

**CHRONIC ILLNESS
 DEMONSTRATION PROJECTS RFP
 OFFICIAL RFP AMENDMENTS - Set 1
 March 12, 2008**

The following are official modifications, which are hereby incorporated into the New York State Office of Health Insurance Program Chronic Illness Demonstration Projects Request for Proposals (RFP), issued February 4, 2008. In the event of any conflict between the RFP and these amendments, the information contained in these amendments will prevail.

RFP Section	Para-graph	Page	Current Language	Corrected or Additional Language (bold)
B. 4	2	7	Please note these counts do not represent unduplicated patient counts for hospitals and/or provider visits. Demonstrations must have an average minimum monthly enrollment of 500 enrollees and can have an average maximum monthly enrollment of 550 enrollees. Therefore, DOH recommends a patient count of at least 700 be derived from a combination of both hospital(s) and provider(s) counts to meet the DOH enrollment minimum. The bidder must be able to demonstrate the capacity to enroll and serve sufficient number of enrollees to demonstrate the cost effectiveness of the demonstration.	Please note these counts do not represent unduplicated patient counts for hospitals and/or provider visits. Demonstrations conducted in the Downstate Geographic Region, New York City Metro Area CIDP Region must have an average minimum monthly enrollment of 500 enrollees and can have an average maximum monthly enrollment of 550 enrollees. All demonstrations conducted in the Upstate Geographic Region and the Long Island Counties and Westchester County CIDP Regions within the Downstate Geographic Region must have an average minimum monthly enrollment of 250 and can have an average maximum monthly enrollment of 300 enrollees. DOH recommends a patient count of at least 700 for the Downstate Geographic Region, New York City Metro Area CIDP Region, and at least 350 for the Upstate Geographic Region and Long Island Counties and Westchester County CIDP Regions of the Downstate Geographic Region. The patient counts can be derived from a combination of both hospital(s) and provider(s) counts to meet the DOH enrollment minimum. The bidder must be able to demonstrate the capacity to enroll and serve sufficient number of enrollees to demonstrate the cost effectiveness of the demonstration.
B. 4.	3	7- 8	DOH is seeking demonstrations that are geographically diverse and represent both Upstate and Downstate New York. Using the case-finding algorithm DOH has developed CIDP Regions within the Upstate and Downstate Regions (Attachment 3).	DOH is seeking demonstrations that are geographically diverse and represent both Upstate and Downstate New York. Using the case-finding algorithm DOH has developed CIDP Regions within the Upstate and Downstate Regions (Attachment 3). Bidders will be asked to identify the Geographic (Upstate or Downstate) and CIDP Region and the specific catchment

			<p>Bidders will be asked to identify the Geographic (Upstate or Downstate) and CIDP Region and the specific catchment area by county and zip codes in which the demonstration will be conducted. The bidder must also provide the number of enrollees that will be served by the demonstration.</p>	<p>area by county and zip codes in which the demonstration will be conducted. The bidder must also provide the number of enrollees that will be served by the demonstration.</p> <p>A bidder may submit a proposal in both the Upstate and Downstate Geographic Region and in one or more CIDP Regions. Each proposal has to be fully unique, stand alone and cannot combine CIDP Regions. <u>Submission of a single proposal that includes a combination of CIDP Regions will result in the bidder being disqualified.</u> A proposal must be submitted separately for each CIDP Region and include both a technical and financial proposal.</p> <p>Due to DOH’s goal to have multiple distinctive demonstrations, a prime bidder will only be awarded one contract. If a prime bidder is eligible for more than one award in either geographic region or within CIDP regions, once notified by the DOH, the prime bidder will have two business days to select the CIDP Region in which they will conduct their demonstration.</p> <p>Any entity that has submitted a proposal as a prime bidder, may also participate as a network provider or subcontractor of another prime bidder’s proposal. A subcontractor may be included in more than one primary bidder’s proposal.</p> <p>If an entity is awarded a contract as a prime bidder, that entity can also participate as a network provider or subcontractor of another awarded prime contractor. A subcontractor maybe a subcontractor for one or more awarded primary bidders.</p>
C. E	3	11	<p>DOH estimates that a minimum CIDP average monthly enrollment of 500 patients will be required in the intervention group to demonstrate scalability and to provide adequate sample size for the evaluation. The DOH maximum average monthly enrollment for a CIDP is 550 enrollees.</p>	<p>DOH estimates that CIDPs conducted in the Downstate Geographic Region, New York City Metro Area CIDP Region must have a minimum average monthly enrollment of 500 patients in the intervention group to best demonstrate scalability and to provide adequate sample size for the evaluation. CIDPs conducted in the Upstate Geographic Region and in the Long Island Counties and Westchester County CIDP Regions of the Downstate Geographic Region must have an average minimum monthly enrollment of 250 patients in the</p>

				intervention group to provide an adequate sample size for the evaluation.
C. E.	4	11	If during the course of the demonstration, a CIDP exhausts the intervention group of potential enrollees without meeting the minimum average monthly enrollment requirement of 500 enrollees, the DOH will release the control group for enrollment in the CIDP. A second control group of similarly risk scored patients will then be established, meeting the CIDP's specifications in another geographic area. This second control group will be used for risk and shared savings analysis.	If during the course of the demonstration, a Downstate Geographic Region, New York City Metro Area CIDP exhausts the intervention group of potential enrollees without meeting the minimum average monthly enrollment requirement of 500 enrollees, the DOH will release the control group for enrollment in the CIDP. A second control group of similarly risk scored patients will then be established, meeting the Downstate Geographic Region, New York City Metro Area CIDP's specifications in another geographic area. This second control group will be used for risk and shared savings analysis. A control group of similarly risk scored patients will be established meeting the CIDP's specifications for the Upstate Geographic Region CIDPs and Long Island Counties and Westchester County CIDP of the Downstate Geographic Region. This control group will be used for risk and shared savings analysis.
C. F.	2	12	The maximum award for a CIDP program will be one million seven hundred and fifty thousand dollars (\$1,750,000), per contract year or a total of five million two hundred and fifty thousand dollars (\$5,250,000) for the thirty-six month contract. Any bidder that submits a proposal that exceeds the maximum award will be disqualified.	The maximum award for a CIDP program conducted in a Downstate Geographic Region, New York City Metro Area CIDP Region will be one million seven hundred and fifty thousand dollars (\$1,750,000), per contract year and a total of five million two hundred and fifty thousand dollars (\$5,250,000) for the thirty-six month contract. Any bidder that submits a proposal that exceeds the maximum award will be disqualified. The maximum award for a CIDP program conducted in the Upstate Geographic Region and in the Long Island Counties and Westchester County CIDP Regions of the Downstate Geographic Region will be nine hundred and twenty-five thousand dollars (\$925,000), per contract year and a total of two million seven hundred and seventy-five thousand dollars (\$2,775,000) for the thirty-six month contract. Any bidder that submits a proposal that exceeds the maximum award will be disqualified.
F.	1	12	DOH is authorized to spend \$10 million in state funds the first contract year and is expected to spend annually for three years for demonstrations targeting high need, high cost Medicaid FFS beneficiaries that are medically complicated. It is anticipated that federal matching	DOH is authorized to spend \$10 million in state funds the first contract year and is expected to spend annually for three years for demonstrations targeting high need, high cost Medicaid FFS beneficiaries that are medically complicated. It is anticipated that federal matching funds will be available for a significant percent of these State funds. If obtained, federal matching funds would be used to reduce the State share for

