

Parkland Community Health Plan (PCHP) Request for Quote (“RFQ”)	
SERVICES	
Issue Date: April 2, 2026	Proposal Due Date: April 16, 2026
Proposals received after the due date and time will not be considered.	
Contract Type: Consulting Anticipated Contract Term: Three years initial plus two (2) one (1) year options Anticipated Contract Effective Date: June 1, 2026 Deadline for Written Questions: April 8, 2026 PCHP Response to Questions: April 13, 2026 Finalist Interviews: April 20, 2026 - April 21, 2026 Expected Contract Award: April 23, 2026	Proposal Submission Instructions: Contact Information All correspondence and questions regarding this RFQ must be directed in writing to: <ul style="list-style-type: none"> • Name: Bobbie Sullivan • Title: Strategic Source Manager, Parkland Community Health Plan • Email: Bobbie.Sullivan@phhs.org and pchp_contracts@phhs.org.
Presentation(s) may be required for finalists as part of the evaluation.	A.) By Due Date and Time: Email one (1) RFQ Response and one (1) Rate Sheet (Exhibit A) to Bobbie.Sullivan@phhs.org and pchp_contracts@phhs.org .
Responses to EACH VOLUME AND SUB-SECTION must be answered in the “Shaded Text Box” provided directly following each section requiring information unless otherwise instructed.	B.) Each page of the proposal must be numbered. C.) Page Limit: 45 pages, with same (preset) margins, and 10 point font or larger.

1 SPECIAL INSTRUCTIONS

- A. Proposals should be submitted in accordance with the Instructions set forth in this RFQ. PCHP will evaluate proposals in accordance with the evaluation criteria in Section 5 & 6 and may issue one or more contracts as a result of this RFQ.
- B. **Questions** may be submitted via email to Bobbie.Sullivan@phhs.org and pchp_contracts@phhs.org.
- C. ***All communication regarding this solicitation must be directed to Bobbie Sullivan (Bobbie.Sullivan@phhs.org). Direct communication about this RFQ with any other Health Plan employee or its representative will be grounds for disqualification.***
- D. **Executive Summary:** No oral commitment, response, answer, or direction from other Health Plan personnel is binding unless also furnished in writing to all prospective Offerors by the Health Plan’s Representative in the form of an amendment to this Solicitation, or as an official response to questions submitted by Offeror(s).



2 BRIEF DESCRIPTION OF PROJECT

PCHP is seeking proposals from qualified consulting firms to support strategic insourcing of Third-Party Administrator (TPA) services supporting PCHPs Medicaid & CHIP business. The consultant will assist PCHP in planning, designing, implementing and operationalizing internal capabilities over a multi-year period that are currently hosted and supported as a business process by an external vendor. The engagement will include operational, technical, regulatory and data architecture support necessary to transition these functions while ensuring continuity of operations and compliance with applicable regulations. PCHP seeks a partner with deep experience in Medicaid managed care operations, claims administration systems, healthcare information technology, electronic data interchanges, and enterprise data architecture.

The below signed, hereby agrees that their organization will submit this RFQ, only communicate with the designated PCHP contracting representative about this RFQ and will furnish and deliver the services subject to the terms and conditions specified herein.

Signature	Company Name	Contact Telephone Number
Printed Name:	Date:	Email:
Title:		

3 INSTRUCTIONS TO OFFERORS

The following instructions will establish the format and content of proposals:

- A. Proposal Cover Sheet:** The FRONT PAGE of this RFQ shall be completed, signed, and submitted as the cover sheet ("the Cover Sheet") for Offeror's proposals. The Cover Sheet shall not count towards the page limit.
- B. Authorized Official and Submission of Proposal:** The proposal must be signed by a leader with signature authority and must stipulate that it is predicated upon all the terms and conditions of this RFQ. You must provide responses to each requirement as to whether you can comply, and if you cannot comply, you must explain why not.
- C.** The proposal and other information related to how the Offeror intends to conduct the scope of work of this solicitation shall be submitted pursuant to the instructions of this RFQ.
- D. Related Documents:** The following documents are released as part of this solicitation package:
 - 1. **Exhibit A: Vendor Rate Sheet** – Please fill out.
 - 2. **Exhibit B: HHSC Addendum** – Additional terms and conditions required by the HHSC for this type of contract will be added as a contract exhibit.
- E. Qualifications & Terms & Conditions:** Offeror's Services must meet all the Health Plan's Qualifications as set forth in Section 5, Pass / Fail Evaluation, the Statement of Work, and the Rate Sheet (Exhibit A). Section 5 shall be completed and submitted with the Cover Sheet and shall not count towards the page limit.
- F. The file name must follow the convention: PCHP_TPA_RFQ_Proposal_[VendorName].**
- G. Contract:** Health Plan has the option to award multiple contracts based on submitted proposals.
- H. Pricing and Potential Award Without Discussions:** Offeror should offer its best pricing in its initial proposal, and such pricing should be valid for One Hundred Eighty (180) days. The Health Plan reserves the right to award without discussions if it is determined that the initial prices are fair and reasonable and that discussions to clarify requirements are not necessary.
- I. References:** Offerors shall provide references as set forth in the RFQ. It is Offeror's responsibility to ensure the reference's point of contact agrees to respond to Health Plan's specific questions regarding Offeror's experience and performance. References shall be capable of answering questions concerning Offeror's ability to deliver products and services relative to this RFQ. Use of Health Plan personnel as references will NOT be counted towards the minimum reference requirements.
- J. HUB Representations and Certifications:** Offerors are encouraged to identify if they are a 51% or more minority, woman, or service-disabled veteran owned business and certified as a "Historically Underutilized Business" or "HUB". If so, please attach a copy of your certification with your proposal, as applicable. Additionally, offerors are encouraged to work with HUBs when subcontracting opportunities arise.
- K. Health Plan Background:** Parkland Community Health Plan was started in 1999 by Parkland Health as a managed care organization to provide services for Texas STAR Medicaid and Children's Health Insurance Program (CHIP) recipients.

Our service area covers Dallas, Collin, Ellis, Hunt, Kaufman, Navarro, and Rockwall counties, where members can seek care at more than 6,000 doctors and specialists and over 40 hospitals and urgent care centers. Learn more at <https://parklandhealthplan.com>.

4 SELECTION PROCEDURES

- A. This is a “best value” procurement where the Health Plan is permitted to make tradeoffs between cost or price and non-price factors and to consider award to other than the lowest priced Offeror or other than the highest technically rated Offeror. Proposals may be evaluated by an evaluation committee. After evaluating proposals, the evaluation committee may make the best value determination. The Health Plan reserves the right to award multiple contracts or reject all proposals and cancel this Solicitation at any time. In addition to evaluating the information provided in each proposal, the Health Plan may reasonably consider information received from other sources including but not limited to consulting firms, benchmarking firms, or any other outside entity.
- B. The pricing submitted with each Offeror’s proposal will be evaluated for cost reasonableness. Submitted prices will be evaluated to determine price reasonableness, and unreasonably high or low prices may result in removal from the competitive range without further evaluation or consideration of contract award. Proposals may also be rejected for including prices beyond the Health Plan’s budget for the subject of this solicitation. The Health Plan is a political subdivision of the State of Texas agency and is therefore exempt from taxes. Do not include taxes in your proposal pricing.
- C. The Health Plan reserves the right to award a contract without discussions and may select finalists for presentations in April 2026.
- D. **Awards.** The Health Plan reserves the right to make a single award, multiple awards, or no award at all to RFQ. In addition, this RFQ may be amended as necessary to meet the needs of the Health Plan or canceled by the Health Plan at any time for any reason or no reason.

