

**A Request for Proposal for
New York State Medicaid Transportation Management – New York City
RFP #16683**

QUESTIONS AND ANSWERS

July 19, 2016

Question #	Corresponding RFP Section	Bidder's Question	Answer
1.	Authorizations	Non-medical transportation: Is the current vendor providing non-medical transportation for the groups identified in this RFP?	The current Transportation Manager manages transportation for groups identified in the RFP, except for those in the Community First Choice Option (CFCO) program, which has not been fully implemented.
2.	Authorizations	Will each of these trips be pre-authorized by DOH or another agency or how will the vendor determine if the non-medical trip is covered under this program?	If you are referring to "prior authorization", trips are authorized by the Transportation Manager for non-emergency medical appointments and to obtain services that are covered within in an enrollee's current plan of care. The Transportation Manager must approve trips according to Medicaid transportation policy.
3.	Authorizations	Please quantify the number of prior approvals for additional passengers required to accompany members for the last two years.	The Department does not maintain this information.
4.	Authorizations	Please provide the current provider's prior authorization error rate for the last 12 months. Is current provider held to same performance measures?	The Department does not maintain this information. The current contract performance measures are not applicable to this RFP.
5.	Authorizations	Please provide number of prior authorizations issued for last 12 months of operation.	There were approximately 4,740,869 prior authorizations issued from July 1 2015 through June 30 2016.
6.	Authorizations	Are any long-term trip authorizations made – for example are a series to trips authorized for a number or weeks or months for such services as Dialysis?	Yes. Standing orders are allowed in certain situations when an enrollee needs continued care at the same facility. Standing orders must be justified by the medical practitioner and approved by the Transportation Manager. There are time limits to the standing orders depending upon the enrollee's need.
7.	Authorizations Section 3.1: General Performance Standards/	In order to comply with the Department's request that the transportation manager incorporate user-friendly electronic technologies in their processes, please confirm that medical practitioners are	No. Due to the potential for fraud and abuse, medical practitioner's electronic signatures are not permitted in lieu of hard copies when providing medical justification documentation.

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	Expectations	permitted to submit electronic signatures in lieu of hard copies when providing medical justification.	
8.	Call Volume/ Call Center	Please provide the total number of calls and average handle time for calls received, by month for the last two years.	Refer to the table below for the total number of calls and average talk time for June 2014 through May 2016.

NYC Call Statistics June 2014 - May 2016							
Month-Yr.	Total Calls Received	Calls Abandoned	Calls Answered	Abandon %	Average Speed to Answer after the Automated Voice Response	Max Time	Average Talk Time
Jun-14	110,230	971	109,259	0.9%	00:15	16:12	06:53
Jul-14	112,482	711	111,772	0.6%	00:19	12:13	06:56
Aug-14	149,549	1,356	148,193	0.9%	00:21	18:02	07:13
Sep-14	134,388	1,897	132,449	1.4%	00:30	08:19	07:10
Oct-14	126,974	1,265	125,709	1.0%	00:20	06:12	07:26
Nov-14	105,933	1,134	104,799	1.1%	00:22	08:06	07:10
Dec-14	116,893	1,554	114,534	1.3%	00:26	21:00	06:50
Jan-15	120,005	2,276	117,239	1.9%	00:27	03:19	07:56
Feb-15	117,784	5,089	112,695	4.3%	01:01	14:11	07:05
Mar-15	126,662	2,354	124,308	1.9%	00:42	10:10	07:01
Apr-15	116,691	2,159	114,532	1.9%	00:39	30:36	07:14
May-15	109,861	2,251	107,610	2.0%	00:39	23:33	07:26
Jun-15	121,621	2,411	119,210	2.0%	00:34	28:47	07:33
Jul-15	121,995	1,857	120,138	1.5%	00:31	26:54	07:25
Aug-15	113,880	950	112,930	0.8%	00:22	22:58	07:32
Sep-15	118,126	1,094	117,032	0.9%	00:20	20:07	07:14

