



**Solicitation Information
July 23, 2019**

RFI# 7598900

TITLE: Rhode Island Medicaid Rite Smiles

SUBMISSION DEADLINE: Tuesday, August 20, 2019 @ 11:00 a.m. Eastern Time

Questions concerning this solicitation must be received by the Division of Purchases at DOA.PurQuestions10@purchasing.ri.gov no later than **Thursday, August 1, 2019 @ 10:00 a.m. Eastern Time**. Questions should be submitted in a *Microsoft Word attachment*. Please reference the **RFI#7598900 – Rhode Island Medicaid Rite Smiles** on all correspondence. Questions received, if any, will be posted on the Division of Purchases' website as an addendum to this solicitation. It is the responsibility of all interested parties to download this information.

Dawn Vittorioso

Buyer II

Applicants must register on-line at the State Purchasing Website at www.ridop.ri.gov

Note to Applicants:

Responses received without a completed RIVIP Bidder Certification Cover Form attached may result in disqualification.

THIS PAGE IS NOT A BIDDER CERTIFICATION COVER FORM

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SECTION 1: INTRODUCTION

The Rhode Island Department of Administration/Division of Purchases, on behalf of the Executive Office of Health and Human Services (EOHHS), is soliciting informational responses from qualified firms to enhance the RIte Smiles managed dental care program that serves members of the Rhode Island Medicaid population born on or after May 1, 2000 and who are living in households with income less than 250 percent of the Federal Poverty Level (FPL), in accordance with the terms of this Request for Information and the State's General Conditions of Purchase, which may be obtained at the Rhode Island Division of Purchases' website at www.ridop.ri.gov.

Instructions and Notifications to Offerors:

1. Potential vendors are advised to review all sections of this RFI carefully and to follow instructions completely, as failure to make a complete submission as described elsewhere herein may result in rejection of the response.
2. The State invites comments, suggestions and recommendations from potential vendors and other interested parties on any questions or issues raised in this RFI. Please note it is not a requirement to answer all questions.
3. Alternative approaches and/or methodologies to accomplish the desired or intended results of this RFI are solicited.
4. This is a Request for Information ("RFI"), and as such no award will be made as a result of this solicitation.
5. All costs associated with attending the pre-solicitation conference and/or developing or submitting responses to this RFI or providing oral or written clarification of the content of a response shall be borne by vendors. The State assumes no responsibility for any costs.
6. Responses misdirected to other locations, or which are otherwise not present in the Division of Purchases at the above stated date/time of opening for any cause will be determined to be late and shall not be considered. For the purposes of this requirement, the official time and date shall be that of the time clock in the reception area of the Division of Purchases.
7. Vendors are advised that all materials submitted to the State for consideration in response to this RFI shall not be considered to be public records as defined in Title 38, Chapter 2 of the General Laws of Rhode Island unless and until there is a contract award through a subsequent, related procurement.
8. Interested parties are instructed to monitor the Division of Purchases website on a regular basis, as additional information relating to this solicitation may be released as addenda.

SECTION 2: REQUEST FOR INFORMATION

This RFI outlines the type of information being solicited and response structure requested from potential respondents.

A. **Background**

The State is considering issuance of a Request for Proposals (“RFP”) from qualified vendors to manage Rhode Island Medicaid’s RItE Smiles program that provides oral health services to Medicaid-eligible children who were born on or after May 1, 2000 and whose families’ income is less than 250 percent of the Federal Poverty Level (FPL). Oral health is an essential component of a child’s overall well-being, as dental disease can significantly impact children’s physical development, school attendance and academic performance, and social determinants of their future success. Since its inception in 2006, RItE Smiles has improved access to oral health care for children and young adults enrolled in Medicaid. EOHHS is interested in input from interested parties about how managed dental care organizations can continue to build and improve upon the foundation of the RItE Smiles program. Some of the goals of the upcoming RFP will be to:

- Improve access to quality oral health care;
- Develop quality measures to improve quality of care;
- Enhance continuity of care to improve overall member health and well-being;
- Integrate medical and accountable care with oral health care.

