

IHT Industry Day Presentation

Disclaimer: This is a draft artifact only and final decisions will be released with the resultant RFP. All comments/responses/answers are subject to change.



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Veteran Health Administration Integrated Healthcare Transformation Requirement Industry Day

Office of Healthcare Transformation (OHT)
in partnership with the
Strategic Acquisition Center – Frederick (SAC-F)

May 13-14, 2019



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Recognition and Housekeeping

- Welcome
- Recognize our Veterans
- Pledge of Allegiance
- Housekeeping
 - Emergency Exits/ Evacuation
 - Silence Cell Phones
 - Restrooms
 - Questions



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Mission Statements

- Veterans Affairs (VA): To fulfill President Lincoln's promise “To care for him who shall have borne the battle, and for his widow, and his orphan” by serving and honoring the men and women who are America’s Veterans.
- Office of Healthcare Transformation (OHT): “to plan, engineer, and implement enterprise Veteran driven systems of care in support of VA priorities.”
- Strategic Acquisition Center – Frederick (SAC-F): “...create superior procurement solutions that deliver on our [VA] promise to Veterans”



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The Team

Contracting – Strategic Acquisition Center - Frederick

- Allen Smith, Contracting Officer
- Kevin Armillotti, Lead Contract Specialist
- Will Milline, Supporting Contract Specialist



Program Office – Office of Healthcare Transformation

- Joe Williams, Deputy Director, OHT
- Emily Drobek, COR/Program Manager
- Sara Paronish, COR/Program Manager



Overview

- Expectations
- Business Needs
- Customer Perspective
- Expected Outcomes
- Procurement Overview
- Q & A
- Closing Remarks
- Networking



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Program Office Overview

Joe Williams, Deputy Director
Office of Healthcare Transformation

Expectations of this Session

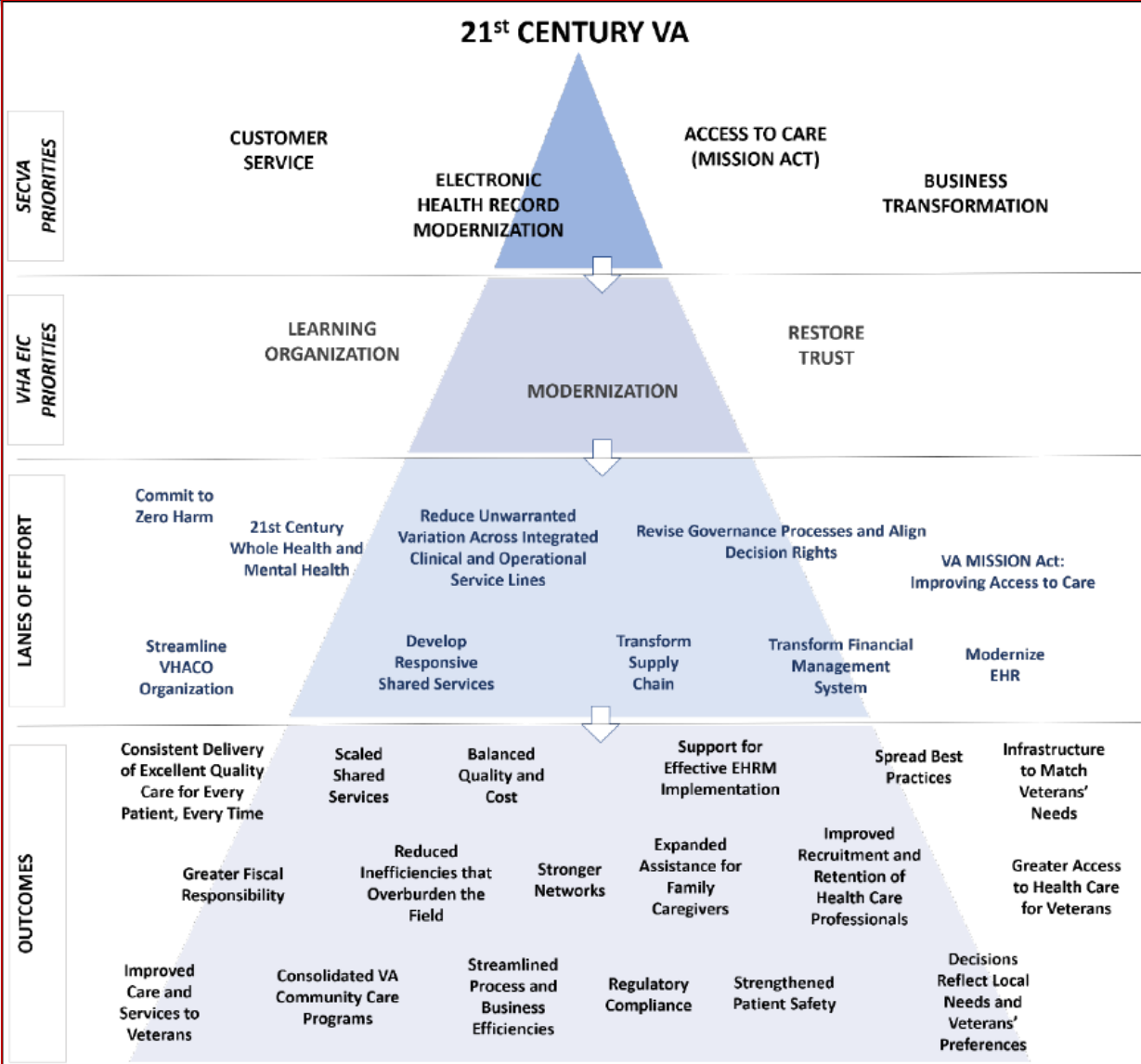
What will you get from today?

