

GOVERNMENT OF PUERTO RICO

ADMINISTRACIÓN DE
SEGUROS DE SALUD (ASES)

PUERTO RICO HEALTH
INSURANCE ADMINISTRATION



CONTACT CENTER OF THE ENROLLMENT
COUNSELOR PROGRAM

Government Health Plan

REQUEST FOR INFORMATION

RFI #CCEC-2023

Issue Date: March 8, 2023

First Amendment Issue Date: March 22, 2023

Response Due Date: April 4, 2023, on or before 6:00 PM

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1. BACKGROUND INFORMATION

1.1. Government Health Plan -

- 1.1.1 Pursuant to Title XIX of the Federal Social Security Act, codified as 42 USC 1396 et seq. (“the Social Security Act”), and Act No. 72 of September 7, 1993, of the Laws of Puerto Rico (“Act 72”), as amended, a comprehensive program of medical assistance exists in Puerto Rico. The Puerto Rico Health Department (“the Health Department” or PRHD) is the single State agency designated to administer medical assistance in Puerto Rico under Title XIX of the Social Security Act of 1935, as amended, and is charged with ensuring the appropriate delivery of health care services under the Medicaid and the Children’s Health Insurance Program (“CHIP”) in Puerto Rico. The Puerto Rico Health Insurance Administration (“PRHIA” or “Administración de Seguros de Salud” or “ASES”, for its Spanish acronym) manages these programs pursuant to a delegation of authority.
- 1.1.2 ASES is a public corporation with autonomy to develop and execute the terms of its organic law - Act Number 72. As part of its responsibilities, ASES contracts with Managed Care Organizations (MCOs) to provide health services to persons who are eligible for Medicaid and other Enrollees, as established by applicable law. Pursuant to this statutory provision, ASES has established a managed care program under the medical assistance program, known as “Government Health Plan”, GHP,” or “Plan Vital”. The GHP is administered and available island-wide in Puerto Rico.
- 1.1.3 Under Plan Vital, Enrollees are able to select an MCO that best meets their needs. Choice counseling functions are a key component of the GHP program and are aimed at ensuring that potential enrollees and active enrollees have the resources available to receive timely, unbiased, and appropriate information about their MCO options in order to make an informed decision about an MCO best suited to address their needs.

1.2 Enrollment Counselor Program -

- 1.2.1 An Enrollment Counselor, as defined¹ at 42 CFR 438.810(a)-(c), is an entity independent of any MCO or provider organized for the provision of choice counseling, and for purposes of this Request for Information (“RFI”), some enrollment activities. This means that the entity must not have any ongoing contracts with an MCO. See Section 2.5.3 of this RFI.

¹ For definition of other terms used in this RFI, see Appendix A.

1.2.2 Choice counseling is a required element of the federal beneficiary support system. A general description of the required functions of the Enrollment Counselor is as follows:

- Provide choice counseling for all potential enrollees and enrollees, except the Platino, Foster Children and Domestic Abuse Victims populations², (accessible in multiple ways including call center, internet, web chat³, mobile app, and via auxiliary aids and services when requested) who disenroll from their current MCO.
- Provide assistance in understanding the managed care delivery system under the GHP.
- Assist in enrollment activities, which may include taking enrollments by phone, or through electronic methods of communication.

*Note: The Medicaid Program has the sole authority to determine eligibility for the GHP, unless otherwise established by Act 72 of 1993.

1.2.3 The Enrollment Counselor provides essential choice counseling functions to support active enrollees during their annual open enrollment period and ongoing for newly eligible individuals. For a general overview of the Enrollment Process, see Appendix B of this RFI.

1.2.4 The Enrollment Counselor uses a Web Based Application and Provider Search Portal for conducting its services. See Appendix C for more technical information.

1.2.5 As of February 28, 2023, GHP approximately serves 1,298,116 beneficiaries. The Commonwealth population includes low-income individuals who do not otherwise qualify for Medicaid and certain Commonwealth employees who have selected Plan Vital as their health plan.

1.2.6 On August 29, 2022, ASES awarded RFP #MCO-2022 for the selection of the MCOs that provide services to Plan Vital. Considering that the Readiness Review process was being conducted during the period traditionally assigned for Plan Vital's Annual Open Enrollment Period, it was postponed for January

² The Foster Care Population and Domestic Violence Population are Auto Enrolled in one MCO and are not eligible to enroll into another MCO. When an Enrollee ceases to be part of the Domestic Violence or Foster Care Populations but continues to be an Eligible Person, it will be considered a for cause reason for which the Enrollee may select a new MCO.

³ The live chat functionality occurs on real time and operates during regular working hours. It currently operates with the Nice-In-Contact software. The user can Access it through the website <https://planvital.org>.

1, 2023, through March 31, 2023. The current call, communications, and transaction volume for this OEP is provided in Appendix D.

- 1.2.7 The 2024 Annual Open Enrollment Period is expected to be held on January 1, 2024 – February 15, 2024.

2. RFI GENERAL INFORMATION

2.1 Purpose of the RFI

ASES seeks to gather information through this RFI concerning professional services provider’s capabilities, pricing, and the general options available to it regarding its current and future contact center and enrollment counselor service needs for the Enrollment Counselor Program of the Government Health Plan.

2.2 Current Services

ASES currently operates, through Truenorth Corporation, an island wide contact center to provide enrollment choice counseling functions to the beneficiaries of Plan Vital. The Enrollment Counselor services are provided through various channels (call center, webpage (including chat functionality), mobile app). The Enrollment Counselor Program runs on a Web Based Application that gives support to all enrollment functions and is linked to Plan Vital’s web portal, mobile app, and a Provider Search Portal. Maintenance to all these platforms and portals is currently provided by Truenorth Corporation. See, Appendix C of this RFI for more technical information.

2.3 Title & Number of the RFI

This RFI is titled Contact Center for Enrollment Counselor Program for Plan Vital, and its reference number is RFI #CCEC 2023. It is required to refer to or include this number on all correspondence and documentation relating to the RFI.

2.4 Warnings

- 2.4.1 This RFI is being issued **solely** for information and planning purposes. **It is not a request for proposals (RFP) nor a promise to issue an RFP in the future and should not be construed as such.** The Puerto Rico Health Insurance Administration (PRHIA or ASES, for its Spanish acronym) makes no representation or guarantee that it will:

2.4.1.1 Issue an RFP for Call/Contact Center and/or Enrollment Counselor Services for the GHP following the issuance of this RFI or;

2.4.1.2 Award a contract to a Respondent to this RFI for the operation of the Call/Contact Center and/or Enrollment Counselor Services for the GHP.

2.4.2 Incurring Costs: ASES will not pay for any information or administrative costs incurred in response to this RFI. All costs or expenses incurred by a Respondent in preparing, transmitting, or presenting any Response or other material submitted in response to this RFI shall be borne solely by the Respondent.

2.5 Who Should respond

This RFI is seeking input from interested parties who:

2.5.1 Have experience in the implementation, management, and provision of services similar to those included in the scope of this RFI for a volume of beneficiaries similar to Plan Vital.

2.5.2 Do not have any interest that may or could represent an actual, potential or future Conflict of Interest, in relation to the award, execution and performance of a contract with ASES, nor with the grantors, personnel and ASES's public service officials, its Board of Directors, or any other personnel responsible for the evaluation or adjudication of a contract, their family members or persons with whom they live, up to a fourth-degree consanguinity or a second-degree affinity.

2.5.3 Comply with the following federal mandatory requirements for all Enrollment Counselors:

- **Independence.** In accordance with 42 CFR 438.810, the Enrollment Counselor and any subcontractor shall be independent of any MCO or health care provider in Puerto Rico. The Enrollment Counselor and any subcontractor shall not be an MCO or a health care provider in Puerto Rico, shall not be owned or controlled by an MCO or a health care provider in Puerto Rico, and shall not own or control an MCO or health care provider in Puerto Rico. Note that the independence and conflict of interest requirements apply to any health care provider, regardless of participation in federal health care programs.
- **Conflict of Interest Safeguards.** In accordance with 42 CFR 438.810, the Enrollment Counselor and any subcontractor shall be free from conflict of

interest. The Enrollment Counselor and any subcontractor shall ensure that no person who is an owner, employee, consultant, or has a contract with the Enrollment Counselor or subcontractor:

- Has any direct or indirect financial interest with any MCO, entity, or health care provider that furnishes health care services in Puerto Rico (including any on-going contract or agreement with an MCO), or
- Has been excluded from participation under Title XVII (Medicare) or XIX (Medicaid) of the Social Security Act, debarred by any federal agency, or is currently or has been subject to civil money penalties under the Social Security Act.

2.5.4 Comply or are willing to comply with all required certifications, documents, and requirements to become a contractor of the federal and state government (*e.g.*, RUP⁴, System for Award Management’s Registration (SAM)).

2.6 RFI Contact

2.6.1 ASES has designated a Contact person who is responsible for the conduct and administration of this process. Any inquiries or requests regarding this process shall be submitted only to the Contact, in writing, and by email.

2.6.2 Respondents may only contact the Contact regarding this process. Other Government of Puerto Rico employees, consultants, and agents do not have the authority to respond on behalf of ASES. ASES shall not assume responsibility for any answers or clarifications provided by other ASES staff, or by any other Government of Puerto Rico employee or agent. A Respondent that contacts another Government of Puerto Rico employee or agent in violation of this requirement will be excluded from further participation in this process.

