

**UNIVERSITY OF CALIFORNIA (UC) HEALTH**

**REQUEST FOR PROPOSAL**

**UC HEALTH POPULATION HEALTH  
MANAGEMENT LANDSCAPE ANALYSIS**

**RFP NUMBER 20-001**

**DATE ISSUED: July 29, 2019**

**DUE DATE: August 9, 2019 – 2:00 p.m. (Pacific Time)**

## REQUEST FOR PROPOSAL

The Regents of the University of California on behalf of UC Health is soliciting proposals for providing UC Health with a landscape analysis that addresses the following objectives

- Understand current population health management capabilities, infrastructure, and unmet needs at each of the medical centers.
- Minimize redundancy; determine opportunities for future investment in resources at the system level that complements and supports existing work.

### I. **SCOPE OF SERVICES**

The scope of work will include the assessment and analysis of the five academic medical centers' current population health management landscape. The deliverables for the work completed under the awarded agreement include a) an electronic written report with an objective overview to compare the similarities and differences in infrastructure and capabilities and unmet needs at each of the medical centers and b) an in-person presentation at the UC Health Population Health Strategy Planning meeting in early December, and c) a facilitator to help structure the discussion during in-person strategy meeting.

**Areas of focus for the assessment are:**

1. **How each campus defines "Population Health Management's Scope" e.g.:**
  - a. Alternative Payment Model (APM)
    - i. ACO and/or Bundles
  - b. Public Hospital Redesign and Incentives in Medi-Cal (PRIME) and Quality Incentive Program (QIP)
  - c. Clinically Integrated Network (CIN)
  - d. Ambulatory Quality/Primary Care Quality & Empanelment
2. **Organizational structure supporting Population Health Management**
  - a. Leaders/ roles (e.g. chief population health officers)
  - b. How it reports to Exec Team, governance,
  - c. How it manages strategic prioritization (e.g. process)
3. **Size of organizational structure supporting Population Health Management**
  - a. # FTEs and annual budget
  - b. Types of staff and scope of work
4. **Investments made so far in key health care delivery population health management capabilities, e.g.:**
  - a. Patient Experience
  - b. Care Management (including social determinants of health and palliative care)
  - c. Transitions of Care (including post-acute care collaboratives or partnerships)
  - d. Disease Management
  - e. Utilization Management
  - f. Billing for new CPT Codes
  - g. Risk Adjustment and Medicare HCC coding efforts
  - h. Training Programs for Staff, Organizational Leaders, Faculty, or Clinical Teams
  - i. MD incentive structures (as relevant to population health)
  - j. Community partnership infrastructure and efforts

**5. Technology and infrastructure investments**

- a. Data Warehousing
- b. Use of other population health management analytics (internal and external vendors) and technologies eg. Optum
- c. Registries
- d. Use of Epic (e.g. Healthy Planet toolkit)
- e. Other population health management tools and mobile apps

**6. Participation in Alternative Payment Models**

- a. What alternative payment models do you participate in or are considering (MSSP, Medicare Advantage, CMS Bundles, Commercial HMO, Direct to employer contracts, other)
- b. How many patients (or what percentage) does that comprise of your patient base
- c. What is the reason/rationale for participation
- d. Are there incentives for population health management/value work for primary care physicians and specialists
- e. Provide a profile of risk based contracts in the LAN categories

**7. What does each campus see as their top barriers and opportunities to advancing their population health management strategies and capabilities. How can UC Health help address these?**

Dependencies/ possible roadblocks

- Ability to engage various senior health system and clinical operations program leaders. Note – this effort will leverage existing and established relationships (e.g. the UC campus population health leaders)
- Ability to access siloed or otherwise undocumented information at each of the 5 health systems
- Ability to identify common themes and opportunities across disparate clinical enterprises that operate independently of each other

**II. UC HEALTH BACKGROUND**

In order to best determine future investments in population health at the UC Health level, a current state analysis of all campus based work in the area is needed. This will help inform how system-level work can help leapfrog innovation, reduce the need for similar resources at all campuses, and effectively leverage the scale of UC. It will also help ensure work that needs to remain at the campus level is not made redundant with system level-investments.