			funds will be available for a significant percent of these State funds.	funding of the CIDPs and will not be utilized for additional contracts.
H. 1. 5)	c.	16	c. Provide the targeted enrollment number for the demonstration (minimum 500, maximum 550 enrollees)	c. Provide the targeted enrollment number for the demonstration (Downstate Geographic Region, New York City Metro Area CIDP , minimum 500, maximum 550 enrollees; Upstate Geographic Region CIDPs and Long Island Counties and Westchester County CIDPs of the Downstate Geographic Region , minimum 250, maximum 300 enrollees)
H. 3. 1.		18	<p>Pass/Fail Requirements</p> <p>All proposals will have an initial pass/fail screening for the following requirements:</p> <ol style="list-style-type: none"> 1. The bidder is eligible to bid as described in Section C. 2. 2. Network of facilities have served at a minimum 700 patients 3. Demonstration average monthly enrollment of 500 enrollees minimum, 550 enrollee maximum. 	<p>Pass/Fail Requirements</p> <p>All proposals will have an initial pass/fail screening for the following requirements:</p> <ol style="list-style-type: none"> 1. The bidder is eligible to bid as described in Section C. 2. 2. Network of facilities in demonstrations conducted in the Downstate Geographic Region, New York City Metro Area CIDP Region must have served a minimum 700 patients. Network of facilities in demonstrations conducted in Upstate Geographic Region CIDPs and Long Island Counties and Westchester County CIDPs of the Downstate Geographic Region must have served at a minimum 350 patients. 3. Demonstrations conducted in the Downstate Geographic Region, New York City Metro Area CIDP Region must have an average monthly enrollment of 500 enrollee minimum, 550 enrollee maximum. Demonstrations conducted in the Upstate Geographic Region and Long Island Counties and Westchester County CIDPs of the Downstate Geographic Region must have an average monthly enrollment of 250 enrollees minimum, 300 enrollee maximum.
Attach-ment 5	e.		The average minimum monthly enrollment must be 500 intervention enrollees. The average maximum monthly enrollment is 550 intervention enrollees.	<p>Downstate Geographic Region, New York City Metro Area CIDPs must have an average minimum monthly enrollment of 500 intervention enrollees. The average maximum monthly enrollment is 550 intervention enrollees. Upstate Geographic Region CIDPs and Long Island Counties and Westchester County CIDPs of the Downstate Geographic Region, must have an average minimum monthly enrollment of 250 intervention enrollees. The average maximum of monthly enrollment is 300 intervention enrollees.</p> <p>Amended – Attachment 5, Technical Proposal</p>

				Form is included at the end of this RFP amendment document.
Attachment- 8			<p>Attachment 8- Financial Proposal Form</p> <p>Operations Cost- The average unduplicated number of intervention enrollees proposed per month for Years 1, 2 and 3 is 500 enrollees.</p> <p>Start Up and Enrollment Cost- will be calculated based on MCCF x 500 enrollees x 12 months.</p>	<p>Attachment 8 A- Financial Proposal Form, Downstate Geographic Region, NYC Metro Area CIDP Region. The average unduplicated number of intervention enrollees proposed per month for Years 1, 2 and 3 is 500 enrollees.</p> <p>Start Up and Enrollment Cost- will be calculated based on MCCF x 500 enrollees x 12 months.</p> <p>Attachment 8 B- Technical Proposal Form, Upstate Geographic Region CIDPs, Downstate Geographic Region, Long Island & Westchester Counties CIDP Regions</p> <p>The average unduplicated number of intervention enrollees proposed per month for Years 1, 2 and 3 is 250 enrollees.</p> <p>Start Up and Enrollment Cost will be calculated based MCCF x 250 enrollees x 12 months.</p> <p>Attachments 8 A & 8 B – Financial Proposal Forms are included at the end of this RFP amendment document.</p>

Attachment 5- RFP Amendment Set 1

Technical Proposal Form: Proposed CIDP Catchment Area

Bidder Name: _____

Geographic Region Upstate _____ Downstate _____

CIDP Region (Choose one) Buffalo ___ Rochester ___ Syracuse ___ Albany ___ Westchester ___
 Nassau/Suffolk ___ NYC ___

A Separate Proposal Must Be Submitted For Each CIDP Region. Proposals Submitted That Include More Than One CIDP Region Will Be Disqualified.

