## Anticipated Facility Licensure Specifications

At the Agency’s sole discretion, the Vendor may be authorized under the Contract to provide within their solution facility licensure capabilities. Prospective vendors are encouraged to describe solutions for integrating necessary functionality to support facility licensure and maintenance activities within the PSM solution. The licensure solution is expected to achieve improved data sharing, elimination of duplicative processes, and provide a unified platform for all provider types to conduct business with the Agency.

The Agency has been granted the authority through Florida Statute to license and regulate most health care facilities in Florida. The Division of Health Quality Assurance (HQA) within the Agency licenses and/or certifies and regulates 40 different types of health care facilities, including hospitals, nursing homes, assisted living facilities, and home health agencies.

Currently, facility licensure starts with the submission of an application to HQA. Facility applications are reviewed, and a determination is made concerning the completeness and accuracy of the application, as well as whether a survey will be required. If a survey is required, it will be scheduled with the provider and then conducted by Agency staff. With limited exceptions, all providers, whether they will enroll in Medicaid or not, will go through this process.

Upon confirmation of a completed application, and successful survey (if relevant), the provider is notified of approval. If there are issues with either the application or the survey, the provider is notified and given the opportunity to correct the application or schedule a follow-up survey. Inability to meet the documentation and/or survey requirements will result in the denial or withdrawal of the application. Facilities are required to renew their licensure every two years to maintain their provider status.

The current process lacks significant automation, consists of manual processes, and has limited data sharing capabilities with other Agency business units. The Vendor may propose an innovative solution, as approved by the Agency, to streamline activities by creating complementary system functionality and business processes to onboard and maintain a provider through concurrent licensure and Medicaid enrollment activities. The Vendor’s licensure solution to combine licensure and enrollment is expected to result in tangible and intangible benefits to the Agency and the provider community.

Vendors that choose to submit an approach under this section may use Table: X – Licensure High-Level Specifications as a basis for their response.

|  | **Table: X – Licensure high-Level Specifications** |
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| **ID** | **High Level Specifications** |
| INN-001 | The Vendor's online enrollment solution shall provide functionality to enable providers to apply and maintain their facility licensure with the Agency. |
| INN-002 | The Vendor's licensure solution shall provide functionality to electronically update information and communicate licensure status (e.g., omissions, deficiencies, denials, withdrawals, or approvals) throughout the licensure lifecycle.  |
| INN-003 | The Vendor's licensure solution shall integrate with other internal or external systems that support the licensure process (e.g., Background Screening Clearinghouse, ASPEN, VERSA, iQIES, eTracks, DFS, EDW, UOC) to seamlessly share bi-directional data. |
| INN-004 | The Vendor's licensure solution shall provide functionality to support all licensure financial transactions (e.g., fees, fines, invoices, etc.) including the capability to calculate, accept, track, and alert the Agency and Providers. |
| INN-005 | The Vendor's licensure solution shall contain robust workflow functionality that supports all licensure activities, business units, and functions.  |
| INN-006 | The Vendor's licensure solution shall provide an automated scheduling system to support all licensure business units. |