The UC Health Division within the University of California Office of the President was created to provide leadership and strategic direction for UC's six academic health systems and 18 health professional schools. The mission of the UC Health Division is *to provide leadership and strategic direction, foster systemwide collaboration and catalyze innovation within the UC Health enterprise to better educate and train the workforce of tomorrow; discover life-changing cures; and deliver care that improves the health and well-being of California, the nation and the world.* UC Health also manages the financial, operational and strategic aspects of UC's self-funded employee health plans, and clinical oversight of the University's student health and counseling services.

UC Health writ large comprises the University of California's clinical and health professional education arms. It combines the strength of UC's patient care, teaching and research. UC has the nation's largest health sciences instructional program with more than 14,000 students, while its six health systems form a \$14 billion enterprise providing broad access to world-class, specialized care. Over the past decade, the UC Health professional schools and clinical enterprise have grown significantly and now constitute a substantial segment of the human, physical, and financial assets of the University. Each of the UC academic medical centers has

earned a place among US News & World Report's "Best Hospital" rankings, with UCSF and UCLA being among the top ten best hospitals in the nation. UC Health is a vital part of California's safety net, providing care to uninsured, Medi-Cal and indigent patients in more than 50 counties. Systemwide, 36% of our inpatient days are for Medi-Cal enrollees and 31% of inpatient days are for Medicare enrollees.

## **UC ACADEMIC HEALTH SYSTEMS**

UC's six health systems, which include five academic medical centers, specialize in complex care. UC provides half of the transplants and one-fourth of extensive burn care in California. UC operates or staffs five Level 1 trauma centers – often providing the only trauma care in the region.

**UC Davis Health** – Providing the region's only academic health center, UC Davis Health is a hub of innovation that encompasses UC Davis Medical Center, UC Davis School of Medicine, The Betty Irene Moore School of Nursing at UC Davis and UC Davis Medical Group. UC Davis School of Medicine is one of the nation's leading medical schools, recognized for its research and primary-care programs. The school places in the top 20 percent of institutions in the country for research funding from the National Institutes of Health (NIH), and is home to one of the nation's inaugural Clinical Translational Science Centers. UC Davis Medical Center serves a 65,000 square-mile area that includes 33 counties and 6 million residents across Northern and Central California. The 625 bed acute care teaching hospital maintains an annual budget of roughly \$1.7 billion. UC Davis admits more than 30,000 patients per year and handles nearly 1 million visits. The medical center's emergency room see more than 210 patients per day on average.

**UC Irvine Health** – Comprised of the Susan and Henry Samueli College of Health Sciences (COHS) and UC Irvine Medical Center. UC Irvine Health is the only academic care provider in Orange County and the region, and plays a unique role, offering primary and specialty care at numerous locations, as well as providing unmatched trauma and critical care services, tertiary and quaternary care and leading-edge cancer treatment at UC Irvine Medical Center. The COHS comprises the School of Medicine, the Department of Pharmaceutical Sciences, the Program in Public Health and the Sue & Bill Gross School of Nursing. As the primary teaching location for UCI School of Medicine, UCI Irvine Medical Center is a 417-bed acute care hospital providing tertiary and quaternary care, ambulatory and specialty medical clinics, behavioral health and rehabilitation. UCI Medical Center features Orange County's only National Cancer Institute – designated comprehensive cancer center, high-risk perinatal / neonatal program and American College of Surgeons-verified Level I adult and Level II pediatric trauma center and regional burn center. UCI Health serves a region of nearly 4 million people in Orange County, western Riverside County and southeast Los Angeles County.

**UCLA Health** – UCLA Health is among the most comprehensive and technologically advanced health care systems in the world, providing an extraordinary opportunity for the advancement of medicine and improving patient care. UCLA Health comprises four hospitals: Ronald Reagan UCLA Medical Center; UCLA Mattel Children's Hospital; Stewart and Lynda Resnick Neuropsychiatric Hospital at UCLA and UCLA Medical Center, Santa Monica. The health system also includes the UCLA Medical Group with its wide-reaching system of more than 170 primary-care and specialty-care clinics throughout Southern California. UCLA Health hospitals place No. 1 in Los Angeles and No. 7 in the country according to U.S. News and World Report's Best Hospital survey. Nearly 600,000 people every year receive care from a dedicated and experienced staff of more than 2,700 physicians and 4,000 nurses, as well as therapists, technologists and support personnel.

