

New York State Department of Health
New York State EPIC, American Indian Health and New York Prescription Saver Card
Request for Proposals RFP #1111091053
Questions and Answers
March 2, 2012

Question Number	RFP Section Reference	Question	Answer
1.	<i>RFP Section C, page II-4</i>	In the RFP, no exception is stated for Controlled Drugs which now have a 90-day supply limit, except for hypnotics. Please confirm.	Days supply/quantity limits for all controlled substance drugs are dictated by NYS Law. <ul style="list-style-type: none"> • Per claim maximum for DEA II, III, IV and V drugs is a 90-day supply (condition codes apply). • Per claim maximum for androgenic agents is a 180-day supply (condition codes apply). • Per claim maximum for hypnotics is a 30-day supply.
2.	<i>RFP Sections III.B.5, page III-14 III.D.6, page III-49</i>	Does the State have specific requirements for professional experience or certifications that the Project Manager located in the Capital District office must possess?	There are no specific requirements for this position, however the Project Manager must have the education and experience necessary to effectively manage the development and implementation of system projects as well as be responsible for the Program's system analysis, data access and reporting needs.
3.	<i>RFP Section C.1.1.e.ii, page III-17</i>	Currently, the Contractor provides a fully accessible, consistent with the New York Office for Technology and Department of Health policies and procedures, website for the New York Prescription Saver program, with an online enrollment application. Will the NYS EPIC Online Application website be maintained on NYS DOH server or the Contractor's servers?	The link to the application form will be accessed from the Department of Health website but the on-line application process will reside on the Contractor's server.
4.	<i>RFP Section 5.a, page III-59 and Attachment 1.b, page A-5</i>	Currently, the Contractor provides a fully accessible, consistent with the New York Office for Technology and Department of Health policies and procedures, website for the New York Prescription Saver program, with an online enrollment application. RFP Attachment 1b shows the New	No, the New York Prescription Saver Program legislation is being changed to remove the sunset date of June 15, 2012 and there are no current plans to terminate the program.

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		York Prescription Saver program with a legislation sunset date of June 15, 2012. Will the online application, and/or website need to be removed effective June 15, 2012?	
5.	<i>RFP Section C.1.1.e.iii, page III-17</i>	Should the implementation cost for the web enrollment be included in the Contractors implementation cost?	No, the EPIC online enrollment specified in C1.1.e.iii may be designed and implemented during the course of the contract according to the project management duties and responsibilities contained within the RFP. The hours and costs for this initiative, should it be performed, would be subject to the “System Change Hours” specified in the RFP. Any maintenance of this system, should it be built, would be subject to the “Systems Staff” costs specified in the RFP.
6.	<i>RFP Section C.1.1.e.iii, page III-17</i>	Will the State have final approval and require that the web site be accessible to the visually impaired?	Yes, the State will have final approval on the web on-line application system. NYS Office of Technology requires that all DOH web based applications be accessible to the visually impaired.
7.	<i>RFP Section 6, page III-23</i>	Currently, the Contractor provides individual 800 numbers for the EPIC Participant line, EPIC Provider Line, NYPS member line and NYPS Provider number. Is it the expectation of the State that this will continue?	Yes, the State anticipates the phone numbers for each program will remain the same.
8.	<i>RFP Section 6, C.6.1.a, page III-24</i>	Please define what is considered a State approved holiday. Is it the States intention to require the Contractor to provide coverage on certain company holidays?	The State will review the list of annual contractor holidays that the contractor provides its employees. The contractor must, at a minimum, provide member telephone coverage for any weekday that State staff are working including elective State holidays. Bidders should note the 24/7, seven day a week provider telephone requirement and claim processing requirements contained within the RFP.
9.	<i>RFP Section 6, C.6.1.m, page III-25</i>	Is it the intention that the State will approve all out going correspondence?	No. Responses to correspondence received by the program including but not limited to: member or caregiver letters, record requests from members or legal entities, and emails coming from the website will not have to be approved by the State. However, to ensure the quality of responsive correspondence, State staff may periodically request to review responses to various types of correspondence. The contractor must provide any training that is necessary to

