

# Community Based Care Coordination Requests for Proposal

## *Frequently Asked Questions*

### **What is the Community Care Hub?**

The Community Care Hub is a model of care that provides a referral network, assignment to a community based organization, and technical support to connect individuals to a community based care coordinator who can work with them step-by-step to find the right basic, medical, and cultural support for their unique needs.

### **What is community based care coordination?**

Community based care coordination is a process that matches individuals with someone who can help them find the unique care that is best for them, whether it be navigating complex health systems, breaking down barriers like language access, or finding vital resources for everyday needs. The community based care coordinator works with them one-on-one to set health goals, and measurable steps, and helps them reach them.

### **What is the Social Care Network?**

Most of us are familiar with healthcare networks in our region, whether that be hospital networks, managed care networks, or other primary care institutions, but what about social care? Social care focuses on the non-clinical needs that folks need to be healthy, like having a safe place to live, access to nutritious food, reliable transportation, or family support services. These essentials—often outside the doctor's office—play a critical role in keeping folks healthy. The Social Care Network is made up of trusted community partners who connect folks to these resources. Care coordinators work one-on-one with folks to address their most urgent needs.

### **Why did you release the RFP information and a PDF of the application before the application launches on September 1<sup>st</sup>?**

We understand RFP processes can be stressful and deadlines these days seem to be tighter and tighter, so we have provided all application materials for this RFP in advance to support a thorough and well-prepared response.

**Do I need to meet all of the minimum qualifications to apply?**

These contracts are performance-based and reflect federal contracting standards. The minimum qualifications will be reviewed in an initial eligibility review and those who do not meet the minimum qualifications will not move on to committee review.

**How did you select the prioritized populations and social barriers to health?**

In 2024, BHT conducted a regional assessment of current data sources to help identify gaps. We used a variety of data sources and resources including county-led Community Health Needs Assessments, a Youth and Young Adult Housing report by the Spokane Regional Health District, census data, DOH data, and Medicaid population data provided from CMS. Understanding that this data isn't always collected with a lens that reflected our approach, we also included in our assessment community feedback that the data didn't capture. The result was our board-prioritized populations for this RFP.

**Why can't a for-profit organization apply for this opportunity?**

The board approved these requirements with a focus on stewarding public tax dollars to serve the Medicaid population. Non-profits, govt agencies, and tribes are allowed to submit proposals. We recommend reviewing the contract before submitting a proposal to make sure all entities associated can meet the expectations and deliverables.

**What if my organization doesn't already have a community based care coordination program? Can I build one with this contract?**

This funding opportunity is for partners who are already prepared for performance-based contracting and are ready to scale their community based care coordination efforts. This is not a good fit for any organization who doesn't have a community based care coordination program that is consistently taking clients and coordinating care.

**Why do you require an organizational readiness assessment?**

Performance-based contracting requires a level of administrative capability that can create risk for the network. In order to manage for risk for the network as a whole, partners must be prepared to meet federal contracting and audit standards.

**Do performance-based contracts carry a level of risk for my organization?**

Yes. Funding is based on an organization's ability to meet the key performance indicators, so there is a level of risk for an organization who doesn't feel they can consistently meet those metrics. There is also, however, incentive payment opportunities for those who go above minimum standards.

**Is this funding flexible and reimbursable?**

Performance-based contracts are not flexible or reimbursable. This funding opportunity requires timely reporting and documentation.

**How will the Community Care Hub be marketed to the community?**

The Community Care Hub and self referral process will be shared with the community through outreach events, an online form available on our website, and social media campaigns as well as through existing referral networks like 211 and our partnerships with local organizations and healthcare networks.

**How will non -English speakers self-refer?**

Our self referral form will soon be available in english and spanish, and folks are always welcome to reach out to our email at [hello@betterhealthtogether.org](mailto:hello@betterhealthtogether.org) to be connected to someone who can help provide language access resources to fill out the form.

**How can CBW's access resource lists for children with disabilities?**

We currently don't have a network guide for our CBWs to use, though we hope to build that in collaboration with our partners in future. We are currently also building a network of community based workers in our region who regularly share resources and opportunities. To be added to that mailing list, you can reach out to the team at [communityhealthworkers@betterhealthtogether.org](mailto:communityhealthworkers@betterhealthtogether.org)

**Are there/will there be multicultural CBW's?**

This RFP is prioritizing organizations that employ CBW's with lived experience who represent the communities and populations they serve.

