



LOUISIANA DEPARTMENT OF HEALTH
BUREAU OF HEALTH SERVICES FINANCING

Request for Information (RFI)

For

LAP/FOA Billing and Premium Collection Services

RFI # 3000017134

RFI due date/time: June 18, 2021 at 11:59 PM (CST/CDT)

NOTE: This RFI is solely for information and planning purposes and does not constitute a solicitation. This information will be reviewed and discussed by the state agency and may result in the advertisement of a formal and competitive Request for Proposal for any or all of the services included in the RFI.

Only information that is in the nature of legitimate trade secrets or non-published financial data may be deemed proprietary or confidential. Any material within a response to this RFI identified as such must be clearly marked and will be handled in accordance with the Louisiana Public Records Act (La. R.S. 44:1-44) and applicable rules and regulations. Any response marked as confidential or proprietary in its entirety may be rejected without further consideration or recourse.

Release Date: May 14, 2021

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1 GENERAL INFORMATION

1.1 Background

Louisiana Department of Health (LDH) Bureau of Health Services Financing (BHSF) has an existing contract with the Office of Group Benefits (OGB), which expires June 30, 2023, for premium management services for the Family Opportunity Act Medicaid Buy-In Program and Louisiana Children's Health Insurance Program (LaCHIP) Affordable Plan. Services include monthly premium invoicing, collecting and processing payments received by mail, auto drafting premiums, the ability to pay online, and a customer service number for a population of approximately 5,000 enrollees. Additionally, OGB sends to, and receives from, the Louisiana Medicaid Eligibility Determination System (LaMEDS) several interface files for enrollment management, based on the enrollee's premium payment status.

1.1.1. What is the LaCHIP Affordable Plan?

- Effective June 1, 2008, the LaCHIP Affordable Plan (LAP) was created through expansion of the separate State Child Health Insurance Program to provide health assistance to uninsured children with family income in excess of the limits for Medicaid but equal to or less than 255 percent (250 percent, plus a 5 percent disregard) of the Federal Poverty Level (FPL).
- LAP is a cost-sharing program with a monthly premium of \$50 per household regardless of the number of certifications per household due to multiple income units. A household that has at least one (1) eligible child verified as a member of a federally recognized American Indian or Alaskan native tribe will pay no premium.

1.1.2. What is the Family Opportunity Act Medicaid Buy-In Program?

- On October 1, 2007, the Family Opportunity Act Medicaid Buy-In Program (FOA) was implemented to cover children, up to age thirteen (13), with disabilities and family gross income equal to or less than 300 percent FPL. Effective October 1, 2008, FOA was expanded to include children, up to age nineteen (19), with disabilities and family gross income equal to or less than 300 percent FPL.
- Families wishing to enroll their child(ren) with disabilities in FOA are required to take employer-offered insurance when it is available, and when the following conditions apply:
 - o The coverage is under a group health plan; and
 - o The employer contributes at least 50 percent of the total annual premium.

1.2 Purpose of RFI

This RFI is issued for the purpose of gathering information, including cost projections, from qualified entities who demonstrate the ability to provide services related to invoicing, collection, and processing of monthly premium payments for LAP and FOA. LDH is seeking information regarding the following specialized services:

- Invoice enrollees for monthly premium payments;

- Collect and process monthly premium payments received by mail;
- Auto-draft monthly premium payments;
- Provide and maintain mechanism to receive and process online payments;
- Provide and maintain a customer service number; and
- Provide and maintain software capable of performing associated services.

1.3 Project Overview

Attachment I: Scope of Work details the overview of the project requirements inclusive of deliverables and/or desired results that the LDH is considering.