2.6.3 The decisions notified by the Contact on any matter regarding this process shall be final.

2.6.4 Contact information for this RFI process is as follows:

Martha L. Vélez González, Esq.
Urb. Caribe Sector El Cinco
1549 Calle Alda

⁴ Certificate of Registration in the Puerto Rico General Services Administration’s (“Administración de Servicios Generales” or “ASG” for its Spanish acronym) Single Registry of Professional Service Providers (RUP for its Spanish acronym).

3. SCOPE OF WORK OF THE ENROLLMENT COUNSELOR CONTACT CENTER

3.1 General Provisions:

- 3.1.1 The Enrollment Counselor provides to ASES Contact Center Choice Counseling Services as well as other tasks associated with the functions of an Enrollment Counselor.
- 3.1.2 The Enrollment Counselor maintains the staff, organizational, and administrative capacity, and capabilities necessary to carry out all the duties and responsibilities stated under this RFI.
- 3.1.3 All documentation, including policies and procedures that the Enrollment Counselor is required to maintain must be submitted to ASES in English.
- 3.1.4 All staff providing direct services to enrollees must be located in Puerto Rico and be properly trained.

3.2 Contact Center Services:

- 3.2.1 The Enrollment Counselor shall operate a Contact Center (a toll-free telephone help line to provide phone-based Choice Counseling) equipped with state-of-the-art caller identification, real time monitoring tools to ensure quality standards, automatic call distribution equipment capable of handling expected call volume, and access to interpreter service for Potential Enrollees and Enrollees whose primary language is Spanish and English or a Prevalent Non-English Language (other than Spanish). ASES provides the Enrollment Counselor the portability of ASES's toll free numbers (1-800-981-2737 & 1-833-253-7721) to be used during the term of the Contract. Upon the termination of the Contract or whenever ASES so requests it, the numbers and their portability will be immediately returned to ASES for its exclusive use. If during the term of the Contract the Enrollment Counselor uses another regular and/or toll-free number to provide services, the number and its portability will be transferred to ASES for its exclusive use and become its property. All costs accrued, due, and owing on this numbers, including but not limited to, any taxes, penalties or fines must be the sole obligation of the Enrollment Counselor.
- 3.2.2 The Enrollment Counselor shall operate a Contact Center operation in Puerto Rico with staffing and infrastructure capacity to process the anticipated volume of calls as well as chat interactions and mobile app messaging, collectively referred herein after as "communications". During Annual Open Enrollment periods (forty-five (45) calendar days expected to be in year 2024 and subsequently from January 1 through February 15), ASES expects the volume of communications to be higher than the

volume of communications during “steady state” operations. Please refer to the Utilization Data for information on experience. Note that in previous years, the Annual Open Enrollment has generally been held from November 1 to December 15. Also note that the current Annual Open Enrollment was extended for a period of ninety (90) days because of the new MCO contract. See Appendix D of this RFI.

- 3.2.3 Contact Center Choice Counselors will use flow chart protocols and scripts developed by the Enrollment Counselor and approved by ASES, and any others provided by ASES for this purpose. The Enrollment Counselor shall have a policy and procedure to ensure consistent and high-quality responses are provided to each person who contacts the Contact Center.

3.2.4 Required Functionality of the Contact Center:

3.2.4.1 IVR System:

- 3.2.4.1.1 The Contact Center must provide an IVR System. During Business Hours, the IVR System must have the capability to offer callers the option at each prompt to speak with a Choice Counselor rather than continue through additional prompts. The IVR must be available twenty-four (24) hours a day, seven (7) days a week.
- 3.2.4.1.2 The Contact Center must use an automated phone triage system, approved by ASES, to redirect callers with questions unrelated to the Enrollment Counselor’s responsibilities to other entities (i.e., Puerto Rico Medicaid Office, ASES, or MCO), as appropriate.
- 3.2.4.1.4 The Contact Center must provide an After-Hours message advising callers of hours of operation and the option to connect directly to the IVR System or to a voicemail box without disconnecting.
- 3.2.4.2 The Contact Center will provide a Call Back call within twenty-four (24) hours of the Enrollee voice mail message, if during regular working hours, or within one (1) Business Day, if after working hours. The same service level agreement (SLA) shall apply to mobile app messages received.
- 3.2.4.3 The Contact Center shall have the technological infrastructure to handle expected number of call-based counseling sessions. Minimally, this would include voice over internet protocol (VOIP) and call-handling software with a sophisticated queue management, monitoring and reporting capabilities. Callers must receive notification, which informs the

beneficiary or authorized representative that “call/chat monitoring may occur.”

- 3.2.4.4 The Contact Center’s technological infrastructure shall be scalable to allow the Choice Counselors to handle both expected and unanticipated surges in activity.
- 3.2.4.5 The Contact Center must establish, operate, monitor, and support an automated call distribution system that must facilitate the most efficient use of Enrollment Counselor resources, supports all standards, services, requirements, compliance and key performance indicators (KPIs) required by ASES, and must include but not be limited to:
 - 3.2.4.5.1 A toll-free telephone help link that has the capacity to process a large volume of calls daily during peak time and to adjust to increased call volume.
 - 3.2.4.5.2 A call pick-up system that places the call/communication in a queue.
 - 3.2.4.5.3 The ability to measure and report daily the average speed of answer by a live Choice Counselor (by type of call/communication form and for all communications in the aggregate), average call/chat wait times, percentage of calls to the Contact Center receiving a busy signal, Blocked Calls, Abandoned Calls/Chats (by type of communication and for all communications in the aggregate), average time to abandon. Also, the ability to perform and report a daily analysis of the quantity, length and types of calls/communications received.
 - 3.2.4.5.4 Informational messages advising callers as to expected wait times while on hold to speak to a live Choice Counselor. Enrollment Counselor may also need to, upon ASES’ request, deliver educational or other messages to improve the Enrollee experience while on hold.
 - 3.2.4.5.5 The availability of oral translation and TTY/TDD services so that Potential Enrollees and Enrollees in need of such services and their authorized representatives will not have to disconnect to access these services. Ensure the Contact Center has sufficient technology and training to handle Deaf, hard of hearing and Deaf-Blind callers.

- 3.2.4.5.6 The ability to record and retain all incoming and outgoing calls for quality assurance purposes for a period of no less than twelve (12) months.
 - 3.2.4.5.7 Ability to transfer calls to other telephone lines without diminishing in-bound or out-bound call capacity.
 - 3.2.4.5.8 The ability to monitor calls/communications from a remote secure location by a third party, including ASES' staff with ASES having ownership and control of these recordings.
 - 3.2.4.5.9 The Contact Center operations must be physically separated from the contractor's other clients/accounts.
- 3.2.5 Choice Counselors and other staff must be able to route phone calls, mobile app messages and chat interactions that cannot be resolved by the agent to a supervisor or specialist. Accordingly, the Contact Center shall maintain a process for the handling of problematic calls/communications in accordance with a standard escalation policy that may be subject to review and approval by ASES.

3.2.6 **Performance Standards:**

The Contact Center shall meet the following performance standards, which shall be measured on a monthly basis, as applicable per metric; failure to meet the performance metrics may result in financial penalties.

- 3.2.6.1 Answer Rate – Ninety five percent (95%) of calls and chats are answered by a live voice.
- 3.2.6.2 Wait/hold Time – Wait/hold time after initial IVR selection to speak to a live operator and an answer by a live operator shall not queue does not exceed two (2) minutes;
- 3.2.6.3 Abandoned Calls – Rate of less than or equal to five percent (5%) on a monthly basis.
- 3.2.6.4 Follow-Up Calls – One hundred percent (100%) of voicemails shall be returned within one (1) Business Day.
- 3.2.6.5 Service Level- Equal to or greater than 80% of calls answered within thirty (30) seconds
- 3.2.6.6 Contact Center Outage – less than 2% of time during the Contact Center's Business Hours that the Contact Center is unable to accept inbound calls.

- 3.2.6.7 First Contact Resolution – 95% of calls, mobile app messages and chats must be resolved by Contact Center during the first interaction with the Enrollee.
- 3.2.6.8 80% of chats received must be responded to by an agent in less than 30 seconds.

NOTE: The Contact Center must have the upgrade capability to simultaneously handle a higher than normal volume of calls during Annual Open Enrollment Period or in the event of an MCO termination or significant adverse change in an MCO provider network (e.g., loss of a large clinical or hospital system).

3.2.7 Member Experience and Satisfaction Survey

One of ASES's goals is understanding and improving the customer experience. Capturing customer feedback and acting to review and potentially modify policy or processes from that feedback is critical to improving the customer experience. Accordingly, the Enrollment Counselor must:

- 3.2.7.1 Direct calls to the Program's satisfaction survey for the Contact Center which measures responsiveness, knowledge, timeliness, politeness, and overall quality of service. This survey must be offered as optional for all Potential Enrollees and Enrollees.
- 3.2.7.2 Use the results of these surveys to identify and resolve potential concerns early.
- 3.2.7.3 Results of surveys must be transmitted to and shared with ASES without any modifications for ASES's own independent review and audit.
- 3.2.7.4 The Enrollment Counselor will provide beneficiaries assistance in completing forms and other procedural steps related to a complaint, including but not limited, to auxiliary aids and services upon request, such as providing interpreter services and toll-free numbers with adequate TTY/TDD and interpreter capability and assistive listening devices, or referring beneficiary to Ombudsman program for assistance if desired.
- 3.2.7.5 The Enrollment Counselor shall acknowledge, in writing, receipt of each complaint within five (5) calendar days of receipt.
- 3.2.7.6 The Enrollment Counselor will send written notices related to complaint via mail or, with beneficiary and/or authorized representative consent, via email.