**What is the difference between community based workers (CBWs) and community health workers (CHWs)?**

BHT supports the growth of the community based workforce. Included in that workforce are titles like Community Health Worker, Peer supports, and many more. We use the term 'community based workforce' to ensure we are being mindful of the many roles that provide vital support to our community members.

**How does this work with the new Medicaid billing for CHW's?**

There are many organizations and contracts that don't allow for community based care coordination, or it's so prescriptive that it doesn't allow for the individual or families to truly be served. This opportunity allows for services and resources to be provided. Organizations that have MCO contracts will need to have processes in place to not-double bill.

What job responsibilities should I be looking for when I employ CBWs through the Hub?

BHT will be providing contracted partners with training opportunities for their workforce. We have compiled a number of resources to help you in prospecting any new CBWs for your organization with materials including job descriptions, posting copy for social media, and expectations of the role. See the supplemental documents listed on the RFP web page for more information or [click here to view this document](#).

**What is the scope and role expectations for insurance navigation?**

This is to not only reduce a barrier to health care but also reduce yet another appointment for the person. The person at the organization being trained does not have to be the specific CBW associated with the care coordination work/contract. Training is provided.

**What is the value of liability insurance required for this program?**

As part of this contract, awarded organizations will also complete a Navigator Partner Cooperative Agreement and training with BHT to provide WA Health Benefit Exchange (WAHBE) Navigator Services for the purpose of enrolling qualified individuals in insurance. We are finalizing the contract language that includes liability insurance limits. That will be posted no later than Sept 1 when the RFP application goes live.

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Key liability information to note:

The minimum acceptable limits shall be as indicated below for each of the following categories: Commercial General Liability covering the risks of bodily injury (including death), property damage and personal injury, including coverage for contractual liability, with a limit of not less than \$1 million per occurrence/\$2 million general aggregate; death), property damage and personal injury, including coverage for contractual liability, with a limit of not less than \$1 million per occurrence/\$2 million general aggregate; Umbrella policy providing excess limits over the primary policies in an amount not less than \$1 million per occurrence; Professional Liability Errors and Omissions (PLEO), with a deductible not to exceed \$25,000, and coverage of not less than \$1 million; Employers Liability insurance covering the risks of Network Partner's employees' bodily injury by accident or disease with a limit of not less than \$500,000; Business Automobile Liability. If services delivered pursuant to this Agreement involve the use of vehicles, either owned, hired, or non-owned by the Network Partner, automobile liability insurance is required covering the risks of bodily injury (including death) and property damage, including coverage for contractual liability. The minimum limit for automobile liability is \$1 million per occurrence, using a Combined Single Limit for bodily injury and property damage; Crime Coverage with a deductible not to exceed \$25,000, and coverage of not less than \$1 million single limit per occurrence which must, at a minimum, cover occurrences falling in the following categories: Computer Fraud; Forgery; and Employee Dishonesty; and Cyber Security Liability, with coverage against Claims resulting from Security Events, Network Security and Privacy, and Employee Privacy; with a deductible not to exceed \$25,000 and coverage of not less than \$500,000 per occurrence. 14 120011612.5 viii. Network Partner waives all rights against BHT for the recovery of damages to the extent they are covered by business auto liability or commercial umbrella liability insurance. d. BHT shall be named as an additional insured on all Commercial General Liability policies and any applicable Umbrella, Business Auto Liability, Cyber Security Liability, and PLEO policies. e. Policies must include reference to this Agreement. f. Network Partner must continue PLEO, Crime, and Cyber Security Liability policies (as applicable), for three (3) years beyond the expiration or termination of this Agreement, naming BHT as an additional insured and to BHT within ten (10) Business Days of written notice. g. Network Partner's insurance policies shall not be canceled or non-renewed in scope of coverage without provision for equivalent substitute insurance.

Network Partner's insurance policies shall not be reduced in scope below minimum acceptable limits without BHT's prior written consent. h. All insurance provided by Network Partner shall be primary as to any other insurance or self-insurance programs afforded to or maintained by BHT and shall include a severability of interests (cross-liability) provision. i. j. Network Partner agrees to waive all rights of subrogation against BHT for losses arising from services performed by Network Partner under this Agreement. By requiring insurance herein, BHT does not represent that coverage and limits will be adequate to protect Network Partner. Such coverage and limits shall not limit Network Partner's liability under the indemnities and reimbursements granted to BHT under this Agreement.