

# Request for Information

# Medicaid Innovation Collaborative Behavioral Health Cohort

**Application Opens:** March 22, 2022

**Application Deadline:** April 19, 2022

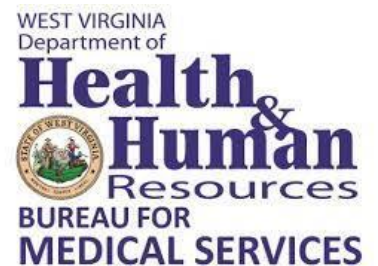
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## Overview

[Medicaid Innovation Collaborative](#) (MIC) aims to advance health equity in Medicaid through the identification and implementation of private-sector innovations. The 2022 Cohort includes the three state Medicaid offices and a combined 15 managed care organizations from Arizona, Hawaii, and West Virginia, focused on advancing equity in behavioral health.

Unmet behavioral health needs are an often overlooked driver of health disparities. The participating MIC states selected the following priority access and quality challenges areas within behavioral health:

1. Behavioral health for adolescents (ages 10-21)
2. Mental health and substance use disorder for pregnant and postpartum women

From in-depth interviews with providers, community-based organizations, and Medicaid beneficiaries, this Request for Information aims to identify and showcase innovative solutions that can demonstrate a positive net impact in engaging the target population (adolescents or pregnant/postpartum women) against one of the Areas of Focus outlined in the Request for Information (RFI).

Solutions selected to present at the final Showcase will be those who best address the challenges and opportunities outlined in the research briefs below.

[Adolescent Discovery Brief](#)

[Maternal Discovery Brief](#)

## Purpose and Background of MIC

Tech-enabled interventions that improve access to and quality of care, as well as address social and environmental needs, are underutilized yet powerful potential solutions to transform the health and wellbeing of the most vulnerable and diverse patient populations in the United States. Through cross state collaboration, in-depth discovery, and technical assistance, MIC enables state Medicaid programs, their managed care plans, and other key stakeholders to identify and implement such solutions. Structured as a cohort program, states and health plans share learnings and collaborate with their peers on a specific health equity challenge.

## Program Goals

This program aims to:

1. Enable the Medicaid ecosystem to coordinate and collaborate on deploying innovative solutions to health inequities
2. Highlight the value that new private-sector solutions bring to address care access, delivery, and quality
3. Identify best-in-class solutions and associated payment models to improve behavioral health services for Medicaid beneficiaries

## Areas of Focus

This RFI seeks solutions that address 1) adolescent behavioral health and 2) maternal mental health and substance use disorder through innovative and comprehensive interventions to an area of focus defined below. As disparities have remained unchanged over decades, solutions must overcome the social, economic, and environmental disadvantages outlined in the research, with the goal of equitable adolescent and maternal behavioral health access and outcomes.

### Universal Solution Characteristics

Where applicable, regardless of Area of Focus, solutions should exhibit:

1. Inclusivity, accessibility, linguistic and cultural responsiveness, and cultural humility
2. Awareness and integration of social and environmental factors that impact Medicaid beneficiaries
3. Understanding of historical and systemic biases that impact Medicaid beneficiaries, resulting in fear, mistrust, and/or care avoidance
4. Respect for Medicaid beneficiaries' self-determination and the provision of opportunities to authentically incorporate their perspectives into their care

### Adolescent Behavioral Health

Tackling adolescent behavioral health in Arizona and West Virginia means increasing access to services and addressing challenges in behavioral health for adolescents and youth crisis support. Solutions must meet the behavioral health needs and increase access to services for adolescents ages 10 to 21. Through this initiative, the Medicaid programs also hope to enhance adolescent crisis prevention and response.

Insights gathered through the discovery process in Arizona and West Virginia, which informed the Areas of Focus, can be found [here](#).

This RFI has two (2) areas of focus for vendors to address in their response to the behavioral health of adolescent Medicaid members; these are not mutually exclusive.

Solutions should focus on all or part of the challenges within an innovation opportunity.

#### 1. Navigating and Coordinating Care, Resources, and Services for Adolescents and Families

*Challenges:* Too often, families and adolescents do not know what services are available to them nor how to access those services. Furthermore, families and adolescents have a challenging time accessing providers and services with the specialized knowledge and experience to treat patients aged 10-21. Often, the whole family needs help, support, and resources - not just the adolescent - yet service providers can be limited in their ability to meet this holistic need. Finally, for a variety of reasons, adolescents and families avoid care and often do not seek help for behavioral health conditions.

