

Request for CalHEERS Development and Operations Services

Draft RFP Comments

ID	General Y/N	Section #	Page #	Req #	Description	Cosmetic Y/N	Reviewer Organization
	Y				Due to time constraints, we are providing comments with respect to a few issues and do not mean to convey any opinion (positive or negative) regarding those provisions we do not address.		The Children's Partnership
	Y				In general, we would like to express our support for the overall approach taken by the RFP, with its expectation of real-time, no-wrong-door service, allowing the consumer to apply, renew, select a plan, and manage coverage in a consumer-friendly manner. There are many specific details that will help ensure a successful, streamlined consumer experience, from the anonymous shopping feature to the plan comparison functions. In addition, we thank you for including this comment opportunity in the process of defining the RFP.		The Children's Partnership
	Y	1.3.2	1-4		We are pleased that California Health and Human Services Agency (CHHS) is integrally involved in the governance and oversight of CalHEERS. Placing Medi-Cal and Healthy Families at the center of the governance structure alongside the Exchange, through representation on the Executive Steering Committee, is essential to creating a fully integrated system across programs. However, there are other places in the document, peppered throughout, that create some confusion about the role of Medi-Cal and Healthy Families, specifically as it relates to the inconsistent use of the term "Exchange Health Services Program." The term is defined to include Medi-Cal and Healthy Families but is sometimes distinguished from Medi-Cal and Healthy Families (such as on page 1-8, discussion of Business Rules). We would urge a scrub of the document to address this inconsistency. Further, we believe it is essential that CHHS' role be clarified through the document to adequately address and strengthen its role within CalHEERS. For instance, in 4.5, page 4-46, the RFP requires the vendor to work with Exchange staff in managing the system, though it should require the vendor to work with Exchange, DHCS, and MRMIB staff.		The Children's Partnership
	Y	1.3.2	1-5		We believe that the Employment Development Department (EDD) should be a partner agency. EDD holds extremely valuable client data that pertains to eligibility and transitions, and is an important part of the fabric of support for Californians who are employed and/or looking to be employed – many of whom could need the programs being offered through CalHEERS, for themselves and/or their dependents.		The Children's Partnership

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	N	1.4.1	1-7		We strongly urge that the RFP specifically require the use of the Enroll UX 2014 design, rather than calling upon the vendor to "design" a user-friendly system. California should take full advantage of the extensive work being done to "design" the Enroll UX system rather than expend resources on the same activity. In adopting the Enroll UX 2014 design, the state will benefit from the most comprehensive, complete effort to create a user-friendly experience. Rather than being tasked to "design" the system, the vendor should be tasked with "customizing" the Enroll UX 2014 design to accommodate state-specific program and policy decisions. We would also recommend including reference to the Enroll UX design in section 4.3.9 (page 4-18 on) as being part and parcel of what is included in "usability".		The Children's Partnership
	N	4.3	4-31		We are concerned by the failure to address non-MAGI Medi-Cal in the business/functional scope, since Healthy Families and Exchange are required to conduct an initial determination of non-MAGI Medi-Cal and provide coverage for those programs pending the final non-MAGI Medi-Cal determination. As such, it is essential that non-MAGI Medi-Cal be integrated with the wider system and done seamlessly. We are pleased by the language being used in 4.3.1, Eligibility and Enrollment, "Other Health Services Programs" (page 4-4) on this point as well as its overall aim, but believe some reference should be made to non-MAGI cases as part of the "one stop shop".		The Children's Partnership
	N	4.3.1	4-1		In laying out the application verification, we would urge revision to clarify that this "verification" function includes both pulling relevant information from available databases at initial application as well as, if required by federal law, verifying information that was provided by the applicant. Specifically, the RFP should denote the need to pull and conduct verification of income from state databases, as well as the federal hub. The ability to conduct a robust income check will be an essential function of CalHEERS.		The Children's Partnership