- 3.2.7.7 The Enrollment Counselor shall provide written notice of resolution of the complaint to the beneficiary and/or authorized representative no later than thirty (30) calendar days of receipt.
- 3.2.7.8 The Enrollment Counselor shall record all complaints in the System tied to the beneficiary for whom the complaint is made and report to ASES upon request.
- 3.2.7.9 The Enrollment Counselor shall maintain a record of all complaints received and report such information to ASES upon request or when the nature of the complaint warrants that it be promptly divulged to ASES.

3.2.8 Language and Information Accessibility:

- 3.2.8.1 The Enrollment Counselor shall provide oral interpreter services to any Enrollee or Potential Enrollee who speaks any language other than English or Spanish as his or her primary language, regardless of whether the Enrollee or Potential Enrollee speaks a language that meets the threshold of a Prevalent Non-English Language. This also includes the use of auxiliary aids and services such as TTY/TDD. The Enrollment Counselor is required to notify the Enrollees of the availability of oral interpretation services and to inform them of how to access oral interpretation services. If oral interpretation services are required in order to provide Choice Counseling to a Potential Enrollee or Enrollee who does not speak either English or Spanish, the Enrollment Counselor must, at its own cost, make such services available in a third language, in compliance with 42 CFR 438.10(d)(4).
- 3.2.8.2 All written materials shall be worded such that they are understandable to a person who reads at the fourth (4th) grade level and must be clearly legible with a minimum font of size twelve (12) point.

3.2.9 Systems Specifications and/or Requirements

- 3.2.9.1 The Contact Center staff must be able to access the Web Based Application, Provider Search Portal and any other working tool or platform to perform its work via the web via Virtual Private Network (VPN).
- 3.2.9.2 All network connections of data interface between the Enrollment Counselor, Web Based App/Provider Search Portal and ASES must include the following minimum-security features:
 - 3.2.9.2.1 To the extent Enrollment Counselor has access to ASES' internal networks, the network from which the Enrollment Counselor will access the internal network of ASES will be

isolated from any other network in the Enrollment Counselor's facilities, especially any public networks that may exist;

- 3.2.9.2.2 To the extent Enrollment Counselor has access to ASES' internal networks, equipment assigned to staff dedicated to this project and that will be connected to the internal network of ASES may not have installed any software that has not been previously authorized by ASES, and only that software that is strictly necessary for the provision of services will be used. Installing new software or changes in the existing configuration must be duly authorized by ASES.
- 3.2.9.2.3 Provide authentication, authorization and "accounting" through a firewall to all incoming connections.
- 3.2.9.2.4 Implement any additional security measures that ASES may require for the protection of information and that are reasonable in light of the requirements necessary for the proper provision of the Enrollment Counselor services.

3.2.10 Equipment

The Enrollment Counselor must provide the necessary furniture (cubicles, shelves, chairs, desks, etc.) and computer equipment (computers, printers, etc.), telephones and all other equipment and facilities needed for the Contact Center. Individually equipped units shall be referred to as a workstation, service station or seat.

3.2.11 Staffing and Key Personnel

- 3.2.11.1 Have sufficient qualified, experienced, and knowledgeable staff and personnel to efficiently administer program requirements and provide all required direct and indirect services.
- 3.2.11.2 The Enrollment Counselor must provide at least the following Key Personnel to perform, at a minimum, the duties established in Appendix E of this RFI.
 - Account Manager
 - Contact Center Manager
 - Contact Center Choice Counselors
- 3.2.11.3 Maintain the needed staffing levels for Contact Center Choice Counselors to comply with the applicable service metrics established in this RFI.

3.2.11.4 Contact Center Choice Counselors must be properly trained, demonstrate competency, and be able to communicate effectively with Potential Enrollees and Enrollees.

3.2.11.5 Employ a sufficient number of Contact Center Choice Counselors who are fluent in Spanish, proficient in English, who are culturally sensitive and able to handle inquiries in both Spanish and English.

3.2.11.6 Contact Center employees must have Puerto Rico Negative Criminal Record certificate and be screened through the OIG exclusion lists.

Operating Hours: Unless otherwise specified by ASES, the contact center staff shall be available Monday – Friday 8:00 AM until 6:00 pm.

3.2.11.7 The Enrollment Counselor must have in place a detailed staffing contingency plan for handling sudden and unexpected increases in enrollment, MCO/PMG/PCP changes and call/communication volumes with a description on how the plan will be implemented and coordinated with ASES.

3.2.12 **Training**

The Enrollment Counselor shall conduct training for the staff involved in the provision of direct services to ensure appropriate functioning and to ensure that staff and personnel understand the GHP program, are trained in the provision of Choice Counseling activities in a culturally competent manner and are aware of all programmatic changes that may occur. Training shall include:

3.2.12.1 Customer service best practice and phone etiquette, awareness of and sensitivity to the needs of persons who may be disadvantaged by income, disability and/or illiteracy, or who may be non-Spanish speaking, use of bilingual interpreters, TTY machines, and other communication devices for the disabled; HIPAA and other data security and privacy protocols;

3.2.12.2 The use of the Web Based Application and Provider Search Portal for Choice Counselors and pertinent staff;

NOTE: The Enrollment Counselor shall submit a staff training plan to ASES for review and written approval and shall update it annually. All training content related to the GHP and Enrollment Process will be developed and provided by ASES on a “train the trainer” basis. The Enrollment Counselor must use the approved training content to provide re-education and mitigation activities to Choice Counselors and other supporting staff, on an ongoing basis. The Enrollment Counselor must ensure that all staff complete all applicable training and pass applicable test(s) before providing direct services to the beneficiaries.

3.2.13 Business Continuity Plan

The Enrollment Counselor must have in place and maintain a business continuity plan that must include disaster recovery processes, specifically how the Enrollment Counselor will restore contact center operations within twenty-four (24) hours and resume all remaining operations within three (3) working days following a natural or manmade disaster. The plan must meet recognized industry standards for security and disaster recovery requirements. The plan must identify disaster situations (e.g., fire, flood, terrorist event, hurricanes/tornadoes), which could result in a major failure. At a minimum, it must include for a redundant telephone system to operate in the event of line trouble or other problems so that access to the contact center by telephone is not disrupted. The Enrollment Counselor must notify ASES each time the business continuity plan is activated within two (2) hours of the event.

3.2.14 Other Responsibilities

3.2.14.1 The Enrollment Counselor shall properly monitor and mitigate performance issues of Choice Counselors on an ongoing basis.

3.2.14.2 The Enrollment Counselor shall provide the administrative support to Choice Counselors, Account/Contact Center Manager and Supervisors, and any other personnel, to perform their corresponding duties and responsibilities to properly provide the required services.

3.2.14.3 **Reporting:**

3.2.14.3.1 The Enrollment Counselor shall maintain proper records and evidence of the activities and tasks performed by the Choice Counselors, Account and Contact Center Manager and other staff for the period of time to be established by ASES. At a minimum the records must include any and all reports required by ASES, logs of orientations performed daily, attendance sheets to training sessions, regular attendance sheets of all staff involved in the provision of services.

3.2.14.3.2 The Enrollment Counselor must submit all reports expressly mentioned in Appendix F, as well as any additional report, data, documentation or information that ASES or CMS may require it to submit from time to time, to measure performance and quality of services as well as to obtain relevant information necessary for the proper operation of the GHP program.

3.2.14.4 The Enrollment Counselor’s operations shall be HIPAA compliant and adhere to all applicable privacy and security policies required by ASES.

3.2.14.5 The Enrollment Counselor shall have adequate procedures for comprehensive data security, records retention and system refreshes.

3.2.14.6 Enrollment Counselor must inform ASES of any situation that may affect the provision of services Immediately after incurring in the knowledge that such situation exists or may exist.

3.2.14.7 Enrollment Counselor shall have written policies and procedures regarding the rights of Enrollees and shall comply with any applicable Federal and Puerto Rico laws and regulations that pertain to Enrollee rights, including those set forth in 42 CFR 438.100, and in the Puerto Rico Patient’s Bill of Rights Act 194 of August 25, 2000; the Puerto Rico Mental Health Law Act 408 of October 2, 2000, as amended and implemented; and Law 77 of July 24, 2013 which created the Office of the Patient Advocate.

3.2.14.4 Have in place the following insurance policies:

3.2.14.4.1 Workers’ Compensation Insurance to insure the statutory limits established by the law of Puerto Rico and Employer’s Liability Insurance with the following limits:

1. Bodily injury by accident: five hundred thousand dollars (\$500,000) each accident;
2. Bodily injury by disease: five hundred thousand dollars (\$500,000) each employee; and
3. One million dollars (\$1,000,000) policy limits.

3.2.14.4.2 Commercial general liability policy(ies) as follows:

1. Combined single limits Bodily Injury and Property Damage of one million dollars (\$1,000,000) per occurrence and in the aggregate including personal and advertising injury and contractual liability; and
2. On an “occurrence” basis.

