



The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at ***wvOASIS.gov***. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at ***WVPurchasing.gov*** with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

Header 1

List View

General Information [Contact](#) [Default Values](#) [Discount](#) [Document Information](#) [Clarification Request](#)

Procurement Folder: 1985877

Procurement Type: Request for Information

Vendor ID:

Legal Name: Wayspring

Alias/DBA: Axial Healthcare, Inc.

Total Bid: \$0.00

Response Date:

Response Time:

Responded By User ID:

First Name:

Last Name:

Email:

Phone:

SO Doc Code: CRFI

SO Dept: 0511

SO Doc ID: BMS2600000001

Published Date: 7/9/26

Close Date: 7/14/26

Close Time: 13:30

Status: Closed

Solicitation Description:

Total of Header Attachments: 1

Total of All Attachments: 1



Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

State of West Virginia
Solicitation Response

Proc Folder: 1985877
Solicitation Description: RFI-TRACKING SYSTEM FOR SUBSTANCE USE DISORDER PROVIDERS
Proc Type: Request for Information

Solicitation Closes	Solicitation Response	Version
2026-07-14 13:30	SR 0511 ESR07122600000000191	1

VENDOR
VS0000053026
Wayspring

Solicitation Number: CRFI 0511 BMS2600000001
Total Bid: 0
Response Date: 2026-07-13
Response Time: 12:28:35
Comments:

FOR INFORMATION CONTACT THE BUYER
Crystal G Hustead
(304) 558-2402
crystal.g.hustead@wv.gov

Vendor		
Signature X	FEIN#	DATE

All offers subject to all terms and conditions contained in this solicitation

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Tracking System for Substance Use Disorder Providers				

Comm Code	Manufacturer	Specification	Model #
93151507			

Commodity Line Comments: No pricing provided; just submitting information and interest in RFI opportunity

Extended Description:

Tracking System for Substance Use Disorder Providers
 PRICING IS NOT TO BE INCLUDED IN THIS SOLICITATION



RESPONSE TO
REQUEST FOR INFORMATION
CRFI BMS2600000001

Tracking System for Substance Use Disorder Providers
West Virginia Department of Human Services — Bureau for Medical Services

Submitted by
Axial Healthcare, LLC (d/b/a Wayspring)
Scott Royston, Chief Growth Officer
sroyston@wayspring.com | 412-443-1789
July 2026

Vendor & Submission Information

RFI Subject	Tracking System for Substance Use Disorder Providers
RFI Number	CRFI BMS2600000001
Vendor Name	Axial Healthcare, LLC (d/b/a Wayspring)
Business Address	209 10th Avenue South, Suite 350, Nashville, TN 37203
Telephone	412-443-1789
Fax	N/A
Contact Person	Scott Royston, Chief Growth Officer
Email	sroyston@wayspring.com

Vendor Signature: Scott Royston **Date:** 7/13/26

Table of Contents

Executive Summary.....	3
3.1.1 Description of the Tracking System	4
3.2.1 Performance Outcome Measures Currently Tracked	5
3.2.2 Ability to Address the State’s Specified Outcome Measures.....	6
3.2.3 Provider-Level Implementation and User Friendliness.....	7
3.2.4 Security Measures Protecting Data Confidentiality	8
3.3.1 Training Materials on How to Use the System.....	8
Certification and Signature	9

Executive Summary

Wayspring appreciates the opportunity to respond to the West Virginia Department of Human Services, Bureau for Medical Services (BMS) Request for Information CRFI BMS2600000001 regarding a tracking system to collect performance outcome measures for substance use disorder (SUD) providers.

Wayspring is a specialized Medicaid partner that pairs behavioral health (BH) network accountability with an embedded, longitudinal SUD care model. We operate in eleven states, manage more than 150,000 SUD members, and oversee more than \$2 billion in behavioral health spend. Our proprietary, BH-specific claims-grouper analytics evaluates over 15,000 BH providers each month and monitors roughly 1,000 BH billing codes each month. This allows us to compare providers apples-to-apples at every ASAM level of care, from inpatient and residential through intensive outpatient and medication-assisted treatment (MAT).

For inpatient and residential SUD providers, Wayspring's tracking system can currently report provider-level readmissions, emergency department utilization after discharge, outpatient follow-up after discharge, MAT/MOUD access after discharge, length-of-stay patterns, short-stay rates, patient acuity, episode cost, total cost of care, and peer benchmarking by ASAM level of care. This gives BMS a provider-level view of whether inpatient SUD treatment is leading to appropriate transitions, reduced acute utilization, and sustained engagement after discharge. Our systems also analyze the full continuum of SUD care including outpatient and community-based providers.

