STATE OF TENNESSEE
DIVISION OF TENNCARE, LONG TERM SERVICES AND SUPPORTS

REQUEST FOR INFORMATION
FOR
ASSISTANCE WITH PLANNING FOR DUAL ELIGIBLE SERVICES
PERTAINING TO LONG-TERM SERVICES AND SUPPORTS PROGRAMS

RFI # 31865-00707
May 18, 2022

1. STATEMENT OF PURPOSE:

The State of Tennessee, Division of TennCare (TennCare), Long Term Services and Supports (LTSS) issues this Request for Information (‘RFI’) for the purpose of gaining insight into the solutions available to meet TennCare’s needs related to oversight and planning for Tennessee’s Dual Special Needs Plans (D-SNPs). TennCare is seeking information and insight from experienced and financially sound organizations to perform analytic, policy, and program administration services, including possible outsourcing functions, for the Department to develop, implement, and oversee a state roadmap to improve programs for individuals dually eligible for Medicare and Medicaid. We appreciate your input and participation in this process.

This RFI is intended to identify solutions in the market that meet the following needs:

- Use program approaches that support person-centered care, independent living, and better outcomes and quality of life for individuals, as well as strengthen the State’s position as a strong fiscal steward of Medicaid funding and maximizing Medicare service coverage.

- Have specialized and impartial expertise in the following:
  - Designing, implementing, and administering Medicare-Medicaid, Medicaid MLTSS, and Medicaid 1915(c) waiver programs, including FFS LTSS;
  - Developing and refining person centered care coordination that supports independent living for aging individuals and people with disabilities;
  - Bringing Medicare expertise to state strategies for improving programs for dually eligible individuals;
  - Details understanding of managed care organizations, both Medicare and Medicaid;
  - Working with states with diverse populations and stakeholders;
  - Providing outsourcing services to states;
  - Engaging and effectively working with a wide array of stakeholders including, but not limited to consumers and their families and caregivers, state Medicaid, Aging and Disability Agency, state legislators, CMS including the MMCO, providers, direct care workers, health plans (D-SNPs, FIDE SNPs, MMPs, Medicaid MCOs), AAADs, advocates, SDOH providers, and others;
Developing strategies to address SDOH and health equity;
Developing value based payment strategies
Developing SMAC provisions with D-SNNPS; Developing and executing comprehensive internal and external state communication plans;
Managing state internal and external workgroups and relationships; and
Advising on IT strategies

Respondents must:

- Demonstrate substantial skills, knowledge, and experience in the above;
- Not have any conflicts of interest with any other clients that would become a stakeholder in the development of the roadmap, such as a D-SNP;
- Have experience managing any type of grant or contract(s) with the State of Tennessee or other States of similar Medicaid/Medicare size with related scopes; and
- Utilize the experience above to assess the current program and provide consultation and support to move the State to implementing fully integrated and aligned programs that improve coordination, outcomes, and cost efficiency, and if necessary, support a study of the impact of a policy that prioritizes aligned enrollment as to the impact of such a policy to members and alternative D-SNP products currently available to members.

2. BACKGROUND:

The State of Tennessee’s Medicaid program provides health care for approximately 1.4 million Tennesseans. Long-Term Services and Supports (LTSS) is one of the largest units within TennCare with a team of highly capable staff who are committed to leading the ongoing development and operation of an innovative, sustainable, person-driven long-term services and supports system in which older adults and people with disabilities and/or chronic conditions have choice, control and access to a full array of high-quality services and supports to assure optimal outcomes, including independence, health and quality of life.

For more than a decade, Tennessee has been working to increase alignment and integration for full benefit dual eligible (FBDE) members in order to improve coordination, quality outcomes, and cost efficiency. TennCare currently has contracts with three Medicaid MCOs to operate aligned D-SNPs; we have also maintained contracts with three non-aligned D-SNP’s that have been in place for a number of years, while not allowing any new non-aligned contractors into the market.

