



*Washington Health Benefit Exchange*

Request for Proposal  
HBE 16-003

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*Navigator Program Services*

*Pierce County Lead Organization*

**Release Date: June 30, 2016**

**Responses Due: August 8, 2016**

# Table of Contents

## 1 Contents

2	Introduction .....	4
2.1	Background .....	4
2.2	Washington Health Benefit Exchange (HBE).....	5
2.3	Navigator Program Overview.....	5
2.4	Lead Organization Responsibilities .....	6
2.5	HBE Infrastructure to Support Navigator Activities .....	8
2.6	Navigator Program Administration.....	9
2.7	Period of Performance .....	9
2.8	Acquisition Authority .....	10
2.9	Scope of the RFP .....	10
2.10	Award .....	10
2.11	Solicitation Process .....	10
2.12	Letter of Intent.....	11
3	RFP Schedule.....	11
4	RFP Administration .....	13
4.1	Communication with HBE .....	13
4.2	Vendor Questions .....	13
4.3	Delivery of RFP Responses .....	13
4.4	RFP Mandatory and Mandatory and Scored Requirements/Responses .....	14
4.5	Washington State Sales Tax.....	14
4.6	Vendor Compliance.....	14
4.7	Vendor Complaints Regarding Requirements and Specifications .....	14
4.8	Withdrawal of Response.....	14
4.9	Cost of RFP Response Preparation.....	15

4.10	Best and Final Offer.....	15
4.11	Response Property of HBE .....	15
4.12	Proprietary or Confidential Information.....	15
4.13	RFP Changes.....	15
4.14	Errors in Response .....	16
4.15	Waive Minor Administrative Irregularities .....	16
4.16	Selection of the Apparently Successful Vendor (ASV) .....	16
4.17	Announcement of Apparently Successful Vendor .....	16
4.18	Optional Vendor Debriefing.....	16
4.19	Protest Procedures .....	17
4.20	No Obligation to Purchase .....	17
4.21	Right to Cancel .....	17
4.22	Order of Precedence .....	17
4.23	Publicity.....	18
5	Affordable Care Act and HBE Requirements for Navigator Organizations and Navigators.....	18
5.1	Who may apply? Minimum requirements:.....	18
5.2	General Responsibilities of Navigator Organizations and Navigators .....	20
5.3	Organization Overview (M).....	24
5.4	General Requirements (MS) .....	26
5.5	Navigator Network (MS) .....	27
5.6	Public Education and Awareness .....	30
6	Performance Monitoring (MS).....	31
6.1	Performance Monitoring Process: .....	32
7	Contract Allocations and Enrollment Targets .....	32
7.1	Budget Proposal (MS): .....	33
8	Evaluation .....	35
8.1	Clarification of Response .....	35
8.2	Administrative Screening.....	35

8.3	Mandatory Requirements.....	35
8.4	Qualitative Review and Scoring .....	35
8.5	Financial Response Evaluation.....	36
8.6	Vendor’s Total Score.....	36
8.7	Notification to RFP applicants of RFP outcome .....	37
9	Glossary of Terms.....	37
10	RFP Appendices.....	40
10.1	Appendix A Conflict of Interest Standards.....	40
10.2	Appendix B Proposed Contract Terms and Conditions.....	40
10.3	Appendix C Protests and Procedures.....	40
10.4	Appendix D Recommended Navigator Organization Selection Criteria .....	40
10.5	Appendix E Navigator Organization Profile Sample.....	40
10.6	Appendix F Navigator Knowledge, Skills and Competencies Guidelines .....	40
10.7	Appendix G Navigator Code of Ethics .....	40
10.8	Appendix H Navigator Responsibilities .....	40

## **2 Introduction**

### **2.1 Background**

In July 2013, the Washington Health Benefit Exchange (HBE) Navigator Program established a statewide network of community navigator organizations to provide healthcare insurance application and enrollment services to Washington’s most vulnerable and hard-to-reach population. This network of navigator organizations was configured into regional/county service areas and managed by navigator lead organization contractors. This Request for Proposal is to attract a navigator lead organization for the Pierce County service area for the contract period October 1, 2016 through June 30, 2017. The short contract timeframe is necessary to ensure continued navigator services in Pierce County through the 2015-2017 state biennium ending June 30, 2017. Please note, HBE plans to administer a new procurement early

in 2017 with new contracts being established for the 2017-2019 state biennium beginning July 1, 2017.

## **2.2 Washington Health Benefit Exchange (HBE)**

The Washington Health Benefit Exchange (HBE) was established July 1, 2011 in statute as a public-private partnership. On October 1, 2013 HBE's marketplace, the *Washington Healthplanfinder*, was opened for individuals and small businesses in Washington to purchase private health insurance coverage through Qualified Health Plans (QHPs) and have access to premium tax credits or apply for coverage through the state's Medicaid system – Washington Apple Health. The HBE is based in Olympia, Washington.

More information about the Washington Health Benefit Exchange is available online at <http://wahbexchange.org/>

## **2.3 Navigator Program Overview**

Prior to opening for business, population data indicated a potential for nearly 700,000 to one million uninsured Washingtonians to become newly covered as a result of expanded Medicaid eligibility and the creation of subsidized and low-cost health insurance products offered through the *Washington Healthplanfinder*. To successfully enroll these individuals in coverage, the HBE developed several avenues for robust outreach and enrollment, including face-to-face assistance through Navigator Program resources.

Lead Organizations are responsible for identifying local community needs related to enrollment assistance and to identify target populations that experience barriers to enrolling in coverage, such as language, low income, cultural beliefs, transportation, etc. Lead Orgs are expected to partner with community organizations best suited to reach these target populations and deliver services. Lead Organizations also coordinate consumer outreach across their service area. Lead Organizations and their network partners are a vital, key component of HBE's customer service team. Foundational to the navigator service delivery model are the individuals representing lead organizations and their partners who deliver application and enrollment services as HBE-certified navigators. Navigators explain the application process, enter applications into *Washington Healthplanfinder*, and explain eligibility results. They facilitate enrollment in both Qualified Health Plans (QHPs) and Washington Apple Health (WAH).

Responsibilities of Navigators:

1. Maintain expertise in eligibility, enrollment and program specifications.
2. Provide information and services in a fair, accurate and impartial manner.
3. Facilitate a consumer's selection of a QHP.
4. Provide assistance applying for premium subsidies and cost-sharing.
5. Provide referrals to appropriate agencies including: the Office of the Insurance Commissioner, the Health Care Authority, and the Department of Social and Health Services, for applicants and enrollees with grievances, complaints, or questions.
6. Provide information to assist individuals in understanding the value and benefit of health insurance coverage, differences among qualified health plans, how to use their insurance benefits, costs they are responsible for and costs the insurance company is responsible for, and how to access the health care system. This includes follow-up services and ongoing support to help people understand how to report changes and retain coverage over time.
7. Contact QHP enrollees periodically throughout the plan year to share pertinent information provided by HBE, such as tax filing requirements, change reporting, important dates to remember for renewing coverage, etc.
8. Provide all information and services in a manner that is culturally and linguistically appropriate and ensures accessibility for individuals with disabilities.
9. Enter all consumer information related to application and enrollment in the *Washington Healthplanfinder* following security and confidentiality standards established by the Exchange.