- Opportunity to develop partnerships
 - large, small, non-profit, academia, etc.
- Better understand:
 - the Government's needs
 - unique solicitation requirements
- Provide input on vehicle structure and scope

What will we get from today?

- Increase vendor understanding:
 - program mission
 - acquisition approach
- Promote fairness and encourage competition
- Reduce overall programmatic risks
 - Increase transparency
 - Receive vendor feedback

Business Needs



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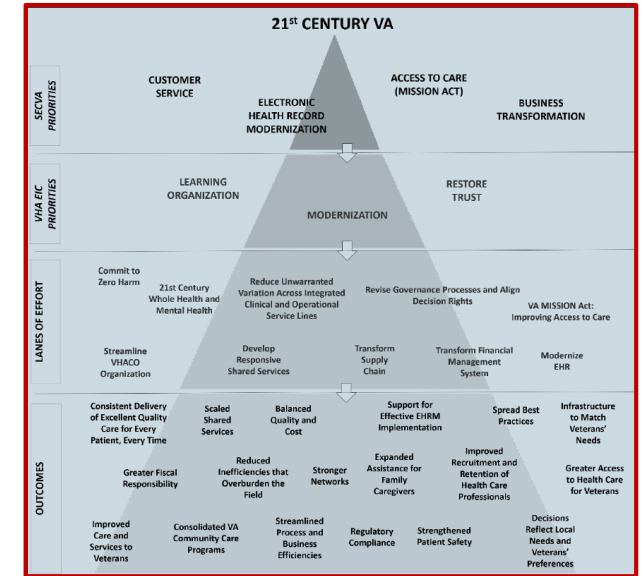
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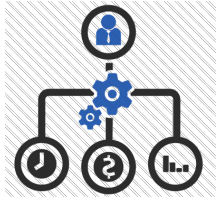
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Business Needs Cont'd.

- Respond to VA strategic priorities
 - Unique Veteran population
- Promote healthcare transformation
 - Seamless, high-quality, integrated, coordinated healthcare, anytime and anywhere
- Support clinically-integrated, community-supported, reliable healthcare
 - Highest-quality and safest outcomes
- Improve trust among Veterans, their families, & employees
- Integrate healthcare trends, advances in information and communications technology
 - Provide the right tools, processes and technologies



Customer Perspective – Service Groups



Program and
Project
Management &
Integration



Improvement &
Change Mgt



Data & Analyses



Training



Strategic
Communications &
Implementation



Supply Chain



Financial
Management
Modernization



Policy Support



Other Tasks Areas



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Customer Perspective – Potential Future Work

Office of Healthcare Transformation

- Healthcare Transformation
- Integrated Healthcare PMO
- MISSION Act

Office of Community Care

- Access Standards
- Integrated Care Coordination

Office of Veterans Access to Care

- EHR
- Stand Alone Scheduling

VHA Finance Office

- Financial Management Business Transformation

Office of Regulatory Affairs

- GAO High Risk List
- Non-clinical appeals

Workforce Management and Consulting

- HR Realignment
- Healthcare HR support (credentialing, privileging, etc.)

