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WV Purchasing Division

RFI RESPONSE

State of West Virginia
Bureau for Medical Services

Modern Case Management System and Incident Management System

RFI Number: BMS 2300000001

Response prepared by

FEI.com, Inc. dba FEI Systems

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September 21, 2022

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September 19, 2022

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will come to market within the next 12-24 months. How do your solution roadmaps stay current with such trends? If possible, please be specific regarding how these trends affect Medicaid, including WVCHIP, or healthcare IT in West Virginia. 12

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REQUEST FOR INFORMATION CRFI BMS230000001
(WEST VIRGINIA BUREAU FOR MEDICAL SERVICES)

By signing below, I certify that I have reviewed this Request for Information in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this response for review and consideration on behalf of my organization.

FEI Systems
(Company)


Corey Atanda (Sep 19, 2022 11:02 EDT)
(Representative Name, Title)

Corey Atanda, Business Development Executive

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(Contact Phone/Fax Number)

September 19, 2022
(Date)

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO. BMS2300000001

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

FEI Systems

Company



Authorized Signature

September 19, 2022

Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.
Revised 6/8/2012

CORPORATE OVERVIEW

FEI is an industry leader with 23 years of experience providing various health and human services information technology (IT) and mission support services to local, state, and federal agencies. We have more than 18 years of experience providing enterprise behavioral health and long-term services and supports (LTSS)/home and community-based services (HCBS) IT solutions. Our technology solutions currently serve more than 50 state and county governments, improving the delivery of health and human services.

At FEI, we specialize in configurable case management solutions that are intuitive and easy to use, to help every member of your workforce stay focused on serving a growing client base while streamlining and relieving the burden of administrative tasks. Our implementation support includes the training necessary for quick adoption by your staff, who will benefit from automated workflows, reporting dashboards, and real-time access to data, waitlists, and waiver information. And we stay with you, continuing our partnership as your program needs change over time.

With our solutions, West Virginia BMS can significantly improve its ability to manage, monitor, and report on the effectiveness of its waiver/HCBS programs. Our system leverages intuitive-design principles for the user interfaces, provides a person-centered organizational model, enables end user configurability so users can make changes without engaging systems engineers, and fully meets 508 compliance.

Our LTSS/HCBS support coordination system has been implemented by four states, the District of Columbia, and two Medicaid Managed Care Organizations (MCOs), and is currently being implemented in three other states. These solutions serve multiple waiver programs encompassing a wide array of waiver services, waitlists, provider agencies, and clients. Today, our solutions support high-quality care provisioning to over more than 820,000 clients.

APPROACH AND QUALIFIED TEAM

FEI is led by an accomplished executive management team of nationally recognized experts in health IT. Most bring more than 20 years of experience in health IT, often with direct experience in federal and state government and leading health-related corporations. Thus, they understand the needs and challenges that government officials experience implementing technology solutions, effectively delivering constituent services, and managing costs.

FEI has earned the HITRUST CSF® certification status for information security, demonstrating our ability to meet key regulations and industry-defined requirements while appropriately managing risk. This achievement places FEI in an elite group of organizations worldwide that have earned this certification.

Our project and account management approach are tailored to each of our clients and leverages proven project management and delivery methodologies consistent with the Project Management Institute (PMI) Project Management Body of Knowledge (PMBOK). We also have a Learning Management System (LMS) to assist with end-user training for our products and solutions. We also have a successful record working with partners and sub-contractors, as needed. We value these partnerships and understand the added value they bring to our clients.

FEI'S RESPONSE

4.2.1. Please describe your CMS and/or IMS solution functionality, including:

a. What modules are available?