#### **2.4 Lead Organization Responsibilities**

Lead Organizations will:

- Assure that HBE-trained, certified Navigators are available and readily accessible to residents in the service area to deliver one-on-one, in-person *Washington Healthplanfinder* application and enrollment assistance.
- Recruit, evaluate and select organizations in their service area that are best suited to accomplish this work; for example, those that have existing relationships with consumers likely to need assistance obtaining health care coverage or using the *Washington Healthplanfinder* system. Best suited to provide these essential services are organizations that interact regularly with individuals and families, have experience serving vulnerable and hard-to-reach populations, and have earned reputations for fairness and trustworthiness. The network needs to reflect organizations with relationships to groups likely to be eligible for both QHPs and WAH.

- Oversee their network of paid and unpaid organizations to deliver one-on-one customer support needed by individuals to access health care programs and qualified health plans available through the *Washington Healthplanfinder* and assist consumers as they navigate Medicaid programs based on Modified Adjusted Gross Income (MAGI) parameters.
- Initiate and lead community outreach and awareness planning and events for the overall service area to ensure a coordinated and strategic effort. Provide periodic forums for Navigators to network and receive updates.
- Act as the funding agent for network partners, compensating their paid, subcontracted network navigator organizations according to Exchange guidelines. Lead Organizations may also include unpaid partners in their networks and must maintain a written agreement with these partners that includes pertinent Navigator service expectations, especially pertaining to security, nondisclosure, and confidentiality.
- Maintain accurate lists of the navigators in their service area, secure and maintain navigator attestations and background checks, and ensure HBE is provided timely notification about new individuals needing navigator testing and certification and access to *Washington Healthplanfinder* or terminating Navigator staff.
- Maintain a list of active Brokers in the service area to be shared with network partner organizations.
- Develop a process for immediate notification to HBE regarding Navigator security, confidentiality and nondisclosure breaches.
- Monitor performance and program integrity of all partners pertaining to Navigator services.
- Participate in meetings and other opportunities with the Exchange and share information with service area navigators.
- Provide regular reports as required by the Exchange and participate in ad hoc reporting as needed.
- Provide enhanced user support on application issues reported by service area navigators. HBE requirements for lead organizations to have the enhanced user function:
  - Designated enhanced user staff must be an employee of the lead organization.
  - Enhanced user staff must be an HBE-trained, certified navigator, complete initial and on-going enhanced user training and on-going training for navigators, meet navigator background check requirements, and complete attestations required by HBE to perform this function.
  - Participate in all HBE enhanced user teleconferences, webinars, and meetings.

## 2.5 HBE Infrastructure to Support Navigator Activities

The Exchange has developed infrastructure to support consumers in learning about and enrolling in health care coverage. Navigators will leverage these resources to assist consumers and report activity to HBE.

1. *Washington Healthplanfinder*: HBE's web-based portal provides consumers with one-stop shopping for health insurance coverage. Navigators will use the *Washington Healthplanfinder* to facilitate individual and family applications, explore plan benefits and costs, apply for cost reductions/tax credits, and initiate enrollment in health care coverage. Navigators will be granted system access that enables them use of system features to help manage and track consumer information through a dashboard.
2. HBE Customer Service Center (Call Center): provides consumer support by phone, responds to basic questions, provides eligibility and enrollment support services and provides website access support. The Call Center assists consumers in connecting to the appropriate agency that can receive complaints and assist with appeals and grievances regarding medical necessity and coverage decisions. Navigators may use the Call Center to seek assistance on behalf of a consumer.
3. Outreach and public awareness support: HBE will support efforts of lead organizations and network partners to the extent possible. Outreach and awareness materials will be developed by HBE for use by lead organizations and network partners. These materials will use HBE-approved messaging. Much of the material will be customizable, enabling organizations to insert their own logos, graphics, event details, locations, etc. Materials will be available in English and Spanish, and some materials will be offered in other languages to accommodate specific needs and outreach goals.
4. Navigator training and certification: HBE navigator training will prepare lead organization and partner navigators to provide consumer assistance and education, complete a consumer's application and eligibility, and facilitate enrollment, renewal, and disenrollment services. The training is web-based and self-paced. Successful completion of the training and passing a qualifying exam is a certification requirement for navigators. HBE's navigator training curriculum includes:
  - Navigator orientation - designed to help navigators educate consumers new to insurance to understand and use health insurance benefits; to deliver services with cultural competency; and other topics that address the needs of vulnerable groups.
  - *Washington Healthplanfinder* system: technical training required to efficiently use the marketplace portal. Training will also include instruction on the eligibility and

- enrollment process, including plan presentation and selection; payment procedures, etc.
- Policies and Procedures: health insurance, QHPs, ethics, customer service, confidentiality, security and nondisclosure, etc.
  - Washington Apple Health: overview of Medicaid programs; modified adjusted gross income (MAGI) and non-MAGI eligibility.
5. HBE Navigator Program staff will provide guidance and direction to lead organizations, communicate policy and system updates, and administer program activities, including enhanced user support. Program staff can assist lead organizations in resolving program barriers, problem-solving, or implementing suggestions or recommended improvements. Periodic conference calls and in-person meetings will be conducted to provide opportunities for lead organizations to connect, share information, and work collaboratively on navigator program needs and issues.

## **2.6 Navigator Program Administration**

The HBE will contract with lead organizations to administer navigator services throughout their service area. Lead organizations are encouraged and expected to partner with other organizations in the service area that are best suited to meet the needs of their local communities. Partners can be paid or unpaid. Lead organizations will be responsible for overseeing partners' service delivery across the service area and will provide a single point of engagement with HBE.

Contracts resulting from the RFP are subject to change during the term of the contract. A change order process will be established for use by either the HBE or the Contractor. The Contractor agrees to reasonably accommodate changes requested by HBE under this process.

All organizations that subcontract with the lead organization are subject to the same contract terms and conditions as the lead organization, and are subject to oversight by the HBE.

## **2.7 Period of Performance**

HBE's lead organization contract resulting from this procurement will begin on October 1, 2016 or upon contract execution and run through June 30, 2017. Lead organizations will need to anticipate high demand for outreach and awareness activities leading up to and throughout open enrollment. Lead organizations also need to plan for increased workload through the open enrollment period beginning November 1, 2016 and ending January 31, 2017. Workload peaks should also be expected during the federal tax season. Organizations will need to adjust

staffing to accommodate workload peaks as needed; however, ongoing assistance must be available throughout the year at a level necessary to assist consumers with QHP special enrollments, change reporting, tax-related questions, and general questions related to QHP coverage.

Note: Lead organization services in Pierce County are part of HBE's statewide navigator network. This RFP is generated to fill the lead organization vacancy in this service area for nine months through the current state biennial period. All lead organization services statewide will be reproccured in early 2017 and new contracts will be established by July 1, 2017 for the 2017-2019 state biennium.

## **2.8 Acquisition Authority**

The HBE issues this Request for Proposal (RFP) acting under the authority pursuant to Chapter 43.71 of the Revised Code of Washington (RCW). Chapter 43.71 RCW is the statute that established the Washington Health Benefit Exchange Board and the Health Benefit Exchange.

## **2.9 Scope of the RFP**

This RFP is being issued for exclusive use by HBE. Organizations that meet the mandatory requirements set forth in this RFP may submit a response.

## **2.10 Award**

There will be one contract awarded as a result of this RFP. The vendor that meets all RFP mandatory requirements and is selected following procedures outlined in Section 4.16 will be notified by email.

## **2.11 Solicitation Process**

The solicitation process of this project is sanctioned and driven directly from federal law and mandated milestones tied to Exchange certification. The procurement is initiated by this RFP. Interested organizations will respond by submitting a complete proposal regarding their abilities to implement and operate a lead organization network for HBE as detailed in this RFP. Potential vendors must use the RFP application template to complete their proposals as outlined in the RFP application packet and submitted by the date/time listed in Section 3 RFP schedule.

