

Board of Community Health  
Care Management Committee Meeting  
April 14, 2005

The Board of Community Health Care Management Committee held its meeting in the Floyd Room, 20<sup>th</sup> Floor, West Tower, Twin Towers Building, 200 Piedmont Avenue, Atlanta, Georgia.

Committee members present were Dr. Inman "Buddy" English and Kim Gay. Kathy Driggers, DCH Chief, Managed Care and Quality, was also in attendance.

Ms. Driggers began by stating that the Department strongly believes that this is probably the most important procurement that has ever been done in the state and the Department feels very strongly about the manner in which it is done. Consequently the Department is handling it a little differently than maybe a conventional procurement would be done. The evaluation team consists of 52 individuals from the Department of Community Health, Georgia Technology Authority, Department of Insurance, as well as independent subject matter experts. The evaluation team is divided into seven teams for each section of the RFP. Only state employees are voting members of these teams.

- Team 1 – Evaluates Enrollment and Disenrollment Member Services and Marketing
- Team 2 - Evaluates Public Benefits, Special Coverage Positions and EPSDT
- Team 3 - Evaluates Provider Networks, Providers Services, Provider Contracts and Payments
- Team 4 – Evaluates Utilization Management and Quality Assurance
- Team 5 - Fraud Abuse, Grievance and Appeals
- Team 6 – Administration and Management – Claims Management and Financial Management
- Team 7 – Information Management and System

There is a crossover between two teams--claims management for example, is a financial process but is also an IT process. There is actually an eighth team that will look at organization and staffing and check references. The Department is in the process of copying for each one of those team members their relevant sections of the RFP. The Department has a wide range of people serving on the evaluation team. They are all senior level and have a wide range of authority now and as well as a wide range of past experience. There are people who are on more than one team. In addition to Medicaid policy staff, there are investigators from the Composite State Board of Medical Examiners, staff from the State Health Benefit Plan and Auditors on the team.

The teams have already been through training sessions and the Department has spent a lot of time preparing these teams for this evaluation. The Department is using a tool that was developed by the federal government called the CASSIP Tool for Federal Procurements. In addition they each have an individual team room where a complete set of all of the bids is there for them in hard copy.

Ms. Driggers said teams can meet as often as they want to individually and some of them have. The Department has scheduled checkpoint meetings along the way in the process. There are a number of required attachments, and samples such as a member handbook, member ID cards, are provided to the team in their team rooms. In addition, all the plans are submitted on CDs as well so team members can look at their CDs.

Ms. Driggers gave an overview of the time schedule.

- Today and tomorrow (April 14 and 15) the team members get their proposals and evaluations tools. They have been given to April 27 to complete all of their reading. We are suggesting that they read everything first.
- On April 28 and 29 midpoint team meetings will be held where we sit down with each one of the teams and say okay guys you should be finished with your reading now; are there any questions, any clarifications needed, any problems that you see, anything you want to talk about.
- We are giving them until May 4 to have their individual evaluations complete.
- Between May 5 and May 13 are team consensus meetings. An individual team member's individual score is not what is recorded; it is the team consensus score. A team will score each particular section, giving it a score of 1 to 5, which corresponds to a point value (1 meaning really bad and 5 meaning really good). It is the team consensus score that matters and what is recorded. In addition there is one person on each team who is designated team chair whose responsibility is to read every one of the bids. Once the teams go through their consensus meetings, the Team Chairs come together and there is a second level of consensus meetings where each of the Team Chairs put all of the scores together and decide collectively on a total consensus score for each bid.

The point allocation for the bids is 1000 points. There are 700 points allocated for the technical piece and 300 for the cost proposal. A bidder has to make 525 points on the technical portion in order to go to the finals to have their cost proposal opened. The Department will send those scores to the Department of Administrative Services and they will open cost proposals for the bids scored past 525.

The next process is the cost proposals evaluation. Mercer Consulting evaluates them in conjunction with DOAS, and a very specific tool is being used to evaluate the cost. The cost proposals are evaluated according to that methodology and the pricing is put together with the technical scores to determine the winners by region. The Department is anticipating the second part of the cost proposals to be opened around May 18. It will take Mercer and DOAS two weeks to do that. DCH hopes to have the cost evaluations complete by the end of May and send the notification to the apparent winner on June 6. By June 30, DCH expects to have the contract signed so these can go live on July 1.

Ms. Driggers said staff will continue to brief Commissioner Burgess, other DCH division chiefs and certain members of the board on the status of the evaluation process.

After addressing questions from the Committee and audience, Ms. Driggers concluded her report.

There being no further business, the meeting was adjourned.