To assist the State in preparing an RFP for these tasks, we are seeking information in response to the following:

Section 1: Stakeholder Profile

1. Briefly describe your organization, including its interest in the RItE Smiles Program, oral healthcare experience, medical care experience, community stakeholder type, and/or why you are an interested party to this RFI.

EOHHS poses the following questions with the understanding that different respondents bring value from the perspective based on their role, e.g. provider, insurance plan, participants, etc. Please feel free to skip questions that are not relevant to you or your organization.

Section 2: RItE Smiles Program Design and Operations

2. EOHHS is considering increasing RItE Smiles members’ eligibility to their twenty-sixth (26th) birthday. What is your position on this consideration? Provide evidence of why your organization thinks raising the age to 26 years old could support members’ oral health outcomes or why it could hinder outcomes for this Medicaid population.
3. Which, if any, of the current RItE Smiles Program’s requirements and regulations¹ should EOHHS consider revising and why?
4. What potential programmatic enhancements should EOHHS require the RItE Smiles

¹ <https://rules.sos.ri.gov/regulations/part/210-30-05-2>

vendor to implement to improve oral health for the RItE Smiles Medicaid population? What are current strengths and/or opportunities for the Program? Provide evidence that supports your position.

5. What creative programmatic strategies should EOHHS and the RItE Smiles vendor consider to increase preventive dental care utilization and improve overall health outcomes?
6. How can EOHHS better incentivize dental providers, such as oral surgeons, orthodontists, and general practitioners, to participate in Medicaid?

Section 3: Technology and System Innovation

7. What innovative technologies or oral health therapies should EOHHS consider to improve oral health for RItE Smiles members? Include in the description how EOHHS can mitigate costs associated with implementing this benefit and provide evidence to support your recommendation(s).
8. What proposed strategies or programmatic changes to the provider payment and delivery system could be implemented to increase dental provider network access and/or decrease member avoidable utilization?
9. What are recommendations for improving integration between medical vendors and oral health vendors? Provide any relevant evidence to support your position.
10. How could EOHHS and Medicaid vendors facilitate information sharing, referrals, and care management between medical and dental providers? How can healthcare providers further member integration?
11. What innovative, practical strategies should the vendor, its partners, and interested stakeholders implement to:
 - Promote program offerings (e.g., trainings) to provider networks/memberships via communications channels (i.e. newsletters, social media, listservs, etc.)?
 - Support implementation of targeted initiatives using workforce innovation?

Include supporting evidence or rationale for the proposed strategy in your response.

Section 4: Quality Improvement & Value-based Care

12. What quality measures or performance metrics should EOHHS consider for evaluating program outcomes?
13. How can EOHHS increase access to oral surgery specialty services for Rhode Island Medicaid RItE Smiles members? Provide any relevant evidence from other states to support increased access.
14. How could Rhode Island's Medicaid Accountable Entities (AEs) support and coordinate care with RItE Smiles dental providers? Describe any programmatic

changes necessary to allow participation.

15. What alternative payment methodologies for oral health providers should the MCOs implement that focus on value over volume and prevent increased medical expenses? At least one (1) methodology must address a strategy for aligning payment amounts based on dental caries risk level.
16. How can a vendor improve patient appointment compliance among RItE Smiles members?
17. Describe at least one (1) strategy for developing new linkages for early intervention and care coordination, including how to utilize existing community systems to combat access-related disparities.
18. What practices and strategies should be implemented to ensure a high level of customer service for Medicaid participants and dental providers, including strategies to listen to provider concerns and perspectives?
19. EOHHS is considering the formation of a RItE Smiles advisory group. Please recommend stakeholders or advocates that should be part of such an advisory group.?

Section 5: Addressing Specific Populations

20. What could the vendor do in the future to better meet the needs of:
 - a. Participants with special health care needs, including developmental disabilities?
 - b. Non-English-speaking and multi-cultural participants?
 - c. Rural populations?
 - d. Low-utilizing adolescents?
21. What strategies should be implemented to ensure orthodontic treatment is performed efficiently and effectively?

