

REQUEST FOR INFORMATION

RFI-22-0001

The Arkansas Insurance Department (“AID”) is seeking information regarding best practices and requirements for a State-based Marketplace employing a state platform rather than the federal platform. Information from this RFI could be used for the development of a Request for Proposal to secure one or more qualified vendors to design, develop and implement an integrated Health Benefit Exchange should the state decide to move forward. This preliminary step is intended to assess the landscape of the specific market, to identify prospective vendors and their capabilities, and to evaluate whether the needs and objectives of the state would best be served by transitioning to a state platform.

ISSUE DATE: 8/8/2022

RESPONSES DUE: 8/31/2022 NOON CST

SECTION 1: OVERVIEW

1.1 INSTRUCTIONS TO RESPONDENTS

- A. The State of Arkansas (“the State”) is issuing this Request for Information (RFI) as specified below. Responses are to be submitted by **12 Noon Central Time on August 31, 2022**, as an e-mail attachment in Microsoft or Adobe format. Responses should be submitted to: aid.sbe.info@arkansas.gov
- B. Questions regarding the contents of this RFI may be directed to the above email address. Responses will be provided to questions submitted by **August 8, 2022**, to end **August 22, 2022 4:00 PM Central Standard Time**.
- C. NOTE: It is desirable that the contractor’s RFI response does not exceed 50 pages. Due to email system restrictions, the file size per email must not exceed 10 MB; however, the contractor may submit multiple emails if needed to submit a complete response.

1.2 DISPOSITION OF RESPONSES

- A. All responses become the public property of the State and will be a matter of public record subject to the provisions of the Arkansas Freedom of Information Act (“FOIA”), Ark. Code Ann. §25-19-101 *et seq.*
- B. Responses should not contain material considered by the respondent to be confidential under state or federal law for any reason including being proprietary, copyrighted, or capable of giving an unfair advantage to competitors.
- C. The State shall have the right to use all ideas, or adaptations of those ideas, contained in any response received to this RFI. While responses to this RFI are optional, all knowledgeable parties are strongly encouraged to provide complete responses.
- D. The AID may exercise the option to further discuss the details of the response with one or more respondents if it is determined the State would like further information.
- E. Responding or not responding to this RFI shall not determine any future partnerships.

1.3 INTENT OF THE RFI

- A. The Office of State Procurement (OSP) issues this RFI on behalf of the AID for planning purposes with the intent to gather information on potential future opportunities related to the program area(s) covered. This RFI shall not be construed as a commitment by the AID to solicit contractual offers or award contracts.
- B. Review of the responses to this RFI by the AID will be undertaken primarily to gauge the aggregate level of qualified interest from potential contractors, assess the overall magnitude of the opportunity identified by potential contractors, and inform the design of any solicitation(s) and/or eventual program(s). Responses will not be reviewed on a competitive basis and the AID does not intend to establish or publish any formal results.
- C. AID does not currently have funding attached to this potential project and no federal grant funds are available, so one goal of this RFI is to explore funding models and solutions available in the marketplace. Respondents should place a particular emphasis on what long-term return on investment the State should expect if it determines pursuit of an RFP is desirable and in the best interest of Arkansans.
- D. AID needs to understand how costing would work under three different circumstances:
 - 1) Initial set-up
 - 2) Steady state operations
 - 3) Accommodating the Affordable Care Act (“ACA”) and other statute and regulatory changes that have a large impact on the system after initial setup (and possibly years of steady state operations)

1.4 PURPOSE

- A. Subject to an assessment of feasibility, costs, and benefits to Arkansas residents, AID is exploring what a transition away from the [HealthCare.gov](#) platform and to a department-procured solution for Marketplace technology, both initial and ongoing operational/maintenance functions, and customer support. This RFI is being issued to gather information for this assessment of the cost-effectiveness, value to Arkansans, and viability of a transition to a state-run platform. This RFI is also being issued to solicit input from vendors and other stakeholders about the best means of achieving the State’s vision for a possible full State-Based Marketplace.

