



**CRISP**

Connecting Providers with Technology to Improve Patient Care

# Maryland Model Analytics Consultant

## ***Request for Proposal***

RFP Issue Date: November 18, 2022

Proposals Due: December 23, 2022

Chesapeake Regional Information System for our Patients  
7160 Columbia Gateway Drive, Suite 100  
Columbia, Maryland 21046



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# 1. Overview and Objective

## CRISP Overview and Background

Chesapeake Regional Information System for Our Patients, Inc. (CRISP) is an independent not-for-profit membership corporation that operates a health information exchange (HIE) serving the Maryland and District of Columbia region. CRISP, which is a private entity chartered and governed to pursue health IT projects best pursued cooperatively, is the state designated HIE for Maryland. Its participants include each of the 48 acute general care hospitals in Maryland, all eight hospitals in the District of Columbia, as well as numerous other facilities and providers of care.

CRISP plays an active role in care transformation in the state of Maryland through the offering of six core services: 1) point of care, 2) care coordination, 3) population health reports, 4) public health, 5) program administration, and 6) interoperability infrastructure support. Two of these services, population health reports and program administration, are most pertinent to this request. Population health report efforts leverage administrative claims data to identify patients who could benefit from services, measure performance of initiatives for quality improvement and program reporting, and coordinate with peers on behalf of patients who see multiple providers. CRISP also offers program administration services such as providing support for Maryland Care Redesign Programs and providing information so that policy discussions are more transparent and informed.

## Engagement Objective

CRISP is seeking a vendor(s) to evaluate specific aspects of the Maryland Total Cost of Care (TCOC) model and care transformation efforts throughout the state. The vendor will securely access administrative claims data and other healthcare data as needed in order to address one or more investigative analysis questions. The vendor will work with CRISP employees and other stakeholders such as hospitals to understand aspects of care redesign potential best practices, and areas of improvement for future consideration.

This RFP is intended to evaluate the abilities of the selected vendor(s) for potential future work. The scope of the engagement will be to enable CRISP to more deeply understand key questions related to TCOC and care transformation and thus improve capabilities available to support those efforts.

## Vendor Qualifications

Key qualifications for a vendor include:

1. Proven data analytics, medical economics, and research methodology capabilities, with extensive familiarity of administrative claims data (primarily Claim and Claim Line Feed (CCLF) and Chronic Conditions Warehouse (CCW))
2. Strong working understanding of Maryland TCOC model, care redesign, value-based payment, and healthcare policy
3. Compliance with the Privacy Act, Freedom of Information Act, HIPAA, and all other State and federal laws and regulations, as well as all Medicare regulations, directives, instructions, and manuals
4. Able to meet the goals and deliverables of the project



- 5. Compliance with the relevant Data Use Agreement(s) (DUAs) and any associated limitations
- 6. Strong Preference for CCW seat (if applicable)

## Scope of Work

The proposed scope of work is to fully address one or more key investigative analytics questions. These questions and deliverables are described in Figure 1.

**Figure 1: Tasks**

<i>Task</i>	<i>Timeframe</i>	<i>Proposed Major Deliverables</i>
<b>8a</b> Episode Quality Improvement Program (EQIP) Initiative - Baseline Analysis (CY2019)	Within 6 months from receipt of data	<p>The product should include a publishable report of findings (reports do not need to meet peer review standards). The report should:</p> <ul style="list-style-type: none"> <li>- Analyze and describe baseline data, including identifying statewide opportunities</li> <li>- Comment on areas of similarities/differences to other state or national bundle payments.</li> <li>- Comment on how the strategies pursued and not pursued map to the published research on successful value-based payment models.</li> </ul> <p>CRISP will provide vendor an inventory of all participating EQIP practices. More information on EQIP can be found here: <a href="https://www.crisphealth.org/learning-system/eqip/">https://www.crisphealth.org/learning-system/eqip/</a> and <a href="https://hsrc.maryland.gov/Pages/Episode-Quality-Improvement-Program.aspx">https://hsrc.maryland.gov/Pages/Episode-Quality-Improvement-Program.aspx</a></p>
<b>8b</b> Episode Quality Improvement Program (EQIP) Initiative - Performance Year 1 (CY2022)	<p>Within 6 months from receipt of data</p> <p>** Task 8b cannot be initiated until the first-year results for EQIP is available in Q3 of CY23.</p>	<p>The product should include a publishable report of findings (reports do not need to meet peer review standards). The report should:</p> <ul style="list-style-type: none"> <li>- Provide EQIP Year 1 results report that describes outcomes and experience during the first performance year (note the results will be calculated by CRISP, the vendor will be evaluating these results as calculated not calculating them)</li> <li>- Describe the strategies being pursued by participants, including key similarities and differences.</li> <li>- Comment on patterns of success or failure within the results (e.g. by type of initiative, region, Entity size or specialty etc.)</li> <li>- Comment on how success and failures map to the published research on successful bundled payments/value-based care model.</li> </ul>



- Comment on whether/how the results calculation methodology implemented by the state may have impacted the findings
- Recommend areas where EQIP program could be expanded/refined/improved.

