

Medicaid Management Information System (MMIS) Retro

Department of Human Services

COPPAR

Procurement Request

Request ID: 2021ITP0068

February 22, 2021

Agency Contact:

Ken Senft

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Review Summary

OA/OIT Decision:

Approved

Date of Final Review:

February 20, 2021

Comments:

Agency CIO Review:

Agency Approver:

Joseph Zimmerman

Date of Approval:

February 04, 2021

Procurement Request Summary

1. Procurement Amount

\$3,130,095

2. Is this procurement request associated with an approved project?

No

Project: N/A

3. Description of Request

SoleSource 36955 in process to extend contract 4400015328. COPPAR approval needed for SoleSource. Requesting the extension of the current contract between CHC and DHS that was originally awarded from RFP 08-14. Title XIX Sec. 1927 of the Social Security Act requires states to provide for the ongoing periodic examination of claims data and other records in order to identify patterns of fraud, abuse, gross overuse, or inappropriate or medically unnecessary care, among physicians, pharmacists and individuals receiving benefits under this title, or associated with specific drugs or groups of drugs. This program is known as the Retro Drug Utilization Review (RetroDUR). DHS issued an RFP for assistance in maintaining the Department's RetroDUR, a clinically based Preferred Drug List (PDL), and to administer the Commonwealth's participation in the federal drug rebate program, and the state supplemental rebate program, including supplemental drug rebates and market share rebates. The goal is to prevent fraud, waste and abuse, to ensure that MA recipients in the Fee-for-Service (FFS) delivery system have access to clinically excellent, cost-effective pharmacy services, and to ensure that the Department maximizes applicable rebates in both the FFS and managed care delivery systems. The procurement was awarded to Change Healthcare (formerly Goold Healthcare). We are currently in the process of releasing RFPs for a new MMIS to replace PROMISe (the RetroDUR business is an MMIS function under a separate contract with CHC). Due to the size and complexity of the PROMISe replacement project, the new MMIS will not be operational before the end of the current CHC contract. Procuring a new CHC contractor prior to implementation of the new MMIS would require the CHC module be able to communicate with both PROMISe and the new MMIS one year later. DHS would like to keep the current CHC contract in place to save implementation costs.

DHS legal approved amendment (attached) pending vendor signature