



Notice of Request for Proposals (“RFP”)
Fraud Waste and Abuse (FWA) Prevention Program

December 15, 2021

Alameda Alliance for Health
1240 South Loop Road
Alameda, California 94502
vendormgmt@alamedaalliance.org

Timeline

ITEM	DUE DATE
RFP Issued	12/15/2021
RFP Responses Due (<i>no exceptions</i>)	01/18/2022
Finalist Selection	02/01/2022
Finalist Interviews and Presentations	02/01/2022-02/15/2022
Vendor Selection	03/01/2022

I. About Alameda Alliance for Health

Alameda Alliance for Health (“Alliance”) is a local, public, not-for-profit managed care health plan committed to making high-quality health care services accessible and affordable to Alameda County residents. Established in 1996, the Alliance was created by and for Alameda County residents. The Alliance Board of Governors, leadership, staff, and provider network reflect the county’s cultural and linguistic diversity. The Alliance provides health care coverage to more than 293,000 low-income children and adults through National Committee on Quality Assurance (“NCQA”) accredited Medi-Cal and Alliance Group Care programs (an employer-sponsored plan that provides low cost comprehensive health care coverage to In-Home Supportive Services (“IHSS”) workers in Alameda County).

a) Programs

Medi-Cal

Medi-Cal is a state-sponsored health insurance program administered through the Alliance. Medi-Cal provides comprehensive health care coverage for those who meet income guidelines, including:

- Families and children;
- People with disabilities; and
- Seniors.

Alliance Group Care

Alliance Group Care provides low-cost health care coverage to IHSS workers in Alameda County. Benefits include routine care from a primary care physician, specialty care, hospital care, and other services.

IHSS home care workers may qualify for Alliance Group Care through the Alameda County Public Authority for IHSS.

II. Project Description

The Alliance is initiating this Request for Proposal (“RFP”) to solicit proposals from eligible firms for a Fraud Waste and Abuse (“FWA”) solution to assist the Alliance in identifying and preventing fraud waste and abuse. The Alliance maintains and must continue to operate a comprehensive FWA program which is held compliant in accordance with federal/state statutes and regulations, including but not limited to:

- Department of Managed Health Care (“DMHC”)
- The Centers for Medicare & Medicaid Services (“CMS”)
- Code of Federal Regulations, Title 42, Part 422, 423 and 455.1-455.23
- Federal False Claims Act, US Code, Title 31

- California Code of Regulations, Title 10
- California Code of Regulations, Title 22 H. Health and Safety Code §1348
- Department of Health Care Services (“DHCS”) Contract

a) **Solution Objectives**

With the solution, the Alliance is looking to:

- Identify claim adjustments and errors;
- Identify billing trends and utilization pattern from both institutional claims and professional claims. Identify billing outside of authorized services;
- Leverage a solution with continuous software enhancements and updates with new emerging fraud schemes to address new edits and rules required by regulatory change and lessons learned from other payers and incorporates trends as they are identified when implemented and in an ongoing manner; and
- Increase ability to identify difficult to detect FWA patterns via a software tool capable of advanced data modeling, link analysis and comprehensive data mining techniques that can screen for, select, and identify claims that have a high probability of FWA and analyze these claims for review and verification;
- Employ a comprehensive set of algorithms to identify billing issues and potential instances of FWA in healthcare spending;
- Reduce FWA manual load for staff, including prioritization of leads by severity of potential fraud to allow for an assessment of overall risk and near perfect results validation to avoid the use of resources in reviewing false-positive results.
- Detect aberrant behavior compared to peers (providers and members);
- Track and trend data on a monthly, quarterly, and yearly basis, including tracking of dollars saved or recovered because of investigations;
- Integrate with other Alliance systems, including RAM’s HealthSuite;
- Implement a system able to provide standard reports and ad-hoc querying tools;
- Ensure compliance with all applicable federal and state security and privacy requirements including, but not limited to, the Health Insurance Portability and Accountability Act (HIPAA) and HITECH.

b) **Datasets to be integrated**

Specifically, we are looking for a solution to review and analyze the following datasets:

- Medical and pharmacy claims data history review;
- Medical encounter data;
- Medical records;
- Utilization management reports; and

- Provider utilization profiles.
- c) **Utilizing the solution**
 Utilizing the technological solution, describe in (a) and (b) above, the Alliance is seeking a vendor who is not only able to identify cases, but will also perform remediation services, including, but not limited to requesting medical records, employing licensed practitioners (nurses or physicians) able to review and make determinations or recommendations for recoveries.

