



**REQUEST FOR INFORMATION (RFI)**  
**Day Activity and Health Services (DAHS)**  
**Value-Based Provider Program Expansion**

**Superior HealthPlan**  
**5900 E. Ben White Blvd**  
**Austin, TX 78741**

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## I. Invitation to Submit Proposal

Superior HealthPlan's purpose is to transform the health of the community, one person at a time. Superior continuously strives to increase the quality and value of services provided to our members throughout Texas. To that end, Superior is currently accepting proposals from our Day Activity and Health Services (DAHS) providers to participate in our **DAHS Value-Based Provider Program**. This program rewards high-performing DAHS providers and removes the documentation submission requirements for DAHS authorization renewals to reduce administrative burden.

Providers providing DAHS for Superior HealthPlan Medicaid (STAR+PLUS) and Superior HealthPlan Medicare-Medicaid Plan (MMP) members in the Bexar and Dallas Service Delivery Areas (SDAs) and Superior HealthPlan Medicaid (STAR Kids) members in the Bexar SDA are eligible to apply if they meet the Eligibility Criteria below.

The purpose of this Request for Information (RFI) is to solicit proposals from various candidate providers, conduct an evaluation as indicated herein, and select the high performing DAHS providers capable of delivering services and supplies in a timely, efficient and cost effective manner while meeting rigorous standards for performance and customer service.

### Provider Eligibility

Providers who meet the following criteria may submit a response to the **DAHS Value-Based Provider Program RFI**:

- Currently contracted in good standing with Superior.
- Providing DAHS to Superior STAR+PLUS and MMP members in the Bexar and Dallas Service Delivery Areas and/or Superior STAR Kids members in the Bexar SDA.
- Have a valid National Provider Identifier (NPI).

### Proposal Submission Details

To submit a proposal for consideration, please review all submission details below:

- Email completed proposal to:  
[SuperiorProject.ManagementOffice@SuperiorHealthPlan.com](mailto:SuperiorProject.ManagementOffice@SuperiorHealthPlan.com).
- Include **DAHS Value-Based Provider Program Submission** in the email subject line.
- Submit proposal no later than **11:59 p.m. (CDT) on Monday, May 16, 2022**.

## II. Proposal Guidelines

This RFI for participation in the **DAHS Value-Based Provider Program** represents the requirements for an open and competitive process.

- The last date for providers to ask questions is **Friday, May 6, 2022**. Allow for 5 Business Days to respond when submitting questions.
- Superior will accept proposals up to **45 Calendar Days** after the initial posting.
- An official agent or representative of the provider applying for the program, who is authorized to bind the provider to the requirements within the proposal, must sign the submission.
- Any proposal received after **Monday, May 16, 2022**, will be excluded from consideration due to timeliness.



Evaluation of proposals will be conducted from May 17, 2022, until August 17, 2022. If additional information or discussions are needed with any providers during this window, the provider(s) will be notified via email. The evaluation process may also include an onsite visit which will be scheduled in coordination with the respondent.

The provider shall be solely responsible for all expenses incurred in the preparation of this RFI. Superior may, at any time and at its sole discretion, reject any and all proposals.

Providers should submit any questions and final responses by email to:  
[SuperiorProject.ManagementOffice@SuperiorHealthPlan.com](mailto:SuperiorProject.ManagementOffice@SuperiorHealthPlan.com).

### III. Proposal Purpose

The purpose of this proposal is to expand our Value-Based Provider Program which removes the documentation submission requirement for DAHS authorization renewals.

In lieu of submitting required documentation to Superior to obtain a renewal authorization, providers participating in the program would become subject to a periodic records review serving as a retrospective audit to ensure appropriate documentation is being maintained for all Superior members. For potential audit requests, providers participating in the program should continue to maintain all documentation required by the Texas Health and Human Services (HHS), Superior policies and guidelines, and those set forth by any other applicable regulatory agency or entity.

Prior authorization requirements for initial and transfer requests would remain unchanged. Members would be free to use Superior contracted DAHS providers not in the program, however standard prior authorization policies would remain applicable in their entirety for those providers not in the program.

### IV. Proposal Requirements

In response to the RFI, applicants should provide an overview of the responding provider and their related experience. Applicants should highlight the factors deemed most critical for success and their approach for rendering **DAHS** by providing adequate feedback and information in response to the requirements below.

#### 1. Introduction

- a. Provide a listing of all service locations, to include the name, address and telephone number of each facility, along with all applicable National Provider Identifiers (NPIs) and Tax Identification Numbers (TINs).
- b. Include names, credentials and a biography of key staff, to include: owners, providers, administrators and supervising nurses.
- c. Share any examples of participation in any similar value-based arrangements.

#### 2. Experience

- a. A detailed description of the services provided at each DAHS facility (if more than one), to include any extra or additional services or activities not typically available in the common scope of DAHS. Include any specifics of nursing care provided.

- b. Provide member distribution of age ranges for the ages served:
  - i. Ages 18 – 20 years of age
  - ii. Ages 21 – 50 years of age
  - iii. Ages 51 – 70 years of age
  - iv. Ages 71 – 90+ years of age
- c. Provide a list of language support services offered.
- d. Provide information on your current capacity and your average percent of capacity for each facility for the past six months.