Notice of Award or Non-award shall be made via email to the consultant’s contact(s) on file.

5 PASS/FAIL EVALUATION

The following are required Offeror qualifications and will be evaluated on a pass/fail basis. Please indicate "yes" or "no" by responding to the following chart:

PASS OR FAIL		YES / NO
1	Vendor must have and be able to demonstrate Experience and Expertise in Texas Medicaid and Managed Care Operations	
2	Vendor must have and be able to demonstrate experience in the Marketplace (ACA)	
3	All work performed under the agreement must be performed onshore as outlined in the current version of the Uniform Managed Care Contract ; Section 4.11 Prohibition Against Performance Outside the United States	
4	Must comply with and agree to include a Business Associate Agreement	

5	Must comply with and agree to include a Non-Disclosure Agreement	
6	Must provide a Conflict-of-Interest Disclosure	

****If Offeror answers "No" to any of the above qualifications, Offeror may be deemed to have not met the minimum qualifications and may not be considered for evaluation.****

6 EVALUATION CRITERIA AND RELATIVE WEIGHT

Evaluation factors are listed below and are assigned the indicated percentage weights which represent the overall importance for consideration.

Evaluation scores will be based on the following point system: One (1) point for each percentage weight as assigned below.

Technical & Operational Solution	Qualifications and Experience	Scope of Work	Pricing
20% (20 points)	25% (25 points)	25% (25 points)	30 % (not scored)

7 PROPOSAL FORMAT

Please submit proposal(s) in accordance with the following instructions:

- Responses to EACH VOLUME AND SUB-SECTION must be answered in the “Shaded Text Box” provided directly following each section requiring information unless otherwise instructed. The text box will automatically expand with your text entries.
- Rate Sheet may be submitted in a separate document. Pricing will be weighted to indicate importance to other categories but will not be scored.
- All Volumes of this RFQ MUST be completely addressed.
- Completed RFQ and all applicable Exhibits with corresponding responses should be emailed to Bobbie Sullivan (Bobbie.Sullivan@phhs.org) and pchp_contracts@phhs.org.
- DO NOT INCLUDE any separate marketing materials or similar information.
- ONLY responses in the Shaded Text Box will be considered unless otherwise instructed. (Exhibit A and Cover sheet excluded).

8 PROPOSAL INFORMATION

Proposals must address all points detailed in the SOW and must be structured according to the following mandatory sections. If the narrative section does not apply, please put N/A.

1. Technical & Operational Solution - (20 points)

A. Corporate Structure

Company history, location, organizational chart, and financial stability data.

Describe:

B. Provide narrative regarding overall ability to support strategic insourcing of TPA services to support PCHPs Medicaid and CHIP business.

- Planning, designing, implementing and operationalizing internal capabilities over a multi-year period.
- Operational, technical, regulatory and data architecture support to transition from external vendor; ensuring continuity of operations and compliance with applicable regulations.

Describe:

2. Scope of Services/Work – (25 points)

For **EACH** section and subsection, describe in detail how your company will meet and **OR** exceed the indicated items:

SOW 1: Third Party Administration

A. The TPA will be responsible for administering the following core functions:
PCHP will entertain proposals for portions of the scope of work. Respondents should indicate components of the scope of work for which they are bidding and outline the level of expertise for each. **Refer to the SOW Section 2 of the RFQ for scope of services.**

a. Develop A Comprehensive Roadmap for Insourcing TPA Services

Describe:

b. Claims Processing Infrastructure Development and Implementation

Describe:

- c. Software and Platform Expertise – Must support the Health Plan with transition system configuration, hosting, architecture and operational optimization

Describe:

- d. Hosting and Cloud Infrastructure - Develop and Implement Scalable Hosting Architecture

Describe:

- e. EDI Integration and Data Exchanges: Support the design and Implementation

Describe:

- f. Transactions include but not limited to 835, 837, 270/271, 276/277, 278

Describe:

- g. Member ID Card Generation and Fulfillment: Design process

Describe:

- h. CRM and Document Management

Describe:

- i. Data Warehouse Modernization

Describe:

- j. Support Development of Encounter Data Management (software procurement or transition of existing EDM)

Describe:

- k. Testing and Operational Readiness: Develop and execute a comprehensive testing framework

Describe:

- l. Staffing Model Development: Support the Health Plan with the recommended operational structure to support internal operations including staffing model options, job descriptions and workforce transition planning

Describe:

- m. Security and Compliance: Ensure all systems and processes meet regulatory requirements

Describe:

- n. Call Center: Design and Implement the Operational and Technical Infrastructure for member and provider call center operations; or support vertical integration solutions between PCHP and Parkland Health

Describe:

- o. Support multiple Call Centers Functions

Describe:

- p. Transition from Current TPA: Provide Full Transition Planning and Execution Support

Describe:

3. Relevant Experience Supporting TPA Insourcing

Respondents must provide a minimum of three (3) examples of consulting engagements performed within the past three (3) years that demonstrate their experience supporting the insourcing of Third-Party Administrator (TPA) functions. **See RFQ – 3. *Relevant Experience Supporting TPA Insourcing* for additional information.**

Example 1:

Example 2:

Example 3:

4. Implementation and Support. See RFQ – 4. *Implementation and Support* for additional information.

Describe:

5. Compliance and Quality Requirements. See RFQ – 5. *Compliance and Quality Requirements* for additional information.

Describe:

6. Reporting and Data Requirements. See RFQ – 6. *Reporting and Data Requirements* for additional information.

Describe:

7. Deliverables:

Deliverable	Description	Due Date
TPA Insourcing Roadmap & Operating Model	Defines current vs. future state, governance, risks, and phased transition plan to insource TPA functions.	TBD
Claims & EDI Architecture Design	Covers end-to-end claims processing, EDI transactions (837/835/etc.), system integrations, and technical architecture.	TBD
Data Warehouse & Governance Framework	Establishes modern data architecture, migration strategy, and governance for analytics, reporting, and compliance.	TBD
Testing & Transition Plan	Includes SIT/UAT/EDI testing, training, knowledge transfer, and go-live planning to ensure operational readiness. Defines staffing structure, regulatory compliance framework, and post-go-live operational support model.	TBD

8. Evaluation Criteria/Qualifications & Experience – (25 points)

1. Provide three (3) references that best represent the Offeror's past performance of specific services relative to this RFP within the last three (3) to five (5) years. Offerors should provide references in narrative form and address each of the sections below. All points of contact should be verified by the Offeror prior to submission as part of Offeror's proposal. Points of contact shall be knowledgeable of past performance from a contractual, managerial, technical perspective.

Reference No. 1:

- a. CompanyName
- b. Project Name
- c. Contact Information (Name, Address, Telephone #, Email)
- d. Description

Reference No. 2:

- a. CompanyName
- b. Project Name
- c. Contact Information (Name, Address, Telephone #, Email)
- d. Description

Reference No. 3:

- a. CompanyName
- b. Project Name
- c. Contact Information (Name, Address, Telephone #, Email)
- d. Description

2. Describe in full detail at least one (1) "lessons learned" from each of the following Third-Party Administrator projects that are similar to the services required in this RFQ.

Lesson No. 1:

- a. Customer Name and/or Description
- b. Issues
- c. Solutions
- d. Other Information

Lesson No. 2:

- a. Customer Name and/or Description
- b. Issues
- c. Solutions
- d. Other Information

Lesson No. 3:

- a. Customer Name and/or Description
- b. Issues
- c. Solutions
- d. Other Information

9. Pricing/Cost – (30 Points)

Provide a clear, all-inclusive pricing model that covers the entire scope of services for each of the sections. All ancillary charges must be explicitly stated. Please also note any volume discounts; delineate implementation, operations, maintenance and other costs; and specify minimum contract length requirements.