<b>9</b> Healthcare Outcomes, Spending or Provider Experience for Functional Area X	Within 6 months from receipt of data	<p>The product should include a publishable report of findings (reports do not need to meet peer review standards). The report should:</p> <ul style="list-style-type: none"><li>- Select a single functional area of healthcare spending (e.g. Urgent Care, Post-Acute care) and compare Maryland Medicare and Commercial outcomes, spending or provider experience in that area by Maryland region or other subset (e.g. Urban vs Rural) in comparison to national experience.</li><li>- Use analytics to explain how care delivery varies in Maryland vs the Nation and within Maryland in terms of factors such as place of service, relative utilization and relative unit cost</li><li>- Report should seek to connect outcomes in Maryland to the Maryland regulatory environment, demographics including at least race and/or ethnicity and socioeconomic status, and business and payer environment and make recommendations for changes that would lower costs or improve quality in Maryland in that functional area (vendor may propose qualitative research and/or utilization patterns)</li><li>- Additional factors (regulatory environment, business and payer environment) may be included if the vendor finds relevant, however socioeconomic status and race and/or ethnicity are required</li></ul> <p>Functional area for this task refers to setting and service type. The proposal can address other areas besides the ones listed above.</p>
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10	Vendor defined Health Equity Focus	Within 6 months from receipt of data	<p>The product should include a publishable report of findings (reports do not need to meet peer review standards). The report should:</p> <ul style="list-style-type: none"><li>- Analyze an areas of healthcare spending in Maryland proposed by the vendor with focus on health equity. CRISP is interested in creative and original ways to leverage the available data.</li><li>- Report should consider the impact of socioeconomic status and race and/or ethnicity on the selected area.</li></ul> <p>CRISP is looking for these studies to provide insights into opportunities to enhance care delivery especially as it relates to improved population health</p> <p>An “area of healthcare spending” is intended to refer to any subset the vendor wishes to define that is not covered by task 9</p>
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The Vendor who wins Task 8a, will also be awarded Task 8b. The best combined response will be selected.

## Data Availability

CRISP has access, either directly, or in conjunction with our partners, to complete medical claims for all Maryland Medicare Fee-For-Service beneficiaries, and approximately 2/3rds of Maryland commercial beneficiaries and all Maryland hospital care, regardless of payer. In addition to these Maryland cost data sets, CRISP has access to national Medicare<sup>1</sup> and Commercial claims data, long-term care and home health data, and a variety of other clinical and quality data sets compiled by Maryland and the Federal Government. As part of this RFP, CRISP is interested in supporting the creative use of this data to promote understanding of healthcare and health in Maryland. Successful bidders will be able to outline their data requests and CRISP will endeavor to fulfill all requests to the extent feasible under relevant laws and regulations and subject to the completion of appropriate documentation.<sup>1</sup>

CRISP assumes that the vendor will have knowledge of available Maryland data and Maryland system. More information can be found on CRISP & HSCRC website and in this RFP. Data access will vary by data source and will be discussed as part of the data request process. After award the selected vendors will submit a narrative request describing the data needs for approval by CRISP and subsequently will need to provide a detailed data specification. Relevant appropriate use and/or data use agreements will then need to be in place as well. Data will be securely transmitted to vendors and will only include the minimal necessary elements to complete each task. Data will be provided to vendors at no cost.

<sup>1</sup>Medicare CCLF data for Maryland FFS beneficiaries will be available. This includes Part A, Part B, and Part D claims (where beneficiaries have this benefit). Substance use disorder claims are not included in the CCLF data. If needed equivalent data can be extracted from the CCW for rest of the nation although this data will be in an aggregated format. The commercial data set is conceptually similar to the CCLF and covers approximately 40% of Maryland beneficiaries.



## Deliverables

In addition to a publishable report on the findings in each task, the vendor should be prepared to deliver up to two (2) one (1)-hour presentations on their findings at a public forum to be identified by CRISP.

Reports do not need to meet peer review standards but rather should be ready for public release. The presentations will be part of a CRISP learning series to share findings and may be recorded.