The tracking system at the center of this RFI already exists today as Wayspring's SUD Provider Scorecards – a fully automated, provider-level reporting platform. For every provider and level of care, it reports a five-point quality score, the provider's quality ranking within the state, peer benchmarking against every other provider, and outcome trends over time. Because the platform is claims-driven, it can be stood up in a new market as quickly as claims feeds and approvals are received. This same provider-level infrastructure can also support BMS's implementation of Senate Bill 231 by giving the State and its MCOs a practical starting point for outcome measurement, provider scorecards, and phased adoption of additional non-claims measures over time.

Our central differentiator is that we are both the analyst and a provider. Wayspring does not just report on the network. We also deliver SUD care ourselves, which means our measure definitions, benchmarks, and provider conversations are grounded in what actually drives quality care at the front line.

Section 3.1 — General Information Being Sought

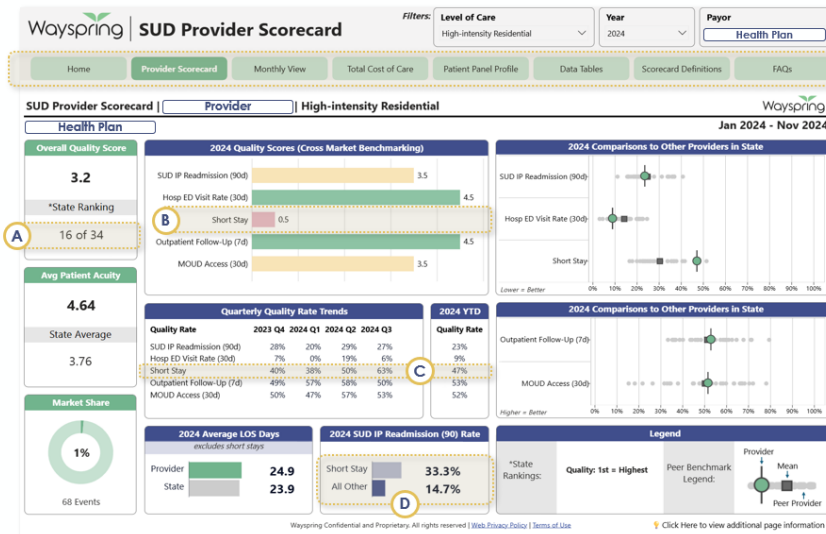
3.1.1 A description of a tracking system that will collect performance outcome measures for substance use disorder providers.

The tracking system is Wayspring's Network Solutions platform and its provider-facing SUD Provider Scorecard.

- **Network Solutions platform.** A BH-specific Payment Integrity and Network Performance technology platform combined with a consulting service, purpose-built to measure provider performance and to find and eliminate low-value behavioral health care. It continuously evaluates roughly 15,000 BH providers and monitors roughly 1,000 BH codes each month.
- **Proprietary claims-grouper model.** The platform ingests claims, pharmacy, eligibility, and encounter data and organizes it into clinically meaningful episodes by ASAM level of care — enabling drill-down from a macro market trend, to a level of care, to an individual provider, to an individual billing code.
- **SUD Provider Scorecard (provider-facing interface).** Fully automated for every level of care, with navigation tabs for Home, Provider Scorecard, Monthly View, Total Cost of Care, Patient Panel Profile, Data Tables, Scorecard Definitions, and FAQs.
- **What each scorecard reports.** An overall five-point quality score; the provider's quality ranking in the state (for example, "16 of 34"); average patient acuity versus the state average; market share; quarterly and year-to-date quality-rate trends; average length of stay; and side-by-side peer benchmarking against every other provider in the state for each measure.
- **Data architecture.** A federated design that combines state Medicaid claims, encounter, pharmacy, lab, and eligibility data into a single evaluation-grade dataset under data-use agreements — without replicating protected health information (PHI) across environments.
- **Speed to value.** Because the system is claims-driven, Wayspring can stand up a new market as quickly as claims feeds and approvals are received, and can be live within 60 to 90 days.