Clinical Operations Offices

- Quality Metric Analysis
- DMLSS/VALOR

Office of Mental Health

- Suicide Prevention Initiatives
- Clay Hunt
- Population Health

Quality, Safety & Value

- High Reliability Organization
- Healthcare Analytics

Office of Research and Development

- Federal Advisory Committee Act
- Intramural R&D

Program Offices and project examples are representative of potential future work on this IDIQ. The list is not all inclusive nor does it guarantee specific requirements.



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Expected Outcomes

- Broad, dynamic support to integrated healthcare requirements, spanning future legislation and executive action
- A pool of experienced SDVOSB led robust vendor teams
 - Agile support to program office requirements
 - Rapid response capability to meet strategic needs and emerging requirements
- Enhanced access to care and services
 - Increased Veteran and employee satisfaction
- Transform VHA healthcare
- Efficiencies in the contracting process
- Seamless integration across workstreams and service groups



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Contracting Office Overview

Allen Smith, Contracting Officer
Strategic Acquisitions Center - Frederick

Procurement Overview

- Acquisition Strategy
- Problems this vehicle solves
- Team concept and rationale
- Ordering and Administration
- Timeline



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Acquisition Strategy

- SDVOSB Set-aside
 - VIP verified Prime (VITALs)
 - NAICS 541611
 - Subcontracting Limitations apply (50%)
 - No Separate Rule of Two determination at TO level
- Indefinite Deliver Indefinite Quantity (IDIQ) Contract [FAR 16.504]
 - Recurring needs
 - Specified Minimum (filled through Award Kick-off Meetings)
 - IDIQ Ceiling (If 10 year PoP approved, up to \$1B)
 - 5 Year Base Period and one 5 Year Option Period (if approved)



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Acquisition Strategy (cont.)

- Multiple Awards [FAR 16.504(c)]
 - Range established at number that balances ability to maintain adequate competition through PoP with need for efficiency and streamlined evaluation
 - Actual Number to be determined based upon quality of responses
 - Anticipate multiple IHT Awards to Veteran Integrated Teams based upon Market Research
- Orders will be Firm Fixed Price, Labor Hour, or Combination (Hybrid)



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Problem: Time-To-Contract

Includes statutory deadlines, short suspense

Problem: Integrated Transformational Support

Programs have requirements that span multiple areas of capability and require *Integrated* support to drive transformation.



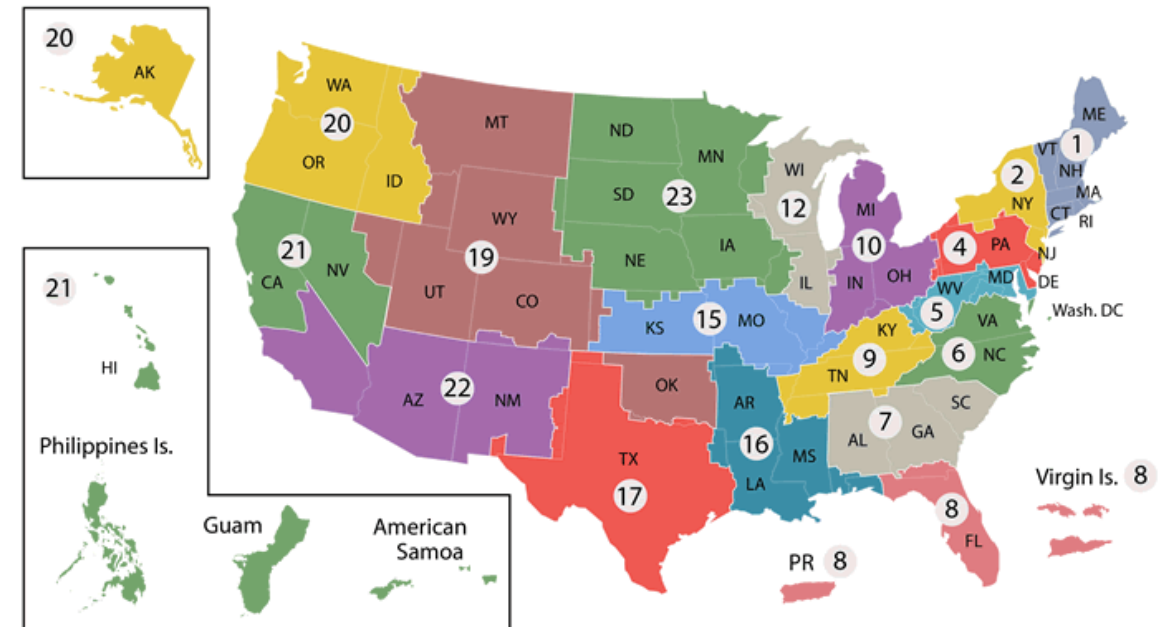
Vehicle (cont.)