HBE will conduct a vendor conference webinar on the date outlined in Section 3 RFP schedule. The vendor conference is optional for entities interested in submitting a proposal. Individuals may submit written questions to the RFP Coordinator only prior to and following the vendor

conference until the cut-off date for questions noted in Section 3 RFP schedule. Individuals may also ask questions during the vendor conference.

Verbal responses to questions provided during the vendor conference will be considered unofficial and non-binding. Written responses to vendor questions will be posted as a numbered addendum on the Exchange procurement webpage within a reasonable time after the vendor conference. The name of the vendor that submitted the question(s) will not be identified. Only written responses posted to the Exchange webpage will be considered official and binding.

No further questions regarding the RFP or proposal requirements will be accepted or responded to after the established question cut-off in Section 3 RFP schedule.

### **2.12 Letter of Intent**

Organizations interested in submitting a proposal to serve as the Pierce County lead organization will submit a non-binding Letter of Intent by July 18, 2016 notifying the Exchange of their interest in applying. The names of organizations submitting a letter of intent will be published as an addendum on the Exchange procurement webpage. Submitting a letter of intent will not obligate a vendor if they subsequently decide not to apply.

There will be no penalty for failure to submit a letter of intent by the due date; proposals for vendors who do not submit a letter of intent will be accepted provided all mandatory proposal elements are met and the proposal is timely.

## **3 RFP Schedule**

The RFP process timelines detailed in this section are set and non-negotiable. Failure to meet any of the due dates and times will disqualify the proposal from consideration. There will be no exceptions. All times are Pacific Time (PT), Olympia, WA.

June 30, 2016	RFP issued and posted on the HBE corporate website/procurements
July 18, 2016	Deadline for submitting vendor questions to address during the vendor conference
July 18, 2016	Vendor Letter of Intent due
July 25, 2016 (9a-10:30a)	Vendor conference via webinar use this link to register for webinar URL <a href="https://attendee.gotowebinar.com/register/4989318060662497283">https://attendee.gotowebinar.com/register/4989318060662497283</a> Webinar ID:148-924-099
July 28, 2016	Final date to submit vendor questions
August 1, 2016	Written responses to Vendor Questions posted on HBE procurement webpage
August 8, 2016	Vendor proposals are due and must be received electronically by RFP Coordinator no later than <b>5:00 PM PDT Olympia</b>
August 17, 2016	Apparently Successful Vendor Announced
August 22, 2016	Vendors not selected may request an optional vendor debrief within three business days after Apparently Successful Vendor is announced
October 1, 2016	Contract begins, dependent on completion of contract execution process.

## 4 RFP Administration

### 4.1 Communication with HBE

Customer Agency: Washington Health Benefit Exchange

RFP Coordinator: Kathy Krulich, Navigator Senior Program Specialist

Mailing Address: PO Box 657, Olympia WA 98507-0657

Telephone: 360.688.7754

Email: [kathy.krulich@wahbexchange.org](mailto:kathy.krulich@wahbexchange.org)

Submitting Proposals: Proposals must be electronically transmitted to the RFP Coordinator by 5:00 p.m. on August 8, 2016 to be considered.

### 4.2 Vendor Questions

Vendor questions regarding this RFP will be allowed as outlined in Section 3 RFP schedule. Vendor questions must be electronically submitted to the RFP Coordinator at [kathy.krulich@wahbexchange.org](mailto:kathy.krulich@wahbexchange.org). HBE will address vendor questions received by the due date with responses posted as addenda on the Exchange procurement webpage. All oral communication, including verbal responses to questions during the vendor conference will be considered unofficial and non-binding. Only written responses posted as addenda to the Exchange procurement webpage will be considered official and binding.

### 4.3 Delivery of RFP Responses

Responses must be electronically submitted by the due date and time. Any area of the response that requires a signature must be accompanied by scanned signatures. Receipt date and time of electronic responses will be the date and time the RFP Coordinator receives the email(s) transmitting the response. All emails needed to submit lengthy proposals must be received by the published date and time, otherwise the response will be considered incomplete and will not be considered.

Receipt of all required response components prior to the response due date and time will constitute compliance with the response requirements. Responses arriving after the due date and time will not be reviewed or evaluated. HBE is not responsible for a vendor's failure to successfully submit a proposal by the due date.

#### **4.4 RFP Mandatory and Mandatory and Scored Requirements/Responses**

Mandatory (M): Sections of the RFP are marked 'M' indicating that the corresponding section on the application template requires a mandatory response. These responses will not be scored; however, absence of any of the mandatory responses could result in disqualification of the proposal.

Mandatory and Scored (MS): Sections of the RFP are marked 'MS' indicating that the corresponding section on the application template requires a mandatory response and will receive a weighted score. Absence of any of the mandatory scored responses will negatively impact the overall score of the proposal.

#### **4.5 Washington State Sales Tax**

Vendors responding to this RFP must be registered with the Washington State Department of Revenue and must collect and report all applicable state taxes, including the Washington State sales tax as prescribed by law.

#### **4.6 Vendor Compliance**

By timely response to this RFP and returning the signed Certifications and Assurances in the application packet, the vendor certifies willingness to comply with all terms and conditions contained in this RFP. This includes the Contract Terms and Conditions (T&C) set forth in Appendix B, which is attached hereto and incorporated herein by reference. The vendor must mark on the Certifications and Assurances document whether they will or will not protest certain aspects of the proposed Contract Terms and Conditions and will document those specific aspects of the proposed Contract Terms and Conditions being protested and include the document with their signed Certifications and Assurances in their application packet.

#### **4.7 Vendor Complaints Regarding Requirements and Specifications**

Vendors that believe the RFP unduly constrains competition or contains inadequate or improper criteria may submit complaints to the RFP Coordinator prior to responding to the RFP. The complaint must be electronically submitted to the RFP Coordinator before the response due date. The solicitation process may continue while HBE considers the complaint(s). Should a vendor complaint identify a change that would be in the best interest of the HBE to make, HBE may modify this solicitation document accordingly, see 4.13.

#### **4.8 Withdrawal of Response**

Vendors may withdraw their submitted proposal at any time by electronically submitting a withdrawal request to the RFP Coordinator, signed by the authorized representative of the vendor. After withdrawing a previously submitted response, the vendor may resubmit their proposal response at any time provided the resubmission is received by the due date and time.

#### **4.9 Cost of RFP Response Preparation**

HBE will not reimburse vendors for any costs associated with the preparation and submission of a vendor's response to this RFP.

#### **4.10 Best and Final Offer**

HBE reserves the right to make an award without further discussion of the response submitted; there will be no best and final offer procedure. Therefore, the response should be initially submitted on the most favorable terms that the vendor can offer.

#### **4.11 Response Property of HBE**

All materials submitted in response to this RFP become the property of HBE. HBE has the right to use any of the ideas presented in any response to the RFP. Selection or rejection of a response does not affect this right.

#### **4.12 Proprietary or Confidential Information**

Any vendor's information contained in the response that is proprietary or confidential must be clearly designated. Marking of the entire response or entire sections of the response as proprietary or confidential will neither be accepted nor honored. HBE will not accept responses where pricing is marked proprietary or confidential.

To the extent consistent with Chapter 42.56 RCW Public Disclosure Act, HBE shall maintain the confidentiality of vendor's information marked confidential or proprietary. If a request is made to view a vendor's proprietary information, HBE will notify vendor of the request and of the date that the records will be released to the requester unless the vendor obtains a court order enjoining that disclosure. If the vendor fails to obtain the court order enjoining disclosure, HBE will release the requested information on the date specified.

