

Medicaid Administrative Services (MAS) and Fiscal Agent Services Project

RFP #1211260917

Questions and Answers 1 through 16

Tuesday, July 16, 2013

ID	Section	Document Reference or Requirement #	Page #	Question	Resolution
1	Attachment E	FIN001	-	<p>In MAS requirement FIN001 of the RFP, the Department is requesting that the vendor “support maximum cost avoidance and reimbursement for Medicaid members” through a variety of functions, including:</p> <ul style="list-style-type: none"> ▶ Preparation of retroactive reports (reverse crossover) to Medicare Part B or the provider, as appropriate, for all claims paid by Medicaid that should have been paid by Medicare part B. ▶ Accumulating claims up to a specified threshold amount and seeking TPL recovery when the threshold is reached ▶ Seeking recovery of claims previously paid when TPL coverage is identified by billing the third parties using the X12N 837 Coordination of Benefits transaction or a proprietary format ▶ Automatically re-billing insurance companies if a response (payment or denial) is not received within NYS guidelines ▶ Supporting recovery from an estate or designated trust ▶ Screening verified TPL resources against paid claims history retroactively for three years to identify recoverable funds <p>These are services already procured and operational through OMIG Contract 200801. Can the Department clarify how these two programs will operate for the State simultaneously?</p>	<p>The Department requires that the MAS solution support the indicated functionality to meet CMS' MMIS certification requirements. The Department does not require that the TPL and recovery activities indicated be performed by staff of the Fiscal Agent/MAS contractor, but does require that the selected solution support these functions. Currently, OMIG maintains a separate contract for the performance of the work indicated, and the MAS RFP is not proposing to take over that work or replace existing OMIG Contract 200801. Attachment E will be amended to make this clearer.</p>

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2	Attachment E	FIN008	-	In MAS requirement FIN008 of the RFP, the Department is requesting “efficient and timely identification of Third Party Liability (TPL) information from all sources and [the initiation of] follow up for purpose of maintaining most up to date TPL information” which are services already procured and operational through OMIG Contract C200801. Can the Department clarify how these two programs will operate for the State simultaneously?	The Department requires that the MAS solution support the indicated functionality to meet CMS' MMIS certification requirements. The Department does not require that the TPL and recovery activities indicated be performed by staff of the Fiscal Agent/MAS contractor, but does require that the selected solution support these functions. Currently, OMIG maintains a separate contract for the performance of the work indicated, and the MAS RFP is not proposing to take over that work or replace existing OMIG Contract 200801. Attachment E will be amended to make this clearer.
3	Attachment E	FIN009	-	In MAS requirement FIN009 of the RFP, the Department is requesting the “[Generation of] automated TPL billing information to providers for members with third party coverage” which is a service already procured and operational through OMIG Contract C200801. Can the Department clarify how these two programs will operate for the State simultaneously?	The Department requires that the MAS solution support the indicated functionality to meet CMS' MMIS certification requirements. The Department does not require that the TPL and recovery activities indicated be performed by staff of the Fiscal Agent/MAS contractor, but does require that the selected solution support these functions. Currently, OMIG maintains a separate contract for the performance of the work indicated, and the MAS RFP is not proposing to take over that work or replace existing OMIG Contract 200801. Attachment E will be amended to make this clearer.
4	Attachment E	FIN010	-	In MAS requirement FIN010 of the RFP, the Department is requesting the “[Identification of] claims with trauma diagnosis codes, accident codes and indicators and routes verification against TPL coverage” which is a service already procured and operational through OMIG Contract C200801. Can the Department clarify how these two programs will operate for the State simultaneously?	The Department requires that the MAS solution support the indicated functionality to meet CMS' MMIS certification requirements. The Department does not require that the TPL and recovery activities indicated be performed by staff of the Fiscal Agent/MAS contractor, but does require that the selected solution support these functions. Currently, OMIG maintains a separate contract for the performance of the work indicated, and the MAS RFP is not proposing to take over that work or replace existing OMIG Contract 200801. Attachment E will be amended to make this clearer.