III. Solicitation Terms and Conditions

- a) **Questions About This RFP**
 Vendors may submit questions regarding this RFP via email to the Alliance Vendor Management Department at vendormgmt@alamedaalliance.org. The Alliance will reply as appropriate.
- b) **Amendments to This RFP**
 The Alliance retains the right to amend this RFP by a written amendment posted on the Alliance website at www.alamedaalliance.org.
- c) **Option to Reject Proposals**
 The Alliance may, at its sole discretion, reject any or all proposals submitted in response to this RFP at any time, with or without cause. The Alliance shall not be liable for any costs incurred by the bidder in connection with the preparation and submission of any proposal. The Alliance reserves the right to waive immaterial deviations in a submitted proposal.
- d) **Master Services Agreement**
 Included as attachments to this RFP are the Alliance Standard Master Services Agreement (“MSA”) and Business Associate Agreement (“BAA”). The vendor agrees to be bound by the terms of the MSA and BAA. Any exceptions must be indicated in Section V, 3.
- e) **Proposal Timeline**

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IV. RFP Submission Responses

In a separate attachment, please provide a response for each question outlined below:

TOPIC	QUESTION
Executive Summary	1. Bidder(s) shall provide a high-level description of how their proposal will meet the project requirements.
General Vendor Information	2. Vendor Primary Contact Information: <ul style="list-style-type: none"> • Name • Title • Address, city, state, zip • Phone number • Alternate phone number • Fax number • Email • Vendor website URL 2a. How long has your company been in business?
Vendor Locations (Please include city and state)	3. Please include the city and state for each department/entity below: <ul style="list-style-type: none"> • Corporate headquarters • Support personnel • In what state(s) is the vendor incorporated?
Vendor Employee Details	4. Please provide the number of employees for each department/entity below: <ul style="list-style-type: none"> • Total employees • Installation
Vendor Privacy and Security	5. Please provide a completed SOC 2 report as an attachment. Alternatively, please complete the attached "Vendor Security Questionnaire." 5a. Please provide privacy and security policies and procedures.
Vendor Financial Status	6. The Alliance is looking for a partner financially capable of meeting all needed services. Please provide a completed SOC 1 report as an attachment. Alternatively, please provide unaudited financial statements.
Exclusions	7. Has your company received notice of violation of, or been convicted of a violation of any federal, state, or local law? If yes, please explain. Provide additional attachments, if necessary. 7a. Has your company been listed as an excluded vendor by any federal or state agency or convicted of a criminal offense related to healthcare? If yes, please explain. Provide additional attachments, if necessary.

TOPIC	QUESTION
Exclusions (cont.)	7b. Has your company been cited for or does your company have business activities that contribute to the violation of human rights? If yes, please explain. Provide additional attachments, if necessary.
Subcontractors	8. Please identify any subcontractors that will be utilized and their specific service offerings.
Experience	<p>9. Please describe your experience implementing your FWA product. We are particularly interested in your experience with the following:</p> <p>9a. Working with any Medi-Cal health plans. If yes, which plans and what services did you perform?</p> <p>9b. Working with any other Medicaid health plans. If yes, which plans and what services did you perform?</p> <p>9c. Working with other commercial health plans. If yes, what services did you perform, and for which plans?</p> <p>9d. Please provide three (3) to four (4) brief client references from current clients that can describe your relationship. Please provide the contact information of a specific person for each reference that the Alliance can contact as part of our evaluation process.</p>
Exceptions to MSA/SOW	10. Bidder(s) shall provide any requested redline edits to the MSA and BAA.
Solution	<p>11. Describe how your solution detects FWA patterns.</p> <p>11a. Explain how your program prioritizes leads by severity of potential fraud to allow for an assessment of overall risk and near perfect results validation to avoid the use of resources in reviewing false-positive results.</p> <p>11b. Confirm that your tool identifies institutional claims and professional claims. Identify billing outside of authorized services.</p> <p>11c. Describe how your system reduces manual staff effort. Please provide examples of time saved at other payers.</p> <p>11d. Describe your standard reporting package and the frequency in which it is communicated to clients.</p> <p>11e. Describe how your solution leverages continuous software enhancements and updates with new emerging fraud schemes to address new edits and rules required by regulatory change and lessons learned from other payers and incorporates trends as they are identified when implemented and in an ongoing manner.</p>
Data	<p>12. Describe how your tool will be/is hosted?</p> <p>12a. Identify the portion of the solution that was derived from publicly available code base.</p>