**UC Riverside Health** – Established alongside the School of Medicine at the University of California, Riverside, UCR Health is growing to meet the healthcare needs of the region – new office locations, new physicians and more specialties – bringing innovative, culturally sensitive medical care to the community. The School of Medicine was conceived to address a shortfall of health care professionals in Inland Southern California. The School of Medicine (SOM) at the University of California, Riverside (UCR) received preliminary accreditation from the Liaison Committee on Medical Education (LCME) in October 2012 and the inaugural medical student class enrolled in August 2013. Provisional accreditation from the LCME was secured in June 2015 and the SOM is preparing for the final step of the three-step accreditation process. The SOM's clinical enterprise, UCR Health, was established upon the school's opening in 2013. It is built upon the premise of serving community needs, most often working collaboratively with healthcare partners to create new services that fill gaps and that are mutually beneficial. UCR Health has established a family medicine practice in Palm Springs and has

begun to create a psychiatry outpatient presence in the community. Clinical programs are being established in operation at three medical centers in the region.

**UC San Diego Health** – UC San Diego Health is the region’s only academic medical center. UC San Diego Health maintains a two-campus strategy, integrating research, teaching and clinical care at locations in Hillcrest and La Jolla. UC San Diego Health has two professional schools: UC San Diego School of Medicine and Skaggs School of Pharmacy and Pharmaceutical Sciences, both located on the UC San Diego campus in La Jolla. UC San Diego Health has three hospitals operating under one license with a current combined capacity of 799 beds: UC San Diego Medical Center in Hillcrest (381 beds), Jacobs Medical Center (364 beds) and Sulpizio Cardiovascular Center (54 beds). UC San Diego Health has among the best doctors in San Diego and is nationally ranked in six adult medical and surgical specialties by U.S. News & World Report.

**UC San Francisco Health** – UCSF Health is internationally renowned for providing highly specialized and innovative care. UCSF Health includes UCSF Helen Diller Medical Center at Parnassus Heights and UCSF Medical Centers at Mount Zion and Mission Bay; UCSF Benioff Children's Hospitals in Oakland and San Francisco; Langlely Porter Psychiatric Hospital and Clinics; UCSF Benioff Children's Physicians; and the UCSF Faculty Practice. UCSF’s four professional schools — Dentistry, Medicine, Nursing and Pharmacy — consistently rank as a top program nationwide in their field. UCSF Health consistently ranks among the best in the country, according to U.S. News & World Report. UCSF Health’s top rankings reflect its singular focus on advancing health care. UCSF Health is the leading institution dedicated exclusively to the health sciences.

### III. **RESPONSE DUE DATE**

Responses are due on August 9, 2019, 2:00 p.m. (Pacific Time).

### IV. **VENDOR RESPONSES**

Vendor responses should describe how your company proposes to complete the work and deliverables as described in the Scope of Services, including but not limited to approach and methodology.

Proposed staffing and staff resumes should be included in the response. Additionally, responses should include the name of the proposed project lead, including his/her experience and expertise.

### V. **VENDOR PRESENTATIONS**

Qualified vendors may be invited to participate in vendor presentations with UC Health representatives. Each vendor will be given 1.0 hour maximum to present their proposed programs as it meets the objectives of this Request for Proposal (RFP) and to address any questions with the UC Health representatives. Presentations are tentatively scheduled to be held on August 14 and 15, 2019 at the UC Health Corporate Office in Oakland, CA. More details of the presentations will be provided to the invited presenters..

UC Health will not be responsible for any costs associated with a vendor’s participation in these presentations and/or for any expenses incurred should a vendor not be invited to participate in the vendor presentations.

Vendor presentations will be held via videoconference.

UC Health reserves the right to reschedule the vendor presentation dates and location.

### VI. **ENGAGEMENT FEES**

Proposals should include all fees and/or costs associated with completing the engagement as outlined in the Scope of Services.

