

Louisiana Medicaid Innovation Challenge

Company Name: _____

All companies that offer a solution to the Challenge Statement and the need outlined in the research brief can respond using this fillable PDF. Please note that you **MUST** download and save the PDF onto your computer first before completing it as PDFs completed online are not saved.

Before responding please review the complete Request for Information (RFI). If you choose to add confidential material in your response, please clearly mark all confidential information either written or uploaded on this form.

SUBMISSION: Once you complete the PDF with associated attachment in Section 6, please email the submission and attachment to **Dawn Love (dawn.love@la.gov)**. Please include the following subject line: **SUBMISSION: MedicaidInnovationChallenge – [COMPANY NAME]**. Applications are due by the date set forth in the Schedule of Events in the Louisiana Challenge Request for Information.

IMPORTANT: Download this PDF to your desktop. Then save and complete the form. Do not complete this form in a web browser like Chrome or Safari. If you do so, your information will be lost and you will need to start the form over. For the long-form questions below, **there are no maximum or minimum character limits**. Please use your discretion when answering.

Please include the following contact information:

- Contact Name: _____
- Contact Job Title: _____
- Contact Email: _____
- Contact Phone Number: _____

SELECT FOCUS AREAS: Which focus area of the Challenge Statement does your solution best address with proven effectiveness in reaching underserved communities and marginalized/vulnerable populations? *Select all that apply. Please complete the corresponding section(s) below in the response*

- Identifies communication preferences of members by channel and dosage
- Provides culturally appropriate targeting and engaging messaging
- Has the capability to provide a multi-channel communication system

Table of Contents

Section 1: Company Information	2
Section 2: Current Customers	4
Section 3: Basic Technology and System	6
Section 4: Outcomes and Impact	7
Section 5: Focus Areas	8
Focus Area 1: Identifies Communication Preferences and Dosage	8
Focus Area 2: Culturally Appropriate and Engaging Messaging	9
Focus Area 3: Multi-channel Communication System	11
Section 6: Upload Materials	12

Section 1: Company Information

1.1. Describe the company in three sentences or less.

1.2. Describe how the company’s product and/or experience can address the Challenge Statement and how you envision the product/service as the solution to the Challenge Statement.

**LOUISIANA MEDICAID INNOVATION CHALLENGE:
COMPANY RESPONSE FORM**

Adaptation Health

3

1.3. Organization type (i.e. nonprofit, for-profit): _____

1.4. Headquarters (City, State): _____

1.5. Founding year: _____

1.6. Approximate annual revenue from last fiscal year: _____

1.7. Number of full time staff members: _____

1.8. Homepage URL: _____

1.9. Company's incorporation status (i.e. LLC, C-corp, B-corp, etc)? _____

1.10. Provide a list of web hyperlinks where the company's existing product can be accessed for review. Include a brief description of each of the hyperlinks. Response should be limited to a maximum of 4 hyperlinks. Examples could include but are not limited to videos, online demos, informational PDFs, and/or additional web pages.

Please copy and paste the complete link, followed by a brief description.

Section 2: Current Customers

2.1. Is the company currently contracting or providing any services through a state Medicaid program?
A contract with a state Medicaid office, not a Managed Care Provider/Organization

- Yes
- No

2.2. Which state Medicaid programs is the company currently contracting with?

2.3. Approximately how long has the company been contracting with a state Medicaid program?

- No contracts with a state Medicaid office
- < 6 months
- 6 months - 1 year
- 1-3 years
- 3-5 years
- 5-10 years
- 10+ years

2.4. Is the company currently contracting or providing services through a Medicaid Managed Care Organization?

- Yes
- No

2.5. List the Medicaid MCOs the company is currently contracting with?

**LOUISIANA MEDICAID INNOVATION CHALLENGE:
COMPANY RESPONSE FORM**

Adaptation Health

5

2.6. Briefly describe the primary end beneficiaries of your product or service.
Who are they and what are their needs? List all that apply.

2.7. Briefly describe the approximate number of end beneficiaries using the product/service today.

2.8. How do your current end beneficiaries relate back to the Challenge Statement?

Section 3: Basic Technology and System

3.1. Describe the technology platform used and provide details for the delivery structure.

What systems, technology, and platforms are you using to operate the program?

3.2. How is the company using data from a State Medicaid Office or MCO? And how is it matching that with beneficiaries?

3.3. Is the end beneficiary required to have a smartphone to access and use any part of the product/service?

- Yes
- No

3.4. Specify the solution's differentiation in the market and the unique process model over competitors (highlight others in your space). Why does this offer value?

Section 4: Outcomes and Impact

4.1. Describe the key outcome metrics that the company currently tracks and the evaluation process.

4.2. Describe the cost savings for clients/customers.

4.3. Describe the analytics on beneficiaries both individually and in aggregate.

4.4. How would a client access, review, and be able to use this data?

Section 5: Focus Areas

Focus Area 1: Identifies Communication Preferences and Dosage

Based on your response to the Focus Areas on page 1 does the company provide a solution for being able to identify the communication preferences of members by channel and dosage?

If you answer yes, please answer the questions in this section. If no, move to the next section.

5.1.1. How does the company gather beneficiary communication preferences?

5.1.2. How does the solution manage this data with the client?

5.1.3. How does the solution handle changes in beneficiaries' personal information such as new phone numbers or addresses?

Focus Area 2: Culturally Appropriate and Engaging Messaging

Based on your response to the Focus Areas on page 1, does the company provide a solution for offering culturally appropriate targeting and engaging messaging?

If you answer yes, please answer the questions in this section. If no, move to the next section.

5.2.1. What language options does the solution currently support?

5.2.2. How does the company connect with beneficiaries? Describe your culture competency process.

5.2.3. How does the product/service build trust with beneficiaries and how has the company built authenticity/legitimacy into the engagement?

**LOUISIANA MEDICAID INNOVATION CHALLENGE:
COMPANY RESPONSE FORM**

Adaptation Health

10

5.2.4. How does the product/service create, sustain, and measure engagement with end beneficiaries?

5.2.5. How does the solution handle disengaged beneficiaries?

Focus Area 3: Multi-channel Communication System

Based on your response to the Focus Areas on page 1, does the solution have the capability to provide a multi-channel communication system?

If you answer yes, please answer the questions in this section. If no, move to the final section.

5.3.1. What types of communication channels can the solution offer to the end-user?

List and briefly describe all that apply

5.3.2. What are the most common communication channels the solution uses to engage with end-beneficiaries? Why are these the most popular channel(s)?

5.3.3. How do multiple communication channels work together and does it create an omni-channel experience?

5.3.4. How does the company monitor and track the impact of each channel?

Section 6: Upload Materials

6.1. Attach a PDF company slide deck with your submission. An example would be the standard overview or sales deck. This is for review purposes only. Please be certain to clearly mark all confidential information. Companies showcased will have the opportunity to change or update any materials.

Save the file as "COMPANY NAME_Louisiana Medicaid Innovation Challenge.pdf" and include it with your email submission.

Confirm Submission:

Yes - confirming we have attached the PDF slide deck with our email response

No - we have not attached the PDF slide deck with our response.