3.2.14.4.3 Commercial auto liability insurance with limits of \$1,000,000 and the following forms: Non-Owned Autos and Hired Autos.

- 3.2.14.4.4 Professional liability insurance with limits not less than \$5,000,000.
- 3.2.14.4.5 Excess liability insurance respect to the commercial general liability policy described above, in an umbrella form and on an occurrence basis with limits of at least \$1,000,000 per occurrence and in the aggregate.
- 3.2.14.4.6 Cyber Security Liability Insurance with limits of at least \$5,000,000.00.
- 3.2.14.4.7 Electronic Data Processes Error and Omissions Insurance with limits of at least \$5,000,000.00 and a Miscellaneous Error & Omissions Insurance with limits of at least \$5,000,000

4 GENERAL CONDITIONS GOVERNING THIS RFI

4.1 Schedule of Events

The information in Table 1 represents ASES’ best estimate of the schedule that will be followed. Unless stated otherwise, items will be due at 6:00 PM (Atlantic Time) on the dates specified below.

TABLE 1

Action	Responsible Party	Date
1. Issuance of RFI	ASES	March 8, 2023
2. Written questions	Respondents	March 15, 2023, at 11:59 PM (AST)
3. Publishing of responses to written questions	ASES	March 22, 2023
4. Request access to ASES’ document repository	Respondent	No later than 11:59 PM (AST) March 31, 2023
5. Submission of Responses	Respondents	No later than 6:00 PM (AST) on April 4, 2023
NOTE: ASES reserves the right to request additional/clarification from Respondents at any time during the process.		

4.2 Explanation of Events

4.2.1 Written questions regarding RFI

Potential Respondents may submit a maximum of fifteen (15) written questions as to the intent or clarity of this RFI. Respondents shall submit all questions in writing by email to the RFI Contact using the Questions and Answers Template in Appendix G of this RFI. Respondents shall submit all questions in writing by a **nonencrypted email** to the RFI's Contact. ASES will not accept questions and issues submitted by means other than email. The email message must contain the following as the subject line:

Question/Clarifications: (Respondent's Name)

Questions must be received by **11:59 PM (AST) March 15, 2023**. ASES reserves the right to disregard any questions that have not been submitted during the proper Q&A period.

Questions shall be clearly labeled and shall cite the Section(s) in this RFI or other document that forms the basis of the question. Questions in excess of the limit herein stated, will not be considered. No compound or multi-part questions are allowed. If submitted, each part of the compound or multi-part question will count as one (1) of the fifteen (15) questions allowed. ASES will not answer more than fifteen (15) questions per Respondent.

4.2.2 Publishing Responses to Written Questions/RFI Amendments

Written responses to written questions and any RFI amendments will be made available to all Potential Respondents on **March 22, 2023**, by posting them to the ASES' website <https://www.asespr.org/> under the "Avisos Públicos" tab beneath the heading "Comunicados".

ASES shall make every effort to provide answers as close to the deadline (March 22, 2023) as possible. ASES reserves the right to determine, at its sole discretion, appropriate and adequate responses to written comments, questions, and requests for clarification. ASES' official responses and other official communications pursuant to this RFI shall constitute an amendment or supplement of this RFI.

4.2.3 Access to ASES' document repository

To receive access on a timely basis and guarantee to have sufficient time to upload the Response, no later than 11:59 PM (AST) on March 31, 2023, the Respondent should request the RFI Contact, by email, the necessary credentials to access ASES' document repository, hereinafter referred to as "Secure Site" or "ShareFile", where Responses must be uploaded and submitted.

Respondents are encouraged to promptly request this access in order to timely receive the username and password to access the secure site. If a Respondent does not receive a username and password within two (2) business days from the date of submission of their request, the Respondent may contact the RFI Contact.

4.2.4 Submission of Response

Responses are due at 6:00 PM (AST), April 4, 2023. Respondents are required to submit only one (1) Response in response to this RFI. The entire Response must be uploaded onto the secure site with the unique password and username given to the Respondent. The Respondent must place the Response in the appropriate folders with the Respondent's name on the secure site.

The Respondent shall not distribute the Response to any entity not specified in this RFI, nor shall the Respondent share its Response with other potential Respondents.

4.3 **General Instructions**

4.3.1 Basis for Response

Only information included in this RFI, and the information supplied by ASES in writing through the RFI Contact in the form of questions and answers should be used as the basis for the preparation of Respondents' submission.

4.3.2 Amended Responses

Responses may be amended prior to the submission Response deadline. If amended, Response shall be resubmitted by Respondent in its entirety. Any previous submission will be discarded and ASES will only evaluate the amended/revised Response.

4.3.3 Disclosure of Response Contents

ASES is a government entity, and its records are public records. Nonetheless, due regard will be given to the protection of proprietary or confidential information contained in all RFI responses received. Hence, all Responses and documents pertaining to this process will be open to the public, except for the material that has been duly designated as proprietary or confidential by the Respondent.

Proprietary or confidential data shall be readily separable from the Response to facilitate public inspection of the non-confidential portion of the Response. Therefore, if the Respondent wishes to preserve the confidentiality of any part of its RFI response, Respondent must submit one (1) copy of the full Response with proposed confidential information redacted. This redacted copy must tell the general nature of the material removed and shall retain as much of the Response as possible. **Blanket labeling of the entire document as "confidential" or "proprietary," and/or mere labelling of a document as confidential or proprietary will not suffice and will not be considered a redacted document.**

In a separate attachment, Respondent shall supply a listing of the provisions identified by Section/subsection number for which it seeks confidential treatment and identify the statutory basis or bases under federal law and/or Puerto Rico Law, including a detailed justification for exempting the information from public disclosure. A convincing explanation and rationale to justify each exemption must accompany the response. The rationale and explanation must be stated in terms of the reasons the materials are legally exempt from release. ASES has no obligation to initiate, prosecute or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information that is sought. The Respondent has the burden of establishing the availability of any applicable legal exemption in any proceeding where it is an issue.

Confidential data is normally restricted to confidential financial information concerning the Respondent's organization and data that qualifies as a trade secret in accordance with the Uniform Trade Secrets Act and Act #80 of June 3, 2011, as amended, (known as "Industrial and Trade Secret Protection Act of Puerto Rico"). **The price of products offered, or the cost of services proposed shall not be designated nor considered as proprietary or confidential information. Hence, it will be fully disclosed to the public.**

If a request is received for disclosure of data that a Respondent has marked confidential in accordance with the rules of this RFI, the RFI Contact shall examine the Respondent's confidentiality requests and issue a written Determination that specifies which portions of the Response may be disclosed. Unless the Respondent takes legal action to prevent the disclosure, the disclosure of the nonconfidential portions of the Response will be so disclosed. The Response shall be open to public inspection subject to any continuing prohibition on the disclosure of confidential data.

By submitting a Response, Respondent acknowledges that it is responsible for defending the confidential nature of the portions of its Response marked as such and agrees to hold harmless and indemnify the Government of Puerto Rico, ASES and the Federal Government for all costs or damages associated with ASES or other governmental entities defending Respondent's request for confidential treatment. Respondent also agrees that ASES may copy the Response to facilitate evaluation, or to respond to requests for public records. Respondent warrants that such copying will not violate the rights of any third party.

The Government of Puerto Rico maintains the right to use all ideas, or adaptations of those ideas, contained in any Response received in response to this RFI.

4.3.4 Ownership of Responses

All documents submitted in response to this RFI shall become the property of ASES and the Government of Puerto Rico.

5 RESPONSE FORMAT AND ORGANIZATION

5.1 Response Format

All Responses must be typewritten on standard 8 ½” x 11” paper. The pages should have one-inch margins, and the font shall be 12-point Arial. The Response must be set at a one and one-half (1.5) line spacing. Larger paper (up to 11” x 17”) and smaller fonts are permissible for charts, diagrams, spreadsheets, etc. The Responses must be in Microsoft Word or a searchable PDF format. All pages of the Response shall include the RFI title “RFI #CCEC2023” consistently in either the footer or header on each page.

The Response and its Attachments must be drafted in the English language. Each document containing tabulated data is required in EXCEL 2003 format.

The Response and its Appendices shall not be password protected or locked.

5.2 Response Organization

Responses should be prepared simply and economically, providing a straightforward, concise description of the Respondent’s ability to meet the requirements of this RFI. Responses to questions and requests under Sections 6.2 & 6.5 shall be limited to fifteen (15) pages jointly.

The Respondent’s response must be uploaded to the corresponding folders created and identified accordingly.

The response to the first question in Section 5 of this RFI shall be labeled as page 1 with each subsequent page numbered thereafter. The pages must be numbered sequentially.

Responses

All information must be incorporated in response to a specific requirement and clearly referenced. ASES will not search for responses outside of the Response when citations to other sources or hyperlinks are provided. A policy, brochure, manual, or reference to a policy, brochure, manual or website does not constitute an adequate response and will not be considered.

6. Response Content

6.1 Letter of Transmittal

Include a Letter of Transmittal, Appendix H of this RFI, duly signed by an authorized representative of the Respondent.

6.2 Qualifications & Experience

6.2.1 Describe the Respondent’s form of business (e.g., individual, sole proprietor, corporation, nonprofit corporation, partnership, Limited

Liability Company) and detail the names, addresses, telephone numbers, and email addresses of its officers and directors and any partners, if applicable.

