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Header 2

List View

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

Procurement Folder: 1985877

Procurement Type: Request for Information

Vendor ID:

Legal Name: WEST VIRGINIA UNIVERSITY

Alias/DBA:

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: 2

Total of All Attachments: 2



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 ESR07142600000000213	1

VENDOR
000000212737
WEST VIRGINIA UNIVERSITY

Solicitation Number: CRFI 0511 BMS2600000001
Total Bid: 0
Response Date: 2026-07-14
Response Time: 10:43:34
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				0.00

Comm Code	Manufacturer	Specification	Model #
93151507			

Commodity Line Comments: RFI only. No contract amount is established at this time; since an estimated service amount is required to submit, \$0 was entered.

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



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

State of West Virginia
Centralized Request for Information
Info Technology

Proc Folder: 1985877			Reason for Modification:
Doc Description: RFI-TRACKING SYSTEM FOR SUBSTANCE USE DISORDER PROVIDERS			
Proc Type: Request for Information			
Date Issued	Solicitation Closes	Solicitation No	Version
2026-06-10	2026-07-14 13:30	CRFI 0511 BMS2600000001	1

BID RECEIVING LOCATION

BID CLERK
DEPARTMENT OF ADMINISTRATION
PURCHASING DIVISION
2019 WASHINGTON ST E
CHARLESTON WV 25305
US

VENDOR

Vendor Customer Code: 000000212737

Vendor Name : West Virginia University

Address : PO Box 6845, 886 Chestnut Ridge Rd

Street :

City : Morgantown

State : WV

Country : USA

Zip : 26506-6845

Principal Contact : Cathy Tarabrella

Vendor Contact Phone: 304-293-3998

Extension:

FOR INFORMATION CONTACT THE BUYER

Crystal G Hustead
(304) 558-2402
crystal.g.hustead@wv.gov

Vendor
Signature X

DocuSigned by:

Stephanie Harrod

FEIN# 556000842

DATE 7/13/2026

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

ADDITIONAL INFORMATION**REQUEST FOR INFORMATION:**

THE WEST VIRGINIA PURCHASING DIVISION IS ISSUING THIS REQUEST FOR INFORMATION FOR THE AGENCY, WEST VIRGINIA DEPARTMENT OF HUMAN SERVICES, BUREAU FOR MEDICAL SERVICES (BMS), FOR THE PURPOSE OF GATHERING INFORMATION TO DEVELOP SPECIFICATIONS FOR A TRACKING SYSTEM FOR SUBSTANCE USE DISORDER PROVIDERS. INFORMATION PROVIDED WILL ASSIST THE WEST VIRGINIA DEPARTMENT OF HEALTH IN DEVELOPING SPECIFICATIONS AND WILL ASSIST IN THE PROCUREMENT PROCESS.

***QUESTIONS REGARDING THE SOLICITATION MUST BE SUBMITTED IN WRITING TO CRYSTAL.G.HUSTEAD@WV.GOV PRIOR TO THE QUESTION PERIOD DEADLINE CONTAINED IN THE SCHEDULE OF EVENTS.

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

Comm Code	Manufacturer	Specification	Model #
93151507			

Extended Description:

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

SCHEDULE OF EVENTS

<u>Line</u>	<u>Event</u>	<u>Event Date</u>
1	QUESTION DEADLINE	2026-06-23

Request for Information

West Virginia Department of Human Services

CRFI BMS2600000001

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SECTION 1: GENERAL INFORMATION

1.1. Introduction:

The West Virginia Purchasing Division ("Purchasing Division") is issuing this Request for Information (RFI), on behalf of Department of Human Services ("Agency"), to all vendors that have a desire to provide information about tracking performance outcome measures for substance use disorder in-patient providers. This RFI is intended to provide the Agency with information necessary to plan and develop specifications for a future procurement.

1.2. Schedule of Events:

RFI Released To Public	06/10/2026
Vendor's Written Questions Submission Deadline	06/23/2026
Addendum Issued	TBD
RFI Opening Date	07/14/2026

SECTION 2: INSTRUCTIONS TO VENDORS SUBMITTING INFORMATION

2.1. REVIEW DOCUMENTS THOROUGHLY: This form contains a request for information that may lead to a future procurement. Please read these instructions and all documents attached in their entirety.