Automated analysis & reporting: Wayspring has created automated provider scorecards for all ASAM levels of care for outcomes and performance reporting



Platform access

Provider and MCOs have tailored access to allow navigation of scorecard summary data as well as drilldowns into costs, patient acuity, and trends

Example takeaways

This provider is in the **middle of the pack** for overall quality. We can see that **Short Stay episodes** are a struggle, and the **trend is getting worse**. Also, these episodes are **>2x as likely to readmit**. This has become a focused quality initiative for this specific site

Section 3.2 — Specific Questions

3.2.1 What performance outcome measures does your system currently track for substance use disorder providers?

By provider and ASAM level of care, the SUD Provider Scorecard tracks a standard set of SUD performance outcome measures today, including:

- SUD inpatient readmission rate (90-day)
- Hospital ED visit rate (30-day)
- Outpatient follow-up after an acute SUD/BH event (7-day) — NCQA/HEDIS-aligned (FUA)
- Medication for opioid use disorder (MOUD) access (30-day)
- Short-stay rate and average length of stay (days)
- Average patient acuity versus the state average
- 30-day ED rate; rate of patients who leave treatment early or against medical advice
- Rate of patients accessing outpatient care within 7 days of inpatient discharge
- Rate of patients accessing a MAT prescription within 30 days of inpatient treatment
- Episode cost by ASAM level of care, benchmarked to national standards
- Total cost of care and return on investment (ROI) by provider and level of care
- Overall five-point quality score and in-state quality ranking; quarterly and YTD quality-rate trends
- HEDIS measures including FUA, FUH, FUI, AAP, and readmission measures

These measures are produced today across our live markets (including Kentucky, Delaware, and Illinois) and are configurable to BMS's specifications.

3.2.2 Can your system address these specific outcome measures?

Yes. The table below maps each outcome measure BMS identified to Wayspring's current capability. Measures available from claims data can be produced immediately. The few measures that depend on cross-agency data or new provider-captured codes are addressed through a "To Build" description for which Wayspring has an established approach. Because the immediate RFI use case is inpatient SUD providers, the most important near-term measures are the discharge and transition measures that can be produced from claims today: follow-up after discharge, readmissions without outpatient follow-up, ED utilization, MAT/MOUD access, length of stay, short-stay rates, and total episode cost. The remaining measures extend the same tracking framework across the broader recovery continuum.

Outcome measure requested (3.2.2)	Availability	How Wayspring produces it
Follow-up: SUD claim within 7 days of discharge	<i>Available today</i>	7-day outpatient follow-up measure (HEDIS FUA-aligned), produced from claims.
Follow-up: SUD claim within 6 months of discharge	<i>Available today</i>	Continuity-of-care window; we track 7-/30-day today, and the 6-month window is a configuration parameter on the same claims logic.
Verified abstinence from non-prescribed substances	<i>To Build</i>	Captured via the ICD-10 "in remission" code, validated by the provider through recurring lab testing for substances (and liver enzymes for AUD). Wayspring helps define the clinical criteria and provider process.
Number of individuals on medication-assisted treatment	<i>Available today</i>	MOUD access (30-day) measure plus MAT member-month analytics by provider and medication.
Social determinants of health (SDOH) tracking/assessment post-discharge	<i>Available today</i>	SDoH action plans (4,000+ completed in a single year for one plan), Z-code capture, and a partner network for housing, food, and transportation.
Readmission to SUD services within 30 days without outpatient follow-up	<i>Available today</i>	Cross-tabulation of SUD readmission against the 7-day outpatient-follow-up flag, by provider and level of care.
Connected to stable, supported housing (shelter excluded)	<i>To Build</i>	No standard claims code exists today; Wayspring recommends defining housing-stability Z-codes and has helped house 20,000+ SUD members. Captured from providers once codes are defined and communicated.
Connected to primary care; one PCP visit within three months of discharge	<i>Available today</i>	Primary-care office-visit claims (HEDIS AAP-aligned).
Connected to employment, education, training, or recovery activities	<i>Partial today; To Build</i>	Employment available via Department of Human Services data using member-matching; education/training are not in a consolidated database and are difficult to certify
Engaged in Medicaid, SNAP, TANF, WIC, or other state benefits	<i>Partial today; To Build</i>	Medicaid engagement from eligibility/claims today; SNAP/TANF/WIC require cross-agency data integration with member-matching.

