Community Based Care Coordination Request for Proposals Webinar #2 Q&A

The following were questions asked and answered during the second webinar for the RFP. We will continue to post Q&As as the webinars progress.

Question: Can you please explain what "60% of referred clients using the CMS" means?
Answer: The KPI outlines at least 30 clients, but if there are less clients than that referred to you in a month, you wouldn't be able to meet that number. The 60% will be used as the metric in the case there are less than 30 clients referred in a month.

Question: Will there be any changes to the RFP once it's officially released on 9/1?
Answer: There will not be any changes once the RFP is released

Question: If an applicant asks for multiple care coordinators, but BHT is not able to fund all of them, would BHT consider a lower number of care coordinators for that applicant, or is it all or nothing when it comes to considering an application?
Answer: Applicants should look closely at the populations and services/resources needed and determine the number of CBW's would be appropriate. If an organization asks for a lot of CBW's and are selected as an awardee but we are not able to fund all of them we would then work with the organization to see if they would be willing to lower the workforce. It would be a discussion.

Question: Thank you for this presentation! Does the RFP outline all deliverables (E.g. budget, etc) that are needed along with the narrative? Does BHT provide templates for those deliverables?
Answer: We are not expecting a budget or providing a template. It's up to the organization how they utilize the funding if awarded and once they meet the KPI's to receive payment. We will be asking for a breakdown of how orgs spent their funding at the end of the contract period so to help inform our processes as we go forward.

Question: It can be challenging to hire new employees when you cannot guarantee them employment beyond June 30 2027. I am wondering if you think there will be additional funding beyond this grant period?
Answer: We are confident that Center for Medicaid and Medicare, who is the federal funding agency, will meet it's binding contractual requirements to the state of Washington. One of the key reason this RFP is geared toward organizations who have a proven track record delivering community based care coordination is that we are working to braid in new funds so that we aren't dependent on Medicaid Waiver funds exclusively. BHT has a long history of success securing state and federal government contracts. We look forward to creatively building a robust set of resources to sustain the Hub long term.

Question: Is it 30 clients per month or the durations of the contract? and will all clients be a referral from BHT to an organization?

Answer: 30 clients on average caseload a month. We also understand that there will be some overlap as with some clients have long-term needs like housing it takes more time for to discharge. Organizations can refer to the Hub to serve them in house.

Question: New technology can be a barrier for organizations. Is your CMS ready to use/ready to go? Will you be providing support for partners to be able to use the platform.
Answer: We provide training and onboarding for all partners into the system, and technical support as we move through the contract. We have used this system for about 5 years and have added custom fields and forms in as needed for our partners.

Question: Hoping for a better understanding of the model. Would a community care hub have to refer to BHT as the main hub to get a client into the system in order to then have the client referred back to the community care hub for services to begin?
Answer: Organizations can refer folks into the Hub and to themselves if those folks come in to your org or reaches out directly to seek assistance. BHRT will also direct referrals to organizations based on a smart assignment. So it can go either way.

Question: I see the prioritized population list. What are the restrictions or requirements for client eligibility?
Answer: These are the populations that organizations need to respond to in their proposals. Awarded organizations will be able to serve the populations indicated, as well as, people who need assistance to meet social drivers of health needs.