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			maintain quality in written materials.
10.	<i>RFP Section 9, page III-28</i>	The requirements call for the Contractor to be able to process manually submitted claims on an exception basis. Will the State define its interpretation of what is an exception basis?	Exception basis includes but is not limited to: 1) Member submission of receipt for drugs purchased in the Part D coverage gap, approved by the Part D plan, filled by an EPIC participating pharmacy but never billed to EPIC as secondary payer. 2) Drug claim in the Part D coverage gap, approved by the Part D drug plan from participating Part D mail order pharmacy that was not billed to EPIC as secondary payer. 3) Member submission of a pre 2012 claim filled by an EPIC participating pharmacy that was never billed to EPIC. 4) Technical difficulties with D.O. processing (anticipate a very small number for this exception).
11.	<i>RFP Section 9, C.9.1.c, page III-29</i>	Are all pharmacies and Medicare Part D plans currently submitting claims in the approved D.O format which allows for the claims to be processed and paid in accordance with the NYS 1/1/2012 Legislative changes?	Beginning January 1, 2012, it is required that pharmacies bill the EPIC program using Version D.O. pharmacy software. Currently there are a small number of pharmacies not submitting claims in the D.O format. It is required that the contractor work with any participating pharmacies or Medicare Part D plans not submitting claims properly.
12.	<i>RFP Section 9, C.9.1.g, page III-29</i>	The RFP states that “Pharmacy providers must be offered the flexibility to override any denials by resubmitting the claim with Drug Utilization Review (DUR) intervention and outcome codes.” Is EPIC discontinuing its procedures for Revatio and Adcirca?	No, EPIC will retain its procedure before dispensing claims for Revatio or Adcirca to EPIC members while in the Part D coverage gap. NYS Law requires that EPIC members filling a claim for Revatio or Adcirca be checked with the New York State Division of Criminal Justice to see if they are listed as a registered sex offender. If they are a registered sex offender, EPIC will not cover the medication as a secondary payer.
13.	<i>RFP Section 9, C.9.1.y, page III-31</i>	Does the State have any current targeted Fraud and Abuse programs for specific populations of the provider and participant communities where additional and more refined targeting is desired?	No, the State will work with the contractor to identify criteria for targeting fraud and abuse on the part of members and providers.
14.	<i>RFP Section 12, C.12.1.b, page III-34</i>	What number or percent of the pharmacy network does the State expect the vendor to conduct on-site audits at?	The State anticipates less than one percent of the participating pharmacies would require an annual on site audit. The State will work with the contractor to determine the most economical method of auditing a

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			pharmacy, provided the contractor assures the State that proper auditing procedures will be performed.
15.	<i>RFP Section 13, page III-35</i>	Since all bank charges are the liability of the Contractor will the State consider banks that are headquartered outside of NYS but have branches within NYS?	Yes, the Contractor can propose a bank that has its headquarters or main office outside of New York State but has branches in New York State. Any such bank however, must also be licensed to conduct business in New York State.
16.	<i>RFP Section 16, C.16.1.c, page III-39</i>	Is it the State's intention to interview and approve key staff?	The State may request to interview and approve key staff during the term of the contract.
17.	<i>RFP Section 17, page III-40</i>	Does the annual outreach budget include the key designated Outreach Manager's salary or just the Outreach Representatives?	The outreach budget includes the Outreach manager and any outreach representatives salaries.
18.	<i>RFP Section 17, page III-40</i>	Will the State reimburse the Contractor on a monthly basis for the annual outreach budget or does the Contractor provide documentation of costs to the State end of the year showing evidence that the \$200,000 was utilized?	The \$200,000 annual outreach budget amount must be built into the contractor's EPIC annual final paid claim administrative fee (which will be reimbursed monthly via the paid claim count). The contractor must provide documentation of its costs showing evidence that the annual amount of \$200,000 was utilized for outreach duties and responsibilities.
19.	<i>RFP Section 17, page III-40</i>	With regard to the annual outreach budget, do we provide company statement or actual receipts to document travel expense costs and salary fringe benefit costs? Sometimes receipts are not given for some travel expenses. Does the annual outreach budget include yearly merit increases in salaries for each year?	EPIC understands receipts are not available for every component of outreach cost. EPIC staff will work with the contractor on the detail of the documentation to be submitted to the EPIC program that shows that the annual amount of \$200,000 was utilized for outreach duties and responsibilities. It is the discretion of the contractor to include merit increases, however, the annual budget is currently limited to \$200,000 for each year, subject to revision based on agreement with the State.
20.	<i>RFP Section 17, page III-40</i>	Does the annual outreach budget include cell phone costs and repairs, laptops, translation fees for outreach materials or can this be submitted as a pass through for the reimbursable charges?	All of the costs for laptops, cell phones cost and repairs should be included in the annual outreach budget and included in Pricing Schedules A1 and A4 in Attachment 11 as part of the EPIC final paid claim administrative fee. Translation fees for outreach materials will be reimbursed separately as a pass through by EPIC pursuant to RFP Section I.1.G. ii. which is now amended to include these