*Innovation Opportunities:* Solutions should be able to create a unified way for adolescents, caregivers, and other non-behavioral health providers to find out what resources and services are available and what the options are for adolescents, specifically. A best-fit solution would utilize a holistic, family-based approach. Solutions should improve access to culturally competent care, bridge the digital divide, and build trust in the community.

## **2. Alternative Care Models: Early Intervention, Crisis Response, and Ongoing Follow-up Services**

*Challenges:* From the discovery, adolescents and families too frequently begin care when they are in crisis. Care often starts at a hospital ER or intervention from law enforcement. When there is a crisis event, it is extremely difficult to find a bed at a psychiatric hospital, and adolescents can wait months for therapy and a psychiatrist. There is an immense opportunity to get adolescents into care earlier in an effort to avoid crisis altogether.

*Innovation Opportunities:* Solutions should provide accessible options for adolescents to enter behavioral health care in advance of issues escalating to crisis. These options include, but are not limited to, telehealth, virtual peer support groups, cognitive behavioral therapy interventions, or any upstream intervention that helps reduce the likelihood of a crisis event. These solutions may coordinate with multiple entry points such as schools, primary care providers, or health plan case managers.

In the case of a crisis event, once the adolescent is stabilized with the appropriate interventions, solutions should be able to provide support services to aid in recovery and future crisis prevention.

Solutions may also engage with adolescents more generally to aid the complicated transition into teenage years, with programmatic components to introduce and assist with mental health and substance use.

### **Maternal Behavioral Health**

The RFI is specifically focused on the behavioral health needs, both mental health and substance use disorder, of Native Hawaiian and Pacific Islander pregnant and postpartum women. These sub-populations include Micronesians, Palauans, and Marshallese.

Insights gathered through the discovery process in Hawaii, which informed the Area of Focus, can be found [here](#).

This RFI has one (1) area of focus for vendors to address in their response to mental health and substance use disorder (SUD) treatment for expecting and new moms.

Solutions should focus on all or part of the challenges within an innovation opportunity.

### **1. Enabling, Navigating, or Coordinating Behavioral Health Care for Expecting and New Moms**

*Challenges:* Pregnant and postpartum women dealing with mental health and substance use disorders face significant challenges getting their care needs met. From the discovery with providers, moms in Hawaii often feel paralyzed and do not know what to do. It is overwhelming to navigate care systems and other support services, especially if in crisis, and they are unaware of all the options available to them or their families. In some cases, women avoid help because of a desire to keep problems within the family, shame and stigma, or the risk of law enforcement involvement. Furthermore, there is distrust of interventions that do not understand Native Hawaiian and Pacific Islander identities, beliefs, and care preferences. The limited availability of behavioral health providers - by geography and specialty - and long wait lists cause significant delays in care. Even when they are ready and care is available, expecting and new moms have difficulty arranging childcare, time off work, and travel to make it to appointments.

*Innovation Opportunities:* Solutions should be able to coordinate and work with existing community resources and health plan pregnancy and postpartum wraparound care models to deliver more connected and informed care. Solutions should be able to create a unified way for moms and families to receive a variety of health and social services and help manage care. Solutions need to help health plans and providers support diverse and vulnerable communities with linguistically and culturally responsive care. Potential solutions can address, enhance, or expand existing care navigation, case management, or member engagement programs.

### **Eligibility to Apply**

Medicaid Innovation Collaborative seeks applications from a diverse range of companies and nonprofits whose current activities can address the parameters indicated in this RFI. Applicants must have a clear focus and ability to solve a proposed Area of Focus, have experience working with or serving marginalized and/or vulnerable populations, and can be located in any state or country (as long as the company has previous experience in the US healthcare market).

### **Required Competencies:**

1. The applicant must have an existing, scalable solution that has demonstrated a positive net impact in engaging Medicaid beneficiaries or the target population (adolescent or maternal) against one of the Areas of Focus outlined in the RFI.
2. The applicant must have a specific focus and history of serving or working with marginalized or vulnerable populations.
3. The applicant must demonstrate the ability to integrate with state and/or health plan information systems and data file transfers.