2.2. NOT A CONTRACT DOCUMENT: Vendors must understand that this RFI is for information gathering purposes only, and a response to this RFI does not generate a contractual obligation on the part of the State to purchase any commodity or service.

2.3. VENDOR QUESTION DEADLINE: Vendors may submit questions relating to this RFI to the Purchasing Division. Questions must be submitted in writing. All questions must be submitted on or before the date listed below and to the address listed below in order to be considered. A written response

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will be published in an RFI addendum if a response is possible and appropriate. Non-written discussions, conversations, or questions and answers regarding this RFI are preliminary in nature and are nonbinding. Submitted emails should have the RFI number in the subject line.

Submit Questions to: Crystal Hustead

Email: crystal.g.hustead@wv.gov

Submission Deadline: June 23, 2026 at 10:00 AM ET

2.4. YOUR SUBMISSION IS A PUBLIC DOCUMENT: Vendor's entire response to the RFI and any correspondence relating thereto are public documents. As public documents, they will be disclosed to the public following the RFI opening as required by the competitive bidding laws of West Virginia Code §§ 5A-3-1 et seq., and the Freedom of Information Act West Virginia Code §§ 29B-1-1 et seq.

DO NOT SUBMIT MATERIAL YOU CONSIDER TO BE CONFIDENTIAL, A TRADE SECRET, OR OTHERWISE NOT SUBJECT TO PUBLIC DISCLOSURE.

Submission of any document to the State constitutes your explicit consent to the subsequent public disclosure of the document. The Purchasing Division will disclose any document labeled "confidential," "proprietary," "trade secret," "private," or labeled with any other claim against public disclosure of the documents, to include any "trade secrets" as defined by West Virginia Code § 47-22-1 et seq. All submissions are subject to public disclosure without notice.

SECTION 3: INFORMATION BEING SOUGHT

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.

3.2. Specific Questions

- 3.2.1.** What performance outcome measures does your system currently track for substance use disorder providers?
- 3.2.2.** Can your system address these specific outcome measures:
 - Follow-up as measured by a claim for SUD services within seven days of discharge
 - Follow-up as measured by a claim for SUD services within six months of discharge
 - Number of individuals who have verified abstinence from non-prescribed substances

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Number of individuals on medication-assisted treatment
Social determinants of health (SDOH) tracking/assessment post-discharge
Readmission to substance use services within 30 Days without outpatient follow-up
Number of individuals connected to stable, supported housing (a homeless shelter does not constitute stable housing)
Number of individuals connected to primary care; one primary care visit within three months of discharge
Number of individuals connected to employment, education, training programs, or other activities indicative of long-term recovery and independence.
Number of individuals engaged in Medicaid, SNAP, TANF, WIC, or other state benefits.
Number of individuals who received new arrests, law enforcement interactions, or CPS investigations.
Number of individuals with a discharge transition plan.

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

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

3.3. Documents Being Sought

3.3.1. Training materials on how to use the system.

SECTION 4: VENDOR RESPONSE

4.1. Incurring Cost: Neither the State nor any of its employees or officers shall be held liable for any expenses incurred by any Vendor responding to this RFI, including but not limited to preparation, delivery, samples, or travel.

4.2. Proposal Format: Vendors should provide responses in the format listed below:

4.2.1. Title Page: State the RFI subject, number, Vendor's name, business address, telephone number, fax number, name of contact person, email address, and Vendor signature and date.

4.2.2. Table of Contents: Clearly identify the material by section and page number.

4.2.3. Response Reference: Vendor's response should clearly reference how the information provided applies to the RFI request. For example, listing the RFI number and restating the RFI request as a header in the proposal would be considered a clear reference.

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4.2.4. Responses: All responses must be submitted to the Purchasing Division **prior** to the date and time stipulated in the RFI as the opening date. All submissions must be in accordance with the provisions listed in Section 2: Instructions to Vendors Submitting Information.

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 information for review and consideration;

West Virginia University

(Company)
Signed by:

Stephanie Harrod

Associate Director, Award Negotiation

FB0DCB11CB514AE
(Representative Name, Title)

304-293-3998 / 304-293-7435

(Contact Phone/Fax Number)

7/13/2026

(Date)

Request for Information: CRFI BMS2600000001

Tracking System for Substance Use Disorder Providers

Prepared for: Department of Administration Purchasing Division

Prepared by: West Virginia University Health Affairs Institute

Address: 64 Medical Dr, Morgantown, WV 26506

Phone: 304-293-4511

Contact: Dr. Jeffrey Coben

Email: jcoben@hsc.wvu.edu

Signature: Jeffrey Coben, MD

Date: 07/13/2026

1 Response to Information Being Sought

1.1 General Information Being Sought

1.1.1 A Description of a Tracking System that will Collect Performance Outcome Measures for Substance Use Disorder Providers.