B. The Arkansas Exchange currently carries out the following functions and duties that it could seek to carry out by engaging an outside contractor, though not limited to:

- 1) Call Center
- 2) Website
- 3) Marketing and Outreach
- 4) Required reporting to CMS

C. The duties of the Marketplace that could be undertaken by a vendor are codified in Ark. Code Ann. § 23-61-804, which could include:

- 1) Provide for the operation of a toll-free telephone hotline to respond to requests for assistance.
- 2) Establish a small business health options program through which qualified employers may access coverage for their employees if a carrier makes such a plan available.
- 3) The small business health options program, without limitation, shall enable a qualified employer to specify a level of coverage so that any of its employees may enroll in a qualified health plan offered through the program at the specified level of coverage if a carrier makes such a plan available.
- 4) Select entities qualified to serve as navigators and award grants to enable navigators to:
 - a. Conduct public education activities to raise awareness of the availability of qualified health plans.
 - b. Distribute fair and impartial information concerning enrollment in qualified health plans and the availability of premium tax credits under 26 U.S.C. § 36B, as existing on April 23, 2013, and cost-sharing reductions under section 1402 of the federal act
 - c. Facilitate enrollment in qualified health plans.

- d. Provide referrals to any applicable office of health insurance consumer assistance or health insurance ombudsman or to any other appropriate state agency for any enrollee with a grievance, complaint, or question regarding his or her health benefit plan or health benefit coverage or a determination under his or her health benefit plan or health benefit coverage.
 - e. Provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Arkansas Health Insurance Marketplace.
 - f. The Insurance Commissioner shall ensure in the navigator selection process that the navigators are geographically, culturally, ethnically, and racially representative of the populations served.
 - g. Otherwise comply with a requirement the commissioner determines is necessary to obtain or maintain the approval to administer a health insurance marketplace.
- D. If the Governor determines that a state-based exchange not on the federal platform for the individual health insurance marketplace is beneficial and appropriate, the Arkansas Health Insurance Marketplace shall:
- 1) Maintain a website through which enrollees and prospective enrollees of qualified health plans may obtain standardized comparative information on such plans.
 - 2) Use a standardized format for presenting health benefit options in the Arkansas Health Insurance Marketplace.
 - 3) Establish and make available by electronic means a calculator to determine the actual cost of coverage after application of a premium tax credit under section 36B of the Internal Revenue Code of 1986 as existing on April 23, 2013, and any cost-sharing reduction under section 1402 of the federal act.

1.5 BACKGROUND/CURRENT ARKANSAS ENVIRONMENT

Since the 2017 plan year, Arkansas has operated its healthcare exchange as a state-based system using the federal platform (“SBE-FP”), [HealthCare.gov](#). The federal government facilitates enrollment for the states through this portal. The state-federal partnership exchange (“SPE”) model was Arkansas’s earliest key movement to gain more flexibility than Arkansas would have had if it had chosen to be under the federally facilitated exchange model. In this hybrid model, states assumed primary responsibility of plan management duties. The federal government retired this model, but the SBE-FP mirrors the retired model while enabling the State more flexibility.

The Arkansas Health Insurance Marketplace (“AHIM”) was established by statute in 2013 and was created in to operate the state’s exchange. The enactment established the entity as a “political subdivision, instrumentality, and body politic of the State of Arkansas.” AHIM was brought to life with a somewhat unusual designation; while it was not created as a state agency, the language in the enabling legislation makes it clear that it was created as a quasi-governmental entity. AHIM operated the exchange for the first five years but was abolished in 2019 by the Arkansas legislature, who transferred its power, functions, and duties to the AID, where it now operates as a division within AID.

Once AHIM was transferred to AID, the functions of operating the exchange that were performed by AHIM staff were absorbed by existing AID staff, and two contracts that were in existence to carry out other requirements came over to AID and are now administered here. One is with the Arkansas Foundation for Medical Care (“AFMC”). The AFMC contract was put in place July 1, 2020 to run through June 30, 2023 and has the option to be renewed for up to four additional years in one-year increments or a portion thereof. The contract is funded at approximately \$250,000 per contract year.