*****Exhibit A - RATE SHEET BELOW*****

Request for Quotes:

PCHP is seeking quotes from qualified consulting firms to support strategic insourcing of Third-Party Administrator (TPA) services supporting PCHPs Medicaid & CHIP business. The consultant will assist PCHP in planning, designing, implementing and operationalizing internal capabilities over a multi-year period that are currently hosted and supported as a business process by an external vendor. The engagement will include operational, technical, regulatory and data architecture support necessary to transition these functions while ensuring continuity of operations and compliance with applicable regulations. PCHP seeks a partner with deep experience in Medicaid managed care operations, claims administration systems, healthcare information technology, electronic data interchanges, and enterprise data architecture.

Please email responses to Bobbie.Sullivan@phhs.org and pchp_contracts@phhs.org by **5PM CST on April 16, 2026**

Information and Required Qualifications:

Anticipated Contract Term: Three years initial plus two (2) one (1) year options

Project Timeline:

- Anticipated Contract Term: Three years initial plus two (2) one (1) year options
- Anticipated Contract Effective Date: June 1, 2026
- Deadline for Written Questions: April 8, 2026
- PCHP Response to Questions: April 13, 2026
- Finalist Interviews: April 20, 2026 - April 21, 2026
- Expected Contract Award: April 23, 2026

Required Qualifications	Please confirm you meet the required qualification (Y/N):
Must satisfy all applicable laws and other requirements promulgated by the Texas Health and Human Services Commission (“HHSC”), the Texas Department of Insurance (“TDI”), the Centers for Medicare and Medicaid Services (“CMS”), and National Committee for Quality Assurance (“NCQA”).	
All work performed under the agreement must be performed onshore as outlined in the current version of the Uniform Managed Care Contract; Section 4.11 Prohibition Against Performance Outside the United States	
Must comply with and agree to include the Texas Medicaid & CHIP Mandatory Administrative Services Addendum in potential services contract. (A copy has been provided as an attachment in accompanying email.)	
Must be able to maintain compliance with all vendor requirements as outlined in the HHSC Uniform Managed Care Contract .	
Providers must be Licensed and Board Certified	
Must comply with and agree to include a Business Associate Agreement	

Scope of Work (SOW)

Purpose and Background

Parkland Community Health Plan, Inc (PCHP) is a licensed Health Maintenance Organization (HMO) operating as a Managed Care Organization (MCO) within the Texas Medicaid and CHIP program. PCHP is owned and affiliated with Parkland Hospital in Dallas County. PCHP operates seven (7) counties in the Dallas Service Area. PCHP is responsible for ensuring members receive medically necessary physical and behavioral health services in accordance with federal and state requirements.

PCHP is seeks to engage a qualified consulting firm to support strategic insourcing of Third-Party Administrator (TPA) services supporting PCHPs Medicaid & CHIP business. The consultant will assist PCHP in planning, designing, implementing and operationalizing internal capabilities over a multi-year period that are currently hosted and supported as a business process by an external vendor. The engagement will include operational, technical, regulatory and data architecture support necessary to transition these functions while ensuring continuity of operations and compliance with applicable regulations. PCHP seeks a partner with deep experience in Medicaid managed care operations, claims administration systems, healthcare information technology, electronic data interchanges, and enterprise data architecture.

Membership estimates: Approximately 155,000

Claims Volume: Average monthly receipts are approximately 181,000.