#### **4.13 RFP Changes**

HBE reserves the right to make changes to this RFP at any time prior to the RFP response due date. In the event it becomes necessary to revise any part of this RFP, addenda will be posted on the Exchange procurement webpage. Notices regarding any RFP changes will also be sent through the Exchange website listserv. It is the vendor's responsibility to ensure that they have reviewed and incorporated all changes to the RFP prior to submitting their response. HBE

also reserves the right to cancel or to reissue the RFP in whole or in part, prior to execution of a contract resulting from this procurement.

#### **4.14 Errors in Response**

HBE is not liable for any errors in vendor responses. Vendors will not be allowed to alter response documents after the response due date. Vendors are liable for all errors or omissions contained in their responses. Corrections to the response submitted prior to the due date must include the agency name and must reference the RFP section number, title and page number of the vendor application where it is to be inserted.

#### **4.15 Waive Minor Administrative Irregularities**

HBE reserves the right to waive minor administrative irregularities contained in any vendor response. Additionally, HBE reserves the right, at its sole option, to make corrections to a vendor's response when an obvious arithmetical error has been made in the price quotation. Vendors will not be allowed to make changes to their quoted pricing after the response submission due date.

#### **4.16 Selection of the Apparently Successful Vendor (ASV)**

After evaluation of the proposals according to Section 8 Evaluation Process, the HBE shall select the ASV to provide navigator lead organization enrollment services for the HBE.

This selection process will occur in two stages:

Vendor proposals will first be evaluated and scored based on RFP Section 8 Evaluation Process. Then HBE will select the Apparently Successful Vendor. If there are two highest scoring proposals, HBE reserves the right to require the two finalists to present their navigator network approaches and strategies in an oral presentation to the Exchange. In this case, the ASV will be selected from the two finalists.

The evaluation process is designed to make this award not necessarily to the vendor of least cost, but rather to the vendor whose response best meets the requirements of this RFP and the work to be done.

#### **4.17 Announcement of Apparently Successful Vendor**

All vendors responding to this solicitation will be notified by e-mail, according to be the date published in Section 3 RFP schedule, when HBE has determined the Apparently Successful Vendor.

#### **4.18 Optional Vendor Debriefing**

Any vendor who is not selected as an apparently successful vendor will be given the opportunity for a debriefing conference by electronically submitting the request to the RFP Coordinator. The request for a debriefing conference must be received by the RFP Coordinator within three (3) business days after notification of the apparently successful vendor. A debriefing conference will be scheduled within three (3) business days of the request. The requesting party will be notified of any delay if HBE requires additional time to prepare for the debrief conference. The debrief conference will be limited to a critique of the requesting vendor's proposal, will be conducted by telephone, and scheduled for 30 minutes maximum. Comparisons between proposals or evaluations of other proposals will not be allowed at any time.

#### **4.19 Protest Procedures**

Vendors who have submitted a proposal to this solicitation and have had a debriefing conference may make protests. Upon completion of the debriefing conference, a vendor has five (5) business days to email a formal, written protest of the solicitation to the RFP Coordinator. Further information regarding the grounds for filing and resolution of protests is contained in Appendix C Protest Procedures.

#### **4.20 No Obligation to Purchase**

HBE reserves the right to refrain from contracting with any and all vendors. The release of this RFP does not obligate HBE to make any purchases. HBE additionally reserves the right to purchase similar products and services from other sources, at its sole discretion.

#### **4.21 Right to Cancel**

The HBE reserves the right to cancel this RFP at any time, reject any and all responses received, and/or not execute a contract resulting from this RFP without penalty to the HBE. The release of this solicitation document does not obligate the HBE to contract for the services specified in this RFP. The HBE shall not be liable for any costs incurred by a vendor in the preparation or submission of a proposal in response to this RFP or any other activity related to responding to this RFP.

#### **4.22 Order of Precedence**

If any provision of this RFP shall be deemed to be in conflict with any statute or rule of law, such provisions shall be deemed modified to conform to said statute or rule of law. In the event of inconsistency in any other documents related to transactions executed pursuant to the RFP, the inconsistency shall be resolved in the order of precedence stated below:

1. Applicable federal and state statutes, laws, and regulations

2. Certifications and Assurances in the application packet
3. The Terms and Conditions of this RFP
4. Appendix B – Proposed Contract Terms and Conditions
5. Any statement of work issued as a result of this RFP
6. The vendor’s response to this RFP

#### **4.23 Publicity**

The apparently successful vendor agrees to submit to HBE all advertising, sales promotion, and other publicity matters relating to any products and services furnished by the vendor wherein HBE’s name is mentioned or language used from which the connection of HBE’s name therewith may, in HBE’s judgment, be inferred or implied. The vendor further agrees not to publish or use such advertising, sales promotion, or publicity matter without the prior written consent of HBE.

## **5 Affordable Care Act and HBE Requirements for Navigator Organizations and Navigators**

This section outlines the requirements organizations must meet under the Affordable Care Act and for HBE under this funding opportunity. Entities interested in applying for this opportunity must follow the application process detailed in the application packet, including the use of the application template.

Organizations will be required to attest on their application template that they meet the requirements specified.

### **5.1 Who may apply? Minimum requirements:**

HBE will select a community and consumer-focused nonprofit group as a navigator organization. The following types of organizations may apply:

- Trade, industry, and professional associations
- Commercial fishing industry organizations, ranching/farming organizations
- Chambers of Commerce
- Unions
- Resource partners of the Small Business Administration
- Agents/brokers
- Other public or private entities, such as tribes, tribal organizations, urban Indian health programs, state and local human service organizations.

### 5.1.1 Organizational Requirements:

The organizational applicant must:

- a. Have and maintain a physical business presence in the proposed service area,
- b. Ensure certified navigators are available to deliver application and enrollment services in person throughout the service area.
- c. Have the knowledge, expertise and resources to carry out the responsibilities outlined throughout this RFP.
- d. Have existing relationships or demonstrate that relationships could readily be established with consumers likely to be eligible for QHP enrollment in the proposed service area, including relationships with employers seeking assistance for uninsured employees, other uninsured employees, other underinsured or uninsured groups, or self-employed individuals.
- e. Not have a conflict of interest as outlined in Appendix A Conflict of Interest Standards during the term of the contract and must submit a plan for remaining free of a conflict for the duration of the contract.
- f. Comply with HBE Data Security Requirements as detailed in Appendix B Proposed Contract Terms and Conditions Schedule 6 and HBE Nondisclosure Requirements as detailed in proposed Appendix B Contract Terms and Conditions Schedule 5.
- g. Have at least 2 years' experience as a Navigator Lead Organization or a Navigator network partner.

### 5.1.2 Prohibited Organizations/Individuals

Organizations or individuals may not serve as a navigator organization or a navigator under this funding opportunity if the organization or individual is:

- Affiliated with a health insurance company or issuer of stop loss insurance.
- A subsidiary of a health insurance company or issuer of stop loss insurance.
- Affiliated with an association that includes members of or lobbies on behalf of the insurance industry.
- Affiliated with an organization that receives or directly receives compensation or consideration, directly or indirectly, from any health insurance issuer or issuer of stop loss insurance in connection with the enrollment of any individuals or employees in a QHP or non-QHP.

### 5.1.3 Nonduplication of funding

The lead organization selected and its paid network partners may not supplant or duplicate existing local, state, or federal funding for any activities within the scope of work of their

contract. The lead organization and navigator organizations are responsible for assuring appropriate recordkeeping is in place that accounts for the work performed under each fund source, if other sources of funding are used to perform similar functions.

