

Digital Behavioral Health Services RFP

Respondent Questions & Answers – February 19, 2025

Question 1: What is the budget for this RFP? Do you pay for technology separately to the services or as one amount?

Response: There is no set, defined budget for these services. Technology would be paid as one amount.

Question 2: Is the number of total supported members still roughly 220,000?

Response: The number of total active and non-Medicare retiree members (includes Partnership) is still roughly 220,000. The State may also include its Medicare retiree members in this offering. There are approximately 63,000 Medicare members (includes Medicare eligible spouses and dependents). Please provide pricing with and without Medicare retirees.

Question 3: Concerning pricing, has the State decided on a model for their mental health solution? Would they want a limited number of visits invoiced directly from the mental health solution and then the cost goes to the health plan? Or would they prefer an unlimited number of covered sessions for members billed through the health plan?

Response: The State has not decided on a model. Please propose all available models.

Question 4: Please confirm pricing should be based on a total of 274,000 eligible covered lives.

Response: The number of total active and non-Medicare retiree members (includes Partnership) is still roughly 220,000. The State may also include its Medicare retiree members in this offering. There are approximately 63,000 Medicare members (includes Medicare eligible spouses and dependents). Please provide pricing for both 220,000 and 283,000 eligible covered lives.

Question 5: Please clarify "per active member per month" pricing.

Response: Please disregard the word "active," this should be "per member per month" pricing.

Question 6: Please confirm how many counseling sessions State of CT offers today per issue.

Response: The State does not limit the number of counseling sessions per issue and currently does not have a digital behavioral health solution.

Question 7: The RFP references Attachment F (Connecticut's standard contract), but it was not included in the provided materials. Will this be shared as part of the RFP process?

Response: The contract template has been posted.

Question 8: Can you clarify whether vendors are expected to agree to all terms as written in the contract (if provided), or will there be an opportunity for negotiation after vendor selection? If modifications are permitted, would the State like vendors to submit proposed redlines now, or will contract negotiations take place at a later stage?

Response: There will be an opportunity for negotiation after vendor selection, however, many of the provisions are statutory and therefore non-negotiable. Please indicate via red-line or on an exception sheet any terms that you cannot agree to as written in the contract template.

Question 9: Please confirm the bidder only needs to submit pricing for base contract and not option years, per the pricing template.

Response: You must submit pricing for the base contract of three-years, you may also provide pricing for two additional option years.

Question 10: Please confirm the pricing sheet aligns to 12 -month calendar years based on award date, or does it align to Connecticut's Fiscal year.

Response: Pricing should align with the Connecticut's Fiscal year (July - June)

Question 11: Will the Best and Final Offer (BAFO) and Reverse Auction process only apply to pricing, or will technical proposals also be subject to revisions?

Response: Technical revisions would be permitted.

Question 12: The RFP states that "all proposed costs must be fixed through the entire term of the contract." Will the State allow for adjustments due to inflation, regulatory changes, or increases in service demand?

Response: Contracted pricing adjustments will not generally be allowed unless there are changes in the services offered or significant regulatory changes. If you have draft contract language that you would like considered on this point, please include it with your submission.

Question 13: Will bidders be penalized for listing contracts that were terminated for reasons beyond their control (e.g., budget cuts, policy changes)?

Response: No, bidders will not be penalized. Please indicate reason for termination if you would like to give context.

Question 14: Will the State allow staffing plan adjustments post-award, or must all key personnel be identified before proposal submission?

Response: Staffing plan adjustments post-award would be allowed.

Question 15: If implementation begins on April 1, 2025, do all assigned personnel need to be onboarded by that date, or is there flexibility in ramping up?

Response: There is flexibility.

Question 16: Will the State provide member utilization data and historical claims data to assist in implementation planning?



Response: Since this would be a new service offering, there is no member utilization or claims data.

Question 17: Will the awarded vendor be required to submit to third-party security audits, or will self-attestations of compliance be sufficient?

Response: Third-party audits are required

Question 18: If multiple vendors are awarded, how will responsibilities be allocated between them to ensure seamless service delivery?

Response: If multiple vendors are awarded contracts, responsibilities will be allocated through direct negotiation among the State and the vendors.

Question 19: The RFP states that full services must be live by July 1, 2025. Does the state anticipate any transition period with the incumbent provider(s), or will the awarded vendor be solely responsible for onboarding all uses by that date?

Response: This would be a new service offering, there is no incumbent.

Question 20: Is there a requirement to submit hard-copy binders or a thumb drive of the RFP submission?

Response: No

Question 21. Do you anticipate requiring a hard copy of the redacted RFP response?

Response: No

Question 22: The current Behavioral Health Utilization Management and Care Management is provided by the current carrier. Is this proposal intended to build upon the existing UM/CM processes, or should respondents include these services in our response?

Response: Respondents have the option to include and/or Integrate Utilization Management and Care Management with the current carrier in their proposals.

Question 23: 1.1 Introduction 1) Regarding the information shared about numbers of covered lives, for the services required in this RFP, what are the approximate Grand Totals of all eligible (covered): 1. Employees & Deproved to the services only 2. Members (employees + retirees + spouses/dependents)

Response: The number of total active and non-Medicare retiree members (includes Partnership) is still roughly 220,000. The State may also include its Medicare retiree members in this offering. There are approximately 63,000 Medicare members (includes Medicare eligible spouses and dependents). Please provide pricing with and without Medicare retirees.

Question 24: 2) 1.2.6 Evaluation Criteria • Positive plan member experience as demonstrated through satisfaction surveys, NPS scores and other mechanisms

Are there preferred methods for tracking member engagement and satisfaction beyond NPS scores?

Response: The State conducts member satisfaction surveys and hosts focus groups periodically. The State is open to all methods that may be proposed.

Question 25: Access to care, are there specific target populations or underserved geographic areas that require prioritized access?

Response: Regardless of geographic area access to mental health care is a significant issue for many Plan Members. There is also a continuing surge in need for pediatric and adolescent mental health care in Connecticut.

Question 26: 2.3.4 Multiple Methods of Communication: • Comprehensive Communication Channels: 4) As this is a Digital Behavioral Health RFP, are in-person visits a required option to connect Plan Members to behavioral health care?

Response: The State's Plan Members often show preference for an in-person provider network; however, such a network is not required to submit a proposal.

Question 27: 2.4 Planned Schedule of RFP Activities 5) What support does the State provide to ensure readiness by the April 1, 2025, implementation date?

Response: The State's consultants and benefits team will assist the selected bidder's implementation team, as necessary.

Question 28: 6.7 Platform & Digital App 7) Are there expectations for co-branded materials or joint initiatives with other healthcare providers?

Response: The State expects to co-brand materials and run initiatives with the selected Vendor(s). There are no other joint initiatives in mind at the moment but the State would be receptive to the idea if the parties agree.

Question 29: 6.10 Reporting 8) Are there preferred formats or frequency requirements for outcome reporting and program performance analytics?

Response: The state would prefer performance reporting and analytics monthly if possible.