6.2.2 Provide a detailed description of the company, its operations, and ownership, addressing the following:

- A. General description of primary business of the organization and its client base;
- B. Organization's areas of specialization;
- C. Any current or recent experience working with state Medicaid agencies.
- D. Length of time organization has been in business.
- E. The personnel and other resources currently available for the scope of work of this RFI;
- F. The experience and qualifications of your key personnel;
- G. Identification and description of any subcontractor(s) you anticipate would be used for functions and responsibilities under the scope of work of this RFI, including area of expertise, background of key personnel, and history of work with your company.

6.2.3 Describe the Respondent's relevant experience and performance in performing the types of duties described in this RFI and details on the number of years of providing such services, with emphasis on clients of similar size as Plan Vital. Provide the maximum number of lives managed, maximum calls handled and any other relevant information. Please include at least one example of a similar project (similar services and/or comparable populations as those required in this RFI) executed in the last 24 months. Do not include ASES as one of your clients.

6.3 References

Provide at least three (3) specific business references with at least one (1) for a project of similar size and scope to that requested in this RFI, within the last five (5) years. **Do not include ASES as one of the clients.** Each reference must include the contact's name, phone number, email address, a brief description of the services provided, and the period of service.

6.4 Attestation on Requirements to become a Government Contractor and others - App. I

- 6.4.1 Answer each item of Appendix I. At the end of the Form, the Respondent must attest and certify that all the representations made in this form are true and correct to the best of its knowledge and after diligent investigation and that if any of the information provided is false, it agrees that ASES may not consider its Response for any purpose.
- 6.4.2 If the answer to any statement is that it partially complies or does not comply, provide a concise explanation.
- 6.4.3 If additional space is needed for explanations, attach additional pages and identify them with the Item # to which it corresponds and state the number of the attachment in the corresponding explanation column.

6.5 Scope of Work:

Provide a detailed description of your organization's approach to each of the following items. In so doing, Respondents must demonstrate the necessary experience and capacity to assume all applicable Enrollment Counselor functions as demonstrated by providing detailed responses to the following questions. This includes providing a detailed narrative, diagrams, exhibits, examples, sketches, descriptive literature and/or detailed information specifically tailored for the services required under this RFI to demonstrate its ability to meet requirements.

- 6.5.1 Describe the services to be provided including information addressing each item appearing in the Scope of Work and particularly address the following:
- A. Describe the Respondent's ability, approach and strategy to meet the requirements of Section 3.2 Contact Center Services and describe the capacity to handle all telephone calls, chat communications and mobile app messages during normal business hours, and peak hours considering the following assumptions and the performance metrics of Section 3.2.6 of this RFI. Include the baselines and assumptions used in your analysis.
- ✓ Call/Chat Volume – See App. D
 - ✓ Average talk time per call/chat
 - Baseline assumption: between three (3) and seven (7) minutes, with longer talk time during periods of surge activity.
 - ✓ Average of total talk time per representative per day (after removing time for breaks, training, etc.)

- Baseline assumption: 6.5 hours per day.
- B. Provide a detailed staffing contingency plan for handling sudden and unexpected increases in enrollment, MCO/PMG's changes and call/communication volumes with a description on how the plan will be implemented and coordinated with ASES.
- C. Provide a description of the Respondent's capability to accurately capture, track, report and audit each metric under this RFI. Describe how this information will be presented to ASES (e.g., Dashboards) and the frequency for updating data.
- D. Description of training requirements for all levels of staff including initial training (ex. Curriculum, length, shadowing requirements, oversight before staff operate independently, etc.), determination and monitoring of staff competency, supervision, supports for staff as they manage challenging calls/communications.
- E. Staffing arrays for all shifts of required coverage, including qualifications, roles, responsibilities, management structure.
- F. Capacity and plans to manage calls/chat with English speaking callers, including limitations to addressing the needs of any special populations.
- G. Capacity to track acuity and disposition of calls/communications
- H. Protocols for supervision, including live assessment of call/communications handling by staff.
- I. Description of the planned capacity to manage calls for individuals who are hearing impaired such as through TTY or TDD
- J. Quality management and improvement plans that support high quality operations, outcomes, and data reporting activities, including annual evaluations and revisions as well as identification of and responding to significant events, risks, critical incidents and grievances.
- K. Description of the telecommunications system including the specific features, linkage protocols, and functionality that will be used to manage multiple callers and to protect against inadvertent dropped calls.
- L. Discuss capacity to use an Automated Call/Communication Distribution System that includes functions such as digital recording, conferencing, silent observation, agent coaching and outbound call blending components.
- M. Discussion about the backup components for power/system failures and other such events that may result in the need for disaster recovery/contingency efforts. If available, attach a risk management or disaster plan.

6.5.2 Please indicate whether the Respondent has effectively managed a transition from an existing contact center provider to yours. Please outline your transition plan and services, including, but not limited to:

1. Telephonic/Telecommunications
2. Data Transition and Migration
3. Customer relationship management
4. Include and illustrate any other services or value-added transition areas you would provide to ASES
5. IVR
6. Contact Center monitoring
7. Call/communications recording and agent recoding system

6.5.3 Describe any barriers you may encounter to meet a possible Go Live for (a) August 1, 2023; or (b) January 1, 2024, and how you will mitigate these barriers.

6.5.4 Please indicate whether you currently have the HIPAA-compliant technological infrastructure in Puerto Rico necessary to operate a contact center. Briefly describe how it operates.

6.5.5 Describe IVR system in use for other clients. Describe the capacity of IVR to allow callers to enter their information to identify the member prior to the call/chat communication being distributed to a contact center representative.

6.5.6 Describe how assistive listening devices will be made available to beneficiaries who need such assistance.

7 PRICING RESPONSE

7.1 Pricing Response

7.1.1 Using the Pricing Response Worksheet (Appendix J of this RFI), the Respondent must propose costs to provide the required enrollment counselor services and functions that meet the requirements specified in the RFI, including the performance metrics.

7.1.2 The template must have the name of the Respondent and be signed by its authorized representative.

7.1.3 The pricing worksheet must be submitted both in Excel Format and in PDF. The PDF copy must be signed. Any discrepancies between both formats, the information on the PDF format will prevail.

7.1.4 The Respondent must complete the entire Pricing Response Worksheet and provide a detailed narrative response explaining the associated costs.

7.2 **PMPM Pricing Model –**

7.2.1 The Per Member Per Month pricing method (PMPM) is ASES' current and preferred compensation model for the services object of this RFI.

7.2.2 The PMPM pricing model is based on the Total Ownership Cost Method. This pricing model includes not only the direct costs of the specific deliverables required for the provision of the enrollment counselor services but also all indirect costs that would be logically attributed to the provision of these services. Compensation includes, but it is not limited to:

- a. personnel/resources costs and required equipment for the contact center choice counselors;
- b. all support or infrastructure activities such as recruiting, training of new personnel, individual training other than system-specific training;
- c. costs of providing the ASES website on secure servers with integration with the Web Based Application and Provider Search Portal for use on the Internet;
- d. the cost of maintaining all hardware;
- e. all charges and costs related to the maintenance of the equipment and infrastructure to be dedicated to the project and systems refresh required to keep them updated and running to perform and fulfill the contracted services, responsibilities and obligations;
- f. operating costs, management and ongoing support, communications, as well as all instances of compliance and contract oversight.

7.2.3 Under this pricing model, the Enrollment Counselor assumes all risks, including but not limited to any fluctuation in actual monthly counts and utilization of services during steady state periods as well as during the annual open enrollment period.

7.3 **Cost Worksheet- PMPM**

7.3.1 Based on the above, the Respondent shall submit a Pricing Response, using Worksheet #1 included in Appendix J that addresses all costs associated with meeting the requirements noted above in Section 3 of the RFI.

- 7.3.1.1 This worksheet captures the Respondent's ongoing monthly costs to maintain contact center choice counselor functions.
- 7.3.1.2 The Respondent must enter the PMPM cost for each year assuming no changes in applicable population. The Respondent must ensure each year is entered, even if the cost is the same year to year.
 - 7.3.1.2.1 The PMPM is the total cost for services divided by the Assumed Member Months for the same period.
 - 7.3.1.2.2 The total cost for services entered must reflect the expected cost for the entire period for the line item.
 - 7.2.6.2.3 The Member Months for each Period is based on the current population projected for a twelve month period. The member month refers to the sum of Applicable Population enrolled in Plan Vital each month.
- 7.3.1.3 The Respondent must explain in the applicable narrative section what factors are considered in the Respondent's proposed total cost for contact center choice counselor services.
- 7.3.2 The Respondent's Pricing Response Submission must include annual costs for up to three (3) years.
- 7.3.3 The Applicable Population or Applicable Enrollees for purposes of the computation of the PMPM cost for the Enrollment Counselor Services excludes the Platino, Foster Children and Domestic Abuse Victims (FC/DA) and inmates incarcerated in penal institutions population of the Government Health Plan (GHP), which do not use the enrollment counseling services.

7.4 Pricing Worksheet – Other Pricing Models

- 7.4.1 In the alternative, the Respondent may submit a Pricing Response using a different pricing model from the one in Section 6.3 above. If so, for each pricing model, using Appendix J, submit a separate pricing worksheet. Properly title each worksheet (i.e., Fixed Price Wk. #2) to differentiate from other worksheets. Please provide the following information:
 - 7.4.1.1 Define the full range of acceptable pricing models that the Respondent would apply to estimate costs to service the requirements of ASES. Be clear on those pricing models that are unacceptable.