## **5.2 General Responsibilities of Navigator Organizations and Navigators**

Navigator organizations funded under this opportunity and navigators will be expected to:

### **5.2.1 Maintain expertise:**

Maintain expertise in eligibility, health insurance basics, enrollment and program specifications for health care coverage and programs offered through the *Washington Healthplanfinder*.

### **5.2.2 Conduct public education activities:**

Engage in activities to raise awareness about programs and benefits offered through the *Washington Healthplanfinder*. Participate in statewide or regional events sponsored or paid by HBE, including providing navigators within the service area to assist with outreach and/or enrollment during events, upon request and advance notice from HBE.

### **5.2.3 Provide consumers with timely information and assistance:**

Assist individuals to apply for and enroll in health insurance coverage:

- a. In person (face-to-face).
- b. Using plain language (including print material or consumer tools).
- c. In a fair, accurate and impartial manner and including information about the full range of QHP options and affordability programs available to them.
- d. At no cost to the individual, including language assistance services necessary to communicate effectively.

### **5.2.4 Inform consumers of the functions and responsibilities of Navigators.**

Navigators are expected to explain their role and responsibilities to consumers, including:

- a. Facilitating consumer selection, enrollment and renewal of QHPs.
- b. Referring the consumer to the Office of the Insurance Commissioner for grievances, complaints, or questions about their health plan coverage or a determination made by the insurance company or a provider related to their coverage.
- c. Entering all application and enrollment information in the *Washington Healthplanfinder* following security and nondisclosure standards established by the Exchange.

- d. Informing consumers receiving application assistance from the organization or navigator staff, using plain language, of:
  - 1. Any lines of insurance business, not covered by the restrictions in Section 5.1.2 Prohibited Organizations and Individuals that the organization or navigator intends to sell during the contract period.
  - 2. Any existing employment relationships, or employment relationships within the last five years with any health insurance issuers or issuers of stop loss insurance, subsidiaries of health insurance issuers or issuers of stop loss insurance, including any existing employment relationships between a spouse or domestic partner and any health insurance issuer or issuer of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance.
  - 3. Any existing or anticipated financial, business, or contractual relationships with one or more health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuer or issuer of stop loss insurance.
- e. Navigators must document a consumer’s consent for the navigator to access personally-identifiable information (PII) or personal health information (PHI) necessary to enroll in coverage. The consent must be recorded in the *Washington Healthplanfinder*. Navigators must also inform applicants of their right to revoke their consent at any time and of the process to submit a complaint about their application or enrollment service assistance.

#### 5.2.5 Cultural, Language and Disability Responsibilities

Navigator organizations must be able to work with all individuals regardless of age, disability, or culture. Organizations must provide information and assistance to consumers that is relevant to their cultural and language needs, including people with limited English proficiency (LEP) and that ensures accessibility for individuals with disabilities. Organizations should seek advice and consult with knowledgeable resources to meet this requirement as needed.

##### a. Cultural/Language Requirements

Organizations will:

- 1. Develop and maintain general knowledge about the racial, ethnic, and cultural groups in the proposed service area, including their health beliefs and practices, primary languages spoken, health literacy and other factors relevant to assisting these groups enroll in health care coverage through the Exchange.
- 2. Receive ongoing education and training in effective cultural and language service delivery.

3. Provide oral/written notice to consumers with limited English proficiency in their preferred language to inform them of their right to receive language assistance services and how to make a request.
4. Provide language assistance in the consumer's preferred language at no cost, including oral and written translation of written documents when necessary or requested to ensure effective communication. Use of a consumer's family or friends as oral interpreters can satisfy the requirement only when the consumer prefers it to an offer of other interpretive services.
5. Implement strategies to recruit, support and promote staff who are representative of the demographic characteristics of the communities in the proposed service area, including languages spoken.

b. Disability Access

Organizations will ensure accessibility and usability of information and tools for individuals with disabilities as follows:

1. Provide consumer education material, websites, or other tools that are accessible to people with disabilities.
2. Provide auxiliary aids and services for individuals with disabilities at no cost when necessary or as requested by a consumer to ensure effective communication. Use of a consumer's family or friends to facilitate communication can satisfy the requirement if requested by the consumer.
3. Provide assistance in a location and manner that is physically and otherwise accessible to individuals with disabilities.
4. Inform the consumer's authorized representatives about the information needed to assist the individual with a disability in making informed decisions on his or her behalf.
5. Provide information about local, state and federal long-term services and support programs, when appropriate.

**5.2.6 Conflict of Interest Standards**

Navigators must uphold and adhere to the following conflict of interest standards to avoid a conflict of interest and protect consumers.

a. Disclosures required by Navigators

A navigator must disclose in plain language to each consumer provided with assistance:

1. Information about the full range of QHP options and insurance affordability programs for which they are eligible.

2. Any lines of insurance business not restricted under this funding opportunity that the navigator intends to sell during the contract period.
3. Any existing employment or former employment (within the last 5 years) with a health insurance company or issuer of stop loss insurance or subsidiaries of either, or any existing employment of a spouse or domestic partner with a health insurance company or stop loss insurance issuer.
4. Any existing or anticipated financial, business, or contractual relationships with one or more health insurance companies or stop loss insurance issuers.

b. Navigator Organization and Navigator Prohibitions

During the term of this contract, navigator organizations and navigators may not:

1. Receive consideration directly or indirectly from any health insurance issuer or issuer of stop loss insurance in connection with the enrollment of any individuals in a QHP or non-QHP.
2. Charge any applicant or enrollee or request to receive any form of compensation for providing application or other assistance related to their navigator duties.
3. Provide gifts, gift cards or cash, or provide promotional items that market or promote the products or services of a third party to any applicant or enrollee as an inducement for enrollment or renewal.
4. Use HBE funds to purchase gifts, gift cards, or promotional items that market or promote the products or services of a third party.
5. Solicit or conduct outreach to any consumer by going door-to-door or using any other unsolicited means of direct contact, including cold calling consumers who have not previously requested contact by the organization.
6. Initiate any telephone call or use electronic telephone dialing systems or recordings to place outgoing calls related to enrollment in health care coverage that are unsolicited or where the organization does not have an existing relationship with the target group(s).

**5.2.7 Navigator Training and Certification Standards**

All HBE-certified navigator must meet HBE training standards to ensure expertise in the needs of underserved and vulnerable populations; eligibility and enrollment rules and procedures; the range of QHP options and insurance affordability programs; and privacy and security standards. Navigator training content includes required modules and regular system and policy updates.

a. Required Training:

1. Qualified health insurance plans, QHP metal levels and how they operate, benefits covered, payment processes, appeal rights and processes
2. Differences among plans
3. Medicaid, Children's Health Insurance Program (CHIP) and other public programs available through the *Washington Healthplanfinder* portal
4. Eligibility requirements for premium tax credits and cost-sharing reductions and the impacts of premium tax credits on the cost of premiums and the individual's annual tax obligations.
5. Basic concepts about health insurance and HBE; benefits of having health insurance and enrolling through HBE; individual's responsibility to meet the federal mandate
6. Eligibility and enrollment rules and procedures, including how to appeal a decision
7. Providing culturally and linguistically relevant services
8. Ensuring physical and program access for people with disabilities
9. Privacy and security standards related to safeguarding consumer's personal information
10. Working effectively with individuals with LEP, disabilities, who are vulnerable, rural and underserved populations
11. Customer service standards
12. Outreach and education methods and strategies
13. Contact information for federal, state, and local agencies for consumers seeking additional coverage options not offered through the Exchange.

b. Certification requirements:

Navigators must be certified by HBE prior to providing any consumer assistance related to healthcare insurance coverage through the *Washington Healthplanfinder*. Navigators must complete all HBE-required training, receive passing scores on HBE examinations, meet background check requirements and sign HBE attestations to obtain and maintain certification. Upon completion of the certification requirements, HBE will grant the navigator access to the *Washington Healthplanfinder* system.