PCHP provides the following services in-house:

- Behavioral Health
- Configuration
- Provider Data Management
- Enrollment

1. Technical and Operational Solution

- Overall ability to support strategic insourcing of Third-Party Administrator (TPA) services supporting PCHPs Medicaid and CHIP business.
 - Planning, designing, implementing and operationalizing internal capabilities over a multi-year period
 - Operational, technical, regulatory and data architecture support to transition from external vendor; ensuring continuity of operations and compliance with applicable regulations

2. Scope of Services

- Develop a comprehensive roadmap for insourcing TPA services including:
 - Operational capability assessment



- Current versus future state design
- Transition timeline and milestones
- Risk mitigation strategy
- Governance Structure
- Operational workflows

- Claims Processing Infrastructure development and implementation:
 - Claims receipt and adjudication
 - EDI Claim Intake (837 transactions)
 - 835 remittance advice generation
 - CARC/RARC
 - SNIP level edits
 - COB processing
 - Provider payment processing integration
 - Assess current tables are properly migrated and/or stored for integration as determined by plan

- Software and Platform Expertise – the consultant must support the health plan with transition system configuration, hosting, architecture and operational optimization:
 - Transition hosted software to ‘maintenance & license’ hosted by the health plan
 - Experience with Trizetto/Cognizant suite of products: QXNT, OnVida, CCA
 - Experience with other software such as Availity, HealthTrio, ImageNet, Optum 3M/CES/PPS

- Hosting and Cloud Infrastructure – Develop and implement a scalable hosting architecture including:
 - Cloud migration strategy
 - Infrastructure architecture
 - Environment provisioning (DEV, QA, UAT, PROD)
 - Disaster recovery and business continuity
 - Performance and scalable planning
 - Experience with Cognizant Platform as a Service (PaaS) and Business Process as a Service (BPaaS) environments is strongly preferred

- EDI Integration and Data Exchanges: Support the design and implementation of:
 - EDI Gateways and claim intake processes
 - File transfer protocols and secure exchange mechanisms
 - Provider file exchanges
 - Eligibility data exchanges
 - Regulatory submission feeds
 - Vendor integrations

- Transactions include but are limited to:
 - 835
 - 837
 - 270/271

- 276/277
- 278

- Member ID Card Generation and Fulfillment: Design process for:
 - Member ID card generation
 - Print & mail fulfillment services
 - Vendor integrations
 - Secure data handling

- CRM and Document Management
 - Customer Relationship Management (CRM) assessment or development
 - Member and Provider service workflows
 - Document repository and records management
 - Call Center integration
 - Integration with case management system
 - Secure storage of correspondence, claims, etc.

- Data Warehouse Modernization – PCHP currently faces challenges with our existing data warehouse environment. The consultant will:
 - Assess the current data warehouse
 - Identify gaps impacting reporting, analytics, and operations
 - Design, configure and implement a modern enterprise data warehouse including data transfers between existing and new environments
 - HEDIS engine integration

- Support development of Encounter Data Management (software procurement or transition of existing EDM)
 - Medicaid encounter submissions
 - Vendor integration with encounter data
 - Data validation and quality controls

- Testing and Operational Readiness: Develop and execute a comprehensive testing framework:
 - System Integration testing
 - User acceptance testing
 - EDI testing
 - Encounter validation testing
 - Operational readiness testing
 - Develop and implement staff training programs and operational documentation and workflows

- Staffing Model Development: Support the health plan with the recommended operational structure to support internal operations including staffing model options, job descriptions and workforce transition planning:
 - Claims Operations

- Call Center
 - Data Management
 - IT support
 - Regulatory Reporting
 - Compliance & Regulatory
-
- Security & Compliance: Ensure all systems and processes meet regulatory requirements including:
 - HIPAA Compliance
 - CMS requirements including InterOperability
 - Texas Medicaid regulations
 - Data privacy and security controls
 - Security architecture
 - Compliance documentation
 - Audit readiness processes
-
- Call center: Design and implement the operational and technical infrastructure for member and provider call center operations or support vertical integration solutions between PCHP and Parkland Health, including:
 - Inbound and outbound call management
 - Interactive Voice Response (IVR) design
 - Omnichannel communication (phone, secure messaging, email, chat)
 - Workforce management tools
 - Quality monitoring and call recording
 - Performance metrics and reporting
-
- Call Center functions must support:
 - Member services
 - Provider services
 - Prior authorization inquiries
 - Eligibility and Benefit inquiries
 - Claim status inquiries
 - PCP change support or finding a PCP
 - Complaints and grievances
 - Care coordination routing
-
- Transition from Current TPA: Provide full transition planning and execution support including:
 - Data migration
 - Operational transition planning
 - Knowledge transfer
 - Parallel processing periods
 - Risk mitigation and contingency planning