- 7.4.1.2 For each pricing model, provide a clear description of the types of fees and costs it will apply to provide the Contact Center Enrollment Counselor Services and any associated materials.
- 7.4.1.3 Disclose and itemize any anticipated fees or mark-ups for products and services from other vendors that would be charged to ASES (for any service, license, product, or materials).

Appendix A

Definitions

RFI # CCEC 2023

This Appendix contains definitions and abbreviations that are used throughout this document.

- A. **Abandoned Call:** A call/communication initiated to a Contact Center that is ended by the caller before any conversation occurs or before a caller is permitted access to a caller-selected option.
- B. **Annual Open Enrollment Period:** Is the period of time established by ASES where active enrollees have one (1) opportunity to select a different MCO, without cause.
- C. **Answer Rate:** A measure of the percentage of callers to the Contact Center who reach a Choice Counselor, in comparison to the number of calls, mobile app messages and/or chats received by the Contact Center.
- E. **Authorized Representative:** A person given written authorization by an Enrollee to make health-related decisions on behalf of an Enrollee, including, but not limited to, selection of an MCO and/or PCP and PMG, in accordance with applicable Puerto Rico law.
- F. **Auto-Assignment:** The assignment of an Enrollee to a PMG and a PCP, normally at the time the person is Auto-Enrolled in the GHP Program.
- G. **Beneficiary Support System:** A federally defined, independent entity (42 CFR 438.71) that provides Choice Counseling and/or Enrollment Activities to Enrollees prior to and after enrollment in an MCO. The entity performing these functions must be independent of any MCO or health care provider in Puerto Rico and not have direct or indirect financial interest in an MCO. (42 CFR 438.810).
- H. **Blocked Call:** A call that cannot be connected immediately because no circuit is available at the time the call arrives or because the telephone system is programmed to block calls from entering the queue when the queue is backed up beyond a defined threshold.
- I. **Business Continuity and Disaster Recovery (“BC-DR”) Plan:** A documented plan (process) to restore vital and critical Information/health care technology systems in the event of business interruption due to human, technical, or natural causes. The plan focuses mainly on technology systems, encompassing critical hardware, operating and application software, and tertiary elements required to support the operating environment. It must support the process requirement to restore vital business Data inside the defined business requirement, including an emergency mode operation plan as necessary.

- J. **Business Days:** Traditional workdays, including Monday, Tuesday, Wednesday, Thursday, and Friday. Puerto Rico Holidays, as defined in the Law for Compliance with the Fiscal Plan, Act No. 26 of April 29, 2017, or any other law enacted during the duration of the Contract regarding this subject or any other day officially designated in writing by ASES and/or Medicaid, are excluded.
- K. **Business Hours:** 8:00 a.m. to 6:00 p.m. local Puerto Rico time on Business Days.
- L. **Calendar Days:** All seven (7) days of the week.
- M. **Contact Center:** A service facility equipped to handle a large number of inbound and outbound calls, chat communications and mobile app messages.
- N. **Children’s Health Insurance Program (“CHIP”):** Puerto Rico’s Children’s Health Insurance Program established pursuant to Title XXI of the Social Security Act.
- O. **Choice Counseling:** the unbiased provision of information and services designed to assist beneficiaries in making enrollment decisions; it includes answering questions and identifying factors to consider when choosing among MCOs and does not include making recommendations for or against enrollment into a specific MCO.
- P. **Commonwealth Population:** This population is comprised of the following groups: Certain persons aged twenty-one (21) through sixty-four (64) years of age, inclusive of the age limits, and who do not qualify for either Medicaid or CHIP; Police officers of the Government of Puerto Rico and their Dependents; Surviving spouses of deceased police officers; Survivors of domestic violence referred by the Office of the Women’s Advocate; and Veterans.
- Q. **Conflict of Interests:** Any group of acts, facts or circumstances that according to ASES’s determination and judgment appears to bring into question the actual or perceived image, independence, objectivity and fair treatment of a Contractor. That includes, but is not limited to, a personal or business interest that may represent a real, potential or apparent Conflict of Interests, as it relates to the performance of the Contract or that may create the appearance of impropriety. It also includes situations where the Enrollment Counselor or ASES’s personnel or their relatives or relationships, up to a fourth-degree consanguinity and second-degree affinity have intentionally affected the procedures to their favor or for their own benefit or the benefit of their family members or friends. This term also incorporates the requirements for Conflict of Interests safeguards for Enrollment Counselors under 42 CFR 438.810.
- R. **Daily Basis:** Each Business Day.
- S. **Data:** Information in digital form that can be transmitted or processed.
- T. **Disenrollment:** The termination of an individual’s Enrollment in an MCO.

- U. **Domestic Violence Population:** Certain survivors of domestic violence referred by the Office of the Women’s Advocate or the Department of the Family, or other agency with jurisdiction, and enrolled in the GHP.
- V. **Eligible Person:** A person eligible to enroll in the GHP program.
- W. **Enrollee:** A person who is enrolled in the GHP with an MCO, based on a determination of eligibility for Medicaid or CHIP.
- X. **Enrollment Activities:** Defined at 42 CFR 438.810(a) as activities such as distributing, collecting and processing enrollment materials and taking and effectuating enrollment by phone, in person, or through electronic modes of communication.
- Y. **Enrollment Counselor:** An individual or entity that performs Choice Counseling and/or Enrollment Activities.
- Z. **Health Insurance Portability and Accountability Act (HIPAA):** The (i) Health Insurance Portability and Accountability Act of 1996, including its Omnibus Rule; (ii) applicable provisions of the Health Information Technology for Economic and Clinical Health Act as incorporated in the American Recovery and Reinvestment Act of 2009; and (iii) their accompanying rules, regulations, standards and procedures.
- AA. **Immediately:** Within twenty-four (24) hours, unless otherwise provided in the Contract.
- BB. **Information System(s):** A combination of computing and communications hardware and software that is used in: (i) the capture, storage, manipulation, movement, control, display, interchange and/or transmission of Information, i.e. structured Data (which may include digitized audio and video) and documents; and/or (ii) the processing of such Information for the purposes of enabling and/or facilitating a business process or a related transaction.
- CC. **Interactive Voice Response (“IVR”) System:** Contact Center function that allows callers to request assistance and check on the status of requests and updates.
- DD. **Island-wide:** All geographic areas that comprise the entirety of Puerto Rico, including Vieques and Culebra, for which the Enrollment Counselor is responsible for the provision of specified functions.
- EE. **Managed Care Organization (MCO):** An insurance company, health care organization, or any other approved health organization in Puerto Rico that meets the CMS definition of an MCO.
- FF. **Medicaid:** The joint Federal/state program of medical assistance established by Title XIX of the Social Security Act.

- GG. Network Provider:** A Medicaid-enrolled Provider that has a Provider Contract with a Contractor under the GHP Program. This term includes Providers in the General Network and Providers in the Preferred Provider Network (PPN).
- HH. New Enrollee:** An Eligible Person who has become a first-time Enrollee of the GHP.
- II. Open Enrollment:** Generally, a period of forty-five (45) Calendar Days during which new Enrollees have one (1) opportunity to select a different MCO or PCP, without cause
- JJ. Respondent:** Any person, corporation, or partnership that submits a response to this RFI.
- KK. PCP Panel:** The number of enrollees a PCP can adequately serve. A panel is open so far as the PCP has not reached the maximum number of Enrollees it may serve and closed once that limit has been exceeded and the PCP cannot accept new Enrollees.
- LL. Potential Enrollee:** A person who has been Certified by the Puerto Rico Medicaid Program as eligible to enroll in the GHP (whether on the basis of Medicaid eligibility, CHIP eligibility, or eligibility as a member of the State Population), but who has not yet enrolled with an MCO.
- MM. Prevalent Non-English Language:** A non-English language spoken primarily by more than five percent (5%) of Potential Enrollees and Enrollees in Puerto Rico, as determined by the Government.
- NN. Primary Medical Group (PMG):** A grouping of associated Primary Care Physicians and other providers for the delivery of services to GHP Enrollees using a coordinated care model. PMGs may be organized as provider care organizations, or as another group of Providers who have contractually agreed to offer a coordinated care model to GHP Enrollees.
- OO. Primary Care Physician (PCP):** A licensed medical doctor (MD) who is a Provider and who, within the scope of practice and in accordance with Puerto Rico Certification and licensure requirements, is responsible for providing all required Primary Care to Enrollees
- PP. Service Level:** A measure of Contact Center Choice Counselor productivity in real time as Contact Center Choice Counselors take calls, chat conversations and mobile app messages, expressed in a percentage of calls/communications answered within a specific time in seconds.
- QQ. Subcontractor:** Any organization or person, including the Enrollment Counselor's parent, subsidiary or Affiliate, who has a Subcontract with the Contractor to provide any function or service for the Contractor specifically related to securing or fulfilling the Enrollment Counselor's obligations to the Government of Puerto Rico under the terms of the Contract.
- RR. Week:** The traditional seven-day week, Sunday through Saturday.