### **5.3 Organization Overview (M)**

#### **Applicant Identification/Contact**

Using the application template, provide the following:

- Full name of the organization
- Business address

- Name of the proposal contact person
- Telephone number
- Email address
- Date organization was established (not required for public organizations)
- Washington UBI number
- Type of organization (e.g. community and consumer-focused non-profit group, local health department, trade industry, professional association, commercial fishing industry organization, ranching and farming organization, chamber of commerce, union, small business development center, etc.)
- Provide a statement affirming that by submitting a response, the vendor and its subcontractors represent they are not in arrears in the payment of any obligations due and owing the State of Washington, including the payment of taxes and employee benefits, and that it shall not become in arrears during the term of the contract if selected as the lead organization.

### 5.3.1 Conflict of Interest Attestation

Applicants must attest:

- a. If any of the vendor's employees or officers or subcontractors' employees or officers were employed by the Washington Health Benefit Exchange or the state of Washington during the last two years, state their positions within the organizations, state their proposed duties under any resulting contract, their duties and position during their employment with HBE or the state, and the date of their termination from HBE or state employment.
- b. If any owner, key officer or key employee of the vendor is related by blood or marriage to any HBE employee or has a close personal relationship to same. Include the identity of the parties, their current or proposed positions and describe the nature of the relationship.
- c. If they have a business relationship with another major HBE contractor.
- d. If the vendor is aware of any other real or potential conflict of interest, the vendor must fully disclose the nature and circumstances of such potential conflict of interest. If, after reviewing the situation and information provided, HBE determines that a potential conflict of interest exists, HBE may, at its sole option, disqualify the vendor from participating in the procurement. Failure to fully disclose any real or potential conflict of interest may result in the disqualification of the vendor or the termination for default of the vendor's contract resulting from this procurement.

### **5.3.2 Declaration of former contract default**

Vendors must indicate whether they have had a contract terminated for default in the last five years. Termination for default is defined as a notice to stop work due to the vendor's poor or non-performance where the issue of performance was either not litigated due to inaction on the part of the vendor, or litigated and determined that the vendor was in default.

### **5.3.3 Disclosure of default details**

If the vendor has had a contract terminated for default in the last five years, the vendor must submit full details including the other party's name, address, and telephone number. The vendor must specifically grant HBE permission to contact any and all involved parties and access any and all information HBE determines is necessary to satisfy its investigation of the termination. HBE will evaluate the circumstances of the termination and may at its sole discretion, bar the vendor from participating in this procurement.

### **5.3.4 Proposing alternate contract language**

The RFP includes the proposed contract terms and conditions, see Schedule B Proposed Contract Terms and Conditions. Any changes or alternate contract language the vendor wishes to propose must be documented, including the reason for the change, and submitted with the proposal on the Certifications and Assurances form. If the proposed changes take more than one page, continue detailing the information on additional page(s) and include with the Certifications and Assurances form.

## **5.4 General Requirements (MS)**

### **5.4.1 Organizational Experience and Community Support**

- a. Summarize the organization's mission, purpose and existing programs and how they align with the Navigator program. (300 word maximum)
- b. Identify the organization's existing relationship(s) to one or more groups or segments of the population who are uninsured and likely to be eligible for a Qualified Health Plan and the nature of the organization's relationship to these group(s).
- c. Detail the organization's experience and approach for delivering services in the last 24 months to individuals with diverse multi-cultural needs, including language needs.
- d. Indicate whether your organization has served as an HBE lead organization or as a network partner of a lead organization (minimum 2 years required).

- e. Identify the number of navigators on staff, including the number of navigators who are enhanced users.
- f. Provide enrollment results, including the enrollment target set for your organization and number of QHP and WAH enrollments achieved since October 1, 2015; and whether the enrollment target was met. If yes, indicate the factors that contributed to your success. If not, indicate factors impacting your achievement.
- g. Identify the organization's program manager who will be responsible for overall management of the scope of work related to this contract. Summarize the individual's experience, skills and qualifications. Describe the required qualifications and experience if the position is currently vacant.
- h. Identify other management or administrative staff (other than navigator staff) responsible for performing programmatic work under this contract and their role and responsibilities.

#### **5.4.2 Service Area and Population to be served:**

The service area is Pierce County. Provide information about the population including:

- 1. QHP target populations and how these groups were identified. Examples of target populations include people who are in low-income groups and uninsured, racial-ethnic groups, low-wage workers, individuals with disabilities, etc.
- 2. Groups in the geographic service area with limited English proficiency.

#### **5.5 Navigator Network (MS)**

The primary responsibility of lead organizations is to assure the delivery of timely and effective outreach, community awareness, basic health insurance education, and application and enrollment assistance to consumers. In most service areas, HBE expects lead organizations to accomplish this by establishing partnerships with organizations that serve and interact with consumer groups likely to be eligible for health insurance coverage through *Washington Healthplanfinder*.

Lead Organizations will determine the number and type of organizations that it will include in its network that will balance access to one-on-one navigator assistance with overall program efficiency and resources. There is no minimum or maximum number of network organizations required.

Navigator network partners will have HBE-certified navigators to enter application and enrollment information using the *Washington Healthplanfinder* system. Navigator organizations must have the necessary technology to access the system and navigators must have basic computer skills and internet access to perform this work. Navigator organizations must also

agree to comply with all requirements for navigator organizations and navigators as stated in this proposal.

#### 5.5.1 Navigator Network selection:

- a. Describe the selection process and criteria used to identify and select navigator organization partners.
- b. Describe the partner compensation approach to be used. It is expected that the approach will include the provision that at least 15% of the partner's compensation award will be based on achieving QHP enrollment targets by the end of the open enrollment period.
- c. Complete a navigator organization profile form (RFP application packet) for each navigator organization in the proposed network, whether paid or unpaid. A navigator organization profile form for the lead organization is also needed if the lead organization will also have navigators on staff who perform enrollment services.
- d. Profiles will include:
  1. Organization name
  2. Amount to be paid
  3. QHP and WAH enrollment targets
  4. Language capabilities, specialized skills, or cultural expertise
  5. Nature of the organization's existing relationship with uninsured individuals:
    - a. Likely to be in the Washington Apple Health coverage group
    - b. Likely to be in the QHP coverage group (139-400% FPL)
  6. Number of HBE certified navigators (# currently on staff and anticipated # of new)
  7. Experience delivering navigator or similar services
  8. All other sources of federal, state or other funding the organization receives to deliver the same or similar services.
- e. Describe the approach for coordinating communication with network partners to keep them apprised of changes, updates, events, and other information relevant to delivering outreach and enrollment assistance.
- f. Describe the approach, method, and frequency for hosting navigator forums, during which navigators can share information, network, hear from lead organization and agency partners (DSHS, HCA, and HBE).
- g. Describe the approach for getting feedback from navigators and navigator network organizations about what they need, want, or gaps that impact their ability to effectively provide navigator services.

- h. The lead organization must establish and maintain either: a subcontract with each of their paid network navigator organization partners; or an agreement/memorandum of understanding with each of their unpaid network partner navigator organizations. The subcontracts and agreements must contain the elements identified as required in Appendix B Proposed Contract Terms and Conditions. Lead Organizations contracting with HBE as a result of this RFP will provide HBE with a sample of their navigator partner subcontract and agreement/memoranda of understanding documents it will use with their proposed partners as required in Schedule 1 of their HBE contract.

