

Medical Alley Association

Healthcare Transformation Initiative @ Medical Alley

Request For Proposal

7.11.2019

MEDICAL ALLEY ASSOCIATION

THE GLOBAL EPICENTER OF HEALTH INNOVATION AND CARE

Table of Contents

1.	INT	RODUCTION	4
	A.	Project Overview	4
	B.	"Medical Alley" Overview	4
	C.	Medical Alley Association Overview	4
	D.	HTI@MA History, Mission & Goals	4
	E.	Medical Alley Healthcare Transformation Demonstration Lab	5
2.	INIT	TATVE & PROJECT SCOPE	6
	A.	Phase I: Stakeholder Assumptions Project	6
	B.	Phase I: Outputs & Expectations	6
	C.	Phase I: Goals	6
	D.	Phase II: Year 1-2 Plan Definition & Execution	6
3.	PAF	RTNERSHIP SCOPE & REQUIREMENTS	8
	A.	Partnership Commitment & Budget	8
4.	SEL	LECTION CRITERIA & PROCESS	10
	A.	Evaluation Criteria & Requirements	10
	B.	Process of Selection	10
	A.	Overview	10
	B.	Liability	10
	C.	Use and Disclosure of Information	11
	D.	Protocol	11
5.	PRO	DPOSAL FORMAT	12

1. INTRODUCTION

A. Project Overview

The Medical Alley Association (MAA) announced the creation of the Healthcare Transformation Initiative @ Medical Alley (HTI@MA) on April 24, 2019. This initiative presents a truly unique opportunity for MAA, its Board of Directors, its members, and the firm(s) selected to provide leadership in the guidance of this initiative. The initiative is intended to be multi-year. This RFP provides for a defined Phase I project (estimated time 2-3 months) and a longer Phase II engagement that will be better defined by the outputs from the Phase I project over 1-2 years. MAA invites responses to Phase I only, Phase II only, or preferably both.

B. "Medical Alley" Overview

Medical Alley is the global epicenter of health innovation and care and where healthcare leaders call home. (https://medicalalley.org/medical-alley/)

Medical Alley is home to the world's #1 health technology innovation cluster, the worlds' #1 ranked hospital and Destination Medical Center, the largest U.S. health insurer and the National Marrow Donor Program. Medical Alley is home to more than 1,000 healthcare companies, employing more than 500,000 Minnesotans and millions worldwide.

Medical Alley has history. We're the birthplace of implantable medical technology and innovative health plan models and Medical Alley is recognized as one of America's "Great Places of Invention" by the Smithsonian Institution, the only place designated for healthcare invention and innovation. (https://invention.si.edu/explore/places-invention)

Medical Alley is the future. Medical Alley is home to the companies that are transforming healthcare; where regenerative and personalized medicine are being pioneered by the University of Minnesota and Mayo's Center for Regenerative Medicine partnership, one of the nation's leading Genomics Centers and game-changing companies.

If you want to know what's going to change healthcare tomorrow, visit Medical Alley today.

C. Medical Alley Association Overview

The Medical Alley Association is uniquely positioned as the only healthcare association in the nation with leadership representation from every sector of healthcare. (https://medicalalley.org/the-association/)

Founded in 1984, the Medical Alley Association supports and advances the global leadership of Medical Alley's healthcare industry, and its connectivity around the world. MAA delivers the collective influence, intelligence and interactions that support Medical Alley.

MAA membership exceeds 600 organizations with a strong connection to Medical Alley and its healthcare leadership. Medical Alley members include many multinational and international organizations.

Our mission: We champion and facilitate an environment that enables health technology and care organizations to innovate, succeed and influence the evolution of healthcare.

Our vision: We will elevate Medical Alley as the global epicenter of health innovation and care.

D. HTI@MA History, Mission & Goals

Over the past five years, MAA has recruited Board leadership from every sector of healthcare, representing leading organizations. Board leadership includes Mayo Clinic, Medtronic, Coloplast, Boston Scientific, Ecolab, United Health Group, Allina Health Aetna, Blue Cross & Blue Shield of Minnesota, Fairview Health, Best Buy Health, 3M Health Care, FedEx Healthcare Solutions, Upsher-Smith Laboratories, Rebiotix, Smiths Medical, Cantel Medical, Abbott,

Navigant Consulting, KPMG, Baird Capital, Lemhi Ventures, Fredrikson & Byron and Furst Group. (https://medicalalley.org/board-of-directors/)

MAA has brought together a unique table of leaders that aspire to collectively influence the transformation of healthcare. With full commitment from the Board and membership of MAA, HTI@MA was launched to accomplish this objective. We expect and anticipate that HTI@MA will:

- Uniquely define the realities of the current healthcare system
- Deliver unique insights into the interplay of and conflicts among the various sectors of healthcare
- Diagnose the real opportunities for exponential change
- Determine the real inhibitors to change
- Pilot, test and articulate successful change

The mission statement of HTI@MA is:

To lead the transformation of healthcare by catalyzing business model shifts among healthcare industry leaders, delivering aligned improvements in outcomes and new models to sustainably manage costs.

HTI@MA shall be designed to:

Deliver structured dialogue focused on healthcare industry business models and interactions among healthcare organizations to illuminate priorities, definitions, and current decision drivers.

Deliver solutions to the marketplace that can be scaled and influence positive shifts in healthcare.

E. Medical Alley Healthcare Transformation Demonstration Lab

MAA has been offered a system hospital to serve as a demonstration lab for projects and pilots with the objective to create the Medical Alley Healthcare Transformation Center. This center will serve as the laboratory and testbed for projects defined by HTI@MA. We anticipate unparalled access to the systems and workflows at this center and the opportunity to test new technologies and business model changes that can drive value and deliver definable shifts in healthcare. We intend to use this platform to share successes with the healthcare community, broadly.

2. INITIATVE & PROJECT SCOPE

A. Phase I: Stakeholder Assumptions Project

Phase I of HTI@MA (Stakeholder Assumptions Project) shall be designed to:

Execute an iterative survey and interview process to:

- (1) Uncover assumptions that stakeholders make about other healthcare sectors, their leaders, drivers, priorities and how they define key healthcare challenges;
- (2) Define the key questions leaders want answered by other sectors and provide the answers they want others to better understand; and
- Identify alignment of challenges and development of common definitions and shared information.

Phase I is intended to expose the differences in how sectors operate, fill gaps in knowledge, and provide insights that lead to change opportunities. Further, Phase I results will determine next steps for the initiative and define priorities, opportunities and projects.

- B. Phase I: Outputs & Expectations
- (1) Delivery of de-identified results of surveys and interviews to inform the perspectives and challenges identified by sector leaders:
- (2) Identification of aligned challenges and opportunities for change;
- (3) Prioritized opportunities for removing barriers through pilot projects, policy or business initiatives;
- (4) Overall scope of existing healthcare environment;
- (5) Formulation of plan for Phase II of HTI@MA, and
- (6) Strategies for leveraging the Medical Alley Healthcare Transformation Demonstration Lab
- C. Phase I: Additional Goals
- (1) Provide an opportunity for further engagement with MAA members
- (2) Educate the MAA membership about and prepare it for HTI@MA
- (3) Assess the receptivity of MAA members to embrace and participate in HTI@MA programs that will be defined in Phase I and implemented in Phase II
- D. Phase II: Year 1-2 Plan Definition & Execution

Based on the outputs of Phase I, MAA requests assistance in the planning, definition, structuring and management of HTI@MA. Expected services should include:

- (1) Definition of Phase II initiative for 1-2 years;
- (2) Workplan for HTI@MA, to include, but not limited to:

- (1) Definition of breakout work (project teams, quarterly Board/Steering Committee actions);
- (2) Setting goals and metrics, tracking progress;
- (3) Supporting outputs (project results, white papers, opinion pieces, legislative drafts, etc.);
- (4) Leading research and support for moving outputs forward and defining new projects and initiatives.

3. PARTNERSHIP SCOPE & REQUIREMENTS

This RFP is designed to engage the services of a consulting firm that 1) can help us design and execute the Stakeholder Assumptions Project, and 2) help us define Phase II projects and objectives and manage this initiative. High level expectations include the following:

- Bring relevant qualifications in qualitative/quantitative data collection and collection design
- Bring relevant healthcare expertise and information to the project(s) to contribute to the collection and design of Phase II
- Leverage past experiences to help us identify required workstreams to engage participants and successfully define and execute the project pathway
- Help us map out timing and required resources for each workstream and the project as a whole
- Phase I: Identify interdependencies across the different sector participants and conflicts among the sectors and help us to map opportunities for change, pilot projects to test change and inhibitors to change within the healthcare system
- Phase II: Help us define plan and execute
- Commitment to being partner and participant in HTI@MA

A. Partnership Commitment & Budget

MAA seeks a partner that is committed to participating and providing leadership to HTI@MA. Budget support shall be determined as part of Phase II. Proposals should be structured as in-kind contributions, without direct compensation for Phase I work. MAA will explore providing non-cash benefits in exchange for commitment. MAA is also planning for an extensive PR campaign in 2020, in part to support the outputs of HTI@MA.

Commitment expectations:

- (1) In-kind contribution of services for Phase I;
- (2) Committed senior leader to engage MAA & Board;
- (3) Appropriate team commitment to accomplish work and objectives; and
- (4) Research/content support for project(s).

Benefits to Firm Selected:

- (1) Profile and publicity of exclusive leadership role in HTI@MA;
- (2) Direct and complete engagement with senior leaders from across healthcare;
- (3) Opportunity to shape the dialogue of healthcare transformation:
- (4) Credit and profile associated with outputs from HTI@MA; and
- (5) Possibility of MAA value, including options of Foundational Member status and appointment of a Director to the Board (TBD), based on level of commitment and quality of response);
- (6) Research/content support for project(s); and

(7) Contribution of content to MAA channels and PR campaign.

Budget for Phase II:

- (1) TBD by scope of Phase II and proposal for support;
- (2) MAA anticipates providing some percentage of Phase II budget in direct cash.

Please accompany your proposal with a separate document addressing each of the following questions/ requirements below:

Please provide an overview of your company's qualifications and capabilities to provide the services we need including the qualifications of the specific individuals and team who would support this project.

Within your response, include a project plan that outlines the individual tasks, their duration, the resources assigned and the outcomes. Also include the potential implementation sequence and timing.

1. Describe your formal approach and discipline for managing, tracking and handling change requests to scope of the project?

2. Project Team

- a. Provide the resumes of all key members of the project team, including the Managing Partner, Project Managers, etc.
- b. Describe the level of access these individuals will have within your organization and the authority they have to commit the firm's resources to meet the objectives.
- c. Confirm if the team will be dedicated to the MAA account and/or time allocation to the HTI@MA project.

4. SELECTION CRITERIA & PROCESS

The MAA Board of Directors will evaluate each proposal and will select the firm to engage in HTI@MA.

- A. Evaluation Criteria & Requirements
- (1) Expertise in broad healthcare consulting
- (2) Qualifications in project leadership, including past performance metrics and customer portfolio
- (3) Qualifications in data collection & analysis
- (4) Experience in working with multiple sectors and companies
- (5) Profile and market reputation for healthcare innovation
- (6) Level of leadership and resource commitment
- (7) Quality of project scope and proposed timetables and workplan
- B. Process of Selection
- (1) Proposals received by July 31, 2019
- (2) Finalists (2-3) selected by August 8, 2019 by MAA Executive Committee
- (3) Recommendations presented to full MAA Board on August 15, 2019 at Board Meeting
- (4) Final selection by September 1, 2019
- (5) Phase I to begin in September 2019
- (6) Phase I results delivered on November 21, 2019 at Board Meeting

PROPOSAL INSTRUCTIONS AND ADMINISTRATION

A. Overview

This RFP was developed to provide the necessary information to prepare a proposal. This section outlines the administrative procedures and guidelines for preparing your proposal.

B. Liability

The issuance of this document and the receipt of information in response to this document will not cause MAA to incur any liability or obligation to you, financial or otherwise. MAA assumes no obligation to reimburse or in any way compensate you for expenses incurred in connection with your response to this RFP.

C. Use and Disclosure of Information

MAA reserves the right to use information submitted in response to this document in any manner it may deem appropriate in evaluating the fitness of the services proposed. Materials submitted by the firm that are considered confidential must be clearly marked as such. If confidentiality cannot be afforded, the firm will be notified and will be permitted to withdraw its proposal.

D. Protocol

Proposals must be submitted no later than the close of business on July 31, 2019. MAA, at its sole discretion, may elect to return responses received after the deadline. Submit one electronic proposal with permission to make additional copies of your proposal to:

Shaye Mandle, President & CEO, Medical Alley Association

Email: smandle@medicalalley.org

All supporting documentation and manuals submitted in response to this RFP will become the property of MAA unless otherwise requested by the firm at the time of submission.

If selected as a finalist, formal presentations will occur on August 15, 2019, between 3:30-6:00pm, before the MAA Board of Directors. Presentations will occur at a place to be designated in Minneapolis.

Pricing information supplied with the response to the RFP must be valid for at least 180 days from the submission date.

This RFP represents the best effort of MAA to document its requirements. MAA reserves the right to adjust the specifications or scope of effort stated in this RFP. If any modifications become necessary, all firms will be notified in writing by means of an addendum to this RFP. Firms will be notified in writing of the results of the selection process.

PROPOSAL FORMAT

MAA has prescribed the format below.

Responses should be tailored specifically to answer this RFP. Additionally, MAA would like to see proposals that include additional ideas or approaches to accomplishing the objectives outlined. If desired, firms may attach support materials in a separate appendix. It is essential that the response be thorough, and yet concise.

In order to facilitate MAA's review of the submitted proposals, firms are required to provide the requested information in the following format.

Table 2.0 Supplier's Proposal Format

(Use this as your checklist for returning items needed by the evaluation team.)

	Section Title	Contents/Deliverables
I.	Executive Summary (optional)	Top level summary of the most important aspects of the proposal, containing a concise description of the proposed solution(s).
II.	Description of Proposed Approach	Clearly identify and detail the proposed service, processes, methodologies and resources required.
III.	Partnership Information	Provide detailed pricing/commitment.
IV.	Appendices	Optional Information