Appendix B - Amended

General Overview of the Enrollment Process

RFI # CCEC 2023

1. Eligibility for Plan Vital

Medicaid has the sole authority to determine eligibility for the GHP, as provided in Federal law and Puerto Rico's State Plan, with respect to the Medicaid and CHIP Eligible and with respect to the Other Groups, as provided in Article VI, Section 5 of Act 72 and other Puerto Rico law and regulation.

2. Enrollment Process -

- 2.1 Every year, the active GHP beneficiaries, except the Foster Children and Domestic Abuse Victims populations⁵, have the opportunity to change their current MCO for any reason during a 45-day Open Enrollment Period, which previously has generally run from November 1 through December 15 (herein after referred to as the "Annual Open Enrollment Period"). See Section 1.2.6 of the RFI regarding the current Open Enrollment Period.
- 2.2 The beneficiaries can only make one (1) change of MCO without just cause, including during the Annual Open Enrollment Period.
- 2.3 New Enrollees have one (1) opportunity to select a MCO during the Medicaid eligibility process with the Puerto Rico Medicaid Program. The selected MCO assigns the PCP/PMG. If the enrollee wants to make any changes to their MCO within ninety (90) days of becoming eligible, the choice counselor will be responsible for assisting in those changes. If the New Enrollee does not select a MCO, the Puerto Rico Medicaid Program will select a MCO on behalf of the New Enrollee. New Enrollees shall be permitted to select a different MCO once without cause, regardless of how the initial selection of MCO was made, during their Open Enrollment Period, which shall begin on the New Enrollee's Effective Date of Enrollment.

⁵ The Foster Care Population and Domestic Violence Population are Auto Enrolled in one MCO and are not eligible to enroll into another MCO. When an Enrollee ceases to be part of the Domestic Violence or Foster Care Populations but continues to be an Eligible Person, it will be considered a for cause reason for which the Enrollee may select a new MCO.

- 2.4 An MCO change made within the first twenty (20) days of the month must be effective the 1st day of the next month. The changes made after the 21st day will be effective on the 1st day of the second month after the selection. For example, a request received January 10th will be effective February 1st, whereas a request received January 21st will be deemed effective March 1st.
- 2.5 After an Open Enrollment Period an Enrollee may request the selection of a new MCO for just cause at any time. The Enrollment Counselor approves the just cause cases that fall with the parameters of applicable federal regulation. If a request does not fall under the causes that constitute cause for disenrollment, it is ASES who shall determine whether the reason constitutes a valid cause.
- 2.6 When an Enrollee ceases to be eligible for the Platino Program but continues to be eligible for the GHP, it is a for cause reason for which the Enrollee may select a new MCO.
- 2.7 If the Enrollee does not make a change in MCO during the Open Enrollment Period, the Enrollee will remain enrolled with his/her current MCO.

3. **Disenrollment**

3.1 Disenrollment occurs only when ASES or the Medicaid Program determines that an Enrollee is no longer eligible for the GHP; or when Disenrollment is requested by the MCO or Enrollee or his or her Authorized Representative for cause, and approved by ASES or the Enrollment Counselor in accordance with the guidelines set forth by ASES. The Foster Care Population and Domestic Violence Populations are not eligible to disenroll from their Auto Enrolled GHP Plan.

3.2 Disenrollment will be processed by ASES, and ASES will issue notification to the MCO who will in turn notify the beneficiary. When an email is provided by the beneficiary, the Enrollment Counselor shall also generate an automatic notice to the beneficiary confirming the disenrollment request. In all cases the Enrollment Counselor must provide the beneficiary with a confirmation number to track the transaction.

In cases where the beneficiary needs to receive health services before the change of MCO is effective and the current MCO does not have available on its provider network the applicable provider, the Enrollment Counselor will notify ASES of the situation IMMEDIATELY for the corresponding Coordination of Benefits.

3.3 The Enrollment Counselor may accept disenrollment requests from the Enrollee or his or her Authorized Representative at any time orally or in writing. The Enrollment Counselor may approve disenrollment requests

made outside of Open Enrollment provided that (1) the Enrollee or Authorized Representative has stated an appropriate cause to disenroll, and (2) the Enrollment Counselor ensures that the Enrollee's disenrollment happens within the required timeframes as specified by 42 C.F.R. 438.3(q); 42 C.F.R. 438.56(c); (d)(3)(ii); and (e)(1)-(2). If the Enrollee or Authorized Representative has not stated an appropriate cause to disenroll, or the Enrollment Counselor is unsure of the same, the Enrollment Counselor shall forward the request to ASES for further determination.

3.3.1 The following, among other similar circumstances, constitute cause for Disenrollment by the Enrollee:

- 3.3.1.1 The Enrollee moves outside of Puerto Rico;
- 3.3.1.2 The MCO's Plan does not, due to moral or religious objections, cover the health service the Enrollee seeks.
- 3.3.1.3 The Enrollee needs related services to be performed at the same time, and not all related services are available within the network. The Enrollee's PCP or another Provider in the MCO's Network have determined that receiving services separately would subject the Enrollee to unnecessary risk.
- 3.3.1.4 Other acceptable reasons for Disenrollment at Enrollee request, per 42 CFR 438.56(d)(2), including, but not limited to, poor quality of care, lack of Access to Covered Services, or lack of Providers experienced in dealing with the Enrollee's health care needs; and
- 3.3.1.5 The Enrollee has become eligible for a Platino Program or has experienced a change in his or her eligibility as a member of the Domestic Violence or Foster Care Populations.

Appendix C

Description of the Web Based Application & Provider Search Portal

RFI # CCEC 2023

The Enrollment Counselor Program uses a Web Based Application and Provider Search Portal for conducting its services through the Contact Center, Plan Vital webpage and Plan Vital mobile app. The Web Based Application and Provider Search Portal have the capacity to give support to all the enrollment counselor activities and functions.

1. WEB BASED APPLICATION:

Following is a description of the major functionalities and capabilities of the Web Based Application that was developed and is maintained by Truenorth Corporation:

- 1.1 Has the capacity to allow access to the Enrollees, Contact Center Choice Counselors and ASES personnel twenty-four (24) hours a day, seven (7) days a week.
- 1.2 Compliant with Section 508 of the Rehabilitation Act, Puerto Rico Act 229 of 2003, as amended, and any other applicable laws governing accessibility;
- 1.3 Creates and manages log-in information including username and password;
- 1.4 Allows viewing the Potential Enrollee's or Enrollee's current Medicaid eligibility, demographic information, and case information, including but not limited to name of the current MCO and Open Enrollment dates;
- 1.5 Compares available MCOs using selection criteria such as participating hospitals, PCPs/PMGs, and specialty providers;
- 1.6 Manages enrollment online, including enrollment or disenrollment from an MCO and selecting a PCP and PMG at the time of enrollment;
- 1.7 Allows opt-in and opt-out of electronic or other communication;
- 1.8 Allows viewing and downloading Enrollee materials specific to the Enrollee;
- 1.9 Accepts updates regarding open/closed enrollment in an MCO;
- 1.10 Accepts updates regarding open and closed Panels for PCPs and prevents selection of a PCP with a full PCP Panel;

- 1.11 Accepts daily updates to any of the Enrollee data elements transmitted by ASES and/or its Agent(s);
- 1.12 Accepts MCO provider network data, including PCPs and PMGs, to inform choice counseling;
- 1.13 Transmits to ASES, or its Agent (via FTP or other prescribed protocol), MCO choice transactions within twenty-four (24) hours of an enrollee's selection of an MCO and, if applicable, a PCP and PMG.
- 1.14 Collects Enrollee selection of MCO or MCO/PCP/PMG through the communication methods specified by ASES, including but not limited to telephone and web, documents requests for MCO selections upon receipt;
- 1.15 Submits MCO or MCO and PCP/PMG selections to ASES within twenty-four (24) hours of an Enrollee or Potential Enrollee's selection of an MCO, including change of an MCO or MCO/PCP/PMG;
- 1.17 Ensures that the elapsed time from the command to view a response on the Web-Based Application until the response appears or loads to completion does not exceed five (5) seconds, ninety-nine percent (99%) of the time.
- 1.18 Processes any relevant files received from ASES to support ongoing operations.
- 1.19 Documents for cause changes and ensures that the system is capable of notifying whether an allowable change has already been made, and subsequent changes are restricted to allowable causes outside of the open enrollment period.

2. PROVIDER SEARCH PORTAL

The Provider Search Portal, which is publicly accessible, has the following characteristics and features:

- 2.1 Availability twenty-four (24) hours a day, seven (7) days a week;
- 2.2 Compliant with Section 508 of the Rehabilitation Act, Puerto Rico Act 229 of 2003, as amended, and any other applicable laws governing accessibility;
- 2.3 Has an easily searchable public area that allows access to general information relevant to the GHP or MCOs, including, but not limited to, provider listings, without requiring the Enrollee or Potential enrollee to log in to the secure area of the website.

3. CHAT FUNCTIONALITY

The live chat functionality occurs on real time and operates during regular working hours. It currently operates with the Nice-In-Contact software. The user can access it through the website <https://planvital.org>.

4. MOBILE APP MESSAGING FUNCTIONALITY:

Occurs asynchronously. The messages are issued by the Enrollee at any time of the day. The Choice Counselors are responsible for answering the messages, which are bidirectional between ASES Vital App and the Web Based App.