3. COMMUNICATIONS:

3.1. Please submit your response to this RFI to:
Matt Brimm, Director of Contracts
Division of TennCare
310 Great Circle Road, Nashville, TN  37243
(615) 687-5811
matt.brimm@tn.gov

3.2. Please feel free to contact the Division of TennCare with any questions regarding this RFI. The main point of contact will be:
Matt Brimm, Director of Contracts
Division of TennCare
310 Great Circle Road, Nashville, TN  37243
(615) 687-5811
matt.brimm@tn.gov

3.3. Please reference RFI # 31865-00707 with all communications to this RFI.
4. RFI SCHEDULE OF EVENTS:

<table>
<thead>
<tr>
<th>EVENT</th>
<th>TIME (Central Time Zone)</th>
<th>DATE (all dates are State business days)</th>
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<tbody>
<tr>
<td>1. RFI Issued</td>
<td></td>
<td>May 18, 2022</td>
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<tr>
<td>2. RFI Response Deadline</td>
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<td>June 1, 2022</td>
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5. GENERAL INFORMATION:

5.1. Please note that responding to this RFI is not a prerequisite for responding to any future solicitations related to this project and a response to this RFI will not create any contract rights. Responses to this RFI will become property of the State.

5.2. The information gathered during this RFI is part of an ongoing procurement. In order to prevent an unfair advantage among potential respondents, the RFI responses will not be available until after the completion of evaluation of any responses, proposals, or bids resulting from a Request for Qualifications, Request for Proposals, Invitation to Bid or other procurement method. In the event that the state chooses not to go further in the procurement process and responses are never evaluated, the responses to the procurement including the responses to the RFI, will be considered confidential by the State.

5.3. The State will not pay for any costs associated with responding to this RFI.

6. INFORMATIONAL FORMS:

The State is requesting the following information from all interested parties. Please fill out the following forms:

<table>
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<tr>
<td>TECHNICAL INFORMATIONAL FORM</td>
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1. RESPONDENT LEGAL ENTITY NAME:

2. RESPONDENT CONTACT PERSON:
   - Name, Title:
   - Address:
   - Phone Number:
   - Email:

3. BRIEF DESCRIPTION OF EXPERIENCE PROVIDING SIMILAR SCOPE OF SERVICES/PRODUCTS
4. Please limit your section 4 response to five (5) pages

4.1. Please provide us with the following information about your company:

4.1.1. Background and history
4.1.2. Size of company
4.1.3. Areas of expertise
4.1.4. Services offered
4.1.5. What separates you from other vendors

4.2. Please provide a brief description of experience providing similar scope of services/products for the following services:

4.2.1. Performing analytic, policy, and program administration services to improve programs for individuals dually eligible for Medicare and Medicaid.

4.2.2. Using program approaches that support person-centered care, independent living, and better outcomes and quality of life for individuals, as well as strengthen the State’s position as a strong fiscal steward of Medicaid funding and maximizing Medicare service coverage.

4.2.3. Having specialized and impartial expertise in the following:

4.2.3.1. Designing, implementing, and administering Medicare-Medicaid, Medicaid MLTSS, and Medicaid 1915(c) waiver programs, including FFS LTSS;

4.2.3.2. Developing and refining person centered care coordination that supports independent living for aging individuals and people with disabilities;

4.2.3.3. Bringing Medicare expertise to state strategies for improving programs for dually eligible individuals;

4.2.3.4. Details understanding of managed care organizations, both Medicare and Medicaid;

4.2.3.5. Working with states with diverse populations and stakeholders;

4.2.3.6. Providing outsourcing services to states;

4.2.3.7. Engaging and effectively working with a wide array of stakeholders including, but not limited to consumers and their families and caregivers, state Medicaid, Aging and Disability Agency, state legislators, CMS including the MMCO, providers, direct care workers, health plans (D-SNPs, FIDE SNPs, MMPs, Medicaid MCOs), AAADs, advocates, SDOH providers, and others;

4.2.3.8. Developing strategies to address SDOH and health equity;

4.2.3.9. Developing value based payment strategies

4.2.3.10. Developing SMAC provisions with D-SNNPS; Developing and executing comprehensive internal and external state communication plans;

4.2.3.11. Managing state internal and external workgroups and relationships; and

4.2.3.12. Advising on IT strategies
**COST INFORMATIONAL FORM**

| 1. | Describe what pricing units you typically utilize for similar services or goods (e.g., per hour, each, etc.): |
| 2. | Describe the typical price range for similar services or goods |

**ADDITIONAL CONSIDERATIONS**

| 1. | Please provide input on alternative approaches or additional things to consider that might benefit the State: |