

Additional Questions
Solicitation No. DHMH OPASS- 11-10606
Submitted September 30, 2011

Question Numbers	RFP Section Reference	RFP Page Numbers	Questions and Answers
1.	4.4.3.5.A Transition and 4.4.3.5.B Program Design, Development and Implementation Deliverables Matrix	75	<p>Sub-item A requires a detailed transition and implementation plan narrative and Gantt Chart. Yet, sub-item B requests an outline and schedule for all deliverables, products, materials, and services required by the RFP and the contract. And, both sub-items reference Section 3.2.2.2. It seems as though all such items to be included under sub-item B would have already been included in sub-item A's Gantt Chart. If the requirements for these items are not the same, would the Department please provide details regarding the differences between sub-items A and B so that bidders are able to craft appropriate responses? If the requirements are the same, would the Department clarify that a response to sub-item B is not needed and will not be scored?</p> <p>The requirements are not the same. Sub-item A refers to transition in and out and the Offeror's plan to work with the existing vendor; while sub-item B refers to implementation with deliverables.</p>
2.	4.4.3.5.E Enrollment Information System 4.4.3.8 Enrollment Information System	76 & 79	<p>While 4.4.3.5. E contains some additional descriptors, these two sections have duplicate verbatim language in the first paragraph and the same reference to 3.2.21 in the RFP. It seems that a response to one would contain the same information as the response to the other. Please provide clarification as to what the Department wants to see in each of these sections.</p> <p>The distinction is the requirement to describe new capacities specifically intended for this project.</p>

3.	3.2.1	23	<p>Please describe in more detail the contractor's responsibilities in the State's implementation of health care reform.</p> <p>Among other things, the proposed regulations suggest a more aggressive enrollment timeframe. However, until the regulations are finalized, the timeframes for changes regarding enrollment, and other potential change, are unknown. The Enrollment Broker is responsible for monitoring changes and implementing them, as necessary, in the provision of its services.</p>
4.	4.4.1	73	<p>The RFP requirement states the Offerors Technical Proposal should be organized in the same manner as Part 4.4.3, which includes some of Section 3 Scope of Work requirements, but not all of those requirements have been asked for in Section 4. Where would the Department prefer bidders answer the Section 3 requirements not specifically referenced in Section 4?</p> <p>Offerors should follow the format of the RFP and answer the required sections accordingly.</p>

5.	3.2.2.3.B.7	30	<p>The section states that the Contractor must have in place and ready for testing/readiness review no later than February 13, 2012 the Contractor's Enrollment Information System (EIS), telephone system, staff, and all other Full Operations requirements specified in Section 3 of the RFP. With the anticipated Transition to begin on or about January 19, 2012, this leaves the vendor with only 25 days to complete all of these requirements, which is virtually impossible for any firm other than the incumbent. All vendors must build a complex enrollment system and stand up a telephony system, which takes a minimum of 120 days to complete. Ordering phone lines alone takes a minimum of 45 - 60 days, and building a complex enrollment system and successfully handling all of the data conversion and testing to ensure a seamless transition of vendors requires a minimum of 120 days. Recruiting, hiring, and training of staff requires a similar timeframe, as staff training alone takes approximately 3 weeks, which is about the total allotted for the entire transition. Unless the readiness review requirement is changed to allow vendors a minimum of 120 days from the date of contract execution, the only firm that could meet this requirement is the incumbent. No matter how experienced a firm, it is virtually impossible to complete the transition requirements in a 25 day time period. In the interest of providing a truly competitive procurement environment and generating the best possible value for the State will the Department consider changing the startup period for firms to have their full operational requirements in place from the current 25 days to 120 days? If this change is not made, the only vendor that will be able to meet the contract transition requirement, and be qualified to submit a bid for this contract, will be the incumbent.</p> <p>While the state realizes it has laid out an aggressive transitional timeline, other vendors have experienced such timelines and managed to meet requirements in the given timeframe. The Department encourages a new vendor to hire experienced staff to help with the transition.</p>
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6.	3.2.5.9.B		<p>Are enrollees allowed to submit for cause disenrollment/enrollment/transfer requests verbally or must they submit these requests in writing?</p> <p>Yes, the enrollees are allowed to submit for cause disenrollment/enrollment/transfer requests verbally.</p>
7.	3.2.5.9.B		<p>The RFP identifies a role for the Contractor in helping Members transfer to MCOs for cause. Does the Contractor have any role in handling disenrollment requests when the member wishes to leave managed care or is this handled by the Department (e.g., the member wishes to return to fee-for-service)? If so please provide information on what is required for those who wish to become exempt or excluded if this applies.</p> <p>Maryland has mandatory Managed Care for the majority of its population except for individuals that qualify for the Rare and Expensive Case Management (REM) program.</p>
8.	3.2.5.9.C		<p>The RFP provides information on an enrollee's annual right to change health plans. Does the Department provide a period after initial enrollment that allows an enrollee to change without cause, such as 90 days after their MCO enrollment date?</p> <p>No, the Department does not provide a period after initial enrollment that allows an enrollee to change without cause.</p>
9.	3.2.5.9.B.3		<p>The RFP indicates a Member has a right to appeal if their good cause request for disenrollment/transfer is denied. Does the Contractor have a role in the appeals process? If so please provide information on what is required.</p> <p>No, the State handles all appeals.</p>
10.	3.2.5.9.C.3		<p>The RFP indicates the Contractor must provide at least 21 days for an individual to change MCOs during their ARC period. How many days prior to a consumer's anniversary date does the Department transmit the monthly ARC file?</p> <p>The Department will transmit the applicable ARC file 60 days prior to a consumer's anniversary date.</p>