Problem: Access to Private Healthcare Expertise

Many initiatives require focused healthcare expertise of Large National Private Sector Healthcare Consultants

Problem: High Resource Levels/ Wide Geographic Deployment

Requirements that require extensive reach-back capability and bench depth not typically available from small business alone



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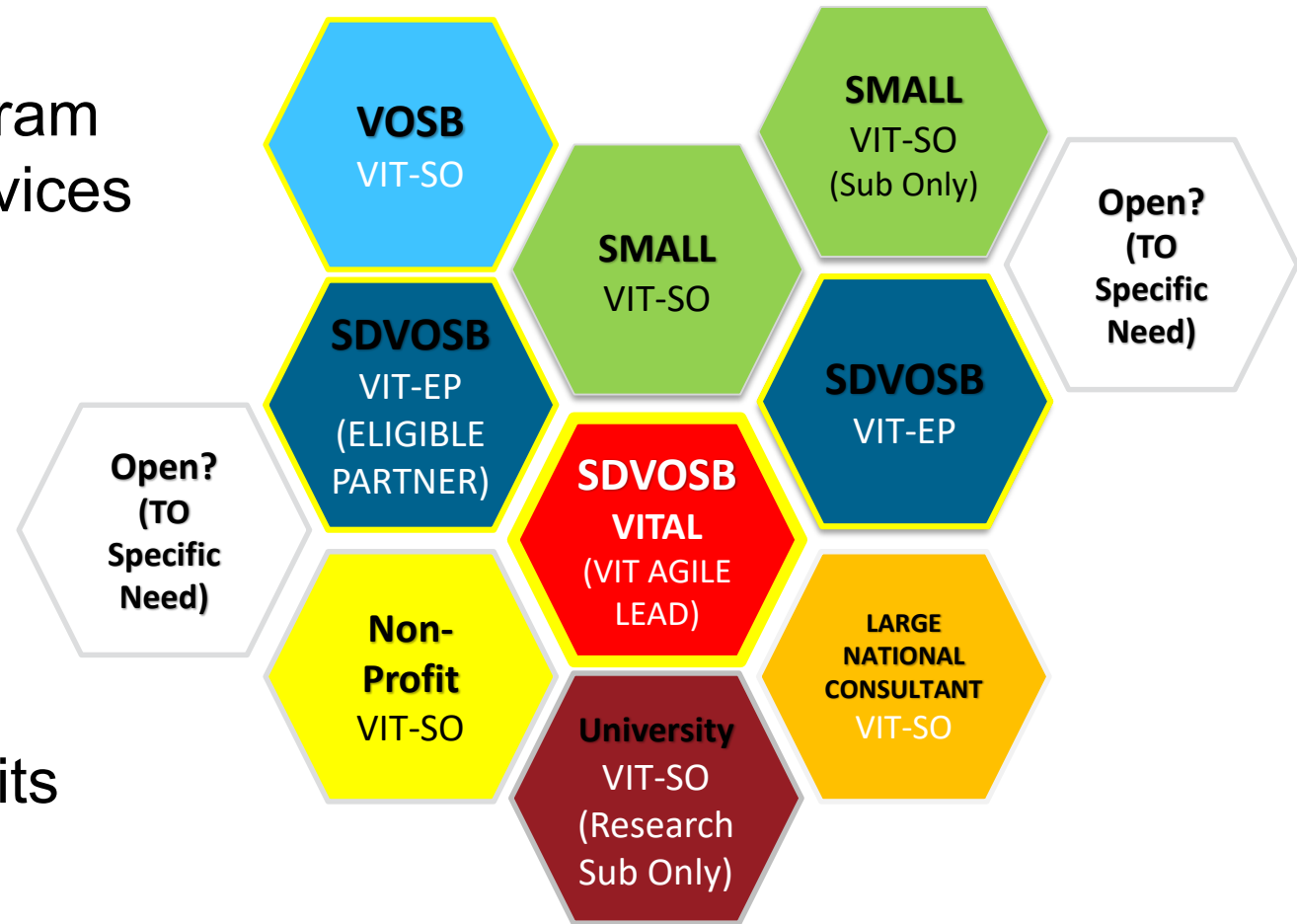
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Team Concept