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9.	Call Volume/ Call Center	Will the Department please provide 12 months of call center data to include current performance and call volumes?	Please see the response to Question #8.																																																																
10.	Call Volume/ Call Center	Can details be provided for current call center volume, including a breakout of call type by weekday (day and hour) and weekend (day and hour)? Details including: a) Number of Reservation calls b) Number of Cancellation calls c) Number 'Where's My Ride' calls d) Average call length for reservation calls e) Average call length for cancellation calls f) Average call length for 'Where's My Ride' calls	The Department does not maintain all of this information. For call volume statistics that the Department maintains, please see response to Question #8.																																																																
11.	Call Volume/ Call Center	Please provide the current call abandonment rate.	For the month of May 2016, the abandonment rate was 0.8%.																																																																
12.	Call Volume/ Call Center	Please provide current call volume by hour for one sample week.	The Department does not maintain this information.																																																																

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13.	Call Volume/ Call Center	Please provide the current call center staffing numbers used by the current Transportation Manager.	The Department does not maintain this information.
14.	Call Volume/ Call Center	Please provide the number of non-English calls experienced by the current Transportation Manager in the last calendar year.	The Department does not maintain this information.
15.	Call Volume/ Call Center	Will DOH accept a system that notifies callers of the approximate wait time for next available call center operator without notifying them how long they have been on hold?	No, the RFP specifies that a message will inform the caller every 30 seconds how long the caller has been on hold. Please refer to page 10. Section 3.2.1, item b, number 2.
16.	Call Volume/ Call Center	Must the vendor offer 24/7 customer service availability to facilities for standard transportation requests or are the after-hours coverage for discharges and urgent trips?	The contractor must establish a system to receive requests from medical practitioners 24 hours a day, 7 days a week regardless of whether a trip is routine, urgent or a discharge.
17.	Call Volume/ Call Center	Please provide the last 12 month of call center activity, including: a) Number of incoming calls; b) Average and maximum talk time; c) Number of available call center operators by the time of day and d) The day of the week, in half-hour increments.	For Questions 17 a) and b), please see the response to Question #8 for a table reflecting the total number of calls and average and maximum talk time for June 2014 through May 2016. For 17 c) and d), the Department does not track these data.
18.	Call Volume/ Call Center	Our intent is to hire as many of the existing call center employees as possible. In order for us to ensure that they make at least as much, or more than they do now, please provide a seniority list for the current employees for these call center services, and indicate position, full time or part time, length of service, and current rate of pay.	The Department does not maintain this information.

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19.	Call Volume/ Call Center Section 6.2.D.1: Call Center Activities and Section 6.2.D.2: Processing Requests for Transportation	<p>In keeping with the RFP requirements to not be repetitive, please clarify how these 2 questions are different and what DOH is expecting in the evaluation of these requirements.</p> <ul style="list-style-type: none"> • 6.2.D.1.d - how your call center staff will establish eligibility and determine if the enrollee has managed care coverage that prohibits fee for service non-emergency medical transportation, and • 6.2.D.2.a - how an individual's Medicaid eligibility will be identified 	<p>6.2.D.1.d, item 2, asks the bidder to describe how staff will establish eligibility and determine if the enrollee has managed care coverage that prohibits fee for service non-emergency medical transportation.</p> <p>6.2.D.2.a, item 1, asks the bidder to describe how an individual's Medicaid eligibility will be identified.</p>
20.	Contract	<p>At various times, state, federal, and local governments change laws, rules and regulations which require a company to increase the wages or benefits for the employees that will be employed under this contract.</p> <p>If such an event occurs during the term of the agreement, how will the agency respond for a request for increased compensation?</p> <p>For example, the recent Affordable Care Act legislation significantly affected the level and cost of medical coverage for employees. Since these events cannot be anticipated and the costs are so significant, we need to understand the risk associated with such laws, rules or regulations.</p>	<p>Bidders should be aware of the minimum wage compensation and assumed risk should be reflected in the contractor's bid.</p> <p>Also, refer to Section 2.3, "Term of Agreement" in paragraph three (3) in this RFP for details pertaining to Price Adjustment.</p>
21.	Contract	What is the current price(s) of services outlined by the current contract?	The Department is unable to share this information. A FOIL request for the underlying contract or procurement record

