

REQUEST FOR PROPOSALS

Regional Care Coordination Platform

Issuing Organization	Iroquois Center for Human Development (ICHHD)
Project	Kansas Frontier Behavioral Health Integration Collaborative (FBHIC)
Funding Source	Kansas Rural Health Transformation Program (RHTP) / CMS Federal Award
RFP Issue Date	Friday, July 25, 2026
Questions Due	Friday, August 7, 2026 by noon Central Time
Proposals Due	Friday, August 14, 2026 by 5:00 p.m. Central Time
Award Notification	Monday, August 31, 2026
Contract Start	Tuesday, September 1, 2026
Budget	\$347,550 (Year 1)
Procurement Method	Formal Competitive Proposals per 2 CFR 200.320
Submission Method	Electronic submission to: stephenoneill@irqcenter.com
RFP Contact	Stephen O'Neill, LCSW, MBA Executive Director stephenoneill@irqcenter.com

SECTION 1: INTRODUCTION AND BACKGROUND

Iroquois Center for Human Development (ICHHD) is a Certified Community Behavioral Health Clinic (CCBHC) and Community Mental Health Center (CMHC) headquartered in Greensburg, Kansas, serving a four-county frontier region including Clark, Comanche, Edwards, and Kiowa counties. ICHHD was awarded \$1,720,957 through the Kansas Rural Health Transformation Program (RHTP) Regional Partnerships Grant Program on May 27, 2026, to launch the Kansas Frontier Behavioral Health Integration Collaborative (FBHIC). The FBHIC is a regional health care partnership structured as an Organized Health Care Arrangement (OHCA) between ICHHD and five hospital partners:

- Comanche County Hospital, Coldwater, KS
- Ashland Health Center, Ashland, KS
- Kiowa County Memorial Hospital, Greensburg, KS
- Minneola Healthcare, Minneola, KS
- Edwards County Medical Center, Kinsley, KS

The FBHIC will embed behavioral health services into hospital settings, build shared care coordination infrastructure, deploy a regional community health worker model, and strengthen workforce capacity across the frontier region. ICHHD is now soliciting proposals for a regional care

coordination platform to support this work. This procurement is conducted under formal competitive proposal procedures as required by 2 CFR 200.320, as the contract value exceeds ICHD's informal acquisition threshold of \$250,000, which is more restrictive than the federal simplified acquisition threshold of \$350,000.

SECTION 2: SCOPE OF WORK

ICHD and its five hospital partners use different electronic health record (EHR) systems. To support effective care coordination, data collection, and reporting across the partnership, ICHD requires a software as a service (SaaS) enterprise care coordination platform that can function as a shared layer across all partner EHR environments.

2.1 Platform Requirements

The selected platform must provide, at minimum, the following capabilities:

Care Coordination and Clinical Workflow

- AI-embedded notetaking and charting functionality to reduce documentation burden for care coordinators and clinical staff
- Referral management and warm handoff documentation across all partner organizations
- Care plan creation, assignment, and tracking across providers and settings
- Post-discharge follow-up workflow support, including automated outreach triggers and task assignment
- Patient risk stratification and acuity flagging to support prioritization by care coordination staff

Patient Communication and Engagement

- Secure patient messaging functionality accessible to both patients and care team members
- Patient self-scheduling capability integrated with provider and care coordinator availability
- Appointment reminder and follow-up notification tools

Data Tracking, Reporting, and Analytics

- Cross-partner utilization dashboards accessible to authorized users across all five hospital partners and ICHD
- Configurable reporting tools to support RHTP grant performance metrics, CCBHC reporting requirements, and partner-defined measures
- Data export capabilities compatible with state reporting formats and external evaluation requirements
- Audit trail and data integrity logging

Integration and Interoperability

- Ability to interface with or operate alongside multiple independent EHR systems, including ICHD's Credible EHR and the varied EHR platforms used by hospital partners
- FHIR or HL7 compatibility preferred; API documentation required
- Support for HIPAA-compliant data sharing across the OHCA partnership

Access, Security, and Compliance

- Role-based access controls supporting at least 20 concurrent users across six partner organizations
- HIPAA compliance with Business Associate Agreement (BAA) available

- SOC 2 Type II certification or equivalent security audit documentation
- Multi-factor authentication support
- Uptime SLA of 99.5% or higher

2.2 Implementation and Training

- Full platform implementation services, including configuration, testing, and go-live support across all six partner organizations
- Onboarding and training for all authorized users, including in-person or live virtual training sessions
- Dedicated implementation project management through go-live
- Ongoing technical support with defined response time SLAs
- Documentation and user guides for all platform features

2.3 Pricing Structure

The budget for this contract is \$347,550 for Year 1, structured as follows per the approved grant budget:

- One-time flat implementation fee;
- Monthly per user fee for 20 users; and
- Monthly per patient fee estimated at 9,000 patients

Vendors proposing alternative pricing structures that achieve comparable scope within the approved budget are encouraged to do so with clear explanation. Proposals must identify all costs, including any costs not covered within the Year 1 budget estimate. ICHD has prepared an independent cost estimate consistent with 2 CFR 200.323 and will use it to evaluate cost reasonableness.

2.4 Sustainability

ICHD and its hospital partners anticipate that the care coordination platform will be a durable component of the regional partnership beyond the initial grant period. Vendors should address long-term pricing, licensing flexibility, and transition support in their proposals.

SECTION 3: PROPOSAL REQUIREMENTS

Proposals must include the following components in the order listed. Incomplete proposals may be deemed non-responsive.

1. **Cover Letter:** A brief letter of introduction identifying the vendor, primary contact, and a statement of interest. Must include a certification that the vendor is not debarred or excluded from federal programs and that no conflict of interest exists.
2. **Organization Overview:** Description of the vendor organization, including years in operation, size, primary service areas, and relevant experience.
3. **Relevant Experience and References:** At least three comparable multi-organization implementations, with contact information for at least two references.
4. **Technical Response:** A detailed response to each requirement in Section 2, including platform features, integration capabilities, and security certifications.
5. **Implementation Plan:** Proposed timeline, key milestones, go-live target, and staffing plan.
6. **Training and Support Plan:** Description of onboarding, user training, and ongoing technical support.
7. **Pricing Proposal:** A complete and transparent pricing schedule including all one-time, recurring, and optional costs.

8. **Sustainability Approach:** Long-term pricing and licensing options available beyond the initial grant period.
9. **Conflict of Interest Disclosure:** A written disclosure of any known or potential conflicts of interest between the vendor and ICHD, its officers, employees, agents, board members, or hospital partners.
10. **Certifications:** Signed certifications confirming (a) the vendor is not debarred or excluded from federal programs, (b) PDF copy of SAM.gov entity record, (c) the vendor has not used and will not use federal funds for lobbying (Byrd Anti-Lobbying Amendment), and (d) the vendor does not use prohibited telecommunications or video surveillance equipment as defined under 2 CFR 200.216.
11. **Subcontractors:** Identification of any subcontractors or third-party partners, including confirmation of their SAM.gov eligibility. Include this information in the written proposal.

SECTION 4: EVALUATION CRITERIA

Proposals will be evaluated by an ICHD review committee using written evaluation procedures consistent with 2 CFR 200.320. Contracts will be awarded to the responsible offeror whose proposal is most advantageous to ICHD, considering price and all other factors below.

Evaluation Criterion	Weight
Platform capabilities and technical requirements met	30%
Relevant experience with comparable multi-organization implementations	20%
Implementation plan and timeline feasibility	20%
Cost and value relative to independent cost estimate and approved budget	15%
Long-term sustainability and pricing flexibility	10%
References and demonstrated performance	5%

ICHD reserves the right to request oral presentations or product demonstrations from shortlisted vendors prior to final award.

SECTION 5: PROCUREMENT AND COMPLIANCE REQUIREMENTS

This procurement is conducted in accordance with 2 CFR Part 200, Subpart D, Procurement Standards (Sections 200.317 through 200.327), as required under the Kansas Rural Health Transformation Program (RHTP) federal award. The following requirements apply to this procurement and to any contract awarded as a result of this RFP.

5.1 Full and Open Competition (2 CFR 200.319)

This RFP is publicly issued to ensure full and open competition. All responsible offerors are encouraged to submit proposals. ICHD will not restrict competition by placing unreasonable requirements on firms, requiring unnecessary experience or bonding, or using noncompetitive pricing practices. Vendors who assisted in developing the specifications for this procurement are ineligible to submit proposals.

5.2 SAM.gov Verification and Debarment (2 CFR 200.212, 2 CFR Part 180)

Prior to award, ICHD will verify that the selected vendor is not excluded or disqualified from participation in federal programs by searching the System for Award Management (SAM.gov) exclusions database. Vendors must maintain active SAM.gov registration or be eligible to register as a condition of award. Vendors must certify in their proposal that they are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in federal programs.

5.3 Conflict of Interest (2 CFR 200.318)

No ICHD employee, officer, agent, or board member with a real or apparent conflict of interest may participate in the selection, award, or administration of this contract. Vendors must disclose in their proposal any known conflicts of interest, including any financial or personal relationship between the vendor and any ICHD employee, officer, agent, or board member. ICHD maintains written standards of conduct governing conflicts of interest as required under 2 CFR 200.318.

5.4 Small and Minority Business Outreach (2 CFR 200.321)

ICHD is committed to contracting with small businesses, minority-owned businesses, women-owned businesses, veteran-owned businesses, and labor surplus area firms to the extent practicable. ICHD encourages proposals from such firms and will take affirmative steps to solicit proposals from these sources when practicable.

5.5 Domestic Preferences (2 CFR 200.322)

To the greatest extent practicable, ICHD gives preference to the purchase of goods, products, and materials produced in the United States. Vendors should identify in their proposals any goods, products, or materials that are not produced domestically and explain why domestic alternatives are not practicable.