3. Relevant Experience Supporting TPA Insourcing

Respondents must provide a minimum of three (3) examples of consulting engagements performed within the past three (3) years that demonstrate their experience supporting the insourcing of Third-Party Administrator (TPA) functions.

Preference will be given to examples involving health plans of comparable size, complexity, and scope to PCHP, particularly within Medicaid and CHIP lines of business.

Each example must clearly evidence the respondent's qualifications and capability to deliver the services described in this Schedule. Submissions should include, at a minimum:

- Client organization
- Engagement scope and objectives
- Description of services performed, including operational, technical, and regulatory components
- Duration and timeline of the engagement
- Key outcomes, deliverables, and measurable results
- Relevance to the services outlined in this Schedule

Respondents are expected to demonstrate a proven track record of successfully executing similar engagements, including the transition of TPA functions from external vendors to internal operations, while ensuring business continuity and regulatory compliance.

4. Implementation and Support

- Demonstrated implementation methodology, including a structured, phased approach (planning through stabilization) and experience executing transition roadmaps for insourcing TPA or similar functions
- Proven ability to design and operationalize a target operating model, including governance structures, roles and responsibilities, and coordination with incumbent vendors for knowledge transfer and transition
- Approach to ensuring operational readiness and business continuity, including process validation, workforce planning, training, documentation, and go-live readiness (e.g., UAT, parallel operations)
- Technical capabilities encompassing systems design and integration, claims administration platforms, Electronic Data Interchange (EDI), and secure, accurate data migration with appropriate governance controls
- Post-implementation support model, including stabilization, issue resolution, performance monitoring, knowledge transfer, and continuous improvement to ensure long-term sustainability
- Program governance and compliance approach, including status reporting, risk and issue management, stakeholder communication, and support for regulatory and audit requirements

5. Compliance and Quality Requirements

- Compliance with HIPAA, HHSC, and applicable Medicaid/CHIP Managed Care regulations.
- Service-Level Agreements (SLAs):
 1. The Consultant shall deliver a complete TPA insourcing roadmap for PCHP’s Medicaid and CHIP programs, including current and future state design, governance, risk mitigation, and a phased transition plan, in accordance with the project timeline and stakeholder approval.
 2. The Consultant shall design a compliant, scalable architecture supporting Medicaid and CHIP operations, including claims, EDI, data warehouse, cloud infrastructure, and security, aligned with HIPAA, CMS, and Texas HHSC requirements and subject to formal approval.
 3. The Consultant shall support execution of the TPA transition to PCHP internal operations, including data migration, testing, training, knowledge transfer, and go-live readiness, ensuring minimal disruption and achievement of defined operational thresholds.
- Provide details on data security controls, encryption, and breach notification procedures.

6. Reporting and Data Requirements

PCHP requires reporting that focuses on EDI transaction performance and SNIP-level error analysis; encounter submission acceptance and data quality validation; data warehouse migration/reconciliation and core data quality metrics; HIPAA/HHSC/CMS compliance documentation and breach/security reporting; operational reporting on claims performance and call-center service levels; transition reporting centered on SIT/UAT/EDI testing results and parallel processing comparisons; and PaaS/BPaaS insourcing reporting that tracks Cognizant platform transition status and QNXT table migration progress.