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			<p>containing the requested information, may be made by contacting the Department's Records Access Officer at foil@health.ny.gov.</p> <p>Information for submitting FOIL requests can be found at: https://www.health.ny.gov/regulations/foil/howto.htm</p> <p>For the full value of the current contract please view: http://www.openbooknewyork.com/</p>
22.	Contract Attachment E: DOH Agreement	<p>Termination for Convenience; DOH Agreement, Section III Term of Contract, E; This agreement may be canceled at any time by the Department of Health giving to the contractor not less than thirty (30) days written notice that on or after a date therein specified this agreement shall be deemed terminated and canceled of draft contract,</p> <p>Will this same right to termination for convenience be extended to Contractor?</p>	<p>No. The termination for convenience clause is a standard New York State clause for use by the Department and will not be extended to the contractor.</p>
23.	Contract Attachment E: DOH Agreement	<p>Termination for Convenience; DOH Agreement, Appendix D (General Specifications), Section C; States that DOH reserves right to stop work at any time that DOH deems contractor unable or incapable of performing and DOH can have the work completed as it wishes and pass on any costs to contractor.</p> <p>Would this section apply since the termination is addressed in the draft contract or could this</p>	<p>The question is unclear. Appendix D (General Specifications) is a part of the draft contract.</p>

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		section could be made to read the same as in the draft contract so that there is notice and time to cure?	
24.	Contract Attachment E: DOH Agreement	Termination for Cause; DOH Agreement, Section III Term of Contract, C; Termination shall be effective ten (10) business days from receipt of such notice, established by the receipt returned to the Department. Does this ten business day period include time to cure? Would Section T in Appendix D also include this ten business day notice?	No, it does not. No, it does not.
25.	Contract Section 3.2.14: Reduction of Payment Regarding Transportation Manager Performance of Call Center and Prior Approval Requirements	Liquidated Damages/Penalties; Document Location: p. 17, Section 3.2.14. Would DOH be willing to accept language that states that LDs will only be applied after notice of service deficiency and time to respond and billing for any assessed LDs shall be done within 60 days of notice	No. This section will not be modified.
26.	Contract	Liquidated Damages/Penalties; Document Location: p. 17, Section 3.2.14	No. This section will not be modified.

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	Section 3.2.14: Reduction of Payment Regarding Transportation Manager Performance of Call Center and Prior Approval Requirements	Would DOH consider waiving LDs for a certain time period after a service level change?	
27.	Contract Section 5.4: Payment	Service Level Adjustments; The level of contractor reimbursement is subject to change monthly during the contract period due to fluctuating number of Medicaid enrollees who are eligible to receive fee-for service transportation (p. 22). Would DOH be amenable to language in the contract to allow for a renegotiation of rates if service levels vary by more than 5%?	No. This section will not be modified.
28.	Contract	Are the following; to be included in the response, and if so, where should they located? Sample contract (Attachment E) Lobbying form – (Attachment S)	Attachment E does not need to be completed, it is an example of a NYS contract. Regarding Lobbying form (Attachment S), see Amendment #1, P.
29.	Contract Section 2.3: Term of Agreement	Does the October 23rd start date for a new vendor represent the start of implementation, with live services beginning on January 23rd? Or, is a new vendor expected to have services implemented for an October 23rd start date?	Please refer to section 2.3 Term of Agreement, page 6. The existing vendor will continue to provide non-emergency Medicaid transportation services for eligible enrollees through January 22, 2017.

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		Will the Department allow for implementation expense?	If a new vendor is selected, the new vendor will use the three month transition period beginning on October 23, 2016 to build their infrastructure in order to provide services effective January 23, 2017. Refer to section 3.3 Project Implementation on page 18 for additional details. There will not be a separate implementation expense payment.
30.	Contract Section 2.3: Term of Agreement	Please confirm the initial three months of implementation, prior go live, would be compensated using same PMPM rate quoted in Attachment C.	See response above to question #29.
31.	Eligibility	To streamline the NEMT request process, can/will DOH transfer eligibility files to the transportation manager? If so, in what format will the transfer be provided and how often?	An eligibility file is uploaded from the Medicaid Data Warehouse by DOH on a monthly basis and exported via File Transport Protocol (FTP) to a website maintained by the contractor.
32.	Eligibility Section 3.1 General Performance Standards/Expectations	CFCO members – Are these members included in the current membership base? Will the broker be responsible for both medical and non-medical trips for these members?	Yes, CFCO members who are currently eligible to receive transportation to eligible medical services are included in the current membership count. In the future, these members will be eligible to receive transportation to eligible non-medical services, provided there is an active Plan of Care that indicates the non-medical transportation that is allowable.
33.	Eligibility	Are there any groups of members for which little or no transportation services are currently rendered that the Agency is thinking of pulling out of the membership currently used for payment to the broker?	The Department will continue to provide transportation to all those who are eligible to receive it and who request such services.

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34	Eligibility	Please provide statistics on member eligibility per month for the past two years of operation, as well as future eligibility assumptions.	<p>Please refer to the table below for the number of NYC enrollees eligible for transportation from June 2014 through May 2016.</p> <table border="1" data-bbox="1297 557 1873 1084"> <thead> <tr> <th colspan="4" data-bbox="1297 557 1873 621">NYC enrollees eligible for transportation arranged by Transportation Manager</th> </tr> </thead> <tbody> <tr> <td data-bbox="1297 621 1430 662">Jun-14</td> <td data-bbox="1430 621 1598 662">3,033,054</td> <td data-bbox="1598 621 1730 662">Jun-15</td> <td data-bbox="1730 621 1873 662">3,352,637</td> </tr> <tr> <td data-bbox="1297 662 1430 703">Jul-14</td> <td data-bbox="1430 662 1598 703">3,032,149</td> <td data-bbox="1598 662 1730 703">Jul-15</td> <td data-bbox="1730 662 1873 703">3,366,415</td> </tr> <tr> <td data-bbox="1297 703 1430 743">Aug-14</td> <td data-bbox="1430 703 1598 743">3,040,968</td> <td data-bbox="1598 703 1730 743">Aug-15</td> <td data-bbox="1730 703 1873 743">3,449,144</td> </tr> <tr> <td data-bbox="1297 743 1430 784">Sep-14</td> <td data-bbox="1430 743 1598 784">3,107,489</td> <td data-bbox="1598 743 1730 784">Sep-15</td> <td data-bbox="1730 743 1873 784">3,443,483</td> </tr> <tr> <td data-bbox="1297 784 1430 824">Oct-14</td> <td data-bbox="1430 784 1598 824">3,146,727</td> <td data-bbox="1598 784 1730 824">Oct-15</td> <td data-bbox="1730 784 1873 824">3,449,672</td> </tr> <tr> <td data-bbox="1297 824 1430 865">Nov-14</td> <td data-bbox="1430 824 1598 865">3,163,754</td> <td data-bbox="1598 824 1730 865">Nov-15</td> <td data-bbox="1730 824 1873 865">3,479,759</td> </tr> <tr> <td data-bbox="1297 865 1430 906">Dec-14</td> <td data-bbox="1430 865 1598 906">3,211,765</td> <td data-bbox="1598 865 1730 906">Dec-15</td> <td data-bbox="1730 865 1873 906">3,513,779</td> </tr> <tr> <td data-bbox="1297 906 1430 946">Jan-15</td> <td data-bbox="1430 906 1598 946">3,253,594</td> <td data-bbox="1598 906 1730 946">Jan-16</td> <td data-bbox="1730 906 1873 946">3,459,467</td> </tr> <tr> <td data-bbox="1297 946 1430 987">Feb-15</td> <td data-bbox="1430 946 1598 987">3,271,239</td> <td data-bbox="1598 946 1730 987">Feb-16</td> <td data-bbox="1730 946 1873 987">3,494,856</td> </tr> <tr> <td data-bbox="1297 987 1430 1027">Mar-15</td> <td data-bbox="1430 987 1598 1027">3,334,917</td> <td data-bbox="1598 987 1730 1027">Mar-16</td> <td data-bbox="1730 987 1873 1027">3,456,739</td> </tr> <tr> <td data-bbox="1297 1027 1430 1068">Apr-15</td> <td data-bbox="1430 1027 1598 1068">3,343,904</td> <td data-bbox="1598 1027 1730 1068">Apr-16</td> <td data-bbox="1730 1027 1873 1068">3,482,049</td> </tr> <tr> <td data-bbox="1297 1068 1430 1109">May-15</td> <td data-bbox="1430 1068 1598 1109">3,335,865</td> <td data-bbox="1598 1068 1730 1109">May-16</td> <td data-bbox="1730 1068 1873 1109">3,484,521</td> </tr> </tbody> </table> <p data-bbox="1157 1101 2016 1166">The Department cannot assume future eligibility figures at this time.</p>	NYC enrollees eligible for transportation arranged by Transportation Manager				Jun-14	3,033,054	Jun-15	3,352,637	Jul-14	3,032,149	Jul-15	3,366,415	Aug-14	3,040,968	Aug-15	3,449,144	Sep-14	3,107,489	Sep-15	3,443,483	Oct-14	3,146,727	Oct-15	3,449,672	Nov-14	3,163,754	Nov-15	3,479,759	Dec-14	3,211,765	Dec-15	3,513,779	Jan-15	3,253,594	Jan-16	3,459,467	Feb-15	3,271,239	Feb-16	3,494,856	Mar-15	3,334,917	Mar-16	3,456,739	Apr-15	3,343,904	Apr-16	3,482,049	May-15	3,335,865	May-16	3,484,521
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35.	Enrollment/ Enrollees	Please provide a one week sample daily trip log, in Excel format, including pick and drop points?	The Department does not maintain this information. For trip related statistics for June 2015 – May 2016, please refer to the response to Question #83.																																																				
36.	Evaluation	Will all of the evaluators assigned to review bidder responses have experience and knowledge of New York City's unique NEMT program, policies, and limitations?	The specific evaluation criteria will not be provided.																																																				

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37.	Medical Justification	Please provide the current average number of medical justifications processed by month.	Please refer to the table below for number of medical justifications processed from June 2015 through June 2016.																																																																																								
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38.	M/WBE	Is the current vendor meeting the M/WBE requirements? If so, what services are they subcontracting to meet the goals?	<p>The Department is unable to share this information. A FOIL request for the underlying contract or procurement record containing the requested information, may be made by contacting the Department's Records Access Officer at foil@health.ny.gov.</p> <p>Information for submitting FOIL requests can be found at: https://www.health.ny.gov/regulations/foil/howto.htm</p>																																																																																								

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39.	M/WBE Section 3.5 Subcontracting	If only subcontracting transportation services, will a vendor satisfy the good faith efforts for MWBE participation if an insufficient number of MWBE Transportation Providers are available to meet the goal?	See Amendment #1, C. The Transportation Manager cannot use a subcontractor to perform Medicaid Transportation Management. The Transportation Manager may use subcontractors for other services. Unlike at-risk brokerage models, the Transportation Manager cannot subcontract with transportation providers. Transportation providers are enrolled with the Department and are not the responsibility of the Transportation Manager.
40.	Post Trip Verification	With millions of trips performed annually, any modification of this requirement will result in significant increased costs. As such, please confirm that pricing negotiations will result from any percentage increase requirement in post-trip verifications made by the Department.	The Department does not view this as added work, but rather work that may be required as part of the contract. Therefore, the bidder must take this into account when submitting their bid proposal. There will be no price negotiations.
41.	Proposal Submission Sections 6.2: Technical Proposal, Section D. Performance Criteria 6.2.D.6 through 6.2.D.12	Will DOH consider giving bidders an overall page limitation for the Technical Response, lifting the limitations on individual sections? This will allow bidders to allocate sufficient pages to pertinent information without wasted space as well as deter excessive responses. 6.2 Technical Proposal, D. Performance Criteria 6.2.D.6 through 6.2.D.12;	See Amendment #1; items E through N.

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		Is it possible to utilize any unused pages in a particular section in order to add to another section?	
42.	Proposal Submission	Several of the required forms appear to be designed in a fillable format and have text taking up the space bidders are to respond in. Please provide the RFP in Word version in order for bidders to utilize the fillable form fields (Attachments A, D, F #1 & #2, and G).	Yes. Fillable forms for this RFP can be found by following the link below: https://www.health.ny.gov/funding/rfp/16683/index.htm
43.	Proposal Submission	The RFP asks for three references from "prior customers." Will DOH accept references from current clients as long