# 2. RFP Process and Submission Instructions

## Contract Type

CRISP will issue full contract specifications as part of the final procurement process as outlined in the RFP timeline below. Vendors are welcome to propose and justify other contract types if deemed appropriate.

## RFP Process Overview

This RFP requires vendors to set forth a plan for addressing one or more of the investigative analytics questions posed above in Figure 1. Vendors may bid on one, some, or all of the tasks and should specify which task number(s) they are addressing in their response. Pricing should be provided for each individual task addressed in the response. Based on responses, CRISP will select multiple vendors for in-person/webinar interviews, conduct reference reviews, and will likely split the final award among multiple vendors to obtain a range of viewpoints. Following the interviews, CRISP may issue refined specifications and ask selected vendors to provide a final response and financial bids.

CRISP expects to issue the final vendor award approximately one month after issuance of this RFP.

### ***i. RFP Timeline***

Figure 2, the Procurement Timetable, represents CRISP’s best-estimated schedule for this procurement. All dates, including the contract start date are subject to change.

**Figure 2: Procurement Timetable**

Event	Approximate Dates	Notes
CRISP Issues RFP	November 18, 2022	Any proposal updates will be communicated as they occur
Clarifications and Q&A	Ongoing	Questions may be submitted to <a href="mailto:learningsystem@crisphealth.org">learningsystem@crisphealth.org</a>
Vendor RFP Responses Due to CRISP	December 23, 2022	Proposals must be emailed by 5 pm



<b>Follow-Up with Vendors</b>	<b>Ongoing</b>	CRISP will contact vendors as needed
<b>Vendor Selection and Contracting</b>	<b>January 13, 2023</b>	CRISP will contact selected bidders to initiate contracting process
<b>Contract Execution</b>	<b>January 20, 2023</b>	Contract will begin upon execution
<b>Data Request for Data Use Agreement</b>	<b>No later than March 1, 2023</b>	Once selected, vendor will submit a data request for each analytics initiative and any necessary DUAs will begin. Vendor may commence work on the project at their convenience but must initiate the data request within 90 days of award and complete the report no later than 180 days from the receipt of data (except task 8b which cannot commence until late 2023.)

CRISP will work in good faith to provide adequate and equal opportunity for all participating vendors. However, CRISP reserves the right to adjust or modify the Procurement Timetable at any point, as deemed necessary, in the process. CRISP desires to select more than one vendor for this engagement, with preference given to minority owned companies.

### ***ii. Requests for Clarification***

CRISP will routinely answer questions related to this procurement, including about the availability of specific data sets. Please email questions and requests for clarification to the CRISP Learning System Team at [learningsystem@crisphealth.org](mailto:learningsystem@crisphealth.org).

## **Terms and Conditions and Confidentiality**

All responses become the property of CRISP and will not be returned to responders. Responses may be disclosed to CRISP and CRISP advisors as deemed appropriate by CRISP. All pricing information will be treated confidentially.

CRISP expressly reserves the right to make any decision regarding future direction or future technology partners. This includes the right to not award a contract pursuant to this RFI/RFP process. CRISP also reserves the right to:

- Accept or reject any and all proposals or parts of proposals received in response to this RFP
- Amend or modify the RFI/RFP or cancel this request, with or without the substitution of another RFI/RFP
- Waive or modify any information, irregularity, or inconsistency in proposals received
- Request additional information from any or all respondents
- Follow up on any references provided





- Negotiate any terms of contract or costs for any proposal
- Request modification to proposals from any or all contractors during review and negotiation
- Negotiate any aspect of the proposal with any individual or firm and negotiate with multiple individuals or firms at the same time

Submission of a proposal in response to this RFP constitutes acceptance of all the conditions of this procurement process described here and elsewhere in the RFP.

A bidder receiving a positive response to their RFP proposal should be prepared to immediately begin negotiation of final terms based on the RFP and other mutually agreed-to terms and conditions, provided that terms described by bidder in their response may be rejected in whole or in part and/or otherwise negotiated by CRISP in the contracting process. In addition, a positive response from CRISP does not assure that a contract will be entered into; CRISP may discontinue negotiations with a bidder at any time, at our sole discretion. Until and unless a formal contract is executed by CRISP and responder, CRISP shall have no liability or other legal obligation to a responder whatsoever, relating to or arising from this RFP, the RFP process, or any decisions regarding pursuit of a formal solicitation.

CRISP will hold responses as confidential.

In no event will CRISP be responsible for damages or other remedies, at law or in equity, arising directly or indirectly from any decisions or any actions taken or not taken in response to or as a result of this RFP or response by a vendor. All responder's costs from response preparation, response delivery, and any negotiation will be borne by the responder.