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	Y	4.3.7			We believe the SHOP design should include a portal that gives the employee the ability to access information of use and interest to him or her regarding their own SHOP coverage and be able to use it to link to their own SHOP account. As relevant, this employee account should be able to link to the Exchange/Exchange Health Service Programs (for themselves as they exit SHOP and/or for their dependents) and connect them with other human services programs.		The Children's Partnership
	N	4.3.7	4-10		Application: The SHOP application should ask the employee to identify any dependents potentially in need of coverage in the Exchange Health Services Programs and, where that is the case, give them the opportunity to authorize sharing information with the EHSP for purposes of facilitating application/enrollment.		The Children's Partnership
	N	4.3.7	4-10		The employee account should provide the functionality for the employee to report problems such as when an employer is not diligently maintaining coverage/protecting their interests.		The Children's Partnership
	N	4.3.7	4-11		Disenrollment: The RFP should include the ability to provide notification to an employee when their employer is taking steps to discontinue SHOP or disenroll the employee and/or their dependents. Such notification should provide the employee with information about their options and provide a link to other coverage options (Exchange/EHSP).		The Children's Partnership
	N	4.3.7	4-14		Consumer Assistance: We support the fact that employer and employee are defined as "consumers" in this section and in 4.6.3.1. But, as drafted, the RFP is unclear what role the employee will actually play and how they will "use" CalHEERS. In fact, we believe the process needs to give the employee the option of a more active role in the application/enrollment/appeals process (as mentioned in comments, above). To facilitate their role, the system should include an employee-accessible account, as distinct from the employer's employee account.		The Children's Partnership
	Y	4.3.8	4-15		Given that MEDS is so critical to the whole process (enabling real-time data retrieval and verification), the RFP needs to be clear concerning what portions of MEDS functionality (as listed in 4.3.8.1) are essential for delivery in July and October of 2013, in advance of the initial start date. While it makes sense to allow MEDS integration to occur over time, that evolution must be timed in a way that supports full capacity of CalHEERS process by 1/1/2014. The MEDS revamp could be separated from this RFP and completed as part of a different contract, but it is an essential part of the modernization of California's enrollment process.		The Children's Partnership

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	N	4.4.3.6	4-32		We support this specific requirement that the vendor shall evaluate UX2014 and adopt aspects that will best meet needs of standards of usability and other California requirements, and inform the Exchange of its decision process and how it will deliver a first-class user experience.		The Children's Partnership
	N	4.4.7	4-37		We recommend that the RFP specify that the vendor will build a connection to the California Child Support Automation System, because it is a valuable resource for up-to-date income information.		The Children's Partnership
	Y	4.4.10	4-44		The RFP should establish performance criteria, for pre-implementation and ongoing evaluation and monitoring of the functioning of the CalHEERS. It is not adequate to "require" the vendor to "design, develop, and implement" the system, and to require them to "provide performance metrics" (page 4-44). In cross-referencing Attachment 3-Requirements, the requirements pertaining to performance metrics should be spelled out in a separate tab, to be clearly identified. Furthermore, the requirements themselves do not give enough definition to the performance metrics, as currently written. For instance, the vendor is left in control of defining, implementing, and reporting a "process improvement program" to evaluate CalHEERS (as in PM 18). In contrast, the specificity in the RFP of reporting metrics is useful and comprehensive, while still allowing for modification as federal and state policy is developed (page 4-45).		The Children's Partnership
	Y	4.6.1.3.1	4-56		Just as the stakeholder role is specifically mentioned with reference to developing a "conversion plan", the stakeholder role in developing, designing, testing, and monitoring the system should be specifically stated in other parts of the RFP to put the vendor on notice as to this important aspect of the CalHEER process, pursuant to AB 1296.		The Children's Partnership
	N	4.9	4-75		We are concerned about the inclusion of the "Alternate Approach", given that it would require substantial investment in duplicative existing systems and, as a result, is unlikely to bring in enhanced federal matching funds. In that description, a reference is made to "the Healthy Families real-time interface". It is questionable whether Healthy Families has such functionality in a manner that would support the functions listed. Even more worrisome is the absence of such "real-time" language regarding the SAWS and MAXe2 systems. If the alternative approach is used, real-time interfaces must be developed between all nodes and the CalHEERS rules engine, to achieve an integrated, real-time system.		The Children's Partnership

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	N	5.5.2.6	5-8		We support the requirement that the vendor provide a first –class user experience through the CalHEERS web portal based on its evaluation of UX2014 and other similar interfaces. In order to ensure a first-class user experience, the vendor should also be required to utilize the UX 2014 design or offer a best-in-class equivalent design that can demonstrate the following: (1)The design is guided by in-depth consumer research that reflects an understanding of the needs, preferences and desires of the target audience. (2)The design, its flow, page layouts, use of typography, color palettes, graphic style, and iconography, has been informed by extensive user evaluation and stakeholder feedback and is in conformance with Affordable Care Act statutory requirements and. (3)The design represents the best use of modern web design techniques employed by leading service and retail companies intended to create a first-class user experience, such as effective hierarchies and contrast, bold touch points, context sensitive information, scalable elements, functional differentiation, object oriented containers, etc. (4)The design is extensible, can support multiple threshold languages, has been tested for ADA and Section 508 compliance by external accessibility experts, and is easily customizable for state policy and programmatic choices.		The Children's Partnership