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			translation fees for outreach materials.
21.	<i>RFP Section 17, page III-40</i>	Does the State require that the Contractor submit any costs over \$350.00 for attendance at events and table exhibits for State approval? Are any costs for attendance at events and table exhibits completely up to the Contractor's discretion?	No, the contractor does not have to submit any costs over \$350 for attendance at events and table exhibits for state approval. The Contractor will have the discretion to choose outreach events; subject to the annual budget amount of \$200,000 and the State's reservation of right to make suggestions or decline participation of specific events.
22.	<i>RFP Section 17.1.b, page III-41</i>	Will the outreach plans have quantitative measurements for each outreach strategy?	The contractor is not required to have quantitative measurements for each outreach strategy, however the State is looking for the contractor to implement evidence based strategies to promote enrollment in EPIC and be able to evaluate the outcome and effectiveness of these initiatives.
23.	<i>RFP Section 17.1.b, i, and l, page III-41</i>	Contractual due dates were eliminated for the monthly report, outreach plans and outreach evaluation of the plans. Will the dates be define be at a later time – will these reports have timeframes with contractual standards?	The State will work with the contractor to identify a timeframe for the submittal of any outreach reports. Each report will have a due date not an individual contract standard.
24.	<i>RFP Section 17.1.h, page III-41</i>	Will the State require that all high profile outreach events (i.e., from elected officials) be submitted for approval prior to attending?	Yes. Prior approval from the NYS DOH will be needed for any event with an elected official.
25.	<i>RFP Section 17.1.l, page III-41</i>	Currently, the Contractor provides an outreach calendar to show the State upcoming outreach events by representative. Is it the expectation of the State that this will continue?	No, however, based on the monthly report and analysis of outreach by EPIC staff, the State reserves the right to make suggestions regarding future outreach activities.
26.	<i>RFP Section 17.1.l, page III-41</i>	Currently, the Contractor provides timesheets identifying how much time was spent on outreach activities and the name of the event. Will the Contractor no longer have to keep track of time records and submit them to the State? Does the Contractor have to compare them to payroll records?	The Contractor will no longer be required to keep track of time records and submit them to the State, nor will it have to compare them to payroll records. The Contractor will need to work with State staff on the detail of the documentation to be submitted to the EPIC program that shows that the annual amount of \$200,000 was utilized for outreach duties and responsibilities.
27.	<i>RFP Section D.2, page III-</i>	The RFP states that the Contractor is required to obtain all written approval from the State for all Contract-	A change is defined as elimination of an existing process or program and replacing with a new process or program.

