

Strategic Rural Telehealth Blueprint

Request for Proposal

RFP Issue Date: May 6, 2026

Proposals Due: June 3, 2026

Chesapeake Regional Information System for our Patients

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The Maryland Rural Health Transformation Program is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$168,180,837.61 with 100 percent funded by CMS/HHS. The contents of this RFP are those of CRISP and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.

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Overview and Objective

CRISP Overview

Chesapeake Regional Information System for Our Patients, Inc. (CRISP) is an independent not-for-profit membership corporation that operates as Maryland's State Designated Health Information Exchange (HIE). CRISP is a private entity chartered and governed to implement health information technology projects best pursued cooperatively. Its participants include each of the acute general care hospitals in Maryland, ambulatory providers across the State, long term care facilities, and numerous other providers of care.

CRISP plays an active role in transforming care in Maryland by offering 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.

Engagement Objective

CRISP intends to partner with a qualified consultant to identify opportunities and barriers to implementing telehealth technologies across rural Maryland. **CRISP seeks competitive proposals to develop a strategic rural telehealth blueprint for creation of a centralized telehealth body.**

Under this RFP CRISP defines telehealth as the breadth of modalities that use electronic information and telecommunications technologies to deliver clinical health care, support health-related education, facilitate public health, and manage health administration remotely. Modalities include but are not limited to patient telehealth visits, remote patient monitoring, asynchronous hub/spoke provider, and provider teleconsults.

Under this RFP CRISP defines a centralized telehealth body as a statewide shared-services ecosystem that provides the common governance, technical enablement, operational support, user assistance and access pathways needed for providers, residents, and partners to deliver and use telehealth consistently and equitably. The centralized telehealth body may or may not include new technology offerings depending on the needs identified in the blueprint.

The strategic rural telehealth blueprint will guide the design, structure, functionality, and implementation of a centralized telehealth body. The goal is to advance adoption of telehealth by rural Maryland communities in a sustainable manner.

This work is part of Maryland's [Rural Health Transformation Program](#) (RHTP), which seeks to strengthen healthcare delivery in rural areas through innovative technologies and partnerships. The RHTP includes expansion of telehealth as a means of improving patient access and care coordination. Rural Maryland is defined under Maryland Code, State Finance and Procurement § 2-207 to include: Allegany, Garrett, Washington, Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, Worcester, Calvert, Charles, St. Mary's, Carroll, Frederick, and Harford Counties.

CRISP seeks proposals that ensure timely completion of the comprehensive strategic rural telehealth blueprint to identify the key components of a centralized telehealth body. CRISP seeks a consultant to:

1. Define the structure and functions that are essential to a centralized telehealth body, including technical, clinical, equity and access, legal and regulatory, workflow/operational, scalability, and financial/sustainability considerations.
2. Identify specific opportunities for and barriers to implementing and expanding telehealth technologies across rural Maryland. Make strategic recommendations to address opportunities and barriers, leveraging existing capabilities and considering new use cases to address identified needs.
3. Provide an implementation plan for phased implementation and expansion of telehealth across rural Maryland. The implementation plan must align with existing related initiatives of CRISP, the RHTP, and their partners.

The proposal must clearly demonstrate how the recommended centralized telehealth body addresses identified needs. The final deliverables are:

- Final Strategic Rural Health Blueprint Report with implementation plan by **December 1, 2026**.
- Dissemination webinar by **December 31, 2026**.

Consultant Qualifications

CRISP seeks a consultant with the following qualifications:

- Demonstrated experience planning and implementing telehealth programs in rural communities, including addressing infrastructure, workforce, and access challenges.
- Familiarity with Maryland's healthcare landscape, existing telehealth resources, and clinical workflows across ambulatory, hospital, and behavioral health settings.
- Demonstrated experience designing and executing stakeholder engagement strategies across diverse groups (e.g., providers, health systems, community organizations and patients), with the ability to translate input into actionable recommendations.
- Proven ability to deliver high-quality, implementation-ready assessments and develop strategic implementation plans.
- Proven ability to manage complex projects and deliver timely high-quality work within aggressive timelines.

Scope of Work

The selected consultant will conduct a comprehensive needs assessment and strategic planning process to develop a strategic rural telehealth blueprint with implementation plan for creation of a centralized telehealth body. Components include the following:

- **Environmental Scan and Landscape Assessment**
 - Assess current telehealth capabilities, infrastructure, and utilization across rural Maryland.
 - Evaluate broadband, device access, interoperability, and digital readiness.
 - Review existing programs, services, and initiatives (e.g., MATRC, State Office of Rural Health, Maryland Health Care Commission, and other partners such as the Maryland Rural Health Association).
 - Identify priority populations, geographic gaps, and unmet needs.
- **Stakeholder Engagement**
 - Design and execute a stakeholder engagement strategy.
 - Conduct interviews, focus groups, and/or surveys with key stakeholders (e.g., providers, health systems, community organizations, patients).
 - Identify barriers, opportunities, and unmet needs from multiple perspectives.
- **Opportunities and Barriers Analysis**
 - Analyze findings for telehealth implementation, expansion, and adoption, considering:
 - Policy, regulatory, and reimbursement challenges,
 - Infrastructure, including the potential for new technology offerings,
 - Interoperability gaps, and/or
 - Workforce and training needs.
 - Identify opportunities for scalable, high-impact telehealth solutions
- **Recommendations and Implementation Plan**
 - Make recommendations to address opportunities and barriers.
 - Develop a phased implementation plan for advancing telehealth in rural Maryland.
 - Ensure alignment with existing programs and avoid duplication of services.
 - Incorporate short-, medium-, and long-term strategies.

