
 - viii. Provider information, if any, entered in the National Practitioner Data Bank.
 - ix. History of sanctions from participating in Medi-Cal/Medicaid and/or Medicare.
 - x. History of sanctions or limitations on the provider's license issued by any state's agencies or licensing boards.
- H. The re-credentialing process must take place at a minimum every three years to ensure that each County Plan provider continues to be appropriately qualified in accordance with legal, professional, and technical standards, and to ensure that each provider continues to be properly licensed, registered, waived, and/or certified as required by state and federal law, based on provider type. All the requirements in the points above must be verified during the re-credentialing process, as stated in each.
- I. The re-credentialing process for providers must include input from County Plans regarding quality improvement activities, beneficiary grievances, and medical record reviews.
- J. The credentialing and re-credentialing process must make available to providers the ability to appeal a credentialing/re-credentialing decision, including a decision to deny a provider's credentialing application, or suspend or terminate a provider's previously approved credentialing/re-credentialing approval. The appeal process must be properly documented.
- K. The credentialing and re-credentialing process must include a secure and effective way to communicate and provide results or issues to County Plans and/or to individual providers working at the County Plans. Workflow must designate a specific liaison(s) to manage county communications, expedite documents, coordinate provider responses, obtain signatures, and provide any other requested information to complete the provider's credentialing and re-credentialing process.

3 Requested Information

CalMHSA is not responsible for costs associated with the development of responses nor shipping or delivery of the same. Respondent is expected to answer all questions and prompts in full to be considered. Responses **must not exceed 20 pages** (this number does not include separate documents as noted in this RFP).

The following components are required as part of your response:

- A. Cover Sheet (*Note: this response is not included in the 20-page limit*).
- B. Evidence of NCQA certification and/or URAC accreditation as a CVO. Evidence submitted must clearly indicate the start and end dates of the certification and/or accreditation. Also, please provide information on whether the CVO intends to seek re-certification and/or re-accreditation once the current cycle expires. (*Note: this response is not included in the 20-page limit*).
- C. Narrative description of Respondent's background information, to include, but not limited to, current structure of the organization, current administrative and managerial capacity to provide credentialing and re-credentialing services to County Plans, including the license types/disciplines/categories and FTEs of the CVO staff anticipated to fulfill the requirements as put forth in Section 2. Project Scope of Work (SOW). If CVO will be utilizing a subcontractor(s) to complete any of the work described on this RFP, you must provide the name(s) of any subcontractor(s) and their role in the credentialing and re-credentialing process as part of the response.
- D. Narrative description of Respondent's years of experience as a CVO, general experience providing credentialing and re-credentialing services, and organizational and staff training/experience relevant to the SOW, calling special attention to any experience providing credentialing and re-credentialing services to California County Plans and/or to other behavioral healthcare systems. Include relevant examples.
- E. Narrative description of how Respondent intends to meet all the requirements stated in the SOW above (Section 2. Project SOW), items A through K. Describe in detail how the CVO intends to complete each of the different activities and/or how the CVO will meet said requirements. If CVO is unable to meet any of the requirements described in the SOW, state that as part of the response.
- F. Provide details on how the CVO will collect credentialing and re-credentialing required information and documentation from County Plan providers. If the CVO is using an application (electronic or paper), please describe how the information/document exchange is secured. You may provide screenshots of the application if already in place or state what it will take to create the application.
- G. Provide details on the current volume of provider credentialing and re-credentialing applications that the CVO can accept responsibility for, as well as information on whether the CVO could expand its capacity, if needed. If the CVO is able to expand its capacity, describe the CVO's plan/activities that will need to take place to complete such an expansion.

- H. Implementation roadmap and high-level tasks/milestones, including a timeline for designing and implementing a credentialing and re-credentialing process for participating CA County Plans based on the SOW provided in this RFP.
- I. **Relevant Technology:** Respondent should describe the organization’s business infrastructure and technical capabilities relevant to the SOW. Detail what technical platform(s)/application(s) the CVO anticipates utilizing for the credentialing and re-credentialing of County Plan providers, including how the CVO will utilize the system(s) for storing, tracking, management, renewals, and county communications. In the response, explain the CVO’s platform(s)/application(s) ability to interface with electronic health record systems using FHIR Application Programming Interface (API) protocols or other applicable methods.
- J. **Budget:** Given the hypothetical scenario below, provide a proposed total budget based on the services to be provided as described in Section 2. Proposed SOW. This should include estimated costs* for staffing and supplies and must include information for prime contractors and any subcontractors that are part of the organization and responsible for any activities under the SOW. Estimates should also reflect any adjustments to the timeline or the addition of specialty or proprietary services. *(Note: this response is not included in the 20-page limit).*

Medium Size County Plan Credentialing & Re-Credentialing Hypothetical Scenario	
MHP & DMC-ODS Provider Types	Number of Providers
Licensed Psychiatrist	23
Licensed Physician	7
Licensed Psychologist	13
Physician Assistant	1
Nurse Practitioner	11
Registered Nurse	19
Licensed Clinical Social Worker	31
Licensed Marriage and Family Therapist	49
Licensed Professional Clinical Counselor	2
Waivered Psychologist	11
Associate Clinical Social Worker	31
Associate Marriage and Family Therapist	24
Associate Professional Clinical Counselor	7
Registered Psychological Assistant	2
Registered SUD Counselor	44
Certified SUD Counselor	42
Licensed Psychiatry Technician	1
Licensed Vocational Nurse	2
TOTAL	320

*All cost estimates are subject to negotiation if selected to contract.