7. Deliverables

Deliverable	Description	Due Date
TPA Insourcing Roadmap & Operating Model	Defines current vs. future state, governance, risks, and phased transition plan to insource TPA functions.	TBD
Claims & EDI Architecture Design	Covers end-to-end claims processing, EDI transactions (837/835/etc.), system integrations, and technical architecture.	TBD
Data Warehouse & Governance Framework	Establishes modern data architecture, migration strategy, and governance for analytics, reporting, and compliance.	TBD

Testing & Transition Plan	Includes SIT/UAT/EDI testing, training, knowledge transfer, and go-live planning to ensure operational readiness. Defines staffing structure, regulatory compliance framework, and post-go-live operational support model.	TBD
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8. Evaluation Criteria/Qualifications and Experience

Proposals will be evaluated based on the following weighted criteria. PCHP may request finalist presentations, site visits, client reference calls, or additional information as part of the evaluation process.

<p>Technical and Operational Solution Overall ability to support strategic insourcing of Third-Party Administrator (TPA) services supporting PCHPs Medicaid and CHIP business.</p> <ul style="list-style-type: none"> • Planning, designing, implementing and operationalizing internal capabilities over a multi-year period • Operational, technical, regulatory and data architecture support to transition from external vendor; ensuring continuity of operations and compliance with applicable regulations. 	20%
<p>Scope of Work Responsible for developing a comprehensive roadmap for insourcing TPA services and administering the core functions specified in the RFQ SOW - Scope of Services. As well as:</p> <ul style="list-style-type: none"> • Geographic coverage across all required counties/regions • Adequate number of vehicles for demand • Availability of multiple transport modes (ambulatory, wheelchair, stretcher) • Ability to provide required NEMT services including demand response transportation services, public transportation services, mileage reimbursement, meals, lodging, advanced funds, and commercial airline transportation • Ability to meet peak demand periods • Provider redundancy to prevent service gaps 	25%
<p>Qualifications and Experience:</p> <ul style="list-style-type: none"> • Demonstrate experience supporting the insourcing of TPA functions/services. • PCHP partner must have deep experience in Medicaid managed care operations, claims administration systems, healthcare information technology, electronic data interchanges and enterprise data architecture. • Clear evidence of qualifications and capability to deliver services required. 	25%
<p>Pricing/Cost:</p> <ul style="list-style-type: none"> • Clear, all-inclusive pricing for entire scope of services of project • Ancillary charges explicitly stated • Note all volume discounts and delineate implementation, operations, maintenance and other costs • Specify minimum contract length requirements 	30% (not scored)

9. Pricing/Cost

Provide a clear, all-inclusive pricing model that covers the entire scope of services for each of the sections. All ancillary charges must be explicitly stated. Please also note any volume discounts; delineate implementation, operations, maintenance and other costs; and specify minimum contract length requirements.

Exhibit A: RATE SHEET

Vendor Information

Vendor Name: _____

Primary Contact: _____

Pricing Model Proposed:

PMPM Per-Transaction Hybrid Other: _____

SECTION A — PRICING BY SCOPE AREA (15 SECTIONS)

Section No.	Scope Area	Pricing Model	All-Inclusive Rate	Assumptions & Notes
1	Develop a comprehensive roadmap for insourcing TPA services			
2	Claims processing infrastructure development and implementation			
3	Software and platform expertise			
4	Hosting and Cloud infrastructure			
5	EDI integration and data exchanges			
6	Member ID care generation and fulfillment			
7	CRM and document management			
8	Data warehouse modernization			

9	Support development of Encounter Data Management			
10	Testing and operational readiness			
11	Staffing model development			
12	Security and compliance			
13	Call center: Design and implementation			
14	Call center supported functions			
15	Transition from current TPA			

SECTION B — IMPLEMENTATION COSTS

Provide narrative for pricing to include:

- Clear, all-inclusive pricing for the entire scope of services of the project
- Ancillary charges explicitly stated
- Note all volume discounts and delineate implementation, operations, maintenance and other costs
- Specify minimum contract length requirements

Describe: