**BIDDER PROPOSAL SUBMISSION CHECKLIST**

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| **Bidder Name:** |  |

Complete a copy of Bidder Proposal Submission Checklist, by indicating if the described submission item is included in your proposal. Place an “X” in the “Yes” or “No” box as applicable. Include an explanation for any “No” responses.

|  | **Submission**  **Item Included** | | **If No, explain reason for non-inclusion** |
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| **Submission Item** | **Yes** | **No** |
| Item 1 – Bidder Proposal Submission Checklist |  |  |  |
| Item 2 – Transmittal Letter |  |  |  |
| Item 3a – PLE Status: Proof of Ownership |  |  |  |
| Item 3b – PLE Ownership and Governing Body Summary form |  |  |  |
| Item 4 – Governance narrative |  |  |  |
| Item 5 – Solicitation Amendments |  |  |  |
| Item 6a – Bidder’s Cover Page |  |  |  |
| Item 6b – Bidder Representations and Certifications form *(Word Version)* |  |  |  |
| Item 6c – Bidder Representations and Certifications form *(Excel Version)* |  |  |  |
| Item 7 – Privatization Act Mandated Representations and Certifications narrative |  |  |  |
| Item 8 – Contract Termination narrative |  |  |  |
| Item 9 – Executive Summary |  |  |  |
| Item 10a – Oklahoma and Medicaid Experience narrative |  |  |  |
| Item 10b – Other State Medicaid Experience form |  |  |  |
| Item 10c – Oklahoma Experience form |  |  |  |
| Item 11 – References form |  |  |  |
| Item 12 – Organization Overview narrative |  |  |  |
| Item 13a – Litigation narrative |  |  |  |
| Item 13b – Bidder Representations and Certifications form, tab B.12 “Legal Actions” |  |  |  |
| Item 14a – Company Financial Information |  |  |  |
| Item 14b – Cash Flow narrative |  |  |  |
| Item 15 – Reinsurance narrative |  |  |  |
| Item 16 – Licensure narrative or copy of license |  |  |  |
| Item 17a – Major Subcontractors narrative |  |  |  |
| Item 17b – Major Subcontractors form |  |  |  |
| Item 18a – Key Staff narrative |  |  |  |
| Item 18b – Plan Staffing form |  |  |  |
| Item 18c – Key Staff and Oklahoma Presence form |  |  |  |
| Item 18d – Job descriptions |  |  |  |
| Item 18e – Resumes |  |  |  |
| Item 18f – Summary of recruitment timelines and activities |  |  |  |
| Item 18g – Contingency plans |  |  |  |
| Item 19 – Contractor’s Association with PLEs narrative |  |  |  |
| Item 20 – Local Oklahoma Provider Organizations narrative |  |  |  |
| Item 21a – Oklahoma Presence narrative |  |  |  |
| Item 21b - Map |  |  |  |
| Item 22a – Economic Impact narrative |  |  |  |
| Item 22b – Economic Impact narrative |  |  |  |
| Item 23a – Operations Plan narrative |  |  |  |
| Item 23b – Gantt chart |  |  |  |
| Item 24a – PCP Providers narrative |  |  |  |
| Item 25 – Provider Network Adequacy narrative |  |  |  |
| Item 26 – Onboarding narrative |  |  |  |
| Item 27 – Provider Education narrative |  |  |  |
| Item 28 – Monitoring narrative |  |  |  |
| Item 29a – Statewideness and Development Challenges narrative |  |  |  |
| Item 29b – Detailed Timelines and Milestones to Achieve Statewideness |  |  |  |
| Item 30 – Access to Services in Rural Areas narrative |  |  |  |
| Item 31a – Claims Processing narrative |  |  |  |
| Item 31b – Claims Processing form |  |  |  |
| Item 32 – Covered Benefits narrative |  |  |  |
| Item 33 – Service Integration narrative |  |  |  |
| Item 34 – Behavioral Health Benefits narrative |  |  |  |
| Item 35 – Pharmacy Program narrative |  |  |  |
| Item 36a – Value-Added Benefits narrative |  |  |  |
| Item 36b – Value-Added Benefits form |  |  |  |
| Item 37 – EPSDT narrative |  |  |  |
| Item 38 – School-Based Services narrative |  |  |  |
| Item 39 – Coordination with Other SoonerCare Programs and Other State Agencies narrative |  |  |  |
| Item 40a – New SoonerSelect Enrollee Outreach narrative |  |  |  |
| Item 40b – New SoonerSelect Enrollee Contact Rates form |  |  |  |
| Item 41 – Enrollee Website, Social Media, and Mobile Application narrative |  |  |  |
| Item 42a – Enrollee Services Call Center narrative |  |  |  |
| Item 42b – Call Center Performance form |  |  |  |
| Item 43a – SoonerSelect Enrollee Grievance and Appeal narrative |  |  |  |
| Item 43b – SoonerSelect Enrollee Grievance and Appeal Resolution form |  |  |  |
| Item 44 – Cost Sharing narrative |  |  |  |
| Item 45 – Tribal Government Liaison narrative |  |  |  |
| Item 46 – Quality Assessment and Performance Improvement narrative |  |  |  |
| Item 47 – Quality Performance Measures narrative |  |  |  |
| Item 48 – Performance Improvement Projects narrative |  |  |  |
| Item 49 – CAHPS® data and/or substitute enrollee satisfaction data with description |  |  |  |
| Item 50 – Provider satisfaction and/or substitute data with description |  |  |  |
| Item 51 – Accreditation narrative |  |  |  |
| Item 52a – Risk Stratification Level Framework narrative |  |  |  |
| Item 52b – Health Risk Screening Activity Rates form |  |  |  |
| Item 52c – Comprehensive Assessment Activity Rates form |  |  |  |
| Item 53 – Care Planning narrative |  |  |  |
| Item 54 – Transition of Care narrative |  |  |  |
| Item 55 – Transitions from Inpatient/Residential Settings narrative |  |  |  |
| Item 56 – Medical Management narrative |  |  |  |
| Item 57 – Prior Authorization narrative |  |  |  |
| Item 58a – Hospital Utilization narrative |  |  |  |
| Item 58b – Hospital Utilization form |  |  |  |
| Item 59a – Emergency Room Utilization narrative |  |  |  |
| Item 59b – Emergency Room Utilization form |  |  |  |
| Item 60 – High Utilizers narrative |  |  |  |
| Item 61 – Evidence-Based Guidelines narrative |  |  |  |
| Item 62 – Health Outcomes narrative |  |  |  |
| Item 63a – Provider Profiling narrative |  |  |  |
| Item 63b – Provider Profile sample |  |  |  |
| Item 64 – Health Equity narrative |  |  |  |
| Item 65 – Primary Care Spending narrative |  |  |  |
| Item 66 – Value-Based Payment Program Approach narrative |  |  |  |
| Item 67 – Value-Based Payment Program Design and Experience narrative |  |  |  |
| Item 68 – Value-Based Payment Program Innovation narrative |  |  |  |
| Item 69 – Behavioral Health and Maternal Services Case Study (Jennifer) |  |  |  |
| Item 70 – Onboarding Case Study (Linda) |  |  |  |
| Item 71 – Care Management Case Study (Jim) |  |  |  |
| Item 72 – Care Management Case Study |  |  |  |
| Item 73 – Discharge Planning Case Study |  |  |  |
| Item 74 – Care Management Case Study |  |  |  |
| Item 75 – Care Management Case Study |  |  |  |
| Item 76 – Reporting narrative |  |  |  |
| Item 77a – Contractor Performance Standards narrative |  |  |  |
| Item 77b – Contractor Performance History form |  |  |  |
| Item 78 – Program Integrity narrative |  |  |  |
| Item 79 – Third Party Liability narrative |  |  |  |
| Item 80a – Information Technology General Requirements narrative |  |  |  |
| Item 80b – System Diagram |  |  |  |
| Item 80c – Interface Diagram |  |  |  |
| Item 80d – IT Roadmap |  |  |  |
| Item 81 – Communications with OHCA narrative |  |  |  |
| Item 82a –System Security narrative |  |  |  |
| Item 82b – State of Oklahoma Security Accreditation and Assessment form |  |  |  |