FEI's Blue Compass suite of solutions was designed to address common requirements while meeting the unique and complex needs of the agencies and organizations we serve. The suite features premiere comprehensive case management systems for LTSS – used by our HCBS clients – and behavioral health. Our enterprise waiver case management system offers comprehensive tools for the cross-agency delivery of coordinated, person-centered health and human services. Blue Compass also includes sub-modules and function-specific features for:

- incident management
- provider management
- data management and analytics
- billing, reimbursement, and claims processing
- consent management
- electronic health record (outpatient)
- assessment for treatment services

b. What features are standard? What features are available at an additional cost?

The Blue Compass case management solution for LTSS/HCBS is a commercial off-the-shelf solution that is configurable to meet the unique needs of our clients. Similarly, the incident management module is designed to meet the standard needs of state incident management activities for HCBS populations. FEI regularly provides additional supplemental services outside the scope of a given RFP – which may include additional interfaces, or custom system capabilities – often negotiated with the state and price depends on service level required.

c. Please describe how your solutions facilitate each stage in the HCBS Continuum of Care, including:

i. Intake

ii. Screening

iii. Assessment

A. What is your approach for supporting assessments, which may vary by populations served under Medicaid HCBS Waivers?

B. Does your solution support gathering of assessment information on mobile devices? Please explain.

iv. Clinical eligibility determination

v. Enrollment

vi. Care Planning

vii. Service Authorization

viii. Service Delivery

ix. Billing/Claiming

x. Reassessments

xi. Re-enrollment

xii. Quality Assurance

Our Blue Compass solution for HCBS is a web-based, person-centered, multi-waiver/program care management platform equipped to support BMS's waiver programs. The solution supports and streamlines the workflows and lifecycle of Member care, including:

- intake
- information and referral
- assessment and reassessment
- care planning and service authorization
- service delivery and payment
- case closure
- claims
- billing
- incident management
- dashboards
- reporting

Blue Compass offers comprehensive case management tools for the cross-agency delivery of coordinated health and human services to facilitate and enhance person-centered care. This includes functionality that provides initial client screening, eligibility determination, and enrollment into one or more programs. Once a member record is completed, an initial application and eligibility determination can be conducted for the client. Once eligibility is established, users can manually enroll clients into appropriate programs or Blue Compass's process automation feature allows automation of activities within the platform that allows the system to move the client through the continuum of care, such as enrollment into a program(s).

Blue Compass can then support standardized assessments or custom state specific assessments that can be completed on any web-based device (tablets, laptops, etc.), on mobile devices, and both with and without internet connectivity. The solution also interfaces with external sites to import assessments as appropriate. The solution offers the user the flexibility to determine the appropriate assessment tool to use based on the specific conditions of the individual. The framework used to develop standardized assessments provides the opportunity to develop multiple types of assessments while ensuring that the database structure is consistent for comprehensive reporting.

Typically, the process in Blue Compass starts with an assessment, where general and diagnostic information is collected. This populates a Care Plan in the platform that clearly identifies needs and goals to establish an actionable plan towards improvement. Designated users complete the Care Plan using input from the member, assessment data, input from the care team, and data available from additional data sources. The care plan format is highly configurable to meet the needs of the specific individual.

In every state implementation, Blue Compass has interfaced with state's Medicaid systems for purposes of Client Eligibility, Prior Authorization requests, Claims, and Provider Eligibility. This focus on streamlined efficiency continues with re-assessments and re-enrollments, where the Blue Compass automation feature triggers activities based on configurable timelines to ensure that all activities related to a member's care occur timely and appropriately.

FEI maintains a detailed Quality Management Plan that describes the processes, procedures, and timeframes used to manage the overall project quality and success. This plan describes our quality planning, quality assurance, and quality control activities.

d. Please describe your standard reporting features. Can users create their own custom reports? How does your solution support measuring outcomes?

The Blue Compass suite uses an industry-leading data visualization platform, complete with custom dashboards and ad hoc reporting capabilities that make it easy for users to pull data in real time, build custom reports, and present program data in an easy-to-understand manner. Our solution's robust reporting capabilities help users easily analyze program outcomes and find data required to analyze resource allocation.

e. What type of on-screen user help is included?