**VII. GENERAL INSTRUCTIONS**

- A. Failure to comply with the provisions outlined herein (General Instructions) will result in your proposal being non-qualified and rejected as non-responsive.
- B. Vendors are required to submit acknowledgment of RFP receipt and provide their intent to participate. All acknowledgments must be received by August 1, 2019 and should be submitted by email to [Eimee Miura \(emiura@mednet.ucla.edu\)](mailto:emiura@mednet.ucla.edu).
- C. The respondent shall provide two (2) written copies and two (2) electronic copies (flash drive) of their response. One (1) written copy should be clearly marked as the "master copy".
- D. A cover letter should be included with response and should include a brief statement of respondent's strengths as a managed services provider. The cover letter should identify the representative of the company that is duly authorized to commit and respond on behalf of the company. This person must sign the cover letter.
- E. Responses should include a return of the original RFP with initials in the space provided (lower right hand corner of each page). Respondent's initials will acknowledge respondent's understanding and acceptance of the contents on that page.
- F. Responses should be submitted in a sealed container, package, or envelope that will preserve contents until opened by an authorized UC Health representative. The RFP number should be clearly marked on the outside of the container, package, or envelope.
- G. Overnight express mail, messenger, or any other delivery method that will ensure on-time delivery with proof of delivery should be used to send responses. UC Health does not assume responsibility for late receipt (delivery) of response or responses sent by the United States Postal Services.
- H. Responses made by email or facsimile will not be accepted.
- I. Responses should be sent to:
- Eimee Miura  
Chief Procurement Officer, UC Health  
10920 Wilshire Blvd., Suite 750  
Los Angeles, CA 90024
- J. Responses should be made in the same order as provided in the RFP. Additional information and/or documents may be attached at the end of the response. The RFP section and item numbers should be noted and referenced on any additional documents.
- K. Deviations from the RFP expectations and requirements must be noted in respondent's response. Respondents should be aware that any deviations to the minimum expectations and/or requirements as outlined in this RFP may result in disqualification.
- L. In accordance with the Schedule of Events, questions should be submitted in writing by email to: Rachael Sak; [rachael.sak@ucop.edu](mailto:rachael.sak@ucop.edu)
- M. Responses to questions will be made in writing to all potential respondents. UC Health does not assume responsibility for questions or responses received after the RFP question and response deadline that might prevent the respondent's ability to provide a response within the established deadline.
- N. All questions should be submitted to the designated UC Health representative. UC Health does not assume any responsibility for questions submitted to or answered by an unauthorized UC

Health representative.

- O. Potential respondents may not make contact with any member of UC Health and may only contact the authorized UC Health staff as outlined in this RFP.

Failure to comply with this requirement may result in the disqualification of the vendor in further participation of this RFP.

**VIII. SCHEDULE OF EVENTS**

Distribution of RFP <a href="http://purchasing.uclahealth.org/bidding-on-jobs">http://purchasing.uclahealth.org/bidding-on-jobs</a>	July 29, 2019
RFP Receipt Acknowledgment and Intent to Participate	August 1, 2019
Written RFP Questions Due	August 2, 2019
Responses to Questions	August 5, 2019
RFP Responses Due	August 9, 2019, 2:00 pm. (Pacific Time)
Vendor Presentations	August 14 and 15, 2019
Selection of Awarded Vendor	August 16, 2019
Contract Executed	August 28, 2019
Engagement Starts*	September 3, 2019

UC Health reserves the right to change and/or modify this schedule. All vendor participants will be notified of any changes.

\*The anticipated completion of the engagement should be three months from the start date.

**IX. BASIS FOR AWARD/SELECTION CRITERIA**

- o It is the intent of UC Health to review and/or award the resulting contract(s) to the responsive and responsible company(ies) whose proposal(s) is determined to be the best overall value to UC Health. Factors considered as the criteria or basis of the award(s) include but is not limited to: cost, service level, vendor presentations, etc. UC Health reserves the right to award one or multiple agreements, not make an award, or cancel this RFP at any time.
- o UC Health may appoint a committee to perform the evaluation. Each proposal will be analyzed to determine overall responsiveness, best qualifications and best value for UC Health. The selection committee may select all, some or none of the awarded vendors for interviews and/or presentations. If UC Health elects to conduct interviews and/or presentations, awarded vendors may be interviewed and scored based upon the criteria referenced within RFP. UC Health may also request additional information of awarded vendors at any time prior to award. UC Health reserves the right to select one, or more, or none of the vendors for award and subsequent contract negotiations.
- o This contract will be reviewed and/or awarded to the responsible company whose RFP response is determined to be the best overall value to UC Health considering all factors in this RFP, and at the sole discretion of UC Health.
- o Other conditions or issues deemed appropriate by the UC Health staff as it relates to the particular services requested in the RFP.

