

Questions and Answers
Eligibility Verification and Program Integrity Services RFP
FAU No: 1006030932

New York State Department of Health, Office of Health Insurance Programs
Division of Coverage and Enrollment, Bureau of Information Management and Program Compliance

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Q1: Are there any organizations that are excluded from providing the services required under this RFP?

A1: In accordance with federal guidance, which can be found at <http://www.cms.hhs.gov/PERM>, a vendor that directly participates in a state's eligibility and/or enrollment processes may not participate in the eligibility review component of PERM. Therefore, if an organization directly participates in New York State's Medicaid or CHIP eligibility determinations and/or enrollment activities it is not eligible to be awarded a contract.

Q2: Who is the incumbent vendor?

Q3: What is the incumbent contract's duration and value?

A2 & A3: The New York State Department of Health does not currently have any vendors providing the services contained in the RFP. The durations and values from the prior arrangement are not being provided because the scope of services and pricing elements required under this RFP are different from those in the prior arrangement.

Q4: Will the Department consider Medicare program integrity experience as a substitute for the Medicaid or CHIP experience requirement?

A4: No.

Q5: RFP Section C.1, Paragraph 2 "Corporate Background, Experience and Capacity" (Page 5) – How does the State prefer the hardcopies of case files to be transferred to and from the contractor's physical plant? Would the State prefer or permit the contractor to use the State's interoffice mail service and pick up/drop off files at the Albany central office? Alternatively, would the State prefer or permit a third party (e.g., USPS, FedEx) to be used to transfer files directly between the district offices and the contractor's physical plant?

A5: The individual Medicaid local Departments of Social Services (LDSS) offices and Child Health Plus (CHPlus) health plans are responsible for transferring photocopies of hardcopy case file documents directly to the Contractor in a manner that is compliant with the federal Health Insurance Portability and Accountability Act (HIPAA) and the State's confidentiality requirements. Since photocopies will be provided for review, the Department does not foresee a need for the Contractor to mail any hardcopy case file documents directly to the LDSS offices or CHPlus health plans. The State's interoffice mail service will not be utilized.

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Q6: Section A, page 1, discusses the administration of the CHPlus program, specifically 19 health plans that accept and authorize applications for CHPlus clients. Are these applications and authorizations done on an electronic system, paper calculations, or a combination of both? If an electronic system is used, is the same electronic system used by all 19 health plans, or is each plan responsible for its own system of eligibility determination?

A6: Each CHPlus health plan is responsible for designing, maintaining and updating its own eligibility determination system to ensure that applications are processed in accordance with program requirements. Health plans are not required to use an electronic eligibility determination system. The Department does not anticipate that the Contractor will need access to any electronic systems at individual health plans because each health plan is required to maintain the information and documentation (imaged or hardcopy) used in the eligibility determination process. Therefore, as indicated on page 10 of the RFP, when conducting a CHIP PERM review the Contractor will request the case file documentation and information from the appropriate health plan. If all of the information needed to verify eligibility for PERM purposes can not be obtained from the health plan, the Contractor shall reach out to other allowable sources to obtain the missing information. Furthermore, the Contractor will have access to the Department's Knowledge, Information and Data System (KIDS), which is a centralized enrollment data system.

Q7: Will the contractor be granted access to the DCF eligibility system(s) and New York's Medicaid Management Information System (MMIS) for the purpose of the PERM and MEQC reviews? If so, can the access be remote access, where the contractor may access the system from their own offices via a secure VPN access?

A7: Remote access to a variety of State's electronic data and enrollment systems will be granted for the purposes of conducting PERM and MEQC review activities in the Contractor's office, which will be located within twelve miles of the Capitol building in Albany, New York.

Q8: Section C, 7.3, page 12, requires three full time staff to assist the Department with reviews of LDSS offices, and other program integrity functions. Will these staff members be involved with these other reviews 40 hours per week, each week of the year? If not, could these staff members be utilized in the PERM or MEQC pilot reviews?

A8: It is expected that the three full-time staff will work solely on the Other Program Integrity Services described in Section 7.3 (i.e., the bidder should not plan for these individuals to be available to work on PERM or MEQC activities).

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Q9: What will the normal work schedule be for the three full-time staff dedicated to other program integrity services?

Q10: Will they be expected to work overtime?

A9 & A10: In general, the staff assigned to Other Program Integrity Services will be expected to work Monday through Friday until 4:30 p.m. Their start time will be based on the contractor's normal work week (e.g., 37.5 or 40 hours per week), and the length of the individual's lunch break (e.g., 30, 45 or 60 minutes). The Department considers a normal work week to be at least 37.5 hours per week. As with most professional positions, some overtime may be required as normal course of business, and it will likely occur when staff is in travel status. On average, the Department's salaried reviewers work about 5 hours of overtime each month.

Q11: Attachment 15 lists 3 FTE review staff to support Other Program Integrity Services. Will any of these review staff require clinical credentials (i.e., Registered Nurse) or are all Reviewers for this function be technical/financial?

A11: The three full-time staff required by Section 7.3 do not require clinical credentials.

Q12: The *Summary of Staffing Needs* indicates requirements that include professional certification as a Certified Internal Auditor, Certified Public Accountant, or Certified Information Systems Auditor, but elsewhere the RFP includes requirements for medical record review. Are all medical record reviews technical or financial in nature, or should the bidder anticipate that clinical staff would be needed?