Blue Compass case management and incident management user dashboards include a help tab for users to query information as required.

f. Please provide your support structure (e.g., hours of operation, methodology including email, support, online ticketing system, etc.)

FEI offers comprehensive help desk support for customers, including support to end-users and state administrators. Our help desk services are tailored to the specific needs of the state so that staff are readily equipped to assist with system-related questions, issues, and requests.

Our service desk associates serve as the primary contacts for all customers, internal and external. Service desk associates focus on aiding, answering questions, documenting requests, and resolving problems via telephone and email. Our customers have unlimited access, via phone or email, to the FEI service desk and technical support staff between 8:00 a.m. to 8:00 p.m. ET, Monday through Friday.

4.2.2 Please describe your CMS and/or IMS solution configurability, including:

a. Is your CMS and/or IMS designed for any particular client, business, or program contexts? Please describe:

We designed our Blue Compass suite of solutions to promote optimal health and well-being for all people. The suite includes a comprehensive case management solution for LTSS/HCBS and an incident management module. Our distinctive blend of information technology and public health expertise help create stronger connections between communities, providers, and department staff members across the continuum of care.

Our system is built on an architecture embracing the principles of the Medicaid Information Technology Architecture (MITA) to ensure system integration into existing state Medicaid enterprise environments. In every state implementation, our Blue Compass solution has integrated with state's Medicaid systems for purposes of client eligibility, prior authorization requests, claims and provider eligibility.

b. If your solution is not designed specifically for Medicaid HCBS waivers, what configurations and customizations are needed to adapt the product for use by State Medicaid HCBS waiver programs?

We have successfully worked with state customers to implement case management solutions in service of multiple waiver programs.

c. Can any aspects of your system be configured by an appropriately trained state user? If so, please provide some specific examples, preferably from a real implementation scenario.

Blue Compass offers complete off-the-shelf functionality while allowing for customer-specific configuration to support West Virginia's vision. The platform is structured to support ongoing configuration of the existing screens, including adding fields, hiding fields, adding or removing validations, and even enabling or hiding entire modules based on the needs of West Virginia's stakeholders. Field labels, values in dropdowns, required or optional fields and hide/show fields and sections are some of the examples of configuration available on screens in Blue Compass. In most cases, the location of fields and sections can be changed on a screen. In addition, forms and assessments built using the Form Builder tool can be updated to add/remove sections, fields and rules by the department.

d. What are some of the more challenging use cases to configure? What are some examples of use cases that require customization?

Some of the more challenging use cases to configure include those in the care assessment and planning process, to ensure the person-centered planning component remains one that is configurable to a state's needs and can accommodate different workflows and developments. Blue Compass has built several of these modules with challenging use cases in such a way as to allow this configuration, enabling states to ask the questions they deem important to guide the person through the planning process.

Certain use cases that require customization include those requiring algorithmic scoring or complicated logic to determine an overall score and any downstream logic that occurs as a result. The Blue Compass product has several industry standard assessments and algorithms (e.g., interRAI) built into the product, and experience customizing several algorithms for custom assessments built by different clients.

4.2.3 Please describe how your system manages user access to member data. Different user types will need different levels of access. Please also describe how your system allows for member transfers from one CMA or service provider to another CMA or service provider, and how it manages user data access when a member is transferred.

Blue Compass is a “role-based plus permissions” system. Roles are grouped into three categories:

- **Task Roles:** These are low-level roles that are not normally directly granted to users. For example, the “Edit Person Health Information” Task role allows the user to edit a person's health information.
- **Task Group Roles:** As the name suggests, these groups of Task Roles provide a convenient way to grant several roles at the same time. For example, the “Edit Person Profile” Task Group Role would include “Edit Person Health Information” along with other roles, enabling the user to edit the entire person record.
- **Job Functions:** These roles typically define the actual types of users of the system. Job Function roles are used to group together Task Group Roles to simplify the act of granting roles to users. An example of a Job Function role is the “Caseworker” role. This role would be granted to caseworkers. In a typical Blue Compass system, only Job Functions are directly granted to users. The other types of roles are typically used as convenient ways of grouping roles and permissions.