- A prequalification process will be used to identify vendors who will be invited to participate in vendor presentations. The prequalification process will include but not limited to the review of the vendor responses to determine their ability to meet the operational model, requirements, and expectations of UC Health as outlined in this RFP.
- Utilization of services outline in this RFP is estimated only and used to solicit responses. It does not bind UC Health to order the same amount in the RFP. UC Health reserves the right to utilize services more or less than the time estimated in this RFP.
- UC Health reserves the right to award contracts based on the RFP to a single provider or multiple providers, affiliated consortium of service partners or awarded vendors, or no providers/vendors at all.
- All current service provider contracts remain in effect with UC Health throughout the evaluation process and said providers may be considered in the RFP process.

#### X. **SUPPLEMENTAL INFORMATION**

- Supplemental material, case studies, graphs, charts data, marketing literature, reference letters, certificates of accreditation and potential services beyond the stated scope of this RFP may be submitted with responses. Supplemental material should be submitted as exhibits to the responses and clearly marked as such.

#### XI. **GENERAL TERMS AND CONDITIONS**

- Preparation Costs: UC Health is not responsible for any preparation costs incurred by respondent. Respondent is solely responsible for all costs in association with information, proposals, visitations, demonstration, and personnel furnished to comply with this RFP or any subsequent requests prior to issuance of an agreement.
- Term of Agreement: The term of any agreement arising from this RFP shall be considered a master services agreement (MSA) for three (3) years with two (2) one-year renewals. Work completed under such MSA shall be supported and agreed upon utilizing a scope of services amendment. Any renewals must be agreed upon in writing by both parties.
- Cancellation of this RFP and/or Awarded Vendor Agreement: UC Health reserves the right to cancel any RFP or vendor award or any parts of any resulting contract when: (a) it is found that product quality, service or delivery is not in keeping with the provisions of this RFP and the awarded vendor(s) has not cured the deficiencies within five (5) days of written or verbal notification, or (b) an item or items or service(s) are no longer needed. Cancellation notification under this provision shall be given to the awarded vendor(s) in writing no later than thirty (30) days prior to the date the cancellation is effective. UC Health reserves the right to cancel with 30-day notice for cause or changing market conditions, or changing UC Health department(s) requirements, or changing requirements and/or savings identified through UC Health Value Analysis process, or identification of new technology/products, or due to mergers and/or affiliations of UC Health. (c) The product or service may be obtained through group purchasing activities with other institutions or firms. (d) The cancellation of the RFP or vendor award is determined to be in the best interest of University of California Health Systems.
- University of California Terms and Conditions: Unless otherwise stated herein or in any resulting MSA, any applicable University of California Terms and Conditions (copy attached) shall be made a part of any agreement arising from the award of this RFP.



- Additional Phases or Scope of Work: UC Health reserves the right to add additional phases to the engagement and/or MSA as a result of work completed or recommended under the original scope of services. Any additional work shall be agreed upon in writing by both parties in the form of an amendment, including but not limited scope of services and fees.

**XII. EXCEPTIONS AND AREAS OF NON-COMPLIANCE**

- Please indicate your compliance with the terms and conditions as set forth in this RFP.
  - 100% Compliance – All terms and conditions of the RFP are accepted without any exceptions, limitations and/or exclusions.
  - Concession Requests – Acceptance with non-contingent concessions requested.
  - Non-Compliance – Acceptance contingent upon exceptions, limitations, and/or exclusions

\_\_\_\_\_

Company

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Name

\_\_\_\_\_

Title

- All exceptions, limitations and/or exclusions should be provided as an exhibit to the response and should include but not limited to the following information:
  - RFP section number and description/requirement
  - Details regarding exception, limitation and/or exclusion
  - Suggested alternative, if applicable
- UC Health reserves the right to review all exceptions, limitations and/or exclusions to determine its appropriateness to the scope of services as outlined in this RFP and may determine as the result of its review to disqualify a respondent from further consideration.