4. The applicant must be able to track and report on key Medicaid metrics, such as quality measures.

**Strongly Recommended Competencies:**

- 5 or more employees (including contractors)
- Early indications of cost savings or effectiveness

**Recommended Competencies:**

- Greater than \$100,000 in trailing 12-month revenue
- The applicant's founder(s), organization leadership, and/or board member composition should reflect or share lived experience with the communities they are aiming to serve.

## **Application Process**

The application is hosted on the online platform, Gust, and contains the following sections:

Section 1: Company Overview

Section 2: Solution Overview

Section 3: Point of Contact Information

Section 4: Upload Materials

- Upload an overview slide presentation in PDF format

Organizations that offer a solution to an *Adolescent Behavioral Health Area of Focus* and meet all required competencies can [apply here](#).

Organizations that offer a solution to the *Maternal Behavioral Health Area of Focus* and meet all required competencies can [apply here](#).

There is no fee to apply.

Applicants may apply to any Area of Focus that fits the organization's solution. Applicants may apply to more than one Area of Focus or for both target populations if the solution has the ability to address the needs outlined through this RFI.

The RFI closes on **April 19, 2022 at 11:59 pm CT**. All responses must be received on or before the application deadline. The organizers will not accept submissions delivered after the application deadline.

After completing the application, the project team will follow up with a calendar hold for the Showcase to ensure a member of the applicant's team can attend. This does not represent a selection decision, only a receipt of your application and a hold to block time in the case you are selected to present.

## Selection Process

This RFI is not an offer to contract and represents a Request for Information only. Applications will be reviewed and scored by representatives from health plans, the community, and state Medicaid agencies. A committee of project partners, including state, managed care, provider, and community representatives, along with outside experts, will make the final selection.

Selection criteria will be based on a combination of the applicant's ability to address the challenges and opportunities outlined in the Area of Focus, to demonstrate solution effectiveness, and to reduce disparities and alleviate systemic gaps or barriers to behavioral health care.

## Schedule

Activity	Timeline
RFI and Application Released	March 22, 2022
Application Deadline	April 19, 2022
Vendor Notification of Showcase Selection	May 13, 2022
Showcase - <i>Adolescent Behavioral Health</i> (by invitation)	May 20, 2022
Showcase - <i>Maternal Behavioral Health</i> (by invitation)	May 23, 2022

## Attendees

The semi-private virtual Showcase will feature a small group of invited applicants that will share their innovative models with a curated audience of state Medicaid leaders, managed care plans, members of MIC's Community Advisory Board, participants from the discovery process, and MIC partners and sponsors.

## Partnership Responsibilities

All selected vendors that receive and accept this invitation will be expected to have a representative from the organization attend the Zoom Showcase on their specific Area(s) of Focus and engage in the following ways:

1. Make a presentation supported by a slide deck outlining the organization's solution, traction gained, outcomes recorded, and plans for scalability and sustainability to attendees.
2. Be prepared for a Q&A session with attendees.

Additionally, if participation in the Showcase results in a contract, vendors agree to respond to occasional requests from MIC for case studies and/or metrics of success.



**Code of Conduct**

Medicaid Innovation Collaborative reserves the right to disqualify any applicant who engages in conduct unbecoming to Medicaid Innovation Collaborative or behaves in any manner that is not aligned with the mission and purpose of Medicaid Innovation Collaborative, its partners, or this RFI process.

**Releases From Liability**

By participating in this RFI, each applicant hereby agrees to release, waive, and discharge Medicaid Innovation Collaborative and its state partners from any and all claims, demands, obligations, causes of action and liabilities which now exist or may hereafter arise that relate in any way to such applicant's participation in the RFI or any participation in any activity, event, or excursion offered in connection with this RFI.

**Licensing of Content**

All information furnished by any applicant to Medicaid Innovation Collaborative under this RFI shall be considered the property of Medicaid Innovation Collaborative and will only be used for purposes of RFI review. Any re-use of information will be made only with explicit written confirmation from applicants.

**Termination**

Medicaid Innovation Collaborative reserves the right to accept or reject any or all proposals, waive any anomalies in proposals, negotiate with any or all applicants, and modify or cancel the RFI. Further, Medicaid Innovation Collaborative can modify, cancel, terminate, or suspend the final webinar events at its discretion without any liabilities.