- Ensures full capability to collectively address almost all VA National Program Healthcare-related Professional Services Requirements
- VA Rule of Two met (with 50% rule)
- Anticipated access to Leaders in Healthcare Consulting, Universities/Research, and non-profits



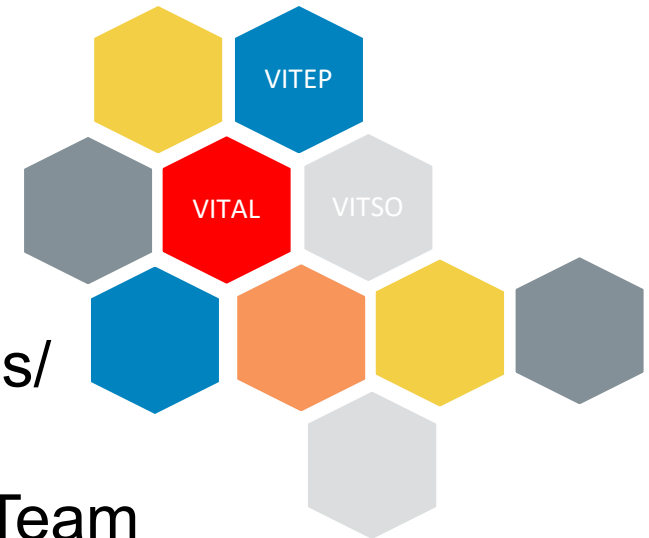
Example Only. Provided only to demonstrate concept.

Team Concept (cont.)

Veteran Integrated Team (VIT)

A robust, fully mission capable team led by a verified SDVOSB Agile Lead (VITAL), with collective capability and experience to deliver exceptional results under any potential health-related task order spanning the required service groups

- VIT Team Members treated similar to Key Personnel
 - Notification to Government prior
 - Replace only with firm equal or greater qualifications/capabilities (as originally evaluated)
- Potential open periods (TBD) for on-ramp/off-ramp of Team Members
- Team must remain Fully Mission Capable



Concept Only



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Team Concept (cont.)

VIT Agile Lead (VITAL)

VIP Verified SDVOSB (small under NAICS 541611), with extensive health care experience and capability integrating teams in execution of Government Contracts



- Very few SDVOSBs prepared to serve as VITALs (confirmed through MR)
- VITALs must have experience/ capability in SG1, SG2, and potentially one or more others based on market research
- Expert Integrator is an ABSOLUTE REQUIREMENT



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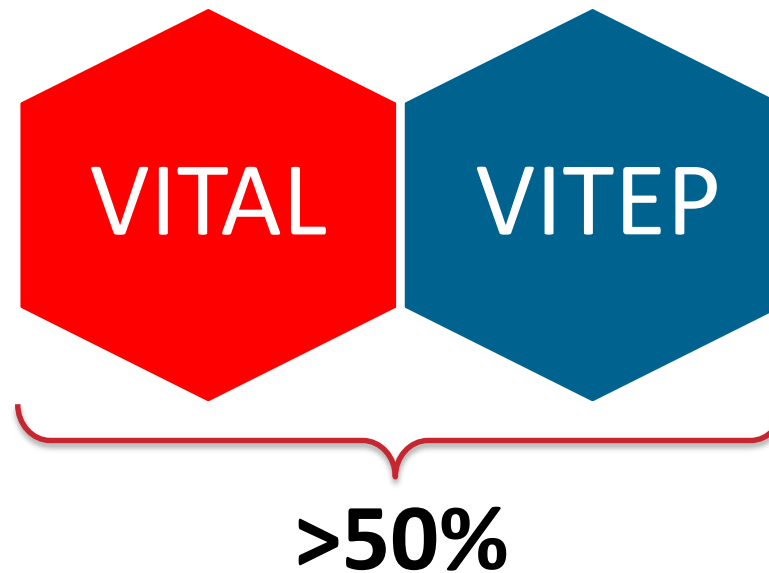
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Team Concept (cont.)