- K. **Letters of Support:** Three (3) signed letters of support, including references from organizations with whom the Respondent has contractual or other business relationships that can substantiate the Respondent's capacity to provide credentialing and re-credentialing services as described in the SOW above. (*Note: this response is not included in the 20-page limit*).

4 Minimum Requirements

Respondent must meet the requirements below otherwise they may be considered non-responsive, and the proposal may be rejected at CalMHSA's sole discretion.

- A. Respondent must have a minimum of three (3) years of experience providing providers' credentialing and re-credentialing services. Respondent must provide the number of years of organizational experience in the proposal.
- B. Respondent's staff must be located within the United States.
- C. Respondent must not currently have a Settlement Agreement or Claim against them with any of CalMHSA's member counties or any state agency. If there are current claims against the Respondent in excess of \$10,000 within the last five (5) years, Respondent must disclose claims information as part of their response submittal. If Respondent has no claims in the last five (5) years, that information must be clearly indicated in the proposal.
- D. Financial Information: Respondent is required to submit copies of Respondent's most recent audited financial statements.

5 CalMHSA Rights and Responsibilities

- A. CalMHSA is not responsible for representations made by any of its officers or employees prior to the execution of the Agreement unless such understanding or representation is included in this RFP or any written addenda to this RFP.
- B. CalMHSA has the right to amend the RFP by written addendum. CalMHSA is responsible only for that which is expressly stated in the solicitation document and any authorized written addenda thereto. Such addenda shall be made available to each person or organization which CalMHSA records indicate has received this RFP. Should such addenda require additional information not previously requested, failure to address the requirements of such addenda may result in the Proposal Package not being considered, as determined in the sole discretion of CalMHSA. CalMHSA is not responsible for and shall not be bound by any representations otherwise made by any individual acting or purporting to act on its behalf.

6 CalMHSA Option to Reject Proposal Packages

CalMHSA, at its sole discretion, may reject any or all Proposal Packages submitted in response to this solicitation. CalMHSA shall not be liable for any cost incurred by a Respondent in connection with preparation and submittal of any Proposal Package.

7 Truth and Accuracy of Representatives

False, misleading, incomplete, or deceptively unresponsive statements in connection with a Proposal Package shall be sufficient cause for rejection of the Proposal Package. The evaluation and determination in this area shall be at CalMHSA's sole judgment and its judgment shall be final.

8 Submission Instructions and Requirements

Proposal Timeline

EVENT	Key Dates
RFP Issued	3/13/2023
RFP Questions Due	3/24/2023
RFP Questions Answered	3/31/2023
Deadline for Responses to be Submitted	4/21/2023
Application Review	4/24/2023– 4/28/2023

Submittal Address

All Submissions must be submitted electronically using CalMHSA's e-Procurement Portal, through Bidnet:

<https://www.bidnetdirect.com/california/californiamentalhealthserviceauthority>.

RFP Questions and Clarifications

All questions and requests must be submitted through CalMHSA's e-Procurement Portal at: <https://www.bidnetdirect.com/california/californiamentalhealthserviceauthority>. The deadline to submit questions for this RFP is **March 24, 2023**. The FAQ responding to the questions will be posted on **March 31, 2023**, at <https://www.bidnetdirect.com> and on the CalMHSA website.

To ensure all parties have access to the same information at the same time, except as stated below, CalMHSA will NOT respond to questions as they are received and will not accept telephonic questions.

It is the sole responsibility of the Respondent to refer to the FAQs, which will be posted on CalMHSA's e-Procurement Portal at <https://www.bidnetdirect.com/california/californiamentalhealthserviceauthority>.

If a Respondent is unable to submit questions via the Bidnet e-Procurement Portal, the Respondent must provide CalMHSA with an email justification at info@calmhsa.org outlining why the Respondent is unable to do so.

If a question relates to a proprietary/trade secrets aspect of a proposal and the question would expose proprietary information if disclosed to competitors, the Respondent must mark the question as "CONFIDENTIAL." With the question, the Respondent must submit a statement explaining why the question is sensitive. If CalMHSA concurs that the disclosure of the question or answer would expose proprietary information, the question will be answered by email reply, and both the question and answer will be kept confidential. If CalMHSA does not concur regarding the proprietary nature of the question, the question will not be answered in this manner and the vendor will be notified and asked whether the vendor would like the question to receive a public response or no response at all.