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5	Attachment E	MEM013	-	In MAS requirement MEM013 of the RFP, the Department is requesting that the awarded vendor "Maintain and provide the capability to review through the web-based application casualty-related information (e.g., motor vehicle accident and workers' compensation information)." This is a service already procured and operational through OMIG Contract C200801. Can the Department clarify how these two programs will operate for the State simultaneously?	The Department requires that the MAS solution support the indicated functionality to meet CMS' MMIS certification requirements. The Department does not require that the TPL and recovery activities indicated be performed by staff of the Fiscal Agent/MAS contractor, but does require that the selected solution support these functions. Currently, OMIG maintains a separate contract for the performance of the work indicated, and the MAS RFP is not proposing to take over that work or replace existing OMIG Contract 200801. Attachment E will be amended to make this clearer.
6	Attachment E	MEM078	-	In MAS requirement MEM078 of the RFP, the Department is requesting the "[Generation of] automated casualty-related letters and/or electronic notifications to members, attorneys, motor vehicle department, etc. according to State-specified criteria." This is a service already procured and operational through OMIG Contract C200801. Can the Department clarify how these two programs will operate for the State simultaneously?	The Department requires that the MAS solution support the indicated functionality to meet CMS' MMIS certification requirements. The Department does not require that the TPL and recovery activities indicated be performed by staff of the Fiscal Agent/MAS contractor, but does require that the selected solution support these functions. Currently, OMIG maintains a separate contract for the performance of the work indicated, and the MAS RFP is not proposing to take over that work or replace existing OMIG Contract 200801. Attachment E will be amended to make this clearer.
7	Vendor Conference			Similarly, the procurement library is heavily weighted with eMedNY materials - Question: will the Department be supplementing the procurement library with additional statistics and descriptive materials relative to the non-eMedNY program elements such as EPIC, PTAR, PBM, CHIP and others - as well as for the State functions to be taken over by the contractor such as the grievance and appeals process	Additional statistics and descriptive materials for program elements covered by the MAS RFP but that are not currently served by eMedNY are under consideration. Specific requests for additional materials to include in the Procurement Library will be considered.

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8	Vendor Conference			In reviewing the 132 pages of requirements in attachment E, we noted that most of them are not assigned to specific program elements. For example the member call center current is part of the pharmacy programs but that is not stated in the RFPI. Question: Will the department be issuing more specifics regarding which requirements pertain to which program elements?	The Department does not plan to issue more specifics regarding which requirements pertain to which program elements. The contractor will be required to satisfy all requirements set forth in the RFP across program elements where none are specified. If the scope of a requirement is unclear, this may be brought to our attention during the question period. Regarding the member call center, the proposed solution must be capable of managing calls for all program services included in this RFP and the resulting contract. Note that PRV091 requires call center support for member pharmacy inquiries
9	Vendor Conference			A 12-month DDI period almost certainly will require a transfer of an exiting system. Is this the intent of the 12 month DDI period?	No, this is not the intent. The Department seeks to procure a system that can be implemented, and enhanced, relatively quickly and efficiently in order to better deploy scarce resources and funds. How vendors propose to achieve this objective is their decision. The Department recognizes that certain approaches are oriented to reduce the need for complex and lengthy development work. The Department expects the vendors to focus on configuring existing infrastructure and platforms for claims processing, customer service, care management and other services where possible, rather than building new systems from the ground up, as is the traditional MMIS approach. To support leveraging of commercial off-the-shelf (COTS) technology, the Department has increased its flexibility on technical details (compared to the previous MMIS procurement) in order to focus on achieving the outcomes provided in the RFP
10	Vendor Conference			Can we get a copy of the slides?	Yes, the slides are now available on the web page for this procurement: http://www.health.ny.gov/funding/rfp/1211260917/index.htm

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11	Vendor Conference			When do you anticipate the RFP for drug rebate to be released?	The Department cannot provide a release date for the drug rebate RFP at this time. When the RFP is issued, it will be posted on the DOH funding announcement web page: http://www.health.ny.gov/funding/ .
12	Vendor Conference			Will the state entertain any changes or be open to flexibility on issues like: implementation time frame, warranties, indemnities, liabilities, etc.?	Any suggested changes should be submitted to the Department for review and consideration no later than the deadline for the receipt of written questions. Should the Department elect to incorporate any suggested changes it will post these as an amendment to the procurement. The Department does not anticipate entertaining any such requests for changes subsequent to the closing date for receipt of written questions. Vendors are reminded of the requirements set forth in RFP Section IV.D.2 Transmittal Letter. In particular, the transmittal letter to be submitted by a vendor should include the following: 5. A statement that the vendor accepts the contract terms and conditions contained in this RFP including attachments 9. A statement that the vendor (i) does not qualify its proposal, or include any exceptions from the RFP and (ii) acknowledges that should any alternate proposals or extraneous terms be submitted with the proposal, such alternate proposals and extraneous terms will not be evaluated by the Department.
13	Vendor Conference			Does the restriction on Medicaid Managed Care plans apply to affiliate corporations of the Medicaid plan?	Medicaid MCOs that currently provide or intend to provide Medicaid insurance services in NYS and affiliated corporations can be included as a subcontractor as long as the managed care components of the scope of work are performed by the prime contractor in order to avoid competitive advantage risks, conflicts of interest, and the appearance of such conflicts. Parent companies and subsidiaries of an MCO that provides risk-based capitated Medicaid services in NYS are not eligible to function as the prime vendor to this RFP.

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14	Vendor Conference			<p>These are services already procured and operational through OMIG Contract 200801. Can the Department clarify how these two programs will operate for the State simultaneously?</p> <p>In MAS requirement FIN001 of the RFP, the Department is requesting that the vendor “support maximum cost avoidance and reimbursement for Medicaid members” through a variety of functions, including:</p> <ul style="list-style-type: none"> ▶ Preparation of retroactive reports (reverse crossover) to Medicare Part B or the provider, as appropriate, for all claims paid by Medicaid that should have been paid by Medicare part B. ▶ Accumulating claims up to a specified threshold amount and seeking TPL recovery when the threshold is reached ▶ Seeking recovery of claims previously paid when TPL coverage is identified by billing the third parties using the X12N 837 Coordination of Benefits transaction or a proprietary format ▶ Automatically re-billing insurance companies if a response (payment or denial) is not received within NYS guidelines ▶ Supporting recovery from an estate or designated trust ▶ Screening verified TPL resources against paid claims history retroactively for three years to identify recoverable funds 	Duplicate. See the Department’s response to question #1 above.
15	Vendor Conference			Will the Department consider providing rolling responses to questions with the ability for vendors to submit a second round of questions?	At this time a formal second round of written questions and answers is not anticipated, however NYS will provide responses to written questions on a rolling basis. It has been the goal of the Department to provide a set of initial responses to allow submission of follow up questions before the written question submission deadline of July 18th at 4:00 PM ET.

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16	Procurement Library and Attachment H	Procurement Library Document #07, Attachment H Schedule D		Will there be a full takeover of all claims processing and support when the cutover for new claims occurs with Release II? The Procurement Library Volume projections and Attachment H Schedule D suggest that older claims will continue to be processed by the legacy system for a period of time. If there is a claims run-out period, what responsibilities will the MAS contractor have for pre-cutover claims during this period?	The Department expects a claims run-out interval to occur after the Phase II go-live and assumption of full operations. The duration is expected to be approximately nine months, during which the MAS contractor will accept and process new claims, but will not be responsible for processing, re-processing or servicing pre-cutover claims already in the eMedNY system. Routing of calls to the appropriate call center and importing of claims payment data to support utilization thresholds will be required by the MAS contractor during this period. Volume projections in the Procurement Library and Attachment H, Schedule D reflect the assumption of a claims run-out period.