Appendix D - Amended

Utilization Data

RFI # CCEC 2023

Amended Appendix D is the Utilization Data of the current Contact Center as of February 28, 2023, and data on other call languages and TTY usage. It is not embedded in this document but is included as a separate Excel document titled Amended Appendix D – Utilization Data.

Appendix E - Amended

Key Personnel

RFI # CCEC 2023

Role	Minimum expected duties and responsibilities of the Role	Minimum experience and qualifications
Account Manager	<ul style="list-style-type: none"> • Status calls with ASES during implementation to discuss operational and technical issues; • Hold regular meetings with internal partners of ASES, the Medicaid Program, and other stakeholders and any third party providing support services for the Enrollment Counselor Program, as identified by ASES; • Act as a liaison between ASES, Medicaid, Choice Counselors, corresponding team leaders and supervisors, and other personnel of the Enrollment Counselor and any third party providing support services for the Enrollment Counselor Program; • Submit regular reports, as requested by ASES regarding services and activities under this RFI; • Attend regular meetings with key personnel of ASES and Medicaid as requested; • Review compliance, and work with the enrollee services to implement required improvements; • Arrange meetings, set agendas, and perform any necessary follow-up activities; 	<ul style="list-style-type: none"> ▪ Bachelor’s Degree, preferably in Business Administration ▪ Bilingual/fluent [Spanish and English] ▪ Excellent communications skills written and oral ▪ Ability to effectively draft, proof and complete reports, presentations and correspondence, using Microsoft Word, PowerPoint and other contemporary business standards ▪ A minimum of one (1) year of experience in project management and in Medicaid and managed care. ▪ Preferably one (1) year of experience in health care, public health, social service field. ▪ Preferably three (3) years of supervisory experience in a service-oriented setting ▪ Planning skills and time management ▪ Good organizing skills, ability to manage multiple priorities and make appropriate decisions to assure completion of tasks on time. ▪ Excellent critical thinking and data analysis skills ▪ Excellent problem solving skills ▪ Good understanding of Excel and other formula-based software ▪ Flexibility of adapting to fast-paced, dynamic work environment. Ability to work in both a team/collaborative

	<ul style="list-style-type: none"> • Gather, analyze, and report statistical data, in a timely manner to ASES and other key stakeholders, as required; • Submit regular reports, as requested by ASES, regarding the services under contract, to keep ASES and key stakeholders informed about matters concerning the services provided; • Conduct other related tasks as requested by ASES. • Participate in meetings with ASES, the MCOs, Medicaid, and any other agencies or groups deemed necessary by ASES. 	<p>setting, but also able to work without supervision when necessary or with multiple supervisors.</p>
Contact Center Manager	<ul style="list-style-type: none"> • Supervise the entire contact center operation • Contribute to the design and implementation of Projects which impact the Contact Center • Ensure effective and consistent communication throughout the team, encourage feedback and customer insight in order to enhance the customer experience. • Embed a performance culture, framework and review processes to achieve service levels and improvements against set targets • Ensures service targets, SLA's and KPI's are continually reviewed, and expectations are met with optimum levels of quality & service delivery. • Engages in direct communication with ASES' Customer Service Director to provide daily reports of the operation, compliance with SLAs and KPIs and other <i>ad hoc</i> reports requested. 	<ul style="list-style-type: none"> • At least one (1) year of experience supervising a contact center of the same size as the one object of this RFI, and in all required areas of operation as stated in App. E.

<p>Contact Center Choice Counselors</p>	<ul style="list-style-type: none"> • Assist Potential Enrollees and Enrollees in understanding the nature of the GHP program and direct Potential Enrollees and Enrollees to other resources as appropriate, such as his/her MCO; • At a minimum, provide detailed information and respond to inquiries regarding the nature of managed care, the scope of benefits under the GHP and information about MCO Network Providers, in a Culturally Competent manner; • Conduct Enrollment Activities, including facilitating enrollment in the Enrollee’s choice of MCO, with or without an accompanying PCP/PMG change, through the accurate and timely entry of required information in the Web-Based application to enable ASES to complete processing of the Enrollment and accompanying PCP/PMG selection, if any, with the appropriate MCO. The Enrollee or his or her Authorized Representative may choose the Enrollee’s MCO, and PCP/PMG if changing MCO, and request disenrollment; <ul style="list-style-type: none"> ○ Submit MCO and accompanying PCP/PMG selections, if any, to ASES using the Web Based Application to record the Enrollee’s selection. ○ Demonstrate sufficient familiarity with the GHP program. 	<p>At least six (6) months experience working as an agent in a contact center</p>
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Appendix F - Amended

Reports

RFI # CCEC 2023

<u>Reporting</u>	<u>Frequency</u>	<u>Description</u>
<u>CONTACT CENTER</u>		
Enrollment <ul style="list-style-type: none"> ○ MCO Changes ○ PCP Changes ○ PMG Changes 	Daily	<ul style="list-style-type: none"> • By Contact Center Reps Choice Counselors
Disenrollments <ul style="list-style-type: none"> ○ MCO Changes ○ PCP Changes ○ PMG Changes 	Daily	<ul style="list-style-type: none"> • Include Reason for Change • By Contact Center Reps Choice Counselors
With Cause (Just Cause) <ul style="list-style-type: none"> ○ Approvals ○ Referrals to ASES for Approval or Denial ○ Coordination of Benefits 	Daily	<ul style="list-style-type: none"> • Once Just Cause is approved, include count on the enrollment / disenrollment field of the daily report, by MCO, PCP, PMG. ○ In cases where the beneficiary needs to receive health services before the change of MCO is effective and the current MCO does not have available on its provider network the applicable provider, the Enrollment Counselor will notify ASES of the situation immediately for the corresponding Coordination of Benefits.

		• By Contact Center Reps Choice Counselors
Number of Calls, Mobile app messages and Chats Received	Daily	
Number of Calls, Mobile app messages and Chats Answered	Daily	
Number of Calls and Chats in the queue at peak times	Daily	
Language / sign language assistance request provided by contact center	Daily	
Waiting Time for all type of communications	Daily	
Average handle time for calls, mobile app messages and chats	Daily	
Number of calls and chats abandoned	Daily	
Average wait time to abandoned calls and chats	Daily	
Number of outbound calls	Daily	
Time Calls on hold	Daily	
Contact Center Choice Counselor Count	Daily	
Referrals to MCO	Daily	○ Identify by MCO
Referrals to Medicaid	Daily	
First contact resolution	Daily	○ Percent of contacts that are resolved by the contact center on the first interaction with the customer
Contact Center outage	WARNING:	

	Enrollment Counselor must inform ASES immediately in writing the occurrence of the event. 24-48 hours	○ Incident Report
Contact Center Trend Report	Weekly	○ Recurrent topics in weekly calls.
CUSTOMER SERVICE SATISFACTION SURVEYS		
○ Contact Center	Daily Availability for ASES to Monitor Results	○ Member satisfaction surveys
AD HOC REPORTS		
○ Requested by ASES and CMS.	As requested,	

Appendix G

Questions and Answers Template

RFI # CCEC 2023

Appendix G is the Question and Answers Template to be used by Respondents when providing questions to ASES regarding this RFI. It is imbedded in this document but also is included as a separate WORD document entitled Appendix G– Questions and Answers Template.

Instructions :

This template is to be used by the Respondent to submit questions regarding the RFI #CCEC 2023.

Please provide all questions by populating this template labeled "Questions and Answers Template." For each question, first include the specific section number to which the question pertains. Then provide the specific page number of the document that the question pertains to, and finally, provide the detailed question.

NOTE: All questions submitted in this Template are subject to the conditions set forth in this RFI. **Please only submit questions using this Template and save it and send as a WORD document only. ASES reserves the right to disregard any questions that have not been submitted using this template.**

All questions must be submitted by email to the RFI Contact on or before 11:59 PM (Atlantic Standard Time) on **March 15, 2023**. ASES reserves the right to disregard any questions that have not been submitted during the proper Q&A period.

#	Section #	Page #	Questions	Answers
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

11				
12				
13				
14				
15				

Appendix H

Letter of Transmittal Form

RFI # CCEC 2023

Respondent's Name: _____

1. Identity (Name) and Mailing Address of the responding organization:

2. Person authorized by the Respondent to represent the organization in this RFI and be contacted for clarifications and additional information:

Name _____

Title _____

Email address _____

Telephone number _____

3. Provide the Respondent's federal taxpayer identification number and Commonwealth taxpayer identification numbers, if different: _____

4. Use of subcontractors (Select one)

___ No subcontractors would be used in the performance of the services inquired in this RFI, OR

___ The following subcontractor(s) would be used (indicate the service to be performed):

(Attach extra sheets, as needed)

5. ___ On behalf of the responding organization named in item #1, above, I accept the Conditions Governing this process.

___ I concur that submission of our Response constitutes acceptance of all the conditions and requirements of this RFI.

___ I acknowledge receipt of any and all amendments to this RFI.

_____, 2023
Authorized Signature Date

Appendix I

Attestation

RFI # CCEC 2023

Appendix I is the Attestation on Requirements to become a Government Contractor and others. It is not embedded in this document is included as a separate Excel document entitled Appendix I– Attestation on Requirements to become a Government Contractor and others.

Appendix J

Pricing Response Worksheet

RFI # CCEC 2023

Appendix J is the Pricing Response Worksheet. It is not embedded in this document but is included as a separate Excel document entitled Appendix J– Pricing Response Worksheet.