#### **5.5.2 Background Checks**

Organizations providing Navigator services, including one-on-one services to consumers under this HBE contract must have background check policies in place for navigator staff or volunteers serving as navigators. The background check policies must meet the provisions for serving children and vulnerable adults as specified in RCW 43.43.830 and RCW 43.43.832. Policies will include the reasons individuals would be disqualified from serving as navigators.

Disqualifications include conviction or pending conviction of crimes related to the exploitation or abuse of vulnerable populations. And due to the navigator's access to applicants' personal health and personal identification information, the background check policies will also include disqualifications related to financial crimes including but not limited to: identity theft, robbery, forgery, fraud, theft, bribery, embezzlement. The organization's proposal must include a copy of the background check policy. If the organization needs to submit a draft policy under this proposal, the document will be clearly marked as a draft. The organization contracting with HBE must finalize the background check policy as a priority and provide a copy to HBE.

#### **5.5.3 Navigator Selection, Training, and Certification**

The proposal will describe the approach for selecting and approving navigators, including lead organization and partner organization responsibilities in the approval process.

##### **a. Selection of Navigators**

Approving navigator candidates is the responsibility of the lead organization based on a candidate's combination of training, experience, and the recommendation of a navigator organization. Appendix F Navigator Knowledge, Skills and Competencies details the knowledge, skills and competencies a navigator would have to be best suited for this role.

The proposal will describe the process the lead organization will use to confirm that a navigator candidate has met the following conditions:

- Has the skills and competencies needed to perform effectively as a navigator;
- Has verified language proficiencies, if the navigator will communicate with consumers in a language other than English;
- Has a background check on file that meets the background check requirements detailed in Section 5.5.2 Background Checks;
- Has completed the HBE navigator training, testing, and certification processes; including initial training and continuing education modules required by HBE.

**b. Navigator functions**

To maintain HBE certification as a navigator, individuals will perform the full range of navigator services required by their *Washington Healthplanfinder* navigator role. These services include but are not limited to facilitation of enrollment in QHP and Washington Apple Health. HBE may end the certification of navigators who do not perform the full range of enrollment services after notifying the lead organization.

**5.6 Public Education and Awareness**

The proposal will describe the organization’s strategy (ies) for conducting public education activities designed to raise awareness about programs and benefits offered through the *Washington Healthplanfinder*. The purpose of public education activities is to increase awareness in the general population and do not need to be focused on a specific target population.

**5.6.1 Outreach**

The organization’s proposal will identify population groups and geographic areas for targeted outreach and include:

- a. The population groups and geographic areas in Pierce County that have higher rates of uninsured populations.
- b. Language and cultural needs.
- c. Network partner organizations with primary responsibility for serving each target group and related language capabilities, including specialized knowledge or skills of the organization.
- d. The organization’s approach for coordinating outreach efforts with network partners to ensure efforts are coordinated and avoid duplication of effort or conflicts among network partners.

- e. Outreach strategies and plans to reach QHP-eligible groups leading up to and during open enrollment

#### 5.6.2 Enrollment Assistance

(This section is FYI only, no response is required on this element.)

Navigator organizations and navigators delivering services will:

- Provide information and assistance to consumers to apply and enroll in health insurance coverage and/or insurance affordability programs.
- Deliver services in person (face-to-face).
- Explain eligibility results and coverage options in a fair, accurate and impartial manner, including information about the full range of QHP options and affordability programs available to them.
- Deliver services at no cost to the individual, including language assistance services necessary to communicate effectively.
- Facilitate the comparison of a consumer's QHP options and their selection of QHPs and QHP renewals.
- Educate consumers who are new to health insurance coverage about the basics of health insurance coverage, for example, understanding key terms, how consumers and insurance carriers share the costs of health care; preventive care benefits available at no cost.
- Enter all application and enrollment information using *Washington Healthplanfinder* following security and nondisclosure standards established by the Exchange.

Participate in enrollment events as needed on weekends or outside normal business hours.

## 6 Performance Monitoring (MS)

The HBE will compile enrollment data from *Washington Healthplanfinder* to report results of lead organization and their navigator organization partners. HBE will make reports available to the lead organizations as they are developed. HBE will respond to requests for information and data from lead organizations to the extent resources allow.

Lead organizations not making satisfactory progress toward enrollment targets for three consecutive months may be required to collaborate with the HBE to develop strategies for improving performance. HBE may terminate a lead organization contract if the organization is not making satisfactory progress toward enrollment targets at the close of open enrollment or at any point thereafter if enrollment results do not improve.

Program integrity is assured by taking steps to reduce the risk of misconduct. Steps include verifying navigators meet established guidelines; complete navigator attestations; complete required training and certification; and have on file background checks with no disqualifying offenses. Additional measures include ensuring consumers have an easy and transparent way to file complaints; occasional observation of Navigator activities by lead organization staff; and/or surveying consumers to get feedback about the services received.

Lead organizations will be required to meet with the HBE upon request to discuss performance of the lead organization or navigator partner organizations. HBE also reserves the right to perform an on-site program review with 14 days' advance notification to the lead organization or network navigator organizations.

#### **6.1 Performance Monitoring Process:**

The proposal will describe:

- a. The approach the lead organization will use to monitor navigator organization partner performance, program integrity, and service quality.
- b. Steps the lead organization will take if a navigator organization is not making progress toward enrollment targets.
- c. The steps the lead organization will take if misconduct is reported regarding an individual navigator and/or navigator organization.

### **7 Contract Allocations and Enrollment Targets**

HBE will award a total of \$101,150.00 to the apparently successful vendor as a result of this RFP. Eighty-five (85) percent of the overall award will be paid in equal monthly installments and 15% will be paid as incentive for the lead organization's QHP enrollment targets met during the open enrollment period. The lead organization's enrollment target is 1000 QHP plans selected during the open enrollment period. Qualified health plan enrollments, either new or renewed, can be counted toward the target provided the assisting navigator completed the plan selection process for the consumer, as validated by *Washington Healthplanfinder*. Network partners' QHP enrollments can be attributed to the lead organization provided the lead organization has a subcontract (for paid partners) or memorandum of understanding agreement (for unpaid partners) in place with each partner.

Lead organizations will establish enrollment targets for paid network partners and compensation methods that tie at least 15% of the partner organization's compensation to achieving their QHP enrollment targets.

Lead organizations may adjust compensation amounts and targets among network partners as needed. If a balance remains in compensation available to network partner organizations due to those organizations not achieving their QHP enrollment targets, the lead organization may redistribute the funds to organizations with higher than expected demand and outcomes; may establish new agreements to meet unmet needs; increase outreach-awareness efforts; or otherwise reallocate the remaining funds to achieve increased enrollments. Subcontracts with navigator organizations may be discontinued as determined necessary by the lead organizations and new navigator organizations may be added. However, lead organizations must not compensate network partner organizations on a per enrollment basis. Lead organizations will provide timely report of network partner changes to HBE as a contract requirement.

Lead organizations will receive 100% of their enrollment incentive compensation if 100% of their enrollment is met. Lead organizations that partially meet their enrollment targets will receive a partial enrollment incentive payment up to the percentage met upon conclusion of the open enrollment period.

## **7.1 Budget Proposal (MS):**

### **7.1.1 Lead organization budget (page 1)**

Using the budget template in the RFP application packet, organizations will include a budget with projected costs for navigator services across major budget categories. The proposed budget may not exceed the estimated contract allocation. Organizations that are contributing staff or other in-kind services to accomplish contract activities will include these quantified resources under the in-kind column and appropriate budget category.