B. RFI Response

The following outline is intended to standardize and structure responses for ease of analysis. *Do NOT include a cost proposal with the RFI response as cost shall not be considered with this RFI.*

- Response to the requirements outlined in Section 2.A.

SECTION 3: QUESTIONS

Questions concerning this solicitation must be e-mailed to the Division of Purchases at DOA.PurQuestions10@purchasing.ri.gov no later than the date and time indicated on page one of this solicitation. No other contact with State parties is permitted. Please reference

RFI# 7598900 Rhode Island Medicaid RItE Smiles on all correspondence. Questions should be submitted in writing in a Microsoft Word attachment in a narrative format with no tables. Answers to questions received, if any, shall be posted on the Division of Purchases' website as an addendum to this solicitation. It is the responsibility of all interested parties to monitor the

Division of Purchases website for any procurement related postings such as addenda. If technical assistance is required, call the Help Desk at (401) 574-8100.

SECTION 4: RESPONSE CONTENTS

A. Responses shall include the following:

1. One completed and signed RIVIP Bidder Certification Cover Form (included in the original copy only) downloaded from the Division of Purchases website at www.ridop.ri.gov. *Do not include any copies in the response.*
2. Response - describing the requirements and concept for this potential project, and all information described earlier in this solicitation. The response is limited to ten (10) pages.
 - a. One (1) Electronic copy on a CD-R, marked “Response - Original”.
 - b. One (1) printed paper copy, marked “Response -Original” and signed.
 - c. Five (5) printed paper copies.

B. Formatting of proposal response contents shall be as follows:

1. Formatting of CD-Rs – Separate CD-Rs are required for the technical proposal and cost proposal. All CD-Rs submitted must be labeled with:
 - a. Vendor’s name
 - b. RFI #
 - c. RFI Title
 - d. If file sizes require more than one CD-R, multiple CD-Rs are acceptable. Each CD-R must include the above labeling and additional labeling of how many CD-Rs should be accounted for (e.g., 3 CD-Rs are submitted for a technical proposal and each CD-R should have additional label of ‘1 of 3’ on first CD-R, ‘2 of 3’ on second CD-R, ‘3 of 3’ on third CD-R).

Vendors are responsible for testing their CD-Rs before submission as the Division of Purchase’s inability to open or read a CD-R may be grounds for rejection of a Vendor’s proposal. All files must be readable and readily accessible on the CD-Rs submitted with no instructions to download files from any external resource(s). If a file is partial, corrupt or unreadable, the Division of Purchases may consider it “non-responsive”. USB drives or other forms of electronic media shall not be accepted. Please note that vendor CD-Rs shall not be returned.

2. Formatting of written documents and printed copies:
 - a. For clarity, the response shall be typed. These documents shall be single-spaced with 1” margins on white 8.5”x 11” paper using a font of 12-point Calibri or 12-point Times New Roman.
 - b. All pages on the response are to be sequentially numbered in the footer,

starting with number 1 on the first page of the narrative (this does not include the cover page or table of contents) through to the end, including all forms and attachments. The Vendor's name should appear on every page, including attachments. Each attachment should be referenced appropriately within the response section and the attachment title should reference the response section it is applicable to.

- c. Printed copies are to be only bound with removable binder clips.

SECTION 5: RESPONSE SUBMISSION

Interested vendors must submit responses to provide information covered by this RFI on or before the date and time listed on the cover page of this solicitation. Responses received after this date and time, as registered by the official time clock in the reception area of the Division of Purchases, shall not be accepted.

Responses should be mailed or hand-delivered in a sealed envelope marked “**RFI# 7598900 Rhode Island Medicaid RIte Smiles**” to:

RI Dept. of Administration
Division of Purchases, 2nd floor
One Capitol Hill
Providence, RI 02908-5855

SECTION 6: DISCLAIMER

This Request for Information is solely for information and planning purposes and does not constitute a request for proposal or an invitation to bid. All information received in response to the RFI and marked as “Proprietary” shall be deemed to be confidential but may still be subject to disclosure pursuant to the Rhode Island “Access to Public Records Act, R. I. Gen. Laws § 38-2-1, *et seq.* Responses to the RFI will not be returned.

END