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Context for today's discussion

- The State of Delaware (the State) engaged Willis Towers Watson (WTW) to support a procurement for health data warehouse services for the Group Health Insurance Program's (GHIP) medical, health management and pharmacy programs
- The State's contract with Merative expires on June 30, 2026
- To maximize the analytic value delivered through the current data warehousing arrangement, the SEBC will be issuing an RFP with a contract effective date of July 1, 2026
- During the May 30, 2025 SEBC Meeting, the SEBC discussed the scope of services for the upcoming health data warehouse RFP and initial feedback from the SEBC
- Today's discussion will focus on an overview of health data warehouse RFP, including prior feedback obtained from Committee members that has been incorporated into the RFP
- Any additional feedback from Committee members will be incorporated into the final version of the health data warehouse RFP, which the Committee will vote on at the July 29, 2025 SEBC meeting

High level RFP objectives

- Offer a state-of-the-art, end-to-end data warehousing and analytics solution that interfaces with the State's vendor
 partners to obtain raw data and troubleshoot any issues with the data files
- Support healthcare consumerism initiatives of the State
- Deliver excellent account management services that support long-term initiatives and day-to-day processes
- Provide a dedicated analytic resource to provide supplemental support on a regularly scheduled and ad hoc basis
- Produce meaningful and timely management reporting
- Offer competitive financial terms
- Provide superior program implementation support
- Maintain data security as outlined by the State's minimum requirements
- Adhere to State contracting requirements



Feedback from SEBC members on the scope of services

- The SEBC requested that a GLP-1 use case be incorporated into the RFP, which was added in the following location:
 - Section 12. Reporting and analytic services > Number 17 on Page 107 reads "17. Please describe how you would assess the impact of GLP-1 medications over time on the health status of members who have been prescribed them and whether the use of GLP-1 medications resulted in net cost savings to the plan."
- The SEBC requested the list of vendors that were invited to participate during the last RFP in 2020, the list of vendors that submitted a bid during the last RFP in 2020, and which vendors will likely be invited to participate in this RFP, which are listed below:

Invited to participate during 2020 RFP

- IBM
- HDMS
- Deerwalk
- Springbuk

Submitted a bid during 2020 RFP

- IBM
- Milliman
- Springbuk
- Delaware Health Information Network
- Active Health dba HDMS
- United Healthcare (Optum)

Recommended invite list for 2025 RFP

- Merative (previously IBM)
- Artemis
- Springbuk
- WorkPartners



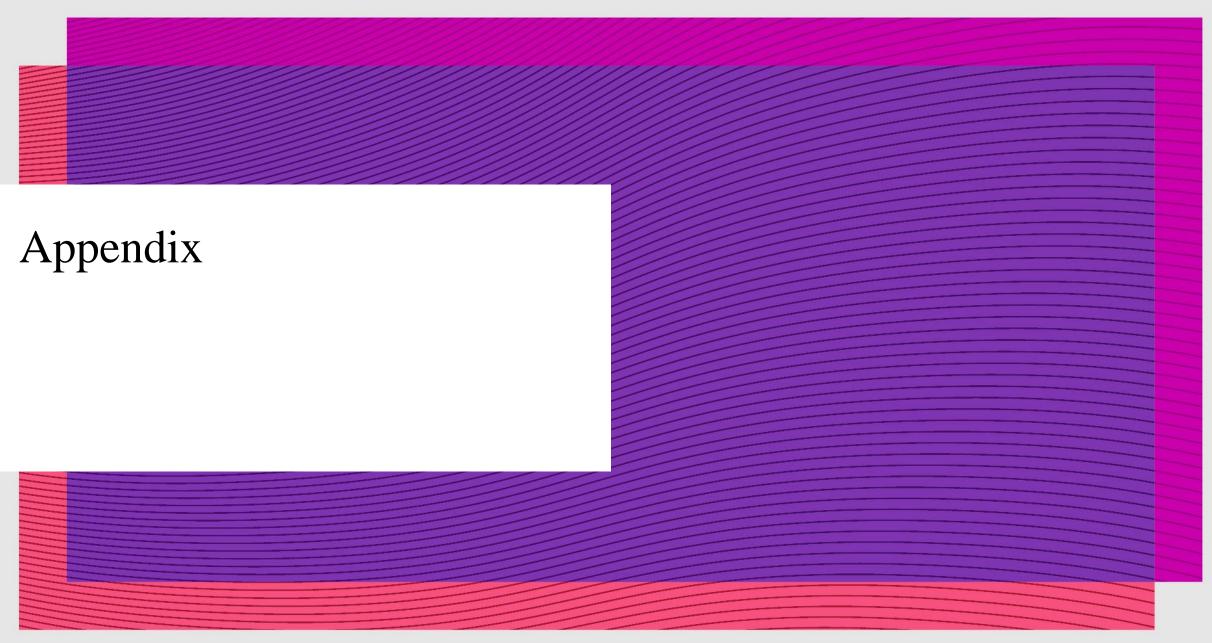
Outline of RFP questionnaire

- Organization and industry information
- Core Capabilities and Experience
- **Account Management**
- Service Delivery
- **Implementation**
- Proposed Account staffing and support
- Data integration, management and quality
- Data methodologies and enhancements
- Benchmarking capabilities
- Data sources
- Data warehouse front-end user tool(s)

- Reporting and analytic services
- Data use and sharing permissions
- Value proposition and areas of distinction
- **Financial**
- Technical Standards and Security Requirements (as specified by Delaware's Department of Technology and Information)
- Miscellaneous (certain legal requirements, audit rights, data privacy policies, invoicing requirements, etc.)

Next steps

- SEBC to provide any feedback on the health data warehouse RFP to the SBO by the end of the day,
 Monday, July 7th
- SBO and WTW will incorporate feedback from the SEBC into the final version of the RFP for the SEBC's approval
- SEBC will vote on the Health Data Warehouse RFP for approval at the July 29th SEBC meeting



Health Data Warehouse vendor selection considerations

 Organizational structure: Account management, data architects, technical support, analytic and clinical Quality and validation Reporting:	nership
 Client services: Implementation process, timeline analytic support analytic support Client services: Implementation process, timeline and ability to provide ongoing analytic support Commitment to process analytic support enalytics: Availability of propensity-matched cohort analytics, predictive analytics, clinical and financial return/value of investment evaluations 	le, aggressive arse performance and location of staff: data management artnering with the quired data and

Data security



Considerations for the next Health Data Warehouse RFP scope of services

- Understanding the ability to include clinical and care management data into the health data warehouse, which, if
 possible, could allow the State access to evaluating clinical outcomes associated with the State's programs
- Add a Minimum Requirement to the RFP for the ability to ingest line by line rebate data, which may be added to the PBM RFP, which will allow the State to receive and analyze the break up of rebate data by drug
- Reviewing and understanding the type of data files these vendors can ingest in addition to what is currently supported
 by the incumbent (for example, but not limited to, adding: EAP, Vision, etc.) and understanding if there are benefits to
 enhancing the type of data this vendor would get
- The Account Management Services support currently provided by the incumbent allows for quick turnaround times, flexibility, accuracy, consistency of file uploads and delivery of reports, which the State does not want to be impacted. Therefore, it's important to document the expectations of the State in this area and ensure the vendors are clear on those expectations.
- The incumbent currently maintains four years of historical data. If this RFP resulted in a new vendor, the TPAs would need to provide historical data and typically only provide up to two years. This is a concern for the State, so should look into requesting additional options from the vendors (outside of the incumbent).