Outcome measure requested (3.2.2)	Availability	How Wayspring produces it
New arrests, law-enforcement interactions, or CPS investigations	<i>To Build</i>	Incarceration data (Department of Corrections) and child-welfare/CPS data integrated via member-matching logic.
Discharge transition plan	<i>Available today</i>	In-facility discharge planning is part of our care model; captured via claims (e.g., transitional care management) and provider documentation.

In short, the large majority of the State’s specified measures are available today from claims, and Wayspring has a project roadmap to add the remainder.

Relevance to Senate Bill 231 implementation. This phased availability framework aligns with the practical implementation challenge created by Senate Bill 231: many measures can be produced immediately from claims, encounter, eligibility, pharmacy, and provider data, while cross-agency measures such as housing stability, employment, incarceration, and child-welfare involvement require defined data feeds, consistent provider coding, and member-matching logic.

3.2.3 This product will be implemented at the provider level. How have providers discussed using your product, and how is it user friendly?

The product is implemented at the provider level today. Providers interact with their own SUD Provider Scorecard through a simple, tabbed web interface that lets them see summary scores and drill into costs, patient acuity, and outcome trends.

How providers use it

Wayspring uses the scorecards as the factual basis for objective, data-driven “rate and quality” discussions with providers. Provider feedback is the first and broadest tier of our network-management approach — provider feedback, then quality audit, then payment integrity, then contract negotiation, with network termination reserved as a last resort for clear quality or fraud-waste-abuse concerns. The large majority of providers are engaged through feedback and education rather than punitive action.

Why it is user friendly

- **One consistent standard.** Providers interact with a single, consistent set of performance expectations instead of navigating conflicting, plan-by-plan requirements, which is a primary source of provider abrasion that the platform removes.
- **Built-in definitions and FAQs.** Dedicated Scorecard Definitions and FAQs tabs explain every measure, numerator/denominator, and benchmark in plain language.
- **Interpretive briefs.** Each dashboard is paired with a short interpretive brief so provider and State staff know what to do with what they are seeing.
- **Legible benchmarking.** Peer comparisons make a provider’s standing immediately clear (for example, “16 of 34” in the state, or that short-stay episodes are a struggle and the trend is worsening), which focuses quality conversations.
- **Hands-on support.** Wayspring offers provider education forums, quality-audit templates and checklists, and BH experts who can assist with chart reviews. The platform is in active use by

providers across Kentucky, Delaware, and Illinois today. We will soon be live in New York, Ohio, Nebraska, Iowa, and Florida.

3.2.4 What security measures are in place to protect the confidentiality of the data?

- **Certified compliance program.** Wayspring maintains HITRUST certification, SOC 2, HIPAA, and 42 CFR Part 2 controls — the heightened confidentiality standard specific to SUD records.
- **Data governance.** Named data stewards, minimum-necessary access controls, encryption, annual penetration testing, and a formal approval-and-audit process for every new data source. We are audited by multiple managed-care partners.
- **Architecture.** A federated data architecture integrates sources into a single evaluation-grade dataset without replicating PHI across environments.
- **Role-based, controlled views.** Provider, plan, and State users receive role-based access, and provider identities are appropriately controlled — including blinding in cross-network analytics.

In practice, Wayspring meets and exceeds the rigorous data-protection requirements imposed by our health-plan partners out of the box.

Section 3.3 — Documents Being Sought

3.3.1 Training materials on how to use the system.

Training and reference materials are built directly into the platform and supplemented by hands-on enablement:

- **In-platform guidance.** A Scorecard Definitions tab defines every measure, numerator/denominator, and benchmark, and an FAQs tab answers common provider questions.
- **Interpretive briefs.** Each dashboard is paired with a plain-language brief that explains the takeaways and recommended actions.
- **Clinical and audit tools.** Wayspring maintains clinical policy and guidance documents (for example, Therapeutic Behavioral Services guidance) and quality-audit templates with checklists and source-document references.
- **Live enablement.** Provider education forums and onboarding sessions, with Wayspring BH experts available to assist.

Because RFI submissions are public documents under West Virginia Code §§ 5A-3-1 et seq. and 29B-1-1 et seq., Wayspring has not embedded proprietary training materials in this public response. We would welcome the opportunity to furnish representative training materials and a live platform walkthrough directly to BMS under appropriate terms.

Certification and Signature

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; and that I am submitting this information for review and consideration.

Axial Healthcare, LLC (d/b/a Wayspring)
(Company)

Scott Royston
Scott Royston, Chief Growth Officer

(Representative Name, Title)

7/13/26
Date