The West Virginia University Health Affairs Institute (HAI) is positioned to support the West Virginia Department of Human Services (DoHS), Bureau for Medical Services (BMS), and partner agencies in developing and implementing a statewide substance use disorder (SUD) performance outcome tracking system. HAI's suggested approach builds directly from prior and ongoing work that has been supported by BMS, the Bureau for Behavioral Health (BBH), and with federal matching funds from the Centers for Medicare and Medicaid Services (CMS). Specifically, the recently completed West Virginia Substance Use Disorder System Evaluation (SUDSE) project (Contract #: BMS2600000004) worked with key state stakeholders to identify priority outcomes for evaluating SUD treatment and recovery services across WV and establish a plan to assess these outcomes. This planned approach, already underway, is in close alignment with the information requested by this RFI.

The SUDSE project demonstrated that there is no existing tracking system in WV capable of collecting and reporting the priority outcome measures needed for evaluating SUD providers. Further, the project identified the need to integrate health data with other existing administrative datasets to assess relevant outcome measures (e.g., employment status, housing stability). Based on these findings, BMS and BBH then contracted with HAI to initiate the construction of an SUD data repository (SUDDR project) that will permit the collection of key performance outcome measures for SUD providers. The SUDDR project (Contract #: BMS2600000016) began on May 1, 2026, and is currently in active system development.

Building an SUD data repository that can track SUD outcomes has several advantages over deploying a new external tracking system. Among others, these include reduced provider burden for data input, enhanced data security and data governance for the state, and greater likelihood of securing matching federal Medicaid Information Technology Architecture (MITA) funding. Therefore, HAI is currently working to create this repository within the state's existing Enterprise Data Solutions (EDS). The data repository approach utilizes Medicaid claims to identify individuals receiving SUD-related services (i.e., the reference population), and then link the individuals identified to their records in other administrative datasets, thereby permitting outcome evaluations through associated variables.

Medicaid claims data not only identify individuals receiving SUD-related services but also serve as the foundation for assessing several of the outcomes outlined in the RFI. However, Medicaid administrative data are limited to medical encounters. Therefore, to develop a wholistic understanding of outcomes, it is necessary to link individuals identified in the repository reference population to other external administrative data sets. They include:

- Employment and workforce-related outcomes: WorkForce West Virginia and/or other workforce and commerce-related data systems.

These outcomes provide the framework for the tracking system. The active SUD Data Repository Project is now building the infrastructure needed to link Medicaid claims to external administrative datasets so these outcomes can be evaluated using existing State data.

At this stage, the system is best described as an active State-aligned data infrastructure project rather than a fully mature commercial product with all provider measures already automated. However, the core components needed for provider-level outcome tracking are already being developed: identification of a repository population of individuals with Medicaid SUD related claims or associated diagnosis codes, assessment of available linkage variables in Medicaid claims and through other state agency administrative data sets, data set governance and access protocols, engagement with data-owning agencies, and preparation for linkage to administrative datasets.

Once implemented and expanded, the system can support several categories of performance measures. Claims and encounter data can support measures related to SUD service use, follow-up after discharge, treatment continuity, use of medications for opioid use disorder, primary care connection, readmission to SUD services, cost, and provider-level utilization patterns. Linked administrative datasets can support broader outcomes such as employment, income or wage indicators, state benefit participation, incarceration or recidivism, child welfare involvement, education or training participation, and housing stability where reliable data are available. Provider-reported or program-level data may be needed for measures not reliably available in claims or administrative systems, such as verified abstinence, discharge transition planning, and certain recovery support activities.

1.2.2 Can Your System Address These Specific Outcome Measures?

Yes, the system under construction is capable of addressing the listed outcome measures. Some of these outcomes can be measured directly by Medicaid administrative data, while others will require linkage to different state agency administrative datasets. Information related to the Number of Individuals with Verified Abstinence, Number of individuals with a Discharge Transition Plan, and some Social Determinants of Health measures will require standardized provider reporting since they are not fully captured in claims or existing administrative systems.

