



Request for Information (RFI) – RFI 26-07426
VIRTUAL URGENT CARE SERVICES

Issuing Entity: Inland Empire Health Plan (IEHP)

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Reference: Non-binding market research for future RFP planning

Confidentiality Notice:

Responses may include proprietary information. However, submissions may be subject to disclosure under the California Public Records Act (CPRA). See ‘Public Records and Compliance Notice’.

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Part I

1. Background and Context

Established on July 26, 1994, Inland Empire Health Plan (IEHP) is a not-for-profit health plan and a local public entity of the State of California. IEHP serves over 1.5 million members in San Bernardino and Riverside counties, supported by 7,500+ providers and 4,000+ employees. Upon receiving its Knox-Keene license from the California Department of Managed Health Care on July 22, 1996, IEHP commenced operations on September 1, 1996, steadfast in its mission: “We heal and inspire the human spirit.”

Membership Totals (as of August 2026):

Program	Members
Medi-Cal	1,320,774
DualChoice (D-SNP)	38,483
Covered California	34,249
Total	1,393,506

2. Purpose

The goal of this RFI is to gather market intelligence, identify qualified vendors, and inform a potential future RFP. This RFI is non-binding and for planning purposes only.

3. Statement of Work

As a result of the Healthcare Reform and participation in the California Coordinated Care Initiatives, IEHP grew to over 1.4 million Members and 8,000 Providers. Currently, 80% of IEHP’s Primary Care Doctors offer telehealth services to our Members and 10% of all clinical visits are completed via telehealth. We are seeking a 24/7/365 virtual urgent care vendor to enhance our Provider Network.

4. Objective

The objective of this RFI is to gather market intelligence on vendors capable of delivering 24/7/365 Virtual Urgent Care Services to IEHP Members through California board certified physicians. IEHP seeks information on vendor capabilities related to providing timely evaluation and management of Members’ clinical needs via telehealth, including the ability to prescribe medications when clinically appropriate.

5. Public Records and Compliance Notice

Responses may be subject to disclosure under the California Public Records Act. Vendors must certify no conflicts of interest with IEHP staff or governing board.

6. Submission Instructions

- Submit responses via EUNA Procurement website:
www.iehp.bonfirehub.com
- Late submissions will not be accepted
- For technical issues, contact EUNA Procurement via the website.

7. Vendor Checklist

- Letter of Interest
- Virtual Urgent Care Services (Response Form)
- Certifications (Non-Debarment, CA SOS (for corporations) and FTB Good Standing)
- Demo Video or Presentation Deck (if needed)

Part II

8. Detailed Scope of Services

This RFI contains a list of questions regarding your On-Demand (24 hrs/ 7 days a week) Clinical Triage and Telehealth Services (CTTS). A qualified vendor, for the purpose of this RFI, is one that can reliably and independently provide ALL required services (confirmation to all requirements under Products/Services) to IEHP.

9. Bidder Questions

Clinical Staffing, Licensure, and Credentialing

- A. Please describe your clinician network. Include the number of California-licensed physicians contracted with your organization. Describe how current staffing could support 24/7/365 On-Demand Clinical Triage and Telehealth Services (CTTS) capacity for IEHP's 1.4 million Members.

VENDOR RESPONSE:

- B. List the credentials and specialties of all Clinicians who provide CTTS.

VENDOR RESPONSE:

- C. Is your organization accredited by NCQA for credentialing? If yes, please describe your credentialing and re-credentialing processes.

VENDOR RESPONSE:

- D. All CTTS services must be performed by staff located within the United States of America. Are all your clinicians California board-certified and physically located in the US? Are non-clinicians interacting with Members physically located in the US?

VENDOR RESPONSE:

- E. Do you use any clinical decision support tools to assist clinicians? If yes, please describe.

VENDOR RESPONSE:

- F. Describe your clinician training program specific to virtual urgent care, including onboarding, continuing education, and competency assessments.

VENDOR RESPONSE:

Clinical Operations and Practice Standards

- G. Please describe the triage protocols and clinical practice guidelines used to determine when non-clinicians escalate interactions to clinicians.

VENDOR RESPONSE:

- H. If your organization employs prescribing clinicians for CTTS: Describe the types of prescription medications available. Identify any restrictions (class, quantity, refill rules, therapy initiation limits). Can clinicians prescribe according to IEHP's formulary?

VENDOR RESPONSE:

- I. Identify all Member subpopulations excluded from receiving CTTS (age limits, language availability, condition-specific exclusions).

VENDOR RESPONSE:

- J. Describe your policies and procedures to share a Member's data with his/her assigned PCP (in case of emergency or need for follow up), IEHP, and IEHP's care programs.