TOPIC	QUESTION
Data (cont.)	12b. How will authentication and authorization be addressed? 12c. Describe support for development, quality assurance, and user acceptance testing (UAT) environments. 12d. How will HIPAA requirements be met? 12f. If the solution will be hosted by the Alliance, list the required hardware and software.
System Integrations	13 Integrate with other Alliance systems, including RAM's HealthSuite (the Alliance's claims system).
Project Planning and Implementation	14. How and whom do we contact throughout the implementation? What are the operations, training, and transition goals? 14a. What are the communication channels and issue escalation processes? 14b. Describe all project milestones with estimated resource requirements and duration. Please provide estimate resources from bidder's side and estimated resources (hours and type) from the Alliance side for each stage.
Disaster Recovery	15. Please provide your organization's formal business continuity ("BC") and disaster recovery ("DR") program policy and procedures. Have you had to implement either of these policies?
Service Level Agreements ("SLAs") and Performance Guarantees ("PGs")	16. Please describe your standard SLAs regarding software availability, critical and non-critical bug fixes, and Help Desk response times. 16a. Please describe what type of PGs are in place for abstraction and over-reads.
Offshoring	17. Does your organization offshore any obligation of this Survey which requires access, use or disclosure of protected health information ("PHI"), as such term is defined by HIPAA, to any subcontractor that is not located in the United States, or is not subject to the jurisdiction of a court in the United States. Please identify and quantify any offshore resources engaged on behalf of your company. Note: No PHI data may be stored or accessed offshore. Proposals with this organizational structure will be considered non-responsive and will not be evaluated.
Pricing	18. What are the different ways your FWA solution bills? Describe your pricing methodologies for your electronic monitoring system and for your professional (including practitioner services), and also including any expenses. For example, the Alliance would be amenable to a per member per month solution, but needs to understand the calculations, and the Alliance would accept a base program fee with additional hourly professional remediation services but will require a per case estimate or services not exceed.

TOPIC	QUESTION
Pricing (cont.)	Please include any variables and implementation fees. Please provide a budget sheet, which must match the proposed staffing plan.
Value Add	19. Do you provide any value-added services with no charge to the Alliance? Please list any other value-added services or any other services provided.
Miscellaneous	20. Please include any details pertinent to your organizational capabilities and the topics of this RFP.

V. Requested Attachments

In addition to the RFP submission responses, the table below indicates required supplemental attachments. Please include the names of all additional documents returned with your response to this RFP. If there are attachments other than those required below you would like the Alliance to consider, please include them when submitting your proposal. Attachments are not to be used in lieu of answering the questions included in this RFP.

ATTACHMENT TYPE	REQUIRED (Y/N)	NAME OF FILE SUBMITTED
Three (3) to four (4) client references	Y	
SOC 1 Report	Y	
SOC 2 Report	Y	

VI. Submission Instructions

Please submit your responses to this RFP electronically via email to the Alliance Vendor Management Department at vendormgmt@alamedaalliance.org.

Please include the following in the subject line: **Fraud Waste and Abuse Solution RFP Response**.

In order to be considered, all electronic submissions must be received by **4 PM (PST) on Tuesday, January 18, 2022**.

VII. Conflict of Interest

Proposer(s) must be free of any obligations and interests, which might conflict with the interests of the Alliance. Any conflict or potential conflict must be described in the proposal. This statement combined with the prior work performed listed in the proposal along with any additional due diligence review of the proposer's independence deemed appropriate by the Alliance will be used to determine whether the proposer(s) has a potential conflict of interest. This decision is solely the responsibility of the Alliance. By submitting a proposal, the proposer(s) agrees to these terms.