Deliverables

The selected consultant will produce the following deliverables:

- **Environmental Scan and Landscape Assessment**
 - Summarize current-state findings.
 - Identify priority communities and service gaps.
 - Assess infrastructure readiness.
- **Summary of Stakeholder Engagement**
 - Summarize key themes, barriers, and opportunities identified through stakeholder input.

- **Opportunities and Barriers Analysis**
 - Synthesize key challenges and high-impact opportunities.
 - Identify priority areas for intervention.
 - If applicable, recommend new technology offerings.
- **Recommendations and Implementation Plan** to implement a centralized telehealth body, including how to:
 - Accelerate the integration of existing telehealth platforms and electronic medical record (EMR) systems with Maryland’s State Designated HIE, considering interoperability, data exchange, and workflow alignment.
 - Enhance technical assistance and support for rural stakeholders, aligned with but not duplicative of existing efforts from Mid-Atlantic Telehealth Resource Center (MATRC), Maryland Rural Health Association, Maryland State Office of Rural Health, Maryland Health Care Commission and other partners. This includes, but is not limited to, recommendations for targeted training, technical assistance, and outreach strategies to support the healthcare workforce, specialty providers, and patients in adopting telehealth services.
 - Actions to address policy, regulatory, and reimbursement barriers.
 - Define key performance metrics and evaluation frameworks to measure progress over time.
 - Highlight high-impact clinical use cases such as behavioral health, chronic disease management, and remote patient monitoring.
 - Evaluate infrastructure readiness, including broadband, device access, digital literacy, and interoperability.
 - Sustain telehealth services.
- **Final Strategic Rural Health Blueprint Report and Dissemination Webinar**
 - Comprehensive written report.
 - Executive summary.
 - Presentation to CRISP leadership and stakeholders.
 - Dissemination webinar in partnership with the State Office of Rural Health.

Data Availability

CRISP will work with the consultant to develop a key informant contact list. Sources for the environmental scan and landscape assessment include:

- [Maryland Health Care Commission reports.](#)
- Preserve Telehealth Access Act of 2025 (SB 372/HB 869).
- Preserve Telehealth Access Act of 2023.

RFP Process and Submission Instructions

Contract Type

- CRISP reserves the right to reject any or all proposals.

- All expenses related to preparing a proposal are the responsibility of the consultant.
- Contract will be time and materials invoiced monthly.
- Administration and Indirect may NOT exceed 7% of the total.
- Consultant must comply with all applicable laws, and regulations.
- In accordance with the U.S. Consolidated Appropriations Act, no cooperative agreement funds may be used to pay an individual working on a DHHS funded project at a rate in excess of the [Federal Executive Level II Pay Scale](#). The Federal Executive Pay scale is updated in January of each calendar year. The rates are set by Congress as part of the annual federal budget appropriations process. The “direct salary and institutional base salary” are limited to the Executive Level II of the Federal Executive Pay scale.
- The selected consultant will be required to sign a CRISP standard agreement including confidentiality terms.

RFP Process Overview

Timeline

- Proposal Deadline: June 3, 2026 5:00pm EST
- Anticipated Award Date between June 15, 2026-June 30, 2026.
- Kickoff meeting and project plan within two weeks of contract signing.
- Required monthly interim progress reports.
- Draft Strategic Rural Health Blueprint Report by **November 15, 2026**.
- Final Strategic Rural Health Blueprint Report by **December 1, 2026**.
- Dissemination webinar by **December 31, 2026**.

Requests for Clarification

Please submit any questions to MDCcommunications@crisphealth.org.

Submission Instructions

- Submit proposals electronically in PDF format.
- Email proposals to: mdcommunications@crisphealth.org
- Subject line: Strategic Rural Telehealth Blueprint RFP – [Consultant Name]
- CRISP will not consider late proposals.

Proposal Evaluation

CRISP will evaluate proposals based on:

- Qualifications of the proposed team (40%):
 - Expertise in telehealth program planning and rural health services.
 - Familiarity with Maryland’s healthcare landscape and existing telehealth resources.

- Proven stakeholder engagement capabilities.
- Experience producing similar assessments on a compressed timeline.
- Proposed work plan (40%):
 - Clarity and vision to achieve all deliverables.
 - Capacity to meet all deliverable deadlines.
- Proposed budget and budget justification (20%).

Proposal Content

The proposal should follow the format below. The response should be concise while providing sufficient detail to adequately address all requirements. We provide single-spaced page length estimates for each section. There is a total 20-page limit.

Section 1. Cover Letter

- Include organization legal name and address.
- The responsible individual entering into the contract must sign the letter.
- Estimated length: 1 page.

Section 2. Executive Summary

- Introduce the consulting organization and provide a high-level overview of the proposed solution and associated timeline.
- Estimated length: 1 page.

Section 3. Consultant Overview and Qualifications

- Provide a company/consulting 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 assigned to this project. Resumes should be attached as an appendix and do not count towards the page limit.
- The consultant should provide two projects for reference using the table format in Figure 1. Provider references for customers with requirements similar to those described in this RFP. CRISP will notify consultants before contacting any references.

Figure 1: References

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

- Estimated length: 2 pages

Section 4. Project Narrative with Workplan and Timeline

- Describe the approach to meeting the scope of work and deliverables described above. You may choose to organize the response by the scope of work sections. Alternatively, you may choose to organize the response in a different way that is logical for your proposed solution.
- Describe the project management structure including the approach to communicating with CRISP so that CRISP stays apprised of project status to know that work progresses as expected.
- Demonstrate a thorough understanding of the project objectives, expected deliverables, and required timeline.
- Include in your timeline at least the deliverables bulleted above. Your organization is free to include additional milestones or key areas of effort to help our team understand your project plan.
- Estimated Length: 10-12 pages

CRISP will assume that any non-answer indicates that any proposed consultant is 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 any contract resulting from this opportunity.

Budget

Consultants must complete the attached [budget spreadsheet](#) to include:

Itemized Budget

Budget should be categorized by Personnel, Fringe, Travel, Equipment, Supplies, Contractual, Other and Indirect Costs

Budget Narrative

For each of the budget categories include a narrative justification for all costs. Budget narrative for administrative costs should be a separate justification.

Hourly Rates

The consultant should provide hourly billing rates and assumptions for level of effort for all assigned staff.

Other Costs

If the solution requires additional systems or capabilities not included in the consultant's proposal, delineate these in the final tab of the spreadsheet in a form you find suitable.

The bidding is competitive. CRISP will consider a range of proposal features such as the quality of the consultant's proposal, the expertise of staff involved, and cost. The award amount will be determined in conjunction with all parties based on reasonable market rates and scope(s) of work. Budget spreadsheet should be submitted separately and clearly tie back to the narrative response..

(Suggested page limit: 3 pages)

RFP Terms and Conditions

Proposal Response

CRISP reserves the right to reject any/all responses received in response to this RFP. CRISP will use any information obtained, along with other information that CRISP deems appropriate, in determining the suitability of a proposed offer. CRISP will notify bidders whose responses were not accepted. CRISP has no obligation to explain the basis of or reasons for the decision it makes relating to the proposals and/or this RFP. CRISP may identify multiple bidders who are determined suitable and negotiate with each of them on parallel tracks, pending a final contracting decision. All responses, assertions, and commitments made in this proposal will be part of any contract.

Response Becomes CRISP Property

All responses become the property of CRISP. CRISP will not return responses to bidders.

Formal Contract

A bidder receiving a positive response to their submission should be prepared to immediately begin negotiation of final contract terms based on the RFP and other mutually agreed 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 a bidder that a contract will be entered into with CRISP; CRISP may discontinue negotiations with a bidder at any time, in its sole discretion.

Within five (5) days of receiving a positive response, bidder is expected to notify CRISP in writing of its contract team, which shall include the individual with authority to approve and execute any final legally binding agreement with CRISP.

Until and unless a formal contract is executed by CRISP and bidder, CRISP shall have no liability or other legal obligation to bidder whatsoever, relating to or arising from this RFP, the RFP process, decisions as to awards resulting from this RFP, or otherwise.

Terms and Conditions

CRISP's standard terms and conditions are attached to this RFP. In providing a response, the bidder must provide a redline of these terms and conditions, should the bidder wish to enter into negotiations. If a redline is not provided, CRISP will assume the bidder is willing

to enter into the agreement, as is. Acceptance of a response does not indicate acceptance of the redlined terms and conditions. The bidder must comply with Maryland Department of Health, Maryland State Office of Rural Health, and CMS terms and conditions included at: <https://health.maryland.gov/pophealth/Pages/RHTP-Procurement.aspx> A successful bidder will also need to complete a funding assessment that confirms no RHTP funds will duplicate or supplant other funding sources.

Maintaining Pricing

Prices must remain valid for at least ninety (90) days from the closing of the contract. Contract negotiations will include price re-verification if the price guarantee period has expired. CRISP reserves the right to request that a bidder only provide a portion of the proposed deliverables or exclude certain partners. If bidders are unwilling to comply with RFP requirements or any terms and conditions, objections must be clearly stated in the Cover Letter to the response.

Cost of Response Preparation

All bidder's costs of proposal preparation and any negotiation will be borne by the bidder.

Applicable Law

The Laws of the State of Maryland shall apply, except where Federal Law has precedence. The successful individual or firm consents to jurisdiction and venue in the State of Maryland.

By the signature of its authorized representative, Bidder acknowledges that it understands and accepts the terms of this RFP.

Bidder: _____

By: _____

Title: _____ Date: _____