

STATE OF TENNESSEE DEPARTMENT OF FINANCE AND ADMINISTRATION DIVISION OF TENNCARE

REQUEST FOR INFORMATION FOR EARLY PERIODIC SCREENING, DIAGNOSTIC AND TREATMENT LIAISON SERVICES AND SUPPORT

RFI # 31865-00724 June 16, 2025

1. STATEMENT OF PURPOSE:

The State of Tennessee, Division of TennCare issues this Request for Information ("RFI") for the purpose of identifying available solutions currently in the market that meet the need of providing Early Periodic Screening, Diagnostic and Treatment (EPSDT) liaison services and support to primary care practices for increasing immunization rates, as well as a Behavioral Health Educational Program for pediatric primary care providers. We appreciate your input and participation in this process.

The current contract can be found <u>here</u>. TennCare is interested in details and information regarding available solutions currently in the market that meet the following needs:

The ability to hold at least two joint meetings per year with TennCare.

Organizations which can represent primary care physicians in dialogue with TennCare on issues related to coding, billing, and documentation of EPSDT services and assisting in the development of related informational resources for primary care providers by:

- Serving as a resource for information on the most current national coding practices and national trends, including advising TennCare on national trends in uses and payment of individual codes such as the trend to begin reimbursing separately for hearing, vision, and other current procedural terminology codes for services provided in conjunction with EPSDT visits;
- Developing and maintaining forms for documentation of EPSDT exams and convening a committee (comprised of representatives of TennCare, each Managed Care Organization (MCO), the Tennessee Department of Health, and the prospective supplier) as needed to review updates to said forms;
- o Developing and producing pediatric and EPSDT/Coding resources and training materials;
- Maintaining forms in an electronic version on the prospective supplier's website;
- Participating with TennCare, MCOs, and other professional health organizations in EPSDT outreach efforts and other collaborative efforts, including collaborating with the MCOs on

outreach to high yield practices and concentrating on regional training programs as appropriate; and

 Developing and maintaining a Well Child Quality Improvement (QI) Project to help practices increase and improve the number of EPSDT services provided. The QI project offers Maintenance Of Certification Part IV as well as continuing medical education. Staff supports practices in implementing quality improvement through training and consultation.

The program includes the development and implementation of training programs for pediatricians and other primary care providers to increase the frequency, quality, and documentation of EPSDT services by:

- Making available provider education from various sources including regional training programs;
- Maintaining a training module, which includes;
 - (1) EPSDT Overview;
 - (2) A review of individual screening components and what is included in each component (comprehensive health history, including developmental and behavioral screening, physician exam, immunization, laboratory work, hearing and vision screening and anticipatory guidance);
 - (3) Coding and billing; and
 - (4) Documentation (including electronic access to prospective supplier EPSDT forms)
- Marketing training programs to the target audience. Training with respect to coding isnot be limited to coding for EPSDT and includes;
 - Development of one EPSDT related webinar or other special project (to be agreed upon by the prospective supplier and TennCare);
 - (2) Providing consultations for primary care providers with electronic health records related to EPSDT and coding compliance, and
 - (3) Approaching physicians new to Tennessee and/or newly credentialed providers recommended to prospective supplier by participating MCOs.
- Providing visits to individual offices, providing regional educational programs, and providing education through professional newsletters, and
- Providing outreach to approximately ten (10) physicians' offices/new physicians per month to include office visits, office-based trainings, regional "lunch and learns", conducting mock chart audits, outreach by email or telephone, and/or MCO activities, participating in physician outreach events (such as exhibiting at conferences or presenting at meetings of primary care-related professional organizations or conducting regional EPSDT coding trainings.) In the case of outreach events, each event will count in lieu of one outreach activity unless the event lasts for multiple days, in which case each day will count as one outreach activity. In the case of regional trainings, regional "lunch and learns", and webinars, each practice represented at the training will count as one outreach activity.

The program also requires an organization to represent primary care physicians in dialogue with TennCare on issues related to management of behavioral and mental health concerns in the pediatric primary care setting.

The organization should offer an educational program entitled Behavioral Health in Pediatrics (BeHiP) to health care providers serving children in Tennessee. The overarching goal of the BeHiP program is to raise the confidence and competency of pediatricians and other providers who work with children with behavioral and mental health concerns. The program includes:

- Maintaining a training curriculum that provides pediatric healthcare providers with tools and strategies to screen for, assess, and manage patients with emotional, behavioral and substance use concerns. The training curriculum will be designed to improve evaluation and management of the most common behavioral health conditions in primary care practice, including appropriate referral.
- Updating training curriculum to include discussion of evidence-based treatments for substance use disorders in adolescents, including medications for opioid use disorder and adolescent and family-specific therapies. Participants will be empowered to connect adolescents to high quality, evidence-based treatment, and actively support their long-term recovery.
- Including in its training curriculum strategies to provide for more efficient workflow (including information on coding), more effective care, and improved family and physician relationships.
- Encouraging practices to integrate Behavioral Health services as part of each encounter.
- Offering associated BeHiP online training modules covering specific topics such as attention deficit hyperactivity disorder, depression, anxiety, substance use disorders and more to help pediatric healthcare providers become more familiar with the resources and screening tools available. Participants will have the ability to work through the screening tools to become familiar with the tools and calculating a score.
 - (1) Update current BeHiP online training modules with new video and curriculum content.
 - (2) Obtain certified medical education accreditation for the online training modules and facilitate distribution of credits upon completion.
- Delivering at least twenty-four (24) BeHiP trainings annually to medical practices, residency programs, medical schools and/or health departments annually.
- In the case of BeHiP training events, each event will count in lieu of one training activity unless the event lasts for multiple days, in which case each day will count as one outreach activity. In the case of regional trainings, regional "lunch and learns", and webinars, each practice represented at the training will count as one training.
- Promoting availability of the Tennessee Child and Adolescent Psychiatry Education and Support (TCAPES) consult line to participating practices.

The program includes an optional BeHiP Quality Improvement Project to practices with associated QI coaching to help practices implement and/or increase the use of various screening tools which includes:

- Designing and managing the QI Project;
- Obtaining Maintenance of Certification Part IV credit of the QI project through the American Board of Pediatrics and Quality Improvement credit through the American Board of Family Medicine; and
- Offering participating practices Quality Improvement Training including:
 - (1) Providing guidance on developing a QI team
 - (2) Introducing the "Model for Improvement" and use of "plan, do, study, act" cycles to measure practice improvement.
 - (3) Provide practices with a run chart to demonstrate success.

Staffing for the BeHiP program includes:

- Retaining project medical director(s) as needed as well as content experts for ongoing updates to and delivery of the program curriculum.
- Retaining and training additional pediatricians as program trainers to deliver the curriculum.

The program also includes promoting the availability of the BeHiP training to providers serving children through various outreach efforts such as:

- Direct marketing to practices;
- Communication with residency programs;
- Sharing information in chapter newsletters and at conference exhibits;
- Sharing information in the Chapter's training and other work with the (Tennessee Child and Adolescent Psychiatry Education and Support) consult services;
- During monthly virtual Extension for Community Healthcare Outcomes (ECHO) sessions for

TCAPES and the foster care medical home program;

- Other opportunities as they arise; and
- Maintain information about the program and associated resources on the prospective supplier web site.

The organization should utilize funding to develop incentives for providers and/or their offices participating in the BeHiP program, and an incentive plan sent to TennCare for final approval.

Other program responsibilities of the organization include:

- serving as a resource to TennCare on national standards related to pediatric care;
- Serving as a liaison with other physician professional organizations; and
- Assisting in the design of TennCare's assessment and evaluation of the program activities.

Program reporting includes:

- submitting written quarterly reports on activities in a format and timeline approved by TennCare to the TennCare Chief Medical Director or designee.
- developing measurable outcomes related to the service activities and goals in collaboration with TennCare. Outcomes may include:
 - (1) materials produced and dispersed;
 - (2) training attendees;
 - (3) traffic from social media campaigns and other communications;
 - (4) participants in quality improvement projects; and
 - (5) practices requesting assistance or additional resources, etc.

2. BACKGROUND:

The State of Tennessee's Medicaid program provides health care for approximately 1.4 million Tennesseans. About 50% of the state's children are also covered under TennCare and they make up the large majority of TennCare members. TennCare Kids is a part of the TennCare Medicaid program designed specifically for children; this includes babies, toddlers, teens, and young adults. TennCare Kids is a full program of checkups and health care services for children from birth through age 20 who have TennCare. These services make sure that babies, children, teens, and young adults receive the health care they need. This includes checkups for vision, hearing, dental and mental health.

TennCare Kids provides:

- Free well-child checkups
- Dental checkups and services
- Medical services
- · Behavioral health services
- Interperiodic screens as needed

TennCare maintains partnerships with three Managed Care Organizations (MCOs) - WellPoint, BlueCross / BlueShield of Tennessee, and United Healthcare - to administer Medicaid EPSDT services in the State. The state is geographically divided into three Grand Divisions: East Tennessee, Middle Tennessee, and West Tennessee. The MCOs utilize a network of providers to administer EPSDT services across all three grand divisions and the ninety-five (95) counties that they encompass.

TennCare's Division of Quality Improvement is responsible for the oversight of TennCare's EPSDT benefit. TennCare collaborates with the MCOs and other community partners to oversee high-quality service delivery of TennCare's EPSDT program.