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	47	initiated changes, modifications, and enhancements to the Program. Can the State please provide its definition of “Change, Modification, and Enhancement” and address in its response whether any modification to a systems underlying operating systems, platforms, or physical or virtual deployment environment, where the program itself is unchanged, is deemed either a change a modification or an enhancement?	A modification would be retention of an existing program or process and adding or deleting specific action(s). An enhancement would be retention of a program and process and adding totally new functionality that will further systematize an existing process. The difference between a modification and an enhancement is a modification is on a small scale and an enhancement is a major project. If the systems, platform or any other program is unchanged and new functionality is being added, it would be an enhancement. If the program is unchanged and a specific action(s) are being added or deleted, it would be a modification.
28.	<i>RFP Section D.4, page III-48</i>	Can the State provide a listing of other factors, aside from the estimated time to define, design, develop, test, and implement exceeding the 200 hours of effort that will be considered when determining whether a system changed will be classified as a new major system process or a major new system function?	The State will also take into account the complexity and urgency of the modifications as well as the possible need to develop new system platforms.
29.	<i>RFP Section D.7.1.a.i, page III-51</i>	Please advise as to how much advance notice the Contractor would expect to have to make any modifications, adjustments, or testing provisions to ensure that any NYSDOH hardware or software upgrades are managed without disruption to NYSDOH connectivity to the Contractor's hosted systems and solutions?	The State will make every effort possible to inform the contractor of any NYSDOH hardware or software upgrades as soon as they are aware of them. EPIC will expect the Contractor to work closely with the NYSDOH technical team to ensure these upgrades occur without any or minimal disruption to NYSDOH connectivity to the Contractor’s hosted systems.
30.	<i>RFP Section D.7.1.d.ii.2, page III-52</i>	Please provide a listing of SAS products for which the Contractor must have installed and configured and hosted for State access to accommodate Direct Data Access requirements.	The only SAS product required will be Base SAS version 9.1 or higher.
31.	<i>RFP Section D.8.1.b.vi, page III-53</i>	Execution of queries searching six months of data can vary in complexity depending on the number of functional areas joined. Does the State have any specific expectations for response time if the historical data being searched covers two subject areas (e.g., Drug and Claim) or three areas (e.g., Drug, Pharmacy,	The State expects the Contractor to have both the technical and programming resources available to execute queries to pull data for multiple months or year from multiple data sources with minimal time constraints.

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		and Claim), etc.?	
32.	<i>RFP Section III.E.4.1.iv, page III-57</i>	Is it the State's intention to overlay the manufacturer's product data with the CMS product data information? Which data would take precedence?	No, if the manufacturer's product data resides on the contractor's file, the CMS product data will not overlay the manufacturer product data on the file. CMS data will only be used if the product data is missing from the manufacturer.
33.	<i>RFP Section III.E.4.1.vii, page III-57</i>	Is it the State's requirement to have the daily transmissions of the submitted product (NDC-11) termination date to the Contractor's claims processing system (point of sale) from the CMS Product File and/or Manufacturer Product File?	Yes, if there is a termination date from the CMS product file and/or the manufacturer product file, the contractor is required to transmit this information daily to the contractor's claims processing system for processing and denying claims.
34.	<i>RFP Section 5.a, page III-59</i>	Currently, the Contractor provides a fully accessible, consistent with the New York Office for Technology and Department of Health policies and procedures, website for the New York *Prescription Saver program, with drug pricing information provided by the New York State. Will the State still provide the pricing information for these drugs to the Contractor to be published on the website?	The State will work with the Contractor to develop a process to update the pricing information for the New York Prescription Saver program. The Contractor will assume the responsibility for updating the pricing information on the website quarterly.
35.	<i>RFP Section IV.C.6, page IV-87</i>	The RFP states that respondents should not use illustrations. Does this mean that respondents are prohibited from including illustrative representations of our systems and capabilities? Are diagrams and process flows allowed? Please clarify.	The Department discourages the submission of lengthy proposals. It does not mean that respondents are prohibited from including illustrative representations of their systems and capabilities. The bidder can include diagrams and process flow charts to clarify their proposal. Respondents should not include extraneous pictures, brochures, etc. that do not provide any additional clarification or explanation of proposed processes.
36.	<i>RFP Section V.I.1.D, page 105</i>	Are there any restrictions to how the Contractor supplies the system change hours to NYSDOH in order to meet the needs of EPIC, AIH, and NYPS programs?	There are no restrictions to how the contractor supplies the system changes hours to NYSDOH other than the staff utilized to perform these tasks must be within the continental United States of America.
37.	<i>Attachment 10, A.2.1.a, page A-25</i>	The contractor performance standards identify ranges for damages. For instance Standard A.2.1.a states "for each .01 to .25% below the standard of 99.5%.... a credit against the programs administrative fee in the amount of \$10,000." Is it the State's intent if the results are below the contract standard of .02% then the credit against the programs	If the contractor performance were to fall below 99.5% down to 99.41%, for the month (the 99.25% to 99.49% increment) then the contractor would credit the State \$10,000. For example: 1) if the contractor's performance was to fall to 99.10% for the month then the contractor would credit the State \$20,000 (the 99.00% to 99.24%