The AFMC is contracted to perform the following two federally required functions:

- A. **Call Center** (ACA Requirement) consumers who need help with the individual marketplace can call the Arkansas call center and speak with a representative or Navigator. The representatives from AFMC can answer questions and Navigators can also enroll consumers into the individual marketplace, but NOT in ARHOMES. If the consumer wants help enrolling in ARHOMES or would like to have a face-to-face meeting, AFMC has an Agent Helpline program that will refer agents to consumers in the county in which they reside. Agents must sign up to become part of this referral program. There are currently about 100 agents (Exchange Producers) participating.

- B. **Navigator Program** (ACA Requirement) AFMC is also responsible for the set up and training of Navigators as required by ACA. They have at least one Navigator, one representative answering phones from 8 AM to 4:30 PM Monday through Friday, and a Spanish speaking Navigator must be on staff. During Open Enrollment they extend the hours to 7 or 8 PM and if Open Enrollment ends on a weekend, they will staff it for that weekend.

The second contract that came over to AID when AHIM was dissolved was with Cranford Johnson Robinson Woods (“CJRW”), an Arkansas based advertising agency. The contract with CJRW was renewed April 22, 2022 for a three-year term ending April 21, 2025, followed by four optional annual renewals to go no later than April 17, 2029. It is funded at \$235,000 per year.

CJRW performs the following functions:

- A. **Consumer Facing Website** (ACA Requirement)- Consumers can access information about the individual health insurance marketplace (ACA) and phone numbers to get help via www.myarinsuance.com website. There is information, fact sheets, and FAQs about the ACA, as well as the phone number to the Arkansas Call Center on every page. There is information for agents and brokers and assisters to get licensed. There is also a ‘Find Help’ feature that allows consumers to input their zip code, address or name of their city and be able to see what licensed agents (Exchange Producers) or assisters (IPA Guides, Navigators, and Certified Application Counselors) nearest to them in their communities to answer questions and get help enrolling in the individual marketplace.
- B. **Marketing** (ACA Requirement) CJRW markets awareness to consumers during Open Enrollment about how to get information about the ACA and the phone number to call the Arkansas Call Center for questions and, also, help in getting enrolled in a Qualified Health Plan. AID can only disseminate information that does not encourage enrollment for any specific carriers because we regulate carriers. AID relies on the carriers to do their own marketing, and only reminds the consumers about open enrollment and where to get information. The campaign is mostly digital via Facebook, Google, and YouTube. CJRW also sets up the Commissioner to be interviewed by radio hosts during open enrollment for public information.
- C. **State Training** (State Legislative Requirement) CJRW also provides prospective licensees state training on the AHIM website for Arkansas’s Medicaid Expansion program, ARHOME. AID is responsible for content of the state training. Any changes that occur must be updated (i.e., the new ARIES eligibility platform currently rolling out). If an individual is compensated for enrolling consumers, they must be licensed. Life &

Health Agents become Exchange Producers (paid via commissions from the carrier). Certified Application Counselors, Navigators and IPA Guides are paid by the organizations that hire them i.e., hospitals, community health centers, colleges etc. All must take federal and state training, pass a background check, and complete an application for their respective license. There is a ‘State Training’ page with the steps and links to complete the training.

1.6 TECHNICAL SPECIFICATIONS

- A. As stated in *Section 1.4 Purpose*, any Contractor must provide services as mandated by state and federal law for the operation of a state-based exchange with a platform to replace HealthCare.gov for Arkansas users. All services to be performed and materials to be produced by the contractor will be accomplished in consultation with and under the direction of the AID, and all procedures developed, and products provided by Contractor efforts will be subject to final approval by and ownership of AID.
- B. The following services and capabilities are required to fulfill Contractor duties, but are not limited to:
 - 1) Management of the State Portal, and any State affiliated websites, applications, and technologies operating as a service of the Exchange. This includes but is not limited to:
 - a. Planning, design, development, setup, and content entry
 - b. Enhancements such as adding functionality, modifying design, and improving workflow and user experience
 - c. Ongoing maintenance and support including security monitoring, upgrading, patching, remedying issues, performance monitoring, and problem resolution
 - d. Applications and websites must be available 24 hours per day/365 days per year, maintaining a minimum ninety-nine percent (99%) uptime.
 - e. Customer service support for citizens and the State through the following channels: phone, email, help portal, live chat, and social media.
 - f. Compliance with all applicable State, Federal, and industry IT confidentiality, security, privacy laws, rules, regulations, methods, policies, standards, and guidelines; including adhering to the State’s technology

access provisions in Arkansas Code § 25-26-201 et seq., as amended by Act 308 of 2013.