3. COMMUNICATIONS:

- 3.1. Please submit your response to this RFI to: Sharon Way, RFP Manager Division of TennCare
 310 Great Circle Road, TN 37243 (615) 339-1741 Sharon.d.way@tn.gov
- 3.2. Please feel free to contact TennCare with any questions regarding this RFI. The main point of contact will be:

Sharon Way, RFP Manager Division of TennCare 310 Great Circle Road, TN 37243 (615) 339-1741 Sharon.d.way@tn.gov

3.3. Please reference RFI # 31865-00724 with all communications to this RFI.

4. RFI SCHEDULE OF EVENTS:

	EVENT	TIME (Central Time Zone)	DATE (all dates are State business days)
1.	RFI Issued		June 16 th , 2025
2.	RFI Response Deadline	2:00 p.m.	July 3 rd , 2025

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 <u>not</u> 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:

	TECHNICAL INFORMATIONAL FORM
1. RESPO	ONDENT LEGAL ENTITY NAME:
Nar Ado	ONDENT CONTACT PERSON: ne, Title: Iress: one Number: ail:
	E PROVIDE US WITH THE FOLLOWING INFORMATION ABOUT YOUR COMPANY: our section 3 responses to two (2) pages or less)
Bac	kground and History including:
•	Size of company
•	Areas of expertise
•	Services offered
•	What separates you from other vendors; and
•	Any other relevant company information
	E ANSWER THE QUESTIONS BELOW:
4.1	your section 4 responses to five (5) pages or less) Does your organization have experience doing trainings on EPSDT coding/documentation and behavioral health topics for primary care providers? Please describe.
	Does your organization have experience doing trainings on EPSDT coding/documentation
4.2	Does your organization have experience doing trainings on EPSDT coding/documentation and behavioral health topics for primary care providers? Please describe.
4.2	Does your organization have experience doing trainings on EPSDT coding/documentation and behavioral health topics for primary care providers? Please describe. How many years of experience does your organization have doing this work? Describe your existing relationships and services provided to with pediatric primary care practices across Tennessee.

- 4.6 Describe your experience marketing the availability of training programs to the pediatric primary care providers in Tennessee, including types of outreach and quantitative measures of outreach. Include examples of outreach marketing (*examples do not count toward page limit and may be included in an appendix*)
- 4.7 Describe the number of providers you have served through your EPSDT Liaison Services, Primary Care Support, and Behavioral Health trainings. Please also provide the number of organizations served.
- 4.8 Please share any data your organization can discuss publicly regarding the efficacy or outcomes of your EPSDT trainings and support services, as well as your behavioral health trainings services.
- 4.9 Please share any additional programmatic, outreach, or services that may be of interest to TennCare based on the information and background TennCare provided above.

COST INFORMATIONAL FORM

- 1. Describe what pricing units you typically utilize for similar services or goods (e.g., per hour, each, per month, etc.):
- 2. Describe the typical price range for similar goods or services.
- 3. Describe your normal pricing approach (e.g. administrative fee, operational fee, per event or activity, etc.):

ADDITIONAL CONSIDERATIONS

1. Please provide additional considerations you think might benefit the State: e.g., current related contracts or similar successful projects you have been a part of in the past.

7. DEFINITIONS:

American Board of Family Medicine – A non-profit, independent medical association that certifies family physicians, ensuring they meet the highest standards of knowledge and practice.

American Board of Pediatrics – An independent, nonprofit organization whose certificate is recognized throughout the world as a credential signifying a high level of physician competence.

Behavioral Health in Pediatrics (BeHiP) – A training program that provides pediatric healthcare providers with tools and strategies to screen for, assess, and manage patients with emotional, behavioral, and substance use concerns.

Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) – A Medicaid benefit that provides comprehensive and preventive health care services for children under age 21. It is designed to ensure that eligible children receive appropriate preventive, dental, mental health, and specialty services. The program emphasizes early identification and treatment of health issues to improve overall health outcomes for low-income infants, children, and adolescents.

Extension for Community Healthcare Outcomes (ECHO) – An innovative tele-mentoring program designed to create virtual communities of learners by bringing together healthcare providers and subject matter experts using videoconference technology, brief lecture presentations, and case-based learning, fostering an "all learn, all teach" approach. Participants are engaged in the bi-directional virtual knowledge network by sharing clinical challenges and learning from experts and peers.

Managed Care Organization (MCO) – A private or non-profit organization that contracts with the state to provide managed healthcare services to Medicaid beneficiaries.

Maintenance of Certification (MOC) – The process by which a physician who has initially become board certified in the specialty practice of their choice maintains their board certification status. It is a 4-part process designed to engage physicians in continuous, lifelong learning required for all physicians initially certified after 1990. The Part IV: Improvement in Medical Practice/Improvement in Health and Healthcare requirement of a Maintenance of Certification Program is defined under section 1848(m)(7)(C)(ii) of the Social Security Act.

Model for Improvement – A framework for structuring and testing improvement projects in health care.

Quality Improvement (QI) Project – A quality improvement (QI) project is a systematic, datadriven approach to identify and improve processes or outcomes within an organization or healthcare setting. The goal is to enhance patient care, efficiency, and overall quality.

Tennessee Child and Adolescent Psychiatry Education and Support (TCAPES) – A program that supports the integration of mental health care into pediatric primary care in Tennessee.

Well Child Quality Improvement (QI) Project – A quality improvement (QI) initiative focused on enhancing the quality of preventive healthcare provided to children during their routine well-child visits, aiming to identify and address potential health issues early on through improved screening, education, and adherence to recommended preventative care schedules.