The system is designed to prevent users from performing tasks unless they are granted explicit permission. The source code itself is only aware of permissions—it is not aware of roles. This separation of roles and permissions provides for a far more flexible system. System administrators can use the role management screens to create new roles or edit existing roles.

Access to a member by a specific staff member is also controlled through assignments to ensure the proper personnel has appropriate access to a person's record. If that person transfers between CMAs or to another service provider, the assignment capability of Blue Compass allows for the assignment transfer to take place—ending one assignment for the individual and starting the new assignment to ensure there is no lapse. When that assignment is transferred, the system will end access to that person's record for the previous CMA and grant access to the person's record to the new CMA, allowing for continuance of care with information previously gathered and assisting in a streamlined transition between agencies.

4.2.4 Please describe your CMS and/or IMS implementation experience, including:

a. How long the solution has been in use?

FEI began supporting state and local health and human services agencies with our IT solutions in 2003 and we have more than 18 years of experience providing both enterprise behavioral health and LTSS/HCBS IT solutions.

b. How many implementations of your CMS and/or IMS have you conducted?

FEI is proud to provide our Blue Compass suite of solutions to more than 50 state and local customers working in LTSS and behavioral health arenas. Currently, there are two production implementations of Blue Compass for IMS. FEI is also working with three new customers to implement the Blue Compass CMS. One of these instances is for a customer who is currently using the Blue Compass IMS module. The remaining two are stand along CMS implementations supporting the LTSS market.

c. What Medicaid HCBS waiver programs has your solution been used for?

Our solutions are used exclusively by health and human services agencies that serve vulnerable targeted waiver populations, including:

- I/DD
- physical health
- aging
- autism
- traumatic brain injury
- substance use disorder
- mental health disorder

d. Have you implemented your solution to manage multiple Medicaid HCBS waiver programs? If so, please provide examples.

Currently, FEI works with eight states and two MCOs in delivering high-quality LTSS care management systems and sub-modules. In six of these states, our LTSS care management solutions support multiple waiver programs encompassing a wide array of waiver services, waitlists, provider agencies, and clients. Our policy is to provide more detailed customer information, especially when it relates to client references, during the RFP process in support of customer confidentiality.

e. Some of West Virginia's waiver programs include a "self-directed care" option. Have any of your implementations included this type of program? Explain how your solution aligns with self-directed care concepts.

FEI supports multiple states with "self-directed care" included in a state waiver program. Blue Compass' self-directed care capabilities support individuals' rights to decide and direct how they receive care and by whom while maintaining fiscal authority over their budget allocations. Developed and easily configured to state and CMS requirements, Blue Compass helps support coordinators (SCs) and consumers identify supports based on each consumer's unique needs, preferences, and decisions about his or her life in the community.

Blue Compass' automated workflow helps to facilitate progress across the case management process. Blue Compass' self-directed consumer and provider portals simplify and optimize the case management experience for SC's, providers, and consumers. Workflows are triggered to generate system actions, such as notifying an SC to conduct an intake assessment once a consumer record is created.

FEI's Blue Compass also completes automatic mathematical calculations to support ISP budget development and includes service providers and rates, service units, total service costs, and total budget amount. The budget functionality is accessible to determine preliminary provider service costs to provide self-directed care for consumers.

f. Have states used your system for Money Follows the Person (MFP) programs? If so, explain how your solution aligns with MFP concepts.