VENDOR RESPONSE:

Outsourcing and Third-Party Management

- K. Please describe what services, if any, your organization outsources or subcontracts CTTS-related services to third-party entities, subsidiaries, or contractors. Include oversight and compliance processes. How do you monitor and audit your delegates/subcontractors for quality and adherence to policies and procedures? Are they all located in the US?

VENDOR RESPONSE:

- L. Describe any cybersecurity requirements you impose of our subcontractors or vendors.

VENDOR RESPONSE:

Telehealth Modalities and Access Channels

- M. Describe the telehealth modalities you provide, including:
- Telephonic encounters
 - Synchronous video encounters (include HIPAA-compliance platform used)
 - Additional channels (text, secure chat, other digital platforms)

VENDOR RESPONSE:

- N. Can Members access CTTS asynchronously (e.g., secure messages with delayed responses)? Please describe workflows and response expectations (e.g. timing, follow-ups, etc.).

VENDOR RESPONSE:

- O. Please detail all services offered by your organization, in addition to urgent care telephonic services (e.g. Behavioral Health, Primary Care, care coordination, care gap closure).

VENDOR RESPONSE:

- P. Currently, IEHP Members access Virtual On-Demand Services directly or they are triaged through our 24/7 Nurse Advice Line. When appropriate, Nurses warm transfer IEHP Members to our Physician Line for an audio/video visit. Can you support this process? If so, please describe your workflow.

VENDOR RESPONSE:

- Q. Do you offer integrations with existing IEHP digital front doors, such as online self-service appointment scheduling, through our “Find a Doctor” feature and/or Member mobile applications? Please describe in detail.

VENDOR RESPONSE:

- R. Describe failover procedures if your telehealth platform experiences unexpected downtime.

VENDOR RESPONSE:

- S. Do you support “queue transparency” (showing Members estimated wait times)?

VENDOR RESPONSE:

- T. Describe how you measure and optimize digital engagement (click-through rates, wait-time abandonment)?

VENDOR RESPONSE:

Eligibility Verification and Technical Capabilities

- U. Describe your real-time eligibility verification capabilities, including support for 270/271, 834, and/or other methods.

VENDOR RESPONSE:

- V. What technical capabilities do you have to receive and send clinical encounter data to IEHP? Can you support Secure File Transfer Protocol (SFTP) file transfers?

VENDOR RESPONSE:

- W. Do you support real-time clinical data integration (API's)?

VENDOR RESPONSE:

Performance Reporting, SLAs (Service Level Agreements), and Dashboards

- X. Can your organization provide monthly reporting on:
- Average speed of answer
 - Average time to care (connecting to a live clinician)
 - Call blockage rate
 - Call abandonment rate
 - Guaranteed service levels
 - Adherence to Utilization Review Accreditation Commission (URAC) call center standards

VENDOR RESPONSE:

- Y. Provide examples of standard performance dashboards (utilization, quality metrics, turnaround times). Describe performance guarantee and measures. Explain SLA governance (monitoring roles, escalation pathways, corrective action plan process).

VENDOR RESPONSE:

- Z. Can reports be altered to meet specific requirements if needed?

VENDOR RESPONSE:

- AA. Describe your process for recording, reporting, and addressing Member grievances. Who monitors grievances? Who escalates issues? Describe corrective action plan procedures.

VENDOR RESPONSE:

- BB. What is your target turnaround time for responding to grievances and complaints?

VENDOR RESPONSE:

Digital Tools, Innovation, and Accessibility

- CC. Describe your digital engagement tools (e.g. AI, mobile app, web portal, chatbot, triage tools, self-service features).

VENDOR RESPONSE:

- DD. Do you support integration (e.g. SSO) between your services and IEHP's services (e.g. website)?

VENDOR RESPONSE:

EE. Describe innovations that improve and support best practices for appropriate Member access, experience, and satisfaction, etc.

VENDOR RESPONSE:

FF. Describe multi-language support and accessibility accommodations (e.g. website, interpreter services).

VENDOR RESPONSE:

Experience and Capacity

GG. Please describe your organization’s experience providing Virtual Urgent Care Services for large health plans or similar populations. Include project scope, scale, and outcomes.

VENDOR RESPONSE:

Pricing and Fees

HH. Describe all fee models you support. Provide a detailed breakdown of all fees associated with CTTS services (one-time vs. ongoing fees, technology vs. clinical fees, add-on services & features, etc).

VENDOR RESPONSE:

10. Accessibility and Equity

IEHP encourages participation from small businesses, minority-owned, and disadvantaged vendors.

11. Evaluation and Next Steps

Responses will be reviewed to inform potential future RFP development. No scoring or ranking will occur at this stage.

12. Legal and Policy References

- California Corporations Code §§17708.03, 2105
- Revenue & Taxation Code §23101
- IEHP Internal Procurement Policies and Procedures Manual (Policy # FIN/PUR 01)