2. ADMINISTRATIVE INFORMATION

2.1 RFI Coordinator

Requests for copies of the RFI must be directed to the RFI Coordinator listed below:

Tamara T. Manuel
 PPMO & Shared Services
 P. O. Box 91030
 Baton Rouge, LA 70821-9030
 Tamara.Manuel@LA.Gov

*This RFI has been posted to LaPAC and the LDH Website, which can be found at the following links: **LaPAC:** <https://wwwcfprd.doa.louisiana.gov/osp/lapac/pubMain.cfm>.*

***LDH Website:** <https://ldh.la.gov/index.cfm/newsroom/category/46>*

2.2 Schedule of Events

<u>Activity/Event</u>	<u>Date</u>
Public notice of RFI	05/14/2021
Deadline for response to RFI	06/18/2021

NOTE: LDH reserves the right to deviate from this Schedule of Events at any time and without notice.

2.3 Response Content

2.3.1 Executive Summary

This section should serve to introduce the scope of the response in as much detail as possible. At a minimum, it should include administrative information including the name of the responder's point of contact, his/her phone number, email address, and any other pertinent contact information. This section should also include a summary of the responder's qualifications and ability to meet, if not exceed, LDH's requirements.

2.3.2 Corporate Background and Experience

Responders should give a brief description of the company history, organizational structure, and number of years in business. Responders should also describe their experience with projects of this type and any experience gained from working with other states or corporation / governmental entities of comparable size and diversity.

2.3.3 Approach and Methodology

The responder should explain the approach and methodology that will be used to provide the services detailed in the attached Scope of Work. Best practices garnered from previous experience with a similar scope of services should be described. Provide a list of issues/concerns that were not taken into consideration in the Scope of Work described herein that you think is important for LDH to consider. Provide alternative solutions for accomplishing the project objectives, if applicable, and any other pertinent information.

2.3.4 Cost Estimate

Provide an estimate of total cost (inclusive of travel and all project expenses). For informational purposes, provide the total estimated number of hours, by classification, for project staff, the billing rate by classification, and an estimated percentage of the effort that will be completed by a subcontractor (if applicable).

2.4 Response Instructions

2.4.1. Response Submittal

Responders interested in providing information requested by this RFI must submit responses, not to exceed ten (10) pages in length and containing the information specified, no later than the deadline for response to the RFI as stated herein.

The responses must be received by electronic copy only to Tamara.Manuel@la.gov on or before the date and time specified in Section 2.2 Schedule of Events. Email submission is the only acceptable method of delivery. Fax, mail, and courier delivery shall not be acceptable. Responders should allow sufficient time to ensure receipt of their emailed proposal by the time specified herein.

Responses received after the deadline, corrupted files, and incomplete submissions (e.g., Part 1 and Part 2 of 3 are received, but Part 3 is not) may not be considered.

2.5 Additional Instructions and Notifications to Responders

2.5.1 RFI Addenda/Cancellation

LDH reserves the right to revise any part of this RFI by issuing an addendum(a) to the RFI at any time. Issuance of this RFI, or subsequent addendum(a), if any, does not constitute a commitment by LDH or the State to issue an RFP or any other process resulting in award of a contract of any type or form. In addition, LDH may cancel this RFI at any time, without incurring any liability from responders or potential responders.

2.5.2 Ownership of Response

The materials submitted in response to this RFI shall become the property of the State.

2.5.3 Cost of Preparation

LDH shall not be liable to any responders or potential responders for any costs incurred in developing a response, preparing for discussions (if any are held), or any other costs that may be incurred by a responder or potential responder in to responding to this RFI.

ATTACHMENT I

SCOPE OF WORK (SOW)

I. Goals/Objectives

LDH is seeking information from individuals/organizations who can demonstrate the ability to perform the specialized services sought. Responses must have a clear focus on the responder's ability to provide the specialized services described herein for a population of approximately 5,000 enrollees and experience in the scope of the services listed. LDH anticipates a 3-year contract term for these services, beginning July 1, 2023.

LDH is seeking the following specialized services:

- ❖ Invoice enrollees for monthly premium payment;
- ❖ Collect and process monthly premium payments received by mail;
- ❖ Auto-draft monthly premium payments;
- ❖ Provide and maintain mechanism to receive and process online payments;
- ❖ Provide and maintain a customer service number; and
- ❖ Provide and maintain software capable of performing associated services.

