General

1. **Question**
   Will consultation services regarding IT and Data Exchange and Claiming include assisting with the creation and delivery of training associated with forthcoming workflow and technology use for key stakeholders impacted?

   **Answer**
   Service component #3 (“Consulting Services Regarding Data Exchange and Claiming”) does not include the provision of training.

2. **Question**
   Since the budget is stated at $300,000 per year, and the desired contracting period is for 2 years to start with optional extension after that, does this mean the available budget for the contract will actually be $600k with no more than $300k spend per year?

   **Answer**
   The agreement will be an initial two-year term with a $300,000 annual budget in each term, adding up to $600,000. There will be an option for extension after the initial two-year term. Final funding amounts are contingent upon Contract Negotiations.

3. **Question**
   Is the budget of $300,000 per year based on a San Francisco fiscal year schedule (July 1-June 30) or is it based on a 12-month period at the start of the contract?

   **Answer**
   The agreement will align with a Fiscal Year schedule. The agreement will be prorated in the first year based on the start date of the agreement.

4. **Question**
   Is there a desired timeline for the phases of this work? Is the current scope of work to be completed in Year 1 and a new scope would be outlined for any continuing work if there was a Year 2 extension?

   **Answer**
   Approximate timelines for Service Components #1-3 are provided below. Note that HSH will rely on the expertise and project management of the Awarded Provider to manage project timelines, to be determined during negotiation of the agreement. Target dates may depend on the types and complexity of solutions identified.

   **Approximate timelines for Service Component #1 Consulting Services and Training Regarding Provision of Medi-Cal Services under CalAIM:**
   
   i. Consulting services are expected to be ongoing throughout the entire contracting period.

   **Approximate timeline for Service Component #2, Consulting Services Regarding Medi-Cal Security and IT Requirements:**
   
   i. Completion of security gaps and needs analysis for HSH and its CBO contractors (within four months of contract start date)
ii. Presentation of solutions to close these gaps (one to two additional months)

Approximate timeline for Service Component #3, “Consulting Services Regarding Data Exchange and Claiming”

i. Review existing HSH data collection and access workflows and storage solutions (within three months of contract start date)
ii. Gaps and needs analysis regarding HSH’s ability to produce 837/EDI compliant claims, as required for CalAIM billing (three additional months)
iii. Identification of technological solutions, workflows, and personnel needs that would put HSH on a path to 837/EDI claims submission and adjudication, presentation of scenarios (three additional months)

5. **Question**
   
   **Is there a place in the RFP you would like us to include an “About Us” or “Team Profile” section?**

**Answer**

There is no additional information required from applicants besides what is listed in the Appendix 1- Application Template.

6. **Question**

   **Can you describe the HSH staff/roles we would partner with for this consultation project (e.g., project manager, program director, IT manager/director)? Are these staff/roles dedicated or partially allocated?**

**Answer**

Current HSH staff dedicated to this project include:

- 1.0 FTE Project Manager/CalAIM Manager
- 1.0 FTE CalAIM/Epic Integration Manager
- 0.3 FTE Strategy and Planning Lead

Additional approved positions dedicated to this project:

- 2.0 FTE Senior Analysts
- 2.0 FTE Program Support Analysts
- 1.0 FTE Senior Database Administrator

Partial allocations:

IT Director, HMIS Manager, Program Managers, and several other staff across HSH are deeply involved in CalAIM planning and implementation activities, and will play crucial roles in the planning and implementation.

7. **Question**

   **Regarding the separate cost proposal for participation in any meetings, is this in addition to the $300k annual budget? If so, does this extra budget cover general project and planning and/or does it cover attending meetings to understand requirements or report to leadership? Any additional clarity would be helpful to understand the types of meetings we should be proposing on.**
The cost proposal for participation in meetings should fit into the $300,000 annual budget. The Awarded Provider will be asked to attend meetings with (1) the HSH CalAIM project team, (2) other internal HSH stakeholders and leaders, (3) Medi-Cal Plans and the San Francisco Department of Public Health, and (4) HSH’s contracted CBO service providers. Meetings in categories (1),(2), and (3) are taking place on a weekly, bi-weekly, monthly, and ad-hoc basis.

Overall, bidders should expect to participate in 1-2 meetings per week at the beginning of the contract period, as more meetings will likely be needed for the review of existing capabilities and needs/gaps analyses. It is possible that the number of meetings may decrease thereafter.

Note that meetings are being conducted virtually at this time. Meetings may begin to take place in-person in the future. Any travel cost associated with in-person meetings should be included in the cost proposal for participation in meetings. There will likely be a remote option for participating in future in-person meetings.

8. Question

It is mentioned in the RFP that the Appendix 1 be one combined PDF document. Should this include Appendix 2: Price Proposal Template or should the Price Proposal Template be kept as a separate file?

Answer

Yes, it should include the Appendix 2: Price Proposal Template. Applicants must submit the Appendix 1: Application Template and the requested attachments in one combined PDF document. Please see the RFP 137.1 Document – Submission Format on page 9.

9. Question

Does Attachment 2 – CMD Form 3 need to be completed and submitted with the proposal? Are there specific instructions on having to submit this form?

Answer

Yes, all attachments must be completed and submitted with the proposal to be considered a completed application, including Attachment 2 – CMD Form 3. Please submit it as part of the Appendix 1: Application Template in one PDF document.

10. Question

It is instructed that Attachment 3 – First Source Hiring Form is required with the proposal submission. Should this be attached to Appendix 1 or are there specific instructions on how to submit this form?

Answer

Please attach the completed First Source Hiring Form to the Appendix 1: Application Template.

11. Question

RFP 137.1 states “any organization that wishes to provide consultant services must apply under this RFP. This includes all organizations that are currently providing such services to HSH and those that wish to do so in the future.” As an organization who would like to provide consultant services in the future, would we still have to apply for this RFP?
| Answer | Any organization that is interested in providing the services included in this RFP is encouraged to apply. However, this RFP will not preclude any organizations from applying or providing any services in the future. |