Withdraw

A Respondent may withdraw or amend its proposal, but only before the Application Submittal Deadline, directly on CalMHSA's e-Procurement Portal at <https://www.bidnetdirect.com/california/californiamentalhealthserviceauthority>.

Review of Applications

CalMHSA will receive all applications and review for completeness and adherence to the RFP rules stated in this document. Following the initial review, all qualified applications will be reviewed and scored by a review panel. The evaluation panel will conduct a fair and impartial evaluation of proposals received in response to this RFP.

The review panel is comprised of individuals with varied backgrounds, to include professional expertise, lived experience, personal knowledge, etc. Panelists' information will not be disclosed

as a matter of confidentiality. CalMHSA is committed to ensuring the RFP review panel is representative of California's racial, ethnic, and cultural diversity.

Selection will not be based exclusively on price or highest score. CalMHSA reserves the right to negotiate with Respondents who, in the opinion of the review panel, have submitted the best proposal in an attempt to reach an agreement. If no agreement is reached, CalMHSA may negotiate with other Respondents or may choose to extend the proposal period. CalMHSA also reserves the right to meet with vendors to gather additional information. Additional information may include, but is not limited to, a demonstration of skills described in the proposal.

Protest Procedures

Protests must be received no later than five (5) business days after the Notice of Intent to Award is posted on the CalMHSA website. The sole bases for protest are that the award was (1) in violation of law, (2) in violation of the provisions of this RFP, or (3) in violation of CalMHSA's procurement process. All protests must be in writing and (1) state in detail each and every ground asserted for the protest, citing to the law, RFP provision, or particular provision of the procurement policy on which the protest is based; (2) explain why the error prevented the aggrieved organization from being awarded the contract; and (3) identify the remedy sought.

Written protests can be sent to the following:

Via Email:

info@calmhsa.org

Via Certified Mail:

CalMHSA
Attn: Chief Operating Officer
1610 Arden Way
STE 175
Sacramento, CA 95815

Within 14 days of receipt of any protest, CalMHSA's Executive Director will provide a written decision which shall be final upon transmission to the protesting party. If the Executive Director determines that the error identified by the protesting party has deprived that party from receiving the contract, the Executive Director may act to rectify the error, including but not limited to: cancellation of the RFP or proposed contract, correction or other revision of the awarded contract, termination of an improperly awarded contract, or affirmation of an existing contract if the discovered defect is immaterial or the Executive Director determines that affirmation is in the best interest of CalMHSA.

Notice Regarding Public Records Act Request

CalMHSA is subject to the Ralph M. Brown Act and the California Public Records Act. All proposals received for this RFP are ultimately subject to public review; however, during the competitive bid process, all proposals will be kept confidential. Upon award and execution of the contract by awardee(s), all proposals and supplemental information will be subject to public review, with the exception of those elements of a proposal which contain elements that are clearly marked as confidential or trade secrets. Any such designation should be accompanied by a brief explanation of the reason the information is non-public and protected from disclosure under California law. CalMHSA reserves the right to disregard such designations if they have been applied indiscriminately to non-protected information, and in no event shall CalMHSA, its agents, representatives, consultants, Directors, or Officers be liable to a responding party for the intentional or inadvertent disclosure of all or a portion of a proposal submitted under this RFP, regardless of whether it was marked as confidential or trade secret.

Although the California Public Records Act allows certain confidential or trade secret information to be protected from disclosure, CalMHSA may not be in a position to establish that the information submitted is protected. If CalMHSA receives a request for public disclosure of all or any portion of a proposal that has been designated as exempt from disclosure, CalMHSA will use reasonable efforts to notify the responding party of the request and give such party an opportunity to assert, at its own expense, a claimed exception under the California Public Records Act or other applicable law within the time period specified in the notice issued by CalMHSA and allowed under the California Public Records Act.

Format of Proposal

Proposals must be submitted through CalMHSA's e-Procurement Portal at: <https://www.bidnetdirect.com/california/californiamentalhealthserviceauthority>. Submissions by other methods will not be accepted. Internet Explorer 11, Microsoft Edge, Google Chrome, or Mozilla Firefox are recommended. JavaScript must be enabled.

Browser cookies must be enabled. Respondents should contact Bidnet at 800-835-4603 for technical questions related to submissions, or visit Bidnet's help forum at [Bidnet Direct](#).

Submission materials should be prepared in the file formats listed under Requested Information for this opportunity in the Bidnet Portal. All PDFs documents must be formatted in Times New Roman, 12 pt. font, double spaced, unless otherwise indicated in the Requested Information. The maximum upload file size is 1000 MB. Documents should not be embedded within uploaded files, as the embedded files will not be accessible or evaluated.