## Submission Instructions

Responses to this RFP should be submitted by **Friday, December 23<sup>rd</sup> no later than 5 pm (EST) to CRISP Learning System at [learningsystem@crisphealth.org](mailto:learningsystem@crisphealth.org)**. Vendors should submit the proposal as a single file containing all response and supporting materials.

## Proposal Evaluation

Proposals will be evaluated based on:

- A preliminary examination to determine completeness of the response;
- An evaluation of healthcare payment research capabilities, including previous project successes;
- Review of plans and associated methodologies to address investigative analytics question(s)
- CRISP prefers proposals to be unbiased and not representative of any special interest groups (significant preference will be given for neutrality of the point of view);
- Reference review;
- Review of estimated price in the finances section.

# 3. Proposal Content

The proposal provides CRISP with an understanding of your company/research team, proposed resources, and your work plan. Resumes for the proposed resources should be included in appendices and do not count towards the page limit.



## A. Summary

Provide a summary of the proposal including company/research team overview and proposed resources  
(Suggested page limit: 1 page)

## B. Company Overview

In this section, provide a company/research team overview including the proposed resources and a description of similar project references. This section should describe the experience and qualifications of the individual team members to be assigned to this project. Resumes should be attached as an appendix and do not count towards the page limit. The vendor should provide two projects for reference (use table format in Figure 3). References should be for customers with requirements similar to those described in this RFP. CRISP will provide vendors notice before contacting any references.

**Figure 3: References**

<i>Project Sponsor Name &amp; Industry</i>	<i>Project Contact Name</i>	<i>Project Phone and/or e-mail</i>	<i>Implementation Date</i>	<i>Approximate Cost of Engagement</i>
1.				
2.				

(Suggested page limit: 2 pages)

## C. General and Technical Questions Responses

CRISP requests responses to all questions listed below, and all answers should be clearly provided within the context of the proposal and/or in their own separate section. All answers provided should be succinct in length to ease reviewer evaluation, while providing sufficient depth to answer each question thoroughly.

CRISP will assume that any non-answer will indicate that any proposed company will be unable to provide or unwilling to disclose a solution to the question, and this may negatively impact CRISP’s perception of the overall proposal. Inability to provide a response to any question will not immediately disqualify a proposal from consideration.

**Please NOTE: All responses, assertions, and commitments made in this proposal will be part of the contract.**

1. Please detail a previous engagement/research project in which your research or evaluations of data were able to identify previous unexplored areas for improvement and tangibly impact population health strategy, value-based payment results, and/or TCOC improvement.
2. Why is your company/research team uniquely suited for this engagement? Why is the resource recommended in this RFP the best fit for CRISP?

(Suggested page limit: 2 pages)



Vendors may choose to respond to one or more of the analytics questions above in Figure 1. For each question that the vendor wishes to be considered for addressing under this RFP, the vendor should supply:

- a preliminary plan, (suggested page limit: 1 page)
- the proposed methodology, (suggested page limit: 3 pages)
- a discussion of the need for the analysis
  - Function areas(s) to be addressed (if addressing Task 2), (suggested page limit: 2 pages)
  - Discussion of the need for the analysis (if addressing Task 3), (suggested page limit: 3 pages)
- the data to be requested from CRISP, (suggested page limit: 2 pages)
  - Data requests should be limited to data that is essential to complete the analysis with the minimum necessary PHI.
- and data to be provided by the vendor (if applicable). (suggested page limit: 2 pages)
  - Vendors are welcome to use data from other sources if they have acquired it themselves.

Supporting evidence of qualifications to address each response and proof of relevant expertise on the topic should also be included.

## D. Finances

Vendors should supply their own budget spreadsheet to include:

### **Hourly Rates**

The vendor should provide hourly billing rates for junior, mid-level, and senior resources.

### **Expenses**

The vendor should also provide an estimate of expenses associated with the project including estimated trips and travel expenses.

### **Other CRISP borne costs**

If the solution requires additional systems or capabilities not included in the vendor's proposal, those should be delineated in the final tab of the spreadsheet in any form you find suitable.

The resources required will vary based on task and contents of each individual proposal. The range for task is anticipated to be between \$20,000-\$40,000 each on average, but this may vary, and some tasks/proposals may be lower while others are higher. Separate budgets should be submitted for each task although tasks 8a and 8b could be combined. Budget spreadsheet can be submitted in the same document or separately, as long as they are clearly delineated.

(Suggested page limit: 3 pages)