II. Services

- Perform invoicing, collection, and processing of monthly premium payments for LAP and FOA enrollees (due on the 10th of each month), on behalf of LDH.
- Receive and process a daily file from LaMEDS that includes any change, as triggered by addition of new eligibility (i.e. addition of new plans, premium changes from \$0 - \$50, etc.), changes (i.e. demographic, eligibility – add/remove child from household, plan termination, etc.), or termination of LAP or FOA.
- Send return file to LaMEDS for every enrollee on the daily eligibility file sent by LDH.
- Upon payment of initial premium, invoice the enrollee for the monthly premium on the first of each subsequent month; and notify LaMEDS of the payment of the first premium.
- Inform the agency of unpaid premiums for LDH to process and send a subsequent closure, as appropriate (FOA households are allowed to miss 3 payments).
- If files are used as method of transmission, send daily error file to LaMEDS with all errors found for each file.
- Receive reconciliation files on the last working day of every month for FOA and LAP, reflecting all of the enrollees receiving FOA or LAP benefits in LaMEDS with what is in the vendor's system.
- Submit any errors and premium collections to LDH.
- Inform LDH/BHSF via email of any individual billing discrepancies, upon discovery.
- Inform LDH/BHSF via email of any noted billing discrepancies and/or file transfer issues, upon discovery.
- Inform LDH/BHSF via email of any overpaid premiums received for enrollees whose LAP or FOA enrollment has been terminated. Upon receipt of notice, LDH/BHSF will determine if the coverage should be reinstated and notify vendor of its decision via email. If the coverage is not reinstated, issue the appropriate refund.

- Collect premiums and deposit into LDH's lockbox.
- Utilize backup documentation from the financial institution that supports the total monthly deposit, ensure proper audit trail, and reconcile with vendor's system.
- Submit a nonpayment file to LaMEDS each business day for discrepancy reconciliation.
- Possess ability to automatically or manually correct premiums imposed in error.
- For twelve (12) months after the FOA coverage termination date, maintain a billing system notation to indicate the overdue FOA premiums for any months of unpaid coverage.
- For ninety (90) days after the LAP coverage termination date, maintain a billing system notation to indicate the overdue LAP premiums for any months of unpaid coverage.
- Meet with LDH/BHSF at least quarterly to discuss issues related to performance measures and to monitor ongoing projects.
- Work with LDH/BHSF, its fiscal intermediary, and any contractor or technical assistance provider retained by LDH to provide data and data tables that comply with Transformed Medicaid Statistical Information System (T-MSIS) requirements.
- Notify LDH/BHSF no later than the next business day following an unsuccessful transmission, so LDH/BHSF may reschedule the transmission.
- Upon request, provide LDH/BHSF with a billing schedule for the contract period.
- Establish and change the layout of the billing statements that are sent to enrollees, upon request from LDH/BHSF.
- Agree to perform or otherwise provide to LDH/BHSF other related services not specified herein.
- Discuss issues related to performance and monitor ongoing projects with LDH/BHSF's Director or his/her designee.

III. Deliverables

- Submit monthly invoices to LDH/BHSF with supporting data detailing the following, by the last day of the month following the end of the calendar month in which services were provided (i.e. March data reported by April 30th):
 - Enrollee name, SSN, Medicaid Person ID, Vendor ID (if applicable)
 - Enrollee program type and begin date
 - Enrollee premium(s) billed and paid
 - Enrollee premium dates and amounts for past due payments
 - Fees being billed to LDH for each corresponding enrollee/premium payment
- Provide monthly performance reports for customer service number including, but not limited to, data collection and turnaround time (i.e. program type, call reason/issue, call volume, time per call, average speed to answer, etc.), in a format established by LDH/BHSF.
- Provide other reports related to services provided including, but not limited to, research of file/system interface issues, collection trends (i.e. breakdown of count and amounts collected via various methods - mail, online, auto-draft), as needed and upon request from LDH/BHSF.