**Consent to Use Company Name After Selection**

By participating in this RFI, any applicant selected to participate in the Showcase grants Medicaid Innovation Collaborative and its partners the right to use their name and public company information for advertising, publicity, promotional, and other purposes in any and all media, now or hereafter, in perpetuity, without additional compensation, notification, or permission. Application shall constitute a waiver to the extent such information may otherwise be protected under state and/or federal privacy laws. This does not include confidential company information submitted for RFI review purposes only.

**Confidentiality Statement**

By responding to this RFI, the submitting organization agrees to keep confidential all information, whether written or verbal, concerning the business and affairs of this prospective project, Medicaid Innovation Collaborative, and its associated partners.

## Project Partner Overviews

The Medicaid Innovation Collaboration is a partnership of three organizations committed to improving the health and wellbeing of low-income Americans:

*Acumen America:* [Acumen](#) is changing the way the world tackles poverty by investing in companies, leaders, and ideas. They invest in innovations that enable low-income communities to transform their lives in 14 countries around the world. In the U.S., Acumen America invests in health, workforce development, and financial service innovations that address acute challenges experienced by low-income Americans.

*Adaptation Health:* [Adaptation Health](#) is a buyer-side incubator program developing and building thought leadership and value on behalf of state Medicaid programs and managed care organizations. They connect state Medicaid agencies, managed care organizations, and innovative ventures to solve deep-rooted problems in Medicaid service delivery.

*Center for Health Care Strategies:* The [Center for Health Care Strategies](#) is a policy design and implementation partner devoted to improving outcomes for people enrolled in Medicaid. Leveraging its previous work in the digital health for underserved populations space, CHCS is partnering with MIC to provide Medicaid policy expertise and technical assistance.

### Point of Contact

For questions, please contact Medicaid Innovation Collaborative Program Manager, Karissa Godzik, at [karissa@medicaidcollaborative.org](mailto:karissa@medicaidcollaborative.org).

## Adolescent Behavioral Health Application:

Questions are provided for reference. Applications must be completed [here](#).

PLEASE ANSWER IN 3-5 SENTENCES (APPROXIMATELY 100 WORDS) OR LESS.

### Company Overview

1. Select the area(s) of focus for which you are applying.
  - a. Navigating and Coordinating Care Resources and Services for Adolescents and Families
  - b. Alternative Care Models: Early Intervention, Crisis Response, and Ongoing Follow-up Services
2. Company Details
  - a. Company name
  - b. Homepage URL
  - c. Headquarters address
  - d. Other office locations (Optional)
  - e. Founding year
  - f. Number of employees, including independent contractors
  - g. Company type (C-corp, S-corp, B-corp, LLC, Nonprofit, Other)
  - h. Funding and sources to date. *Please include how much funding received, when, and from whom.*
  - i. Approximate revenue in the last 12 months. *Nonprofits, please include grants and donations (Optional)*
  - j. Using bullets, list up to three publicly-announced applicable past and/or current contracts
3. Describe your organization in three sentences or less.
4. Describe your experience with payors. Include experience with Medicaid plans. If the solution has historically been provider-focused, describe your roadmap to engage with payors.
5. Provide an overview of your revenue model. Include any experience with value-based arrangements or willingness to engage in risk-based contracts.

### Solution Overview

6. Describe the primary users of your solution, how you engage with them, and how your solution impacts them.

7. Describe how your solution addresses the needs outlined in the Area(s) of Focus. Where relevant, include:
  - a. How your solution enables the user to connect with services
  - b. How your solution utilizes, connects to, or integrates with existing behavioral health care resources
  - c. How your solution collaborates with a user's current treatment team(s)
  - d. How your solution enables the user to connect with peers, family, or community
  - e. How your solution builds trust with a user and the approach to addressing their shame, mistrust, and/or fear of behavioral health care utilization
  - f. How your solution empowers adolescents and their caregivers in care decision making. Describe any other stakeholders you include in decision making and care delivery.
8. Describe how your solution is designed and informed by users' perspectives and experiences.
9. Describe how you collect, measure, and evaluate key metrics and outcomes and how you share them with your partners.
10. Describe how your solution impacts quality measures. Describe any previous experience with HEDIS, CAHPS, or STARS improvement.
11. Describe the realized or anticipated return on investment of your solution. Share any other value on investment not expressed in dollars.
12. Provide any evidence of historical performance that supports the outcomes described in previous responses (e.g., pilot performance, case studies, customer testimonials, etc.).  
*Note: further detail can be uploaded separately as supporting material*
13. Describe how your solution fills a gap or removes a barrier in existing systems of behavioral health care.
14. Describe how your solution reaches and serves diverse and vulnerable populations. Include any prior experience serving Medicaid or other marginalized populations.
15. Describe how you assure accessibility for users across all modes of solution delivery (including, but not limited to, those with vision impairment, hearing impairment, limited computer access, limited internet access, limited literacy, or limited English proficiency).