Blue Compass solutions provide an easy way to enroll, track, and report on MFP participant activities. Through automated submission processes, support coordinators can enroll participants in a state MFP program. Once all signed waiver documents are received, Blue Compass person records include an identifier in the attribute section, so our partners can easily see who is in the MFP program. All MFP data can be tracked, and reports submitted to respective departments directly from the platform. This includes any waiver offers, linkages, eligibility determinations, required reporting at the required intervals for the 365-day tracking report, and discharges from the program. FEI works with partners to confirm all MFP requirements are met.

4.2.5 Please describe your typical System Development Life Cycle (SDLC) approach.

FEI follows a mature SDLC approach to developing and implementing our Blue Compass case management solutions and modules. We use the Scaled Agile Framework (SAFe) throughout our product development process. Our software development program and processes are CMMI ML3 certified.

4.2.6 Please describe your solution's hosting environment, levels of service, and alignment with federal standards for privacy, security, and hosting. Are any browser add-ons or plug-ins required for end users?

FEI's Blue Compass solution is offered as a software-as-a-services (SaaS) solution hosted in the AWS cloud infrastructure. As such, we maintain all hardware and software required to operate the solution. This includes core components required for the system along with any hardware and licensing for peripheral components, such as service desk management, software deployment, analytics and reporting, program management, systems monitoring, and others.

At FEI, we take information and data security very seriously, particularly when it comes to client data on cloud-based applications. All FEI employees and contractors undergo mandatory training for security and privacy, including specific HIPAA training. All personnel performing services on behalf of a covered entity or other similarly regulated customers, who require access to our systems, facilities, or sensitive PHI/PII data, are subject to background investigations. FEI only stores sensitive data that we have a legitimate need to store to fulfill our business obligations. FEI uses FedRAMP approved cloud environments and services to host all systems following both federal and vendor identified best practices. FEI uses cloud resources and tools to enforces multi-factor authentication (MFA) to access cloud environments, configuration management to keep resources aligned with security setting, employs strong encryption (in transit and at rest) to render sensitive data unreadable for the non-authorized, and provides continuous security monitoring of systems. Moreover, FEI has implemented a comprehensive information security program aligned to NIST SP800-53 control sets and NIST SP 800-66/HIPAA. FEI is HITRUST certified, with annual third-party audits for the program.

4.2.7 What is your experience CMS and/or IMS in a modular MES environment?

a. Has your solution been implemented in a context that requires Centers for Medicare and Medicaid Services certification? If so, was certification obtained? If not, why?

FEI is currently supporting certification efforts for four of our current clients using our LTSS/HCBS case management solution. We obtained CMS certification for the implementation of our eLTSS case management platform in 2018.

b. If not, are there any known obstacles or risks to implementing your CMS and/or IMS in a modular MES environment that will require Centers for Medicare and Medicaid Services certification?

We are not aware of any obstacles or risks when implementing our CMS and/or IMS modular solutions that would keep the platform from obtaining the required CMS certification.

4.2.8 What is your experience with interoperability?

a. Does your solution align with FHIR interoperability standards, including use of standardized application programming interfaces (APIs)? Please explain and elaborate.

The FEI Blue Compass system supports the Fast Healthcare Interoperability Resources (FHIR) standard to exchange the Plan of Care and other resources. The interface leverages standard RESTful Web Services (APIs).

b. What is your experience integrating your solution with the following, and using what methods [i.e., API, custom interface; extract, transform, load (ETL); etc.]

- i. Another vendor's or the state's IMS*
- ii. Medicaid Management Information System (MMIS)*
- iii. Medicaid eligibility system*
- iv. Individual providers*
- v. ASO systems*
- vi. Managed care organization (MCO) systems*

Throughout our implementations, FEI has integrated with numerous target systems (i.e., MMIS, eligibility, State systems, provider, and MCO) using a variety of standards based and custom means. FEI has used the following means to integrate:

- **RESTful Web Services:** Real time APIs that are built on the FEI application side for the target system to consume.
- **RESTful Web Services:** Real time APIs on the target system, where the FEI system connects to said APIs to execute actions. The functions on the FEI side are built based on the specifications provided by the target system.
- **Batch based integration using a file transfer capability, such as SFTP, IBM Sterling Connect Direct, or other file transfer system:** These integrations have been completed both as push and pull, where FEI either fetches or drops a file to the target location. Additionally, this process follows a method where the integration file format is predefined. It is important to note that FEI has integrated using numerous standards-based file formats, such as 837/837, etc.
- **State owned integration service through a Systems Integrator:** FEI has integrated with SI platforms. Integration can be done through both API and messaging based services.
- **Data integrations:** FEI has integrated with target systems using various ETL and replication-based mechanisms. As above, these can be push or pull, depending on the needs. As an example, FEI has supported transferring data through both direct and partial database-based replications/log

shipping, or an ETL process where data is transformed before ingestion at the target side. Additionally, FEI can support other more direct data sharing methods.

- **Single Sign On integration through standard SSO protocols** (e.g., OpenID Connect, OAuth 2.0, etc.).

c. What challenges have you encountered integrating or interfacing with other systems?

There are several challenges when integrating systems. Most notably are lack of documentation for the integrating systems, legacy system using non-standard file layouts, and project teams who are not familiar with the data exchanged between systems. These issues can be overcome by ensuring there is a subject matter expert for each interface who understands the business needs satisfied by the interface as well as the data exchanged between the two systems.

4.2.9 What is a typical implementation timeline? Please include key phases, milestones, drivers, and assumptions. What variables impact the implementation timeline, and how, for instance, number of HCBS waiver programs, number of providers, number of named users?

a. IMS only

b. CMS only

c. IMS and CMS

Implementation timelines can vary based on a number of variables but mainly on the requirements outlined in the customer's request for proposal. FEI can deliver an out of the box delivery of the Blue Compass solution in six to nine months, depending on the number of modules requested. Customer requirements can drive the solution to require additional configuration or customization.

4.2.10 What conditions create a favorable environment for a successful implementation? What conditions add risk to implementations?

A key area for successful implementation is for the project teams, customer, and vendor, to establish clear expectations when it comes to project goals, solution requirements, and collaboration methods. Ensuring the teams are on the same page and clearly communicating removes risks associated with assumptions and lessens the opportunities for misalignment on project goals and outcomes.

One of the biggest challenges for vendors delivering and maintaining complex technical applications for government customers can be obtaining consistent access to stakeholders who understand the business objectives and are empowered to make decisions. Access to key stakeholders — who may be from multiple departments or agencies — must be managed to ensure the right stakeholders are available at the right time, throughout the project's lifecycle, to communicate key business and technical needs and fine-tune processes as needed.

4.2.11 What training and organizational change management support does your company provide?

The Blue Compass solution is designed to be a user-friendly system with a workflow that matches the system users. This makes it easy for users to learn the system. Users of various skill levels can use the system following FEI's system knowledge transfer and training. Our training offerings include a train-the-trainer model and an online learning management system.

Our comprehensive change management process is typically invoked to note issues on the platform because addressing root causes often entails some risk and possibly a configuration change. Our team classifies and prioritizes every problem, links it to previous incidents if such a relationship exists, and links it to the resulting change management if a relationship exists. This data and linkages are maintained in FEI's Service Management system.

As part of maintaining an ISO-20000-compliant operation, FEI has developed a comprehensive change control process. This process is supported by a Change Management (CM) system that not only tracks each change but includes a comprehensive approval and notification process.

4.2.12 Please describe your CMS and/or IMS pricing model, and what features, products, services, licenses, etc. are included for each:

a. For implementation (one-time and recurring, if applicable); what variables impact costs?