11.	3.2.5.9.C.6		<p>The RFP requires the Contractor to perform follow-up procedures on bad addresses and transmit this information to the State. How is this information provided to the State or what process or procedure is to be followed in providing this information?</p> <p>Follow-up procedures on bad addresses are transmitted via fax to the Department.</p>
12.	3.2.6.1.B		<p>Please confirm that HRA information is transmitted to MCOs electronically using a secure file transfer process.</p> <p>Yes, the HRA information is transmitted to MCOs electronically using a secure file transfer process.</p>
13.	3.2.7.4		<p>This section discusses instances where the PCP with whom the HOH wishes to enroll is in more than one MCO and the HOH does not make an MCO selection. According to the RFP DHMH shall ensure that the Enrollment Broker Default Assignment of the MCO in these cases is unbiased and based on the algorithm approved by the Department. It is stated elsewhere in the RFP that the Department will automatically assign those who do not select an MCO and this is not the responsibility of the Contractor. Please clarify the role of the Contractor in auto-assignment (if any) when the HOH does not choose an MCO, and his/her PCP participates in more than one MCO.</p> <p>The Department is responsible for auto assigning, not the Contractor.</p>
14.	3.2.10.2		<p>The RFP indicates the Contractor sends the Department a daily electronic transaction that indicates updated TPL information. The TPL information is compiled into a report which is sent to the Department. Is the report a separate requirement from the transaction file and if so how frequently is the report provided? Is the report a deliverable?</p> <p>Yes, the TPL information is compiled into a report which is sent to the Department once per month.</p>

15.	3.2.10.3		How is the Contractor to report to the Department's DRAFT Unit that TPL information we receive is inconsistent with the Department's TPL system? (e.g., hard copy report, electronic file, or e-mail)? The Contractor reports to the Department's DRAFS Unit via electronic file.
16.	3.2.10.5 and 3.2.10.6		What reporting method is used by the Contractor to notify Department's DRAFS Unit of TPL coverage or that there is a discrepancy between the MMIS data and information received by our staff on TPL (e.g., how is this information sent)? Monthly electronic files are used by the Contractor to notify Department's DRAFS Unit of TPL coverage.
17.	3.2.21.2		Will the daily file sent to the Contractor contain phone numbers for Enrollees? If it does, what proportion of phone numbers are out-of-date? The daily file sent to the Contractor does not contain phone numbers.
18.	3.2.25.1.D		Please clarify the definition of "handle" in this requirement. Is the requirement strictly with regard to the telephony infrastructure / phone system having the capacity to accept 100 simultaneous calls (scalable to 150) or does this also reflect a requirement that staffing levels should accommodate the handling of this number of simultaneous calls? To "handle" a call mean to answer and address any issues or concerns that the caller may have. The telephone system is responsible for having the ability to simultaneously answer 150 simultaneous calls at a time. It is the responsibility of the Contractor to assess the amount of staff needed to accommodate this requirement.
19.	3.2.25.1.D		Is the existing Avaya phone system scalable to accommodate 150 simultaneous calls? Yes, the Avaya phone system is scalable to accommodate 150 simultaneous calls.