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		administrative fee will be \$20,000?	increment) requiring the contractor credit the State an additional , \$10,000. 2) If the contractor’s performance was to fall to 98.90% (the 98.75% to 98.99% increment), the contractor would be required to credit the State an additional \$10,000 for a total of \$30,000.
38.	<i>Attachment 10, Sections A.2.3.c and A.2.3.d, page A-31 - A-32</i>	The RFP indicates that the Contractor must guarantee that 90% of the incoming calls to the EPIC and NYPS member telephone lines be answered by a customer service representative within 120 seconds, calculated on a monthly basis. Does this include calls answered by an IVR or is this restricted to calls answered by a representative only?	The referenced contract standards are restricted to calls answered by a representative.
39.	<i>Attachment 10, Sections A.2.3.e and A.2.3.f, pages A-32 - A-33</i>	The RFP indicates that that the percentage of incoming calls to the Contractor’s EPIC an NYPS member and provider telephone lines in which the caller disconnects prior to the call being answered by a customer service representative will not exceed three percent calculated on a monthly basis. Does this include calls answered by an IVR or is this restricted to calls answered by a representative only?	The referenced contract standard is restricted to calls answered by a representative.
40.	<i>RFP Attachment 11, Pricing Schedule A.1</i>	The Department of Health estimates the 2012 paid claims to be 1.1 million. Does this represent claims paid or does it include claims returned as paid but the payment is 100% copay? Since according to the NY EPIC Provider Agreement pharmacies are required to submit all claims does the department also have an estimate on this volume?	This includes paid claims in the coverage gap with an amount paid to the pharmacy that is greater than zero. Because of the 2012 change to a coverage gap only program, the Department does not have a reliable estimate of the number of claims that will be submitted to the EPIC program. See RFP Attachment 3, Table 1 for historical claim volume.
41.	<i>RFP Attachment 11, Pricing Schedule A.1</i>	RFP Attachment 11 Pricing Schedules for NYEPIC, AIH, and NYPS are listed as “Draft.” When will the final version be released?	The Pricing Schedules posted under Attachment 11 are the final pricing schedules which should be completed by interested bidders.
42.	<i>RFP Attachment 11, Pricing Schedule A.8,</i>	Given the reduced volume of claims, is it possible to move this from an annual discount to biennial?	No

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	<i>Additional Staffing Pricing. Page A-41</i>		
43.	<i>RFP Attachment 19, page 2</i>	For Contractor Staff Qualifications and Credentials, is it the State's intention to have references for each company listed? Or is it the State's intention to have the respondent list the names and addresses of company where the applicant previously worked.	No, it is not the State's intention to have references for each company listed. The bidder should list the names and addresses of the companies where the applicant previously worked.
44.	<i>RFP Attachment 20, page A-67</i>	Attachment 20 was not provided electronically at the time the RFP was issued. Can the State please provide RFP Attachment 20 in an electronic format to facilitate completion?	Attachment 20 is provided as a Word document with these questions and answers as Questions and Answers, Attachment 1.
45.	<i>RFP Section C 6., page III- 24</i>	Please provide more recent phone call statistics from January 2012 forward.	The recent phone call statistics from January 2012 through February 29 th is provided as a PDF document and included in this document as Questions and Answers, Attachment 2.
46.	<i>RFP Section C-9. C.9.1 w. page III-31</i>	Please provide the number of enrollees that are currently locked to specific pharmacies identified by the State.	Currently, there are no EPIC enrollees that are locked into specific pharmacies. Effective January 1, 2012 EPIC is a coverage gap only program, consequently EPIC no longer requires the contractor to lock members into specific pharmacies.
47.	<i>RFP Attachment 11, Pricing Schedule A.1</i>	Are coverage gap claims with a zero payment amount to the pharmacy counted as a paid claim for purposes of the final paid claim administrative fee?	Approved claims with a pharmacy payment of zero whether they are in the coverage gap or not, are not counted as a paid claim when calculating the amount to be reimbursed to the contractor for the claim administrative fee.
48.	<i>RFP Attachment 11, Pricing Schedule A.1</i>	Since there will be fewer coverage gap claims paid in the early months of a year will the State consider paying the administrative claim fee for a minimum number of claims each month then reconciling at the end of the year.	No, the state will reimburse the contractor according to the terms of the RFP. Any bidder should consider the timing of payments when they compute their final paid claim administrative fees.