Implementation costs will vary based on the following factors:

- State requirements surrounding hosting options (i.e., On-Premises, Commercial Cloud, GovCloud, etc.) and security compliance (i.e., HIPAA, NIST 800-53, etc.)
- Project timeline
- Overall scope and complexity of services to be provided
- Requirements surrounding the use of other ancillary tools or services (i.e., Scan/OCR solutions, mobile application(s), BPO services, custom reporting / analytics, language translation services, etc.)
- Data Migration / Data Cleansing requirements
- Number, type, and complexity of integrations with other state-provided architecture or tools (e.g., USB, IAM/SSO, Rules Engine, EDMS, etc.) and/or other external systems (e.g., real-time/near real-time API, FHIR/HL7 interfaces, etc.)
- Expected number of named and/or concurrent users accessing the system
- Complexity of business rules and associated workflows
- Other state-specific scope items requiring additional configuration and/or system customization
- On-Shore / Offshore requirements

It is worth noting that FEI maintains the hardware and software required to operate Blue Compass solutions, and we offer fixed price or consumption-based pricing, based on the state's needs.

b. For on-going post-implementation (one-time and recurring); what variables impact costs?

All new change or enhancement requests are coordinated with FEI, and costs will vary. Any change or enhancement request to the system goes through specific requirements documentation, quotation, communication, and approval steps as part of FEI's **change control management process**, as outlined below:

- Business requirements and use cases are documented by the state and the Account Manager through a Change Request (CR) form.
- The Account Manager creates a work item in Microsoft ADO and responds to the state with an initial cost estimate and assumptions for customer approval. Depending on the scope of the enhancement, we may develop a full statement of work, project plan, and require funding for the requirements development phase of the project.
- Upon approval, detailed requirements are generated along with a price quote, including additional support costs, if applicable.

BMS must approve the requirements and price quote before FEI begins work on any change request related items.

c. Can system operations and maintenance be assumed by BMS or another vendor?

FEI can supply a comprehensive SaaS offering that includes operations and maintenance (O&M), and therefore, there would be no need to transfer to another vendor.

4.2.13 In order to secure federal funding for this project, BMS must provide the Centers for Medicare and Medicaid Services with estimated implementation and on-going costs. We understand there are many variables that impact your pricing. Your assistance completing the table below is most appreciated. Please identify the nature of the cost for each line item, and add rows as needed. If more tables are needed, please include a supplemental file with your response. Assume four waiver programs with the self-directed option plus the state's Money Follows the Person program and State Plan Personal Care Program are in scope; and up to 2000 users. It is not necessary to maintain this table format in your response. Please indicate where hosting in a secure cloud environment is included.

To provide informed cost estimates, we will await further discussion and clarification of scope requirements. As pricing estimates are often used to secure project funding, we recognize the importance of having accurate information and a clear understanding of scope and pertinent assumptions highlighted in other areas of our response ahead of providing a price estimate to potential customers.

4.2.14 What information do you need from BMS in future solicitations to create the most accurate and cost-effective pricing?

While we recognize that each project is unique, the following information is beneficial in assisting vendors to provide accurate and cost-effective pricing related to the scope of services requested:

- Anticipated contract term (including base and option years) along with the project start date
- Clearly defined project timeline (DDI and O&M period)
- Clearly defined scope of services to be performed including any items that are to be considered optional
- Metrics for the following:
 - Provider / member population
 - Anticipated number of concurrent users accessing the system and their role(s)
 - Number of environments needed (i.e., Dev, QA, UAT, Prod)
 - Required key staff and their role(s)
 - Data migration (i.e., existing database type(s), size, record count, etc.)
 - Document conversion / storage requirements (if applicable)
 - Anticipated monthly helpdesk call volumes / types (if applicable)
 - Anticipated monthly print / mail volumes / types (if applicable)
 - Recovery Point Objective / Recovery Time Objective
 - System availability and other service level agreement requirements
- Sample workflows, reports, documents, etc. associated with the scope of services to be performed
- Training approach (e.g., train the trainer, etc.) and anticipated user types / counts to receive training

4.2.15 What types of solicitation requirements would prevent you from bidding?

FEI would be very interested in partnering with BMS in their CMS and IMS efforts and does not foresee a reason why we would not be able to fulfill the state's requirements.