A12: Attachment 1, *Summary of Staffing Needs*, does not require a professional certification for any staff position. Rather, professional certification (e.g., Certified Internal Auditor, Certified Public Accountant, or Certified Information Systems Auditor) is listed under "Preferred Additional Experience". Please note, the successful bidder will not be conducting any medical record reviews under this RFP. As indicated on page 3 of the RFP, such reviews are conducted by federal contractors. The successful bidder's involvement with the two non-eligibility review components under PERM is limited to assisting the Department in providing information and/or data requested by the federal contractors, if requested by the Department (page 11 of the RFP).

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Q13: Please clarify Attachments 3-8. Are all component cells to be completed for each year? (Some cells seem to be lighter which might indicate they are not to be completed.)

A13: All cells for all components are to be completed for each year.

Q14: Attachment 12 does not include a line item for Systems/software development. Should bidders assume that all software and hardware should be included in "Other?"

A14: Hardware should be included in the "Equipment" line. Software may be included in "Other" line. The accompanying administrative fee narrative should explain in detail where the bidder's costs are reflected on the Attachment and how those costs were estimated for each contract year.

Q15: Attachments 13-15 (review fees pricing): On each of these forms, the schedule provides one line for the price, labeled "project staff (i.e. salaries & fringe)." Please confirm that review fees are limited to payroll costs alone and all other costs are included in the administrative fee.

A15: As indicated in the first paragraph on page 22 of the RFP, as well as Attachments 13 through 15, the review fee is limited to the salary and fringe costs for the project staff. With the exception of transition costs, all other costs should be reflected in the administrative fee.

Q16: Section 7.2, page 12 states that the Contractor will perform a number of tasks, including: "Working with internal information technology staff to develop programming criteria that is consistent with the universe selection criteria and the approved sampling plan." Please confirm our understanding that "internal" refers to the Contractor's information technology.

A16: The word "internal" refers to the Department of Health's information technology staff.

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Q17: Section C.7.3 (page 13) indicates that some travel will be required of the staff assigned to Other Program Integrity Services. Will travel be required of the staff assigned to PERM and/or MEQC activities?

A17: Generally, travel will not be required for staff dedicated to PERM and/or MEQC because a majority, if not all, of the electronic images or photocopies of the case file documents and information will be received and reviewed at the Contractor's office, which will be located within twelve miles of the Capitol building in Albany, New York. However, the required level of access to one of the systems needed for Medicaid PERM activities is only available in New York City at this time. In the event that remote access to this system from the Contractor's office can not be granted, or until such time that it is, occasional single-day trips to New York City may be required. It is expected, but not guaranteed, that no more than an aggregate of 20 single-day trips from Albany, NY to New York City will be needed over the entire contract. Two staff members traveling on the same day is equal to two single-day trips.

Q18: Section C, 7.2, pages 11 and 12 discusses the MEQC pilot project requirements for this RFP. Does the Department envision a full scale review with independent verification as part of the MEQC Pilots, a desk review of selected eligibility categories or geographic locations, or a combination of both?

A18: As stated in Section B.2 (page 4) and Section C.7.2 (pages 11-12), the Department operates a waiver MEQC program. Each review plan, including the verification process, is specifically and expressly developed based on the target area that is selected. For example, the 2009 MEQC review project will evaluate the accuracy of Medicaid eligibility determinations and redeterminations made for Single and Childless Couples (S/CC) that were found ineligible for Temporary Assistance. (Note: S/CC individuals are at least 21 but less than 65 years of age, have no children under the age of 21 in the household, and are not blind, disabled or pregnant.) The approved review plan stipulates that the verification process will be based on the information and documentation contained in the case file or accessible databases (i.e., independent verification, or contacting outside/third party sources, is not required). A similar verification process will be followed for the 2010 MEQC review project. Target areas and audit plans for the 2011 through 2015 MEQC review projects have not been selected, submitted or approved; therefore, the verification processes for those review projects are not known at this time.

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Q19: RFP Section B.2 “Medicaid Eligibility Quality Control” (Page 4) – Can the State provide bidders with a copy of the most recent MEQC review plan?

A19: The 2009 and 2010 MEQC review plans approved by the Centers for Medicare and Medicaid Services (CMS) will be shared with the successful bidder. Typically, the review plan is 3-4 pages in length and includes the following sections:

- Project Title;
- Purpose;
- Scope (including sample size and review process); and
- Additional Information.

Q20: Can the Department provide a sample report from the MEQC component, since it uses an approach unique to New York?

A20: As needed, the Department will share prior year reports with the successful bidder. In prior years, the reports generally include the following sections:

- Executive Summary;
- Background;
- Purpose & Scope;
- Results/Findings;
- Conclusions;
- Corrective Actions; and
- Appendices/Attachments.

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Q21: In Section 7.2 on page 12, the RFP indicates that between 600 and 900 individual cases will be reviewed on an annual basis. We have several questions about review volume:

- a. Please clarify what is meant by a case.**
- b. Should bidders assume that in years 1 and 2 between 1,200 and 1,800 individual cases will be reviewed?**
- c. Can the Department please provide an indication of level of effort by an individual or team to complete a case to assist us with estimating FTEs?**

A21a: A case typically refers to information and/or data for an individual applicant or recipient (as opposed to an entire family or household).

A21b: According to the approved 2009 and 2010 MEQC review plans, a total of 1,200 individual cases (600 per review project) will need to be reviewed in contract year 1. The 2011 and 2012 review plans have not been developed yet. As indicated in Section C.7.3 (top of page 12) of the RFP, each review project typically includes an examination of 600 - 900 individual cases to ensure that the State's maintenance of effort is continued.

A21c: No. The Department is unable to provide this information because each technical proposal will be assessed in part based on the proposed staffing plan that is submitted. Bidders should estimate the number of FTEs needed for this component based on their past experience, and their understanding and knowledge of the review requirements outlined in the RFP or clarified herein.