

RFI-003-10/11
STATE OF FLORIDA
AGENCY FOR HEALTH CARE ADMINISTRATION
REQUEST FOR INFORMATION
PREPAYMENT USE OF TECHNOLOGY TO DETECT AND DETER MEDICAID
FRAUD, ABUSE, AND OVERPAYMENTS

1. REQUEST FOR INFORMATION

The Agency for Health Care Administration (Agency) is seeking information from vendors for innovative uses of technology to assist the Agency in detecting and deterring fraud, abuse and overpayments in the Florida Medicaid program. The Agency is interested in obtaining information from vendors who would use unique Medicaid recipient identifiers in detecting and deterring fraud; identifiers are not limited to any one methodology and the use of biometrics is encouraged.

A Request for Information (RFI) is not a method of procurement. Responses to a RFI are not offers and shall not be accepted by the Agency to form a binding contract. This RFI shall not directly result in the execution of a contract with the Agency. The Agency reserves the right to utilize the information gathered through the RFI process to develop a scope of services, which may be incorporated into a contract using a statutorily approved method of procurement.

2. AGENCY GOALS

The outcomes desired by the Agency through the implementation of a prevention program include, but are not limited to:

- Improved ability to detect Medicaid fraud through use of technology;
- Improved reporting of detected and suspected fraud to the Agency; and
- Implementation of a fraud detection approach that will meet an established rate for return on investment.

3. ANTICIPATED SCOPE OF SERVICES

The vendor shall utilize a systematic method to deter fraud, abuse, and overpayments in the Florida Medicaid Program. The vendor's approach shall utilize innovative technology that is cost-effective for the Agency, readily available to the Agency, and able to be implemented and utilized by the Agency. The vendor shall provide reports and deliverables to the Agency as evidence of the program status and progress. The Vendor shall meet with the Agency to address current and/or future activities.

The vendor shall be well-versed in Florida Medicaid program policy, coverage and limitations, and the providers and recipients in the program.

4. RFI RESPONSE REQUIREMENTS

Vendors responding to this RFI are asked to be thorough, but concise. The total response to this RFI should be limited in length to no more than fifty (50) single-sided pages.

The RFI response should including the following information:

1. The vendor's name, place of business address(es) and contact information, including representative name and alternate if available, telephone number(s) and email address(es);
2. A statement of interest in the proposed services outlined in this RFI;
3. A description of the vendor's business and its experience as it relates to the services outlined in this RFI. This description should include a narrative explaining past experiences in which the vendor has engaged with other health care payers, health care agencies, health care service providers, or government agencies for the same or similar work. The vendor should indicate any Medicaid and/or Medicare experience it has for the same or similar work. The description should include a list of projects the vendor has bid on for services similar in nature to those described in this RFI;
4. A description of the methodology used by the vendor in planning and designing its proposed approach. The description should include, at a minimum, project management, criteria for evaluating identified deficiencies, and risk assessment and mitigation;
5. A description of the scope of Medicaid fraud that the vendor's proposed approach is designed to detect and deter, including the rationale for determining that it will detect/deter fraud as described in this RFI. The description should not be limited to any particular manner of defrauding (including abuse and overpayments), but should include a discussion of how the prospective vendor's approach may address as many manners as applicable, including:
 - a. Phantom billing;
 - b. Up-coding;
 - c. Overutilization;
 - d. Medicaid ID card share/swap;
 - e. Medical identity theft; and
 - f. Other fraudulent activities.
6. A brief narrative of the vendor's proposed system for providing the services described in this RFI including, but not limited to:
 - a. Anticipated technical support for hardware and software needs for the Agency and the vendor;
 - b. Whether technical support would be on-site or via telephone/on-line;