4.2.16 Describe the major trends in the Medicaid HCBS waiver CMS and IMS solution space that you believe BMS should be aware of, including any product or approach changes that you believe will come to market within the next 12-24 months. How do your solution roadmaps stay current with such trends? If possible, please be specific regarding how these trends affect Medicaid, including WVCHIP, or healthcare IT in West Virginia.

FEI believes that advances in system automation and advanced analytics will become essential elements for CMS and IMS solutions over the next five years. These additions enable the platform to become an active member of the Care Team, offering insights, predictions, and even care recommendations to support users in decision making.

4.2.17 In the states where you have implemented your CMS and/or IMS, what have been some of the notable program outcomes? What performance metrics were you able to provide to substantiate this success?

Our clients for IMS do not provide performance metrics currently. We can seek to provide CMS performance metrics during the RFP stage, if required, but will forgo doing so now for client confidentiality.

4.2.18 If BMS released an RFP that allowed vendors to bid on IMS only, CMS only, or CMS and IMS, which systems would you bid on and why? Please share any comments on this potential RFP structure in terms of how it would impact your interest in bidding.

FEI is willing and prepared to support BMS in their case management needs, their incident management needs, or a combination thereof. In our experience, we have seen that a single procurement for both CMS and IMS would not only save the state time, money, and resources from having to release multiple RFPs but also prove most beneficial to the state and members as they can leverage the capabilities of a single, enterprise solution.

In addition, a procurement that includes both CMS and IMS would offer the state a solution that allows for enhanced automation and efficiency, the ability to merge data reporting in dashboards for appropriate user roles, and improved ease of access for users at every level. Our Blue Compass suite of solutions is well-suited to serve BMS HCBS program members and we would be proud to support the state in its efforts.

4.2.19 Do you have a short demonstration of your solution that you would like to present to BMS? If BMS wishes to take part in a demonstration, BMS will reach out to the Respondent for further information.

Yes, FEI would like to provide a short demonstration of our Blue Compass case management solutions, incident management module, and show how the two work together or serve as standalone solutions to serve the state of West Virginia.

4.2.20 Is there additional information you would like to share with BMS related to the topics addressed in this RFI?

FEI eagerly anticipates the opportunity to support the BMS with this effort.

FEI's Blue Compass platform is uniquely designed to leverage the complex business rules, workflows, and requirements of both CMS and IMS, whether in one single, enterprise platform or as standalone solution, to truly support the full continuum of the HCBS lifecycle. With that said, we firmly believe that the state, it's end-users, support coordinators, providers, and members would benefit most with an enterprise platform that includes both CMS and IMS.

This enterprise approach drives operational efficiency and increased administrative capacity, providing cost-saving, improved outcomes, and higher member satisfaction rates. In multiple states, FEI has consolidated all functionality (inclusive of incident management) and data from disparate legacy systems managing various populations into a single, integrated case management system with the flexibility and scalability to manage any additional populations, programs, and/or functionalities.

This also allows for client data of both CMS/IMS and West Virginia's Medicaid waivers to be supported by the same platform, reducing duplicated data entry and allowing for more efficient O&M. In addition, a combined procurement would allow Blue Compass to provide a holistic view of the member, including all incidents and data analytics, which would eliminate the need for multiple systems and potentially significant interfacing challenges.

Furthermore, because Blue Compass includes a suite of modules, this would easily allow an opportunity for expansion in the future without implementing a separate system, resulting in superior resource savings and less burdensome on staff. In our experience, working alongside a proven vendor, with multiple prior implementations, to form a genuine partnership to best serve the members the BMS is charged with serving is invaluable.

FEI proudly supports West Virginia Department of Health and Human Resources currently with our Behavioral Health module within Blue Compass, and we look forward to supporting the BMS in whichever direction it chooses.