List County(s) in Bidder's Catchment Area	By County, List All Zip Codes in Bidder's Catchment Area					
The Bidder's Proposed Actual Average Unduplicated Number of Intervention Enrollees Proposed Per Month to Receive CIDP Services during the Contract Year.	Year 1		Year 2		Year 3	

Instructions for Completion of Technical Proposal Geographic Area Form

- a. Bidder Name: Provide the name of the prime bidder organization.
- b. Geographic Region: Select either the Upstate or Downstate Geographic Region in which the demonstration will be conducted.
- c. CIDP Region: Selected the CIDP Region in which the demonstration will be conducted.
- c. County(s) in Bidder's Catchment Area: Provide the county or counties within which the CIDP will be conducted. (Add additional rows as required)
- d. Zip Codes: List by county(s) the zip codes within which the CIDP will be conducted.
- e. Bidder's proposed Actual Average Monthly Number of Intervention Enrollees
 For each contract year provide the average number of unduplicated enrollees proposed to receive CIDP care coordination services. Downstate Geographic Region, NYC Metro Area CIDPs must have an average minimum monthly enrollment of **500** intervention enrollees. The average maximum monthly enrollment is **550** intervention enrollees. Upstate Geographic Region CIDPs and Long Island Counties and Westchester County CIDPs of the Downstate Geographic Region, must have an average minimum monthly enrollment of **250** interventions enrollees. The average maximum of monthly enrollment is **300** intervention enrollees.

Financial Proposal Form

Downstate Geographic Region, NYC Metro Area CIDP Region

Bidder Name: _____

Monthly Care Coordination Fee (MCCF) Per Enrollee* \$ _____

Operations Cost				
	Average Unduplicated Number of Intervention Enrollees Proposed Per Month	MCCF	Operation Months in Year	Total
Year 1	500		9	
Year 2	500		12	
Year 3	500		12	
Operations Grand Total:				
<ul style="list-style-type: none"> Yearly Operations Cost = 500 enrollee X MCCF X Months In Year For purposes of evaluation and financial scoring, DOH is using 500 enrollees as the monthly average of intervention enrollees. 				

Start Up Cost	\$ _____
<ul style="list-style-type: none"> Start up cost may total no more than 10% of the proposed MCCF x 500 enrollees x 12 months 	

Enrollment Cost	\$ _____
<ul style="list-style-type: none"> Enrollment cost may total no more than 15% of the proposed MCCF x 500 enrollees x 12 months 	

Program Total Cost	\$ _____
<ul style="list-style-type: none"> Program Total Cost = Start Up Cost + Enrollment Cost + Operations Grand Total 	
<p>* The Monthly Care Coordination Fee will be the same amount over the course of the 3 year contract Please note proposals that exceed the maximum award of \$1, 750,000 will be disqualified.</p>	

Financial Proposal Form

Upstate Geographic Region CIDPs
Downstate Geographic Region, Long Island & Westchester Counties CIDP
Regions

Bidder Name: _____

Monthly Care Coordination Fee (MCCF) Per Enrollee* \$ _____

Operations Cost				
	Average Unduplicated Number of Intervention Enrollees Proposed Per Month	MCCF	Operation Months in Year	Total
Year 1	250		9	
Year 2	250		12	
Year 3	250		12	
Operations Grand Total:				
<ul style="list-style-type: none"> Yearly Operations Cost = 250 enrollee X MCCF X Months In Year For purposes of evaluation and financial scoring, DOH is using 250 enrollees as the monthly average of intervention enrollees. 				

Start Up Cost	\$ _____
<ul style="list-style-type: none"> Start up cost may total no more than 10% of the proposed MCCF x 250 enrollees x 12 months 	

Enrollment Cost	\$ _____
<ul style="list-style-type: none"> Enrollment cost may total no more than 15% of the proposed MCCF x 250 enrollees x 12 months 	

Program Total Cost	\$ _____
<ul style="list-style-type: none"> Program Total Cost = Start Up Cost + Enrollment Cost + Operations Grand Total 	
<p>* The Monthly Care Coordination Fee will be the same amount over the course of the 3 year contract Please note proposals that exceed the maximum award of \$ 925, 000 will be disqualified.</p>	