Follow-up as measured by a claim for SUD services within seven days of discharge.

- Yes. This can be measured using Medicaid claims and encounter data for individuals who remain enrolled in Medicaid.

Follow-up as measured by a claim for SUD services within six months of discharge.

- Yes. This can be measured using the same claims-based logic over a longer follow-up window and can be stratified by provider, provider type, region, level of care, or population characteristics, for services covered under Medicaid and for individuals who remain enrolled in Medicaid.

Some Medicaid enrollees may transition to another type of insurance while receiving treatment or have other means of paying for care outside of Medicaid, such as Veterans Administration benefits. Additional data sources will be required to assess follow-up services paid for by other insurance providers.

Number of individuals connected to primary care; one primary care visit within three months of discharge.

- Yes. This can be measured through Medicaid claims and encounter data by identifying qualifying primary care visits within three months after discharge.

Number of individuals connected to employment, education, training programs, or other activities indicative of long-term recovery and independence.

- Yes, with linkage to external administrative datasets. Employment outcomes could be assessed using WorkForce West Virginia data. Education and training outcomes may require linkage to adult education, workforce training, higher education, or related systems. Claims may capture referrals or case management services, but actual employment, education, or training participation is best measured through administrative data or structured provider reporting. HAI has begun the process to identify and link variables utilizing the repository dataset. Additionally, it should be noted that these measures are also needed for the ex parte determinations required under the new HR1 requirements for Medicaid beneficiaries. HAI is coordinating and managing this work on behalf of BMS and is intimately familiar with plans for necessary data and vendor integrations.

Number of individuals engaged in Medicaid, SNAP, TANF, WIC, or other state benefits.

- Yes, with linkage to DoHS eligibility and benefit systems. Medicaid participation can be identified through Medicaid enrollment and claims data. SNAP, TANF, WIC, and related benefit participation would require linkage to WV PATH and other relevant DoHS systems. HAI has begun the process to identify and link variables utilizing the repository dataset.

Number of individuals who received new arrests, law enforcement interactions, or CPS investigations.

- Yes, with linkage to criminal justice and child welfare data systems, subject to availability, legal permissions, and data governance. Incarceration and correctional involvement could be assessed through the West Virginia Division of Corrections and Rehabilitation. CPS investigations and child welfare involvement could be assessed through WV PATH and child welfare data sources. Arrests or law enforcement interactions may require additional justice data partners.

Number of individuals with a discharge transition plan.

- Partially. This is unlikely to be fully captured in claims unless a specific billing code, authorization field, care coordination record, or provider-reported data element is established. HAI can help the State define what constitutes a discharge transition plan and develop a standardized reporting approach if existing data are insufficient.

involved, and requirements established by data-owning agencies. Because SUD data may involve heightened confidentiality protections, privacy and legal review should be built into the system design from the beginning. Some datasets may require additional consent processes, segmentation, data suppression, or restrictions on redisclosure.

For cross-agency data linkage, HAI would work with BMS, DoHS, MCOs, MMIS partners, EDS administrators, and external data owners to define legal authority, permitted uses, linkage variables, exchange processes, retention rules, reporting limits, and destruction or archiving requirements. Identifiable data should be used only when necessary for linkage or validation. Analytic files and reports should use de-identified, limited, or aggregated data whenever possible.

Provider-level and public-facing reporting should also include privacy protections, including small-cell suppression, aggregation, and other disclosure limitation methods to reduce re-identification risk, especially for small providers, small counties, sensitive outcomes, or rare events.

1.3 Documents Being Sought

1.3.1 Training Materials on How to Use the System.

HAI can develop training materials for providers, State staff, MCOs, and data partners. Because the proposed system should rely heavily on existing claims, encounter, and administrative data, training should focus on measure definitions, data quality expectations, reporting workflows, dashboard interpretation, privacy requirements, and use of provider-level feedback for continuous quality improvement.

Training materials may include a system overview, provider user guides, measure specification documents, dashboard/report guides, data quality guidance, privacy and confidentiality training, frequently asked questions, recorded walkthroughs, and technical assistance materials.

HAI recommends piloting training materials with a small group of providers or data users before statewide rollout. This would allow the State to identify unclear measure definitions, workflow challenges, data quality issues, and reporting needs before full implementation. Training should also include ongoing technical assistance, office hours, issue escalation pathways, and periodic updates as measures and data sources mature.