Include information on the following budget categories:

- Organization's administration fee (a fee charged by the organization that covers the cost of accounting, payroll, and other overhead that is deducted off the top of contracts awarded to the organization.)
- Employee costs (including salaries, benefits and other employee costs) related to:
  - Project Management/Administration staff
  - Staff performing enhanced user(s) functions
  - Navigator staff
- Supplies/equipment
- Travel/transportation
- Outreach allocation (at least 10% of the total award)

- Navigator network partner compensation
- Language and disability access services
- Other (itemize if more than 5% of contract allocation)

**7.1.2 Network Partner Budget worksheet (page 2), including**

- Business name of each proposed network partner
- Amount allocated from the lead organization
- QHP and WAH enrollment targets

## 8 Evaluation

Vendor responses will be evaluated strictly in accordance with the requirements stated in this RFP and any addenda issued.

The evaluation of vendor responses to the mandatory and mandatory scored requirements will be conducted by an evaluation team as designated by HBE. Each proposal will be scored and the overall score will determine the ranking of the proposals.

### 8.1 Clarification of Response

The RFP Coordinator may contact the vendor for clarification of any portion of the vendor's response.

### 8.2 Administrative Screening

Responses will be reviewed initially by the Navigator Team program staff to determine on a pass/fail basis whether all of the RFP administrative elements were included. The evaluation team will only evaluate responses meeting all administrative requirements.

### 8.3 Mandatory Requirements

Responses meeting all of the administrative requirements will then be reviewed on a pass/fail basis to determine if the response meets all mandatory requirements (M). Only responses meeting all mandatory requirements will be further evaluated. Responses meeting all mandatory requirements will be further evaluated. Responses that pass the administrative screening and mandatory requirements review will be evaluated and scored based on responses to the mandatory scored requirements in the RFP.

### 8.4 Qualitative Review and Scoring

Each scored element in the activities and requirements sections (sections 5 and 6) will be given a score by each evaluation team member. The scores will be totaled and an average score for each response will be calculated as set forth below. This will be used in the calculation of vendor's total score, as set forth in Section 8.7 Vendor Total Score.

Evaluation points will be assigned to each question as follows:

0	Unsatisfactory	Response does not answer the question, is insufficient or unclear.
1	Below Average	Response provides minimal information to evaluate or demonstrates minimal skills, capabilities, and resources to achieve objectives.

2	Average	Response demonstrates satisfactory level of skills, capabilities and resources to achieve objectives.
3	Above Average	Response demonstrates strong skills, capabilities and resources to achieve objectives.
4	Exceptional	Response demonstrates the highest level of skills, capabilities and resources to achieve and exceed objectives.

### 8.5 Financial Response Evaluation

Section 7 (budget proposal) of the RFP is a mandatory response element and will have a maximum weighted score as follows:

Item	Rating Considerations
Cost proposal	0 – cost proposal exceeds funds available 20 – cost proposal is less than or equal to the allocation
Direct service delivery (navigator staff and network partners as outlined in the budget template)	0 – less than 50% of total funds committed to direct services 20 – at least 50% of total funds committed to direct services 40 – at least 60% of total funds committed to direct services 60 – at least 70% of total funds committed to direct services
Administrative fees	0 – administrative fees are 30% of allocation or higher 20 – administrative fees are 11-30% 40 – administrative fees are 0-10% 60 – no administrative fees
In-kind contribution	0 – no in-kind contribution 20 – in-kind contribution is less than 15% of allocation 40 – in-kind contribution is 16% to 30% 60 – in-kind contribution is 30% or higher
<b>Maximum total points = 200</b>	

### 8.6 Vendor's Total Score

Vendors will be ranked using the vendor’s total score for its response, with the highest score ranked first and the next highest score ranked second, and so forth.

Sections 5 through 7 of the RFP will have maximum weighted scores as follows:

RFP Section #	Category/Details	Max. Score
5-6	Organization requirements and responsibilities total	600
7	Budget proposal/partner allocation model	200
	<b>MAXIMUM TOTAL SCORE</b>	<b>800</b>

### 8.7 Notification to RFP applicants of RFP outcome

The RFP coordinator will send email notification to all applicants of the selection process outcome after completion of the evaluation process. The notification due date is specified in Section 3 RFP schedule.

## 9 Glossary of Terms

The following definitions will be in force when used in this RFP and/or any award resulting from this RFP.

**Apparently Successful Vendor (ASV)** shall mean a vendor with the highest ranking score, who meets all the requirements of this RFP and is chosen as the successful candidate during the evaluation or interview process.

**Authority** shall mean the Health Benefit Exchange (HBE), the organization issuing this RFP.

**Business Days or Business Hours** shall mean Monday through Friday, 8 AM to 5 PM PT, local time in Olympia, Washington, excluding state holidays.

**CMS** shall mean the Center for Medicare & Medicaid Services.

**Community awareness and education** means informing the community through the provision of information and resources.

**Contract** shall mean the RFP, the vendor’s Response, contract document, all schedules and exhibits, all work plans, and all amendments awarded pursuant to this RFP.

**HBE** shall mean the Washington Health Benefit Exchange, the organization issuing this RFP.

**Impartiality** shall mean to maintain objectivity, detachment, neutrality and fairness imparting information to consumers and ensuring the consumer's decision is not influenced or directed.

**Lead Organization** shall mean an organization awarded a contract as a result of this RFP that will lead navigator activities in a geographic area composed of one or more counties.

**Mandatory** shall mean the vendor must comply with the requirement, and the response will be evaluated on a pass/fail basis.

**Mandatory Scored (MS)** shall mean the vendor must comply with the requirement, and the response will be scored.

**Navigator** shall mean an individual or entity that is certified by HBE to provide one-on-one assistance to individuals to understand program options, complete an application and facilitate the selection of an insurance plan or program for enrollment purposes through the *Washington Healthplanfinder*.

**Open enrollment period** shall mean the period of time designated by HBE for individuals to enroll or renew coverage in a qualified health plan. Open enrollment during this contract period will occur from November 1, 2016 until January 31, 2017. Open enrollment for subsequent years will be established by CMS.

**Outreach** shall mean targeted efforts to reach out to a specific group or population in a community location and offer application and enrollment assistance into a health insurance plan or program.

**Personal Information** shall mean information identifiable to any person, including but not limited to information that relates to: a person's name, health, finances, education, business, use or receipt of governmental services or other activities, addresses, telephone numbers, social security numbers, driver's license numbers, other identifying numbers, and any financial identifiers.

**RCW** shall mean the Revised Code of Washington.

**Response** shall mean the written proposal submitted by a vendor to HBE in accordance with this RFP. The response shall include all written material submitted by a vendor as of the date set forth in the RFP schedule or as further requested by HBE.

**Services** shall mean those services provided by vendor relating to this RFP, which may include both personal services and purchased services.

**Subcontractor** shall mean a vendor not in the employment of a lead organization who is performing all or part of the HBE services on behalf of the lead organization contracted with HBE and under separate contract with the lead organization.

**Vendor** shall mean an individual or company whose response under this RFP has been accepted by HBE and is awarded a fully executed, written contract.

## **10 RFP Appendices**

**10.1** Appendix A Conflict of Interest Standards

**10.2** Appendix B Proposed Contract Terms and Conditions

**10.3** Appendix C Protests and Procedures

**10.4** Appendix D Recommended Navigator Organization Selection Criteria

**10.5** Appendix E Navigator Organization Profile Sample

**10.6** Appendix F Navigator Knowledge, Skills and Competencies Guidelines

**10.7** Appendix G Navigator Code of Ethics

**10.8** Appendix H Navigator Responsibilities