VIT Eligible Partner (VITEP)

Similarly situated entities eligible to serve as teaming partners, contributing to VITAL's 50% for purposes of limitations on subcontracting requirement

- VITAL should consider partnering with numerous VITEPs with experience/expertise in various service groups



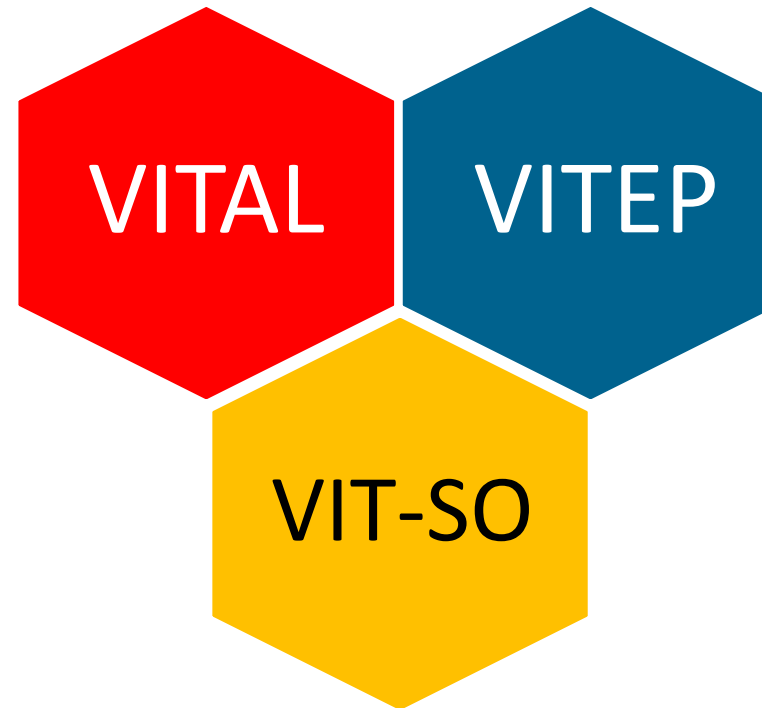
- VITEPs may be awarded a contract number and may have opportunity to serve as TO-Lead (TBD)

Team Concept (cont.)

VIT Subcontracting Only (VIT-SO)

Team members not similarly situated (non-SDVOSB) that cannot serve as eligible partner, and cannot contribute to VITAL's 50% for purposes of limitations on subcontracting requirement

- Could include VOSBs, Small Businesses, Large Businesses, Universities, Non-profits, etc.



- Capability in one or more SGs
- Necessary for a robust team

Evaluation and Award

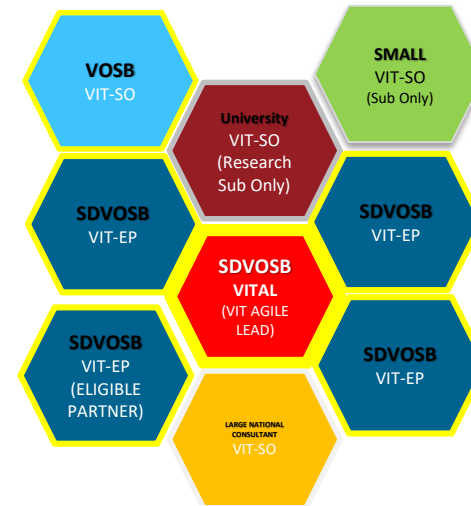
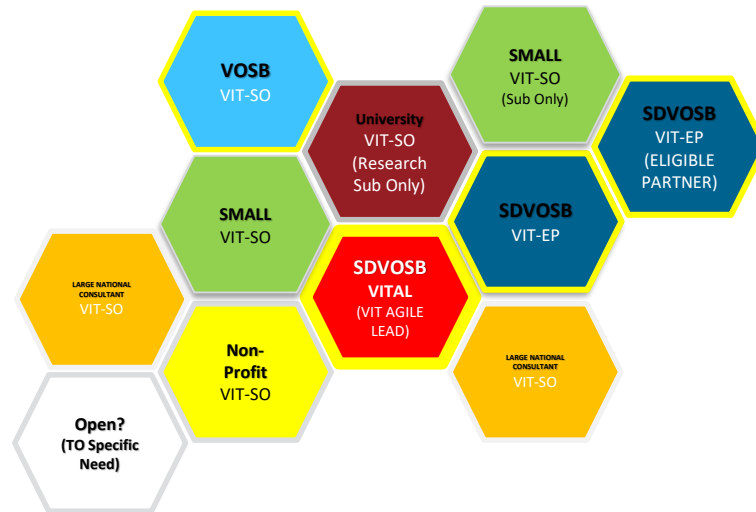
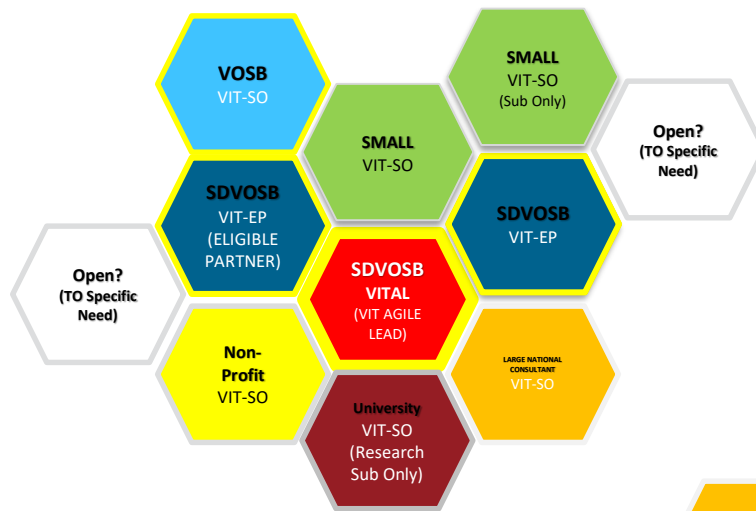
Factors and Specifics Being Developed Now (subject to change)