## **Point of Contact**

16. Primary Contact Details
  - a. First and Last Name
  - b. Title

- c. Email
- d. Phone

### **Uploads**

Required: Slide Deck Presentation in PDF Format

*For review purposes only. If selected to present, you will have the opportunity to change or update any materials.*

Optional: Supporting Material (one-pager, flyer, case study)

Optional: Company Video (YouTube or Vimeo Link)

## Maternal Behavioral Health Application:

Questions are provided for reference. Applications must be completed [here](#).

PLEASE ANSWER IN 3-5 SENTENCES (APPROXIMATELY 100 WORDS) OR LESS.

### Company Overview

1. Company Details
  - a. Company name
  - b. Homepage URL
  - c. Headquarters address
  - d. Other office locations (Optional)
  - e. Founding year
  - f. Number of employees, including independent contractors
  - g. Company type (C-corp, S-corp, B-corp, LLC, Nonprofit, Other)
  - h. Funding and sources to date. *Please include how much funding received, when, and from whom.*
  - i. Approximate revenue in the last 12 months. *Nonprofits, please include grants and donations (Optional)*
  - j. Using bullets, list up to three publicly-announced applicable past and/or current contracts
2. Describe your organization in three sentences or less.
3. Describe your experience with payors. Include experience with Medicaid plans. If the solution has historically been provider-focused, describe your roadmap to engage with payors.
4. Provide an overview of your revenue model. Include any experience with value-based arrangements or willingness to engage in risk-based contracts.

### Solution Overview

5. Describe the primary users of your solution, how you engage with them, and how your solution impacts them.
6. Describe how your solution addresses the needs outlined in the Area of Focus. Where relevant, include:
  - a. How your solution enables the user to connect with services
  - b. How your solution utilizes, connects to, or integrates with existing behavioral or maternal health resources (including existing health plan care models)
  - c. How your solution addresses pregnant and postpartum women's shame, mistrust, and/or fear of behavioral health care utilization

- d. How your solution empowers service providers (clinicians, community organizations, health plans, etc.) to assist pregnant and postpartum women and their families in care decision making
  - e. How your solution helps connect pregnant and postpartum women to ethnically concordant or responsive service providers
7. Describe how your solution is designed and informed by pregnant and postpartum women's perspectives and experiences.
8. Describe how you collect, measure, and evaluate key metrics and outcomes and how you share them with your partners.
9. Describe how your solution impacts quality measures. Describe any previous experience with HEDIS, CAHPS, or STARS improvement.
10. Describe the realized or anticipated return on investment of your solution. Share any other value on investment not expressed in dollars.
11. Provide any evidence of historical performance that supports the outcomes described in previous responses (e.g., pilot performance, case studies, customer testimonials, etc.).  
*Note: further detail can be uploaded separately as supporting material*
12. Describe how your solution enables service providers to reach and serve diverse and vulnerable populations. Include any prior experience serving Medicaid or other marginalized populations.
13. Describe how you assure accessibility for users (service providers, pregnant and postpartum women, or other) across all modes of solution delivery (including, but not limited to, those with vision impairment, hearing impairment, limited computer access, limited internet access, limited literacy, or limited English proficiency).

## **Point of Contact**

14. Primary Contact Details
  - a. First and Last Name
  - b. Title
  - c. Email
  - d. Phone

## **Uploads**

Required: Slide Deck Presentation in PDF Format

*For review purposes only. If selected to present, you will have the opportunity to change or update any materials.*

Optional: Supporting Material (one-pager, flyer, case study)

Optional: Company Video (YouTube or Vimeo Link)