

# San Francisco Health Service System Health Service Board

## SFHSS Medicare Advantage Request for Proposals (RFP) Update

August 12, 2021

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# Medicare Plans Discussion

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- The goals of today's meeting are to review:
  - Consolidated goals and objectives
  - Path to RFP
  - RFP timeline
- We appreciate your questions and comments today—knowing your input as Health Service Board (HSB) Commissioners will help guide San Francisco Health Service System (SFHSS) in the selection process over the coming months.

## Medicare Plans Discussion—Consolidated Goals and Objectives

Strategic Goal	Pillar(s)	Key Objectives
<b>Affordable and sustainable</b>	<p><b>Cost:</b> SFHSS expects no increase to premiums</p> <p><b>Quality:</b> SFHSS will prioritize plans with a CMS Star rating of 4.0 or higher</p>	<p>Support health plan models focused on sustainable, financially stable, high-quality, cost-effective health plan programs and options</p> <p>Leverage SFHSS purchasing power to enhance plan competition and reduce future Medicare plan premium cost trends</p>
<b>Reduce complexity and fragmentation</b>	<p><b>Administration:</b> SFHSS expects superior customer service, plan design administration and program offering</p>	<p>Minimize member disruption by maintaining a similar balance of current copays and deductibles as well as network and pharmacy formulary</p>
<b>Engage and support</b>	<p><b>Quality:</b> SFHSS will prioritize plans with a CMS Star rating of 4.0 or higher</p> <p><b>Administration:</b> SFHSS expects superior customer service, plan design administration and program offering</p>	<p>Innovate for better care management of the drivers that affect risk scores</p>

## Medicare Plans Discussion—Consolidated Goals and Objectives (cont.)

Strategic Goal	Pillar(s)	Key Objectives
<b>Choice and flexibility</b>	<b>Administration:</b> SFHSS expects superior customer service, plan design administration and program offering	Enhance diversity of choices geographically while maintaining balanced enrollment among offered plans  Reduce administrative complexity of “split families” (retiree families with one or more Medicare individual and one or more non-Medicare individual)
<b>Whole person health and well-being</b>	<b>Quality:</b> SFHSS will prioritize plans with a CMS Star rating of 4.0 or higher	Partner with plans committed to the strategic goal of ongoing whole person health, well-being of Members and improved health equity

Underlying all activity are legal / policy guardrails, meaning:  
**SFHSS will work within the construct of the City Charter**

# Medicare Plans Discussion—Path to RFP

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**Previous discussions by SFHSS staff and the HSB are as follows:**

- 2018 Strategic Planning—Innovation Day June 2018
- Adopted Strategic Plan—October 2018
- Medicare Market Update—November 2020
- HSB Input on RFP Goals to SFHSS—June 2021

# Medicare Plans Discussion—Path to RFP

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## Revising the process:

- After hearing from the Health Service Board in June 2021 regarding the goals and objectives of the RFP, the SFHSS Staff are recommending a revised approach to the RFP that would include an initial RFI (Request For Information – see next page for description).

# Medicare Plans Discussion—Path to RFP

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## What is a Request For Information (RFI)?

- An RFI is a formal request for written information from potential vendors prior to an RFP
- An RFI is an opportunity to educate and inform SFHSS prior to an RFP to:
  - Allow for additional fact-finding
  - Ask more open-ended questions than an RFP
  - Allow vendors to fully explain their current and future offerings
  - Affirm or negate the necessity for an RFP
- The expected outcome of an RFI process is:
  - An RFP scope of work that is more narrowly-tailored to solve specific challenges faced by an organization
  - A streamlined questionnaire that focuses on the specific goals and objectives of the organization and the true vendor differentiators which allows for a very focused evaluation processes
  - Competitive requirements for the RFP will be clarified in an open and fair manner
  - Overall, the pre-work of an RFI process results in an RFP process that is efficient and effective

# Medicare Plans Discussion—Path to RFP (continued)

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- The initial RFI will be advantageous for the following reasons:
  - While Medicare Advantage (MA) plans are highly regulated, there are opportunities for vendors to be innovative, which creates complexity in assessment of MA plans. An RFI approach offers a non-binding opportunity for SFHSS to revitalize its understanding of the MA marketplace.
  - A key learning from the Active/Early Retiree RFP process completed in early 2021 was to be concise in expectations of potential vendor partners. An RFI approach provides an opportunity to educate and inform SFHSS to create an efficient scope of work.
  - An RFI allows for a more open dialogue between SFHSS and the interested vendors including the opportunity for the vendors to develop a better understanding of SFHSS and its challenges. An RFI approach offers an opportunity for creative solutioning within a less-structured framework.
  - The RFI process will allow for a greater level of transparency and wider input in the earlier stages. An RFI approach offers SFHSS the opportunity to include two members of the HSB to participate in the analysis phase of the RFI and provide a broader contribution to the groundwork of the formal RFP (where the HSB's direct involvement is restricted by policy and potential legal issues).



# Medicare Plans Discussion—Path to RFP (continued)

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Broader contribution in the RFI process will include:

- SFHSS Executive Director, COO, CFO, Senior Health Program Planner
- Aon
- HSB Commissioner (elected member)
- HSB Commissioner (appointed member)

## Medicare Plans Discussion—Path to RFP

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### Next Steps:

- Staff will prepare an RFI to release to the market
- The results of the RFI will either inform the RFP or determine that an RFP is not necessary
- Staff will present to the Board the options and potential gains for a Medicare Advantage plan RFP for the 2023 plan year (December 2021/January 2022)
  - SFHSS may then retain the current group Medicare Advantage plan offering framework and expand potential Medicare Advantage plan offerings to SFHSS Medicare retirees without an RFP
  - The Board may choose to expand current options within the existing framework and incumbent vendors and Staff will conduct a Medicare Advantage plan RFP for the 2023 plan year (January 2022-June 2022)

## Medicare Plans Discussion—Timeline (DRAFT)

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- **August – September 2021:** Continued research on stakeholder engagement, member feedback and assessment of scope
- **September 2021:** presentation of RFI summary and consolidated goals and objectives to the Board
- **September 2021:** release RFI to the market
- **October/November 2021:** evaluate RFI responses
- **December 2021:** presentation of RFI learnings and impact on RFP goals and objectives to the Board
- **January 2022:** release RFP to the market
- **February/March 2022:** evaluation of proposals (non-financial components)
- **April 2022:** actuarial assessment of financial components
- **May 2022:** Board discussion of evaluation and assessment (Staff recommends exercising the option to have two May Board meetings)
- **June 2022:** SFHSS recommendation to the Board