- C. Hosting on a secure platform, managing the ongoing costs of bandwidth, network, and security
- D. Establishment of a change control process, including but not limited to:
 - 1) Software documentation
 - 2) Internal review, approval of all changes to network and software configurations by more than one person
 - 3) Source and object code separation
 - 4) Physical and logical security
 - 5) Integration with existing State systems
 - 6) Establish electronic means of communicating enrollment/financial data (834, 820s) with issuers and with Medicaid. Arkansas uses commercial insurance available in the Marketplace to cover most of its expanded-Medicaid population.
 - 7) Establish electronic account transfers to and from state Medicaid system.

E. As-Needed Services including, but not limited to:

- 1) Domain registration services, including procurement of domains, configuration of website addresses, and management of the domain's ongoing costs
- 2) Providing dedicated resources for development of the Exchange to ensure that technical support and project development resources are available on-demand
- 3) Advising AID of any state or federal legislation that may impact the State's objectives or applications as well as any legislation that may be needed to facilitate the achievement of the State's objectives

- 4) Transition: Migration/conversion from HealthCare.gov to the new platform and all duties and responsibilities of the incumbent network manager

SECTION 2: CONTRACTOR RESPONSE TO RFI

Responses are encouraged from all knowledgeable parties. It is recommended to format responses to coincide with the structure of this section.

2.1 APPROACH AND EXPERIENCE

- A. Describe your organization's overall approach to satisfy the requirements identified herein.
- B. Detail anticipated challenges in your approach to provide these services.
- C. Describe enhancements and/or modifications your organization would make as compared to HealthCare.gov and current Arkansas Exchange operations.
- D. Describe how your organization would market and publicize the AHIM.
- E. Describe your organization's experience in expanding public information and increasing the utility and form of public information.
- F. Describe your organization's experience with providing add-on services to the public, such as access to other for-profit information databases, electronic mail, and calendaring.

2.2 OPERATIONS

- A. With the understanding that AID has no funds dedicated or appropriated to this potential project, describe the funding model(s) your organization would require to provide these services.
- B. Describe how your organization would handle integration with existing State systems, specifically Medicaid and the ARHOME program.
- C. Describe your organization's record keeping system.
- D. Describe your organization's approach to developing and maintaining a business plan.
- E. Describe your organization's performance monitoring and problem resolution standards.
- F. Describe your organization's approach to providing customer service and support to citizens and the State through the following channels: phone, email, help portal, live chat, and social media.
- G. Describe your organization's security measures and how your organization would ensure compliance with all applicable state and federal laws, rules, regulations, methods, policies, standards, and guidelines; including compliance with the State's technology access provision in Arkansas Code § 25-26-201 et seq., as amended by Act 308 of 2013.
- H. Describe how your organization would track and notify appropriate personnel of legislation that may impact the AHIM's objectives.

2.3 IMPLEMENTATION AND TRANSITION

- A. Describe your organization's approach to implementing and transitioning the services from the federal platform.
- B. Detail anticipated challenges transitioning the services described and a contingency plan to solve such challenges.
- C. Describe your organization's experience transitioning and implementing projects of a similar scope and size.
- D. Provide a sample implementation plan and transition timeline from a previous project similar in scope and size.

2.4 GENERAL

- A. What are the challenges and opportunities associated with the following agreement lengths?
 - 1) Three-year initial term with up to four additional renewal periods
 - 2) Alternative periods to consider (not to exceed seven years)
- B. Identify any additional pertinent information that was not considered in the RFI.

2.5 ADDITIONAL INFORMATION (OPTIONAL)

- A. We also request you attach any applicable solicitations from other states for reference or provide information regarding how other states implemented state-based exchanges on state platforms that may be more efficient or beneficial than the approach described in this RFI.