20.	3.2.25.1.M		<p>Please clarify the requirement for call monitoring. Is the expectation that the Contractor provide capability to monitor only live calls? Or is there a requirement to record all calls and have the ability to monitor recorded calls as well?</p> <p>The Department's requirement is to record all calls and have the ability to monitor calls.</p>
21.	3.2.29.2.G		<p>The MCO Default Assignment report indicates totals are broken out by type of enrollment (phone, mail, and field). Will the Department please confirm that the requirement for breaking this report out by type of enrollment (phone, mail, field) is not possible because this report represents enrollments executed by the Department's auto-assignment process which means they could not be handled by any other channel (phone, mail field)?</p> <p>Yes, the Contractor would be able to provide this report because all enrollments, including auto-assignments by the Department, are sent to the enrollment broker in the daily enrollment file. Refer to attachment CC for transaction types. The enrollment type would be the Department for these transactions.</p>
22.	3.2.30.4		<p>This section states that one week after January 19, 2012 the Contractor shall develop for DHMH approval, a training program for CCAs. Given the complexity of the HealthChoice/PAC programs and the time needed to develop a comprehensive training program it would be impossible for a vendor to develop an entire training program within a week. Will the department consider changing this date to at least 45 days after January 19, 2012? If this change is not made, the only vendor that will be able to meet this requirement will be the incumbent.</p> <p>While the state realizes it has laid out an aggressive transitional timeline other vendors have experienced such timelines and managed to meet requirements in the given timeframe. The Department encourages a new vendor to hire experienced staff to help with transition.</p>

23.	3.2.34		<p>This section states that the within 30 days of the start of the contract, The Contractor shall submit a detailed description of its disaster contingency and recovery plan for all requirements specified in this RFP. But one of the evaluation criteria (5.2.1.12, pg 83) asks whether there is a detailed Disaster Contingency and Recovery Plan, which seems to imply that a Plan should be submitted with the proposal. Can you please clarify this requirement?</p> <p>Within 30 days of the start of the Contract, the Contractor shall submit a detailed description of its disaster contingency and recovery plan for all requirements specified in this RFP.</p>
24.	3.5.8		<p>The RFP indicates that DHMH shall measure and review Contractor performance using a Performance Monitoring System. Will the Department please clarify what is meant by the performance monitoring system?</p> <p>The State has Contract Monitors who will be monitoring calls. The Service Matrix and required reports will help with the Performance Monitoring.</p>
25.	4.4.1		<p>The RFP requirement states the Offerors Technical Proposal should be organized in the same manner as Part 4.4.3, which includes some of Section 3 Scope of Work requirements, but not all of those requirements have been asked for in Section 4. Where would the Department prefer bidders answer the Section 3 requirements not specifically referenced in Section 4?</p> <p>Offerors should follow the format of the RFP and answer the required sections accordingly.</p>
26.	4.4.3.6.C.2		<p>Will the Department please clarify whether the organizational chart requested relates to significant subcontracts of the proposed project's organization or to significant subcontracts of the Offeror's corporate organization? If the latter, please define "significant", as a large corporation with multiple domestic and international operations could have thousands of subcontracts.</p> <p>This requirement references the organizational chart between the Contractor and the subcontractors.</p>

27.	4.4.3.7.B		<p>Must the bidder provide letters of intended commitment to work on the project for proposed key personnel who are currently employed by the bidder?</p> <p>Yes, the Offeror needs to provide letters of intended commitment for key personnel.</p>
28.	4.4.3.9		<p>This section states that proposals that identify specific benefits as being contractually enforceable commitments will be rated more favorably than proposals that do not identify specific benefits as contractual commitments, all other factors being equal. Will the Department please provide examples of the type of "specific benefits" contemplated by this question.</p> <p>The specific benefits refer to the specific economic benefits that will accrue to the Maryland economy.</p>