Anticipated Factors:

- EXPERIENCE (Integrator and Team Members)
- TECHNICAL ABILITY (Integrator and Team Members)
- PAST PERFORMANCE (PPQs for Integrator and Team Members)
- PRICE (Labor Rates/ Weighted Average or Representative TO Pricing)

Evaluation and Award (cont.)

Awards made to X number of VITs, who then compete on Task Orders (*multiple VITs shown as example only*)



Administration

- Government assesses VIT/ VITAL Performance over the life of the contract
 - Performance on Task Orders
 - Responsiveness to Task Order Requests
 - Off-ramp of VIT possible if not performing, non-responsive, or not fully mission capable
- Government may include periodic On-Ramp/Off-Ramp at Contract Level to maintain quality of IHT VITs and to ensure continued competition
- Anticipate VITAL awarded contract remains VITAL for full life of long term contract—5 year (VITAL will not size out until Option exercise), unless CO requests VITAL certify size at order level.
- If ineligible under CO request for recertification at order level, VITEP may serve as TO Lead (TBD)
- If VITAL size out at year 5, potential for VITEP to step into VITAL role w/ Gov't approval (TBD)
- Gov't may establish periodic “Open window” for VITALs to on-ramp/ off-ramp partners/subs (TBD)



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Ordering

- SAC-F Contracting Officers
- Fair Opportunity (FAR 16.505) unless exception applies
- Orders priced, performance based, priced as FFP, LH, or Hybrid
 - Within Scope
 - Within PoP (anticipate 5+5)
 - Within IDIQ Ceiling
 - Non-protestable under \$10M (unless above violated)
- CO determines appropriate evaluation factors tailored to the acquisition
- Task Orders may include “Wildcard” VITEPs or VITSOs where Subject-Specific First Tier Subs (including Independent Contractors) may be brought on for a single TO. (Identified in TO request)



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Acquisition Timeline

- RFP Released (JULY 2019)
- Evaluations and Awards (AUGUST-SEPT 2019)

After award

- TO competitions beginning SEPT for VIT Awardees
- Non awardees added to “Free Agent VIT List” for future partnering. Awardees may potentially add Free Agents during Open Windows for On-Ramp. Gov’t intends to maintain this list for life of the vehicle, including periodic FBO Notices for firms wishing to be added to the list.



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- Q.1: Past Performance?
- Q.2: Government verse Private Sector?
- Q.3: VITAL Eligibility?



Closing Remarks

- Please email William.Milline@va.gov with additional questions
- Thank you for your participation
- Please feel free to continue your conversations and networking across the street at McCormick & Schmick's



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Integrated
support to drive
Transformation.