5.6 Independent Cost Estimate

Prior to issuing this RFP, ICHD developed an independent cost estimate for this procurement consistent with 2 CFR 200.323. The independent cost estimate is maintained in ICHD's procurement records and will be used to evaluate the reasonableness of proposed costs.

5.7 Required Contract Provisions (2 CFR 200.180, 216, 322, 327 and Appendix II to Part 200)

The contract awarded as a result of this RFP will include all required provisions identified in Appendix II to 2 CFR Part 200, including but not limited to:

- Contracts over \$250,000 will address administrative, contractual, and legal remedies for contractor violations or breach of contract terms, including sanctions and penalties (2 CFR 200 Appendix II, Part 200(A))
- Contracts over \$10,000 will address termination for cause and for convenience by ICHD, including the manner by which termination will be effected and the basis for settlement (2 CFR 200 Appendix II, Part 200(B))
- Equal Employment Opportunity compliance as required by Executive Order 11246 (2 CFR 200, Appendix II, Part 200 (C))
- Byrd Anti-Lobbying Amendment certification: contractors must certify they have not and will not use federal funds to lobby federal officials in connection with the award (2 CFR 200 Appendix II, Part 200 (I))
- Debarment and Suspension certification consistent with 2 CFR Part 180 (2 CFR 200 Appendix II, Part 200 (H))
- Prohibition on certain telecommunications and video surveillance services or equipment as required under 2 CFR 200.216
- Domestic preferences for procurements as required under 2 CFR 200.322
- Rights to audit and access records as required under 2 CFR 200.337

5.8 Business Associate Agreement (HIPAA)

The selected vendor must execute a Business Associate Agreement (BAA) with ICHD as required under the Health Insurance Portability and Accountability Act (HIPAA) prior to contract execution. Proposals must confirm the vendor's willingness and ability to execute a BAA.

5.9 Procurement Records (2 CFR 200.318)

ICHD will maintain complete procurement records for this solicitation for a minimum of three years from the date of final payment or as otherwise required by the federal award. Records will include this RFP, all proposals received, the evaluation record, the basis for contractor selection, justification for the contract price, and any other documentation required by 2 CFR 200.318.

5.10 General Provisions

- ICHD reserves the right to reject any or all proposals, to waive informalities, and to make an award in the best interest of the project and its funders.
- ICHD reserves the right to request additional information, conduct site visits, or request oral presentations from any offeror during the evaluation process.
- Proposals must remain valid for a minimum of 90 days from the submission deadline.
- All contract terms are subject to review and approval by ICHD legal counsel.
- This procurement is supported by federal financial assistance from the Centers for Medicare and Medicaid Services (CMS) through the Kansas Rural Health Transformation Program. The contents of any resulting contract do not necessarily represent the official views of CMS, HHS, or the U.S. Government.

SECTION 6: SUBMISSION INSTRUCTIONS

6.1 Submitting Questions

- Questions must be submitted in writing to:

Stephen O'Neill, Iroquois Center, Executive Director
stephenoneill@irqcenter.com
No later than noon, Central Time
Friday, August 7, 2026.

- Responses will be distributed to all interested vendors to ensure full and open competition.
- Vendors are prohibited from contacting ICHD staff, board members, or hospital partners regarding this RFP outside of the formal question and answer process. Violations may result in disqualification.

6.2 Proposal Preparation

- Proposals may not exceed 10 pages, single-spaced, with 1" margins
- Proposal should maximize legibility; Arial size 15 or Times New Roman size 11 or 12 is preferred. Charts, tables, and citations may be prepared using a smaller font size.
- All pages of the proposal must include a footer with the vendor's name, the date, and the page number.
- Required attachments – unless otherwise indicated, these proposal requirements count toward the page limits:
 - 1-page Cover Letter (does not count toward page limit);
 - 10-page Proposal;

- o Budget (does not count toward page limit); use provided template
- o Signed Conflict of Interest Disclosure (does not count toward page limit); use provided template; and
- o Signed certifications (do not count toward page limit); use provided certification templates.

6.3 Proposal Submission

- Proposals must be submitted electronically to

Stephen O'Neill, Iroquois Center, Executive Director
 stephenoneill@irqcenter.com

- Submission deadline is Friday, August 14, 2026 at 5:00 p.m. Central Time.
- Proposals must be submitted as a single PDF or Word document.
- The subject line of the submission email must read: FBHIC RFP Response - Care Coordination Platform - [Vendor Name].
- Late submissions will not be accepted.
- By submitting a proposal, the vendor certifies that the information provided is accurate and complete, that the vendor is not debarred or excluded from federal programs, and that no conflict of interest exists that would impair the vendor's ability to perform the contract.

This RFP is issued under the Kansas Frontier Behavioral Health Integration Collaborative (FBHIC), funded by the Kansas Rural Health Transformation Program (RHTP) with federal financial assistance from CMS/HHS. This procurement is conducted under 2 CFR Part 200 Subpart D Procurement Standards. ICHD is an Equal Opportunity Employer and contractor.