**3. Delivery and Coordination of Services**

- a. Please describe the intake process used to assess a member's needs to identify supports and interventions needed.
- b. Please identify the conditions your facility can support below and provide a description of the specific interventions or precautions used by the facility for members presenting with:
  - i. Feeding/swallowing problems
  - ii. Special dietary needs
  - iii. Incontinence of bowel or bladder
  - iv. Compromised cardiac status
  - v. Compromised respiratory status
  - vi. Presence of or increased risk of skin breakdown
  - vii. Difficulty with ambulation or general mobility, including those with an increased fall risk
  - viii. Chronic pain
  - ix. Hearing and/or visual impairment
  - x. Speech/language/communication impairment
  - xi. Cognitive impairment
  - xii. History of or risk of behaviors which are socially inappropriate or represent a potential danger to self or others
- c. How do you communicate changes to a members' care and health status to their Primary Care Physician (PCP)?
- d. When a member's health status changes, what is your communication plan for reporting changes to Superior?

**4. Provider Satisfaction**

- a. Provide a detailed description of any complaints against the provider within the past six months, and include steps taken to rectify the complaint.

**5. References**

- a. Describe any awards, honors or special recognitions attained by the provider(s) and/or facility.
- b. Share any relevant testimonials from referring physicians and/or members, if available.

**6. Attestations**

- a. In your response, provide attestation that documentation related to member records, including intake and enrollment into the facility, is accurate and complete and would be available for periodic records review if selected as a participating provider for this program.

**7. Additional Information**

- a. If applicable, provide any additional relevant information for consideration.

## V. Submission Timeline

RFI Timeline*	
Milestones	Dates
RFI posted date	<b>Friday, April 1, 2022</b>
Last day for providers to submit questions	<b>Friday, May 6, 2022</b>
Closing date	<b>Monday, May 16, 2022</b>
Evaluation period	<b>Tuesday, May 17, 2022 – Wednesday, August 17, 2022</b>
Provider notifications	<b>Friday, August 26, 2022 – Wednesday, August 31, 2022</b>
Implementation Date	<b>Saturday, October 1, 2022</b>

*Please Note: Timeline is subject to change; notification will be posted to Superior website if there are any adjustments.*

## VI. Submission Requirements

**All proposals should adhere to the following specifications:**

1. Providers must fill out all required fields in the [Day Activity and Health Services \(DAHS\) Value-Based Provider Program: Request For Information \(RFI\) Submission Form](#).
2. Proposals must be complete and address all elements in their entirety.

### Proposal Submission Details

1. To submit an electronic proposal for consideration, please review all submission details below:
  - a. Email completed proposal to: [SuperiorProject.ManagementOffice@SuperiorHealthPlan.com](mailto:SuperiorProject.ManagementOffice@SuperiorHealthPlan.com).
  - b. Include **DAHS Value-Based Provider Program RFI Submission** in the email subject line.
  - c. Submit proposal no later than **11:59 p.m. (CDT) on Monday, May 16, 2022**.

## VII. Proposal Evaluation Criteria

Superior will evaluate all submissions based on specific criteria. To ensure consideration for this RFI, your proposal should be complete and meet all of the following criteria:

- I. **Overall proposal suitability:** Proposed answers must meet the scope and needs included herein and be presented in a clear and organized manner.



- II. **Service Delivery:** Providers will be evaluated on the service(s) provided to members receiving DAHS.
- III. **Member health/safety:** Providers will be evaluated on the degree to which their policies, procedures and day to day operations facilitate the health and safety of members receiving DAHS.

## Disclaimer

Superior will not share information submitted in response to the RFI with any entity outside of Centene Corporation (Superior's parent company) unless otherwise required by law. Superior will award based on the actual proposals received, qualifications, experience, resources, proposed services, and the proposer's past record of performance and other factors identified in the RFI. This also includes responses received from references, interviews and any follow-up questions.

An evaluation committee will assess each proposal on the basis of how it corresponds to the factors, information and requirements included in the RFI, and scored according to the criteria included in Proposal Evaluation Criteria section.

In evaluating the proposals and selecting a contractor, Superior reserves the rights to:

- I. Reject any and all proposals.
- II. Issue subsequent Requests for Information for the same or similar goods or services.
- III. Not include for participation in the program.
- IV. Accept the proposal which Superior deems to be the most beneficial.
- V. Negotiate with any proposer to further amend, modify, redefine or delineate its proposal.
- VI. Negotiate and accept, without re-advertising, the proposal of the next-highest scored proposer, in the event that participation in the program is unsuccessfully negotiated with the selected proposer (which may occur prior to the time a final recommendation for award is made for executive approval)
- VII. Further question any proposer to substantiate claims of experience, background knowledge and ability.

Superior reserves the right to waive technical defects, discrepancies and minor irregularities, and not include for participation in the program when it finds such action is in the best interest of the public.

Superior reserves the right to cancel a solicitation, or reject any or all proposals in whole or in part when the cancellation or rejection is in Superior's best interests as determined by Superior.

If all proposals are rejected, Superior may call for new proposals in a new solicitation, or may consider the proposals received with opportunity for supplemental submission. If there is partial rejection, Superior may solicit supplemental information only from those proposers who submitted proposals.

By submitting a proposal, respondent acknowledges that the respondent has read and understands the terms and conditions applicable to this RFI, and accepts and agrees to be bound by the terms and conditions of participation in the program, including the obligation to perform the scope of work and meet the performance standards. A responder may withdraw its proposal at any time.

Superior will not consider proposals received after the time and date indicated for receipt of proposals.