- c. Description of any existing collection/tracking capabilities that the vendor can modify to meet the Agency's needs;
 - d. The vendor's proposed system capability to flag anticipated or actual claims for Medicaid reimbursement for denial due to a detected error or ineligibility;
 - e. The vendor's proposed system capability to flag suspected fraudulent activity and an explanation of the vendor's proposed manner and frequency in which to convey suspected fraud to the Agency; and
 - f. Identification of system safeguards to ensure its users are not circumventing the fraud prevention aspects of the system.
- 7. A description of the vendor's proposed reporting capabilities to assist the Agency in further fraud detection and deterrence of potential erroneous payments as a result of the proposed approach.
- 8. A description of an implementation and operational plan for providing the services described in this RFI. The plan should include, but is not limited to:
 - a. Suggested timelines for completion of key activities and milestones;
 - b. A description of potential deliverables;
 - c. Pre-implementation analysis and plan for database/system integration with the Florida Medicaid Management Information System (FMMIS), including claims payment, provider file, and recipient eligibility;
 - d. Potential operational and implementation concerns with the proposed approach and plans to address them, including any assistance that might be needed from the Agency.
- 9. A description of how the vendor's proposed approach will offer advantages or improvements over existing, known alternative technologies. The description should also identify known or potential concerns with other alternative technologies.
- 10. A description of known or potential legal concerns for recipients, providers, and the Agency regarding the vendor's approach;
- 11. A description of the staffing level the vendor anticipates will be needed in order to carry out its proposed approach. The description should include, at a minimum, the estimated number of staff that the vendor would assign to a project such as the one described in this RFI, key staff positions and staff role(s) in the project;
- 12. Description of the vendor's information systems capabilities and security features, including the ability to protect information in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) requirements;

13. A description of the vendor's protocols and internal procedures for ensuring system security and the confidentiality of personally identifiable data, as well as its disaster recovery plan and ability to resume service with minimal disruption;
14. A description of the vendor's quality assurance system, including a description of how the vendor intends to monitor the appropriateness and effectiveness of the service;
15. An estimate of the overall cost to implement a preventative program as described in this RFI. Respondent's to this RFI hereby understand and agree that the estimate is not a cost proposal. The Agency reserves the right to utilize the cost information received for budgeting needs.
16. Identification of any proposed additional services or standards which exceed the Agency's minimum requirements for the services described in this RFI.

5. PROPRIETARY INFORMATION

This RFI and any response to it are public records under Chapter 119, Florida Statutes. Responses must indicate which portions, if any, of the information provided are trade secret by marking each page upon which such information appears as "trade secret pursuant to Section 812.081, Florida Statutes. Vendors must indicate which portions, if any, of the information being provided are trade secrets, by marking each page upon which such information appears. Information specifically identified as a trade secret under Section 812.081, Florida Statutes, will be kept confidential to the extent provided by law. If the Agency receives a public records request for information that has been identified by the responder as a trade secret, the Agency will notify the responder of such request.

6. RESPONSES

Respondents to this RFI shall submit one (1) hard copy and one (1) electronic copy of its response. The electronic format shall be submitted on CD-ROM. The software used to produce the electronic files must be Microsoft Word 97 and/or Excel 97 or greater. These electronic files must be logically named and easily mapped to the hard copy submittal. The electronic media must be clearly labeled in the same manner as the hard copy.

Responses to this RFI should be provided no later than **5:00 PM, Eastern Time, November 1, 2010**. Responses shall be submitted to:

Agency for Health Care Administration
Procurement Office
Attn: Chrisy Smith
Building 2, Suite 203
2727 Mahan Drive, MS #15
Tallahassee, FL 32308

7. VENDOR COSTS

Vendors are responsible for all costs associated with preparing a response to this RFI. The State of Florida, Agency for Health Care Administration, will not be responsible for any vendor costs associated with preparing this information.

8. QUESTIONS

Questions concerning this RFI can be submitted in writing via email to the address listed above. All responses to questions received will be made, in writing, directly to the sender.

9. AGENCY FOR HEALTH CARE ADMINISTRATION WEBSITE

Additional information about the Florida Agency for Health Care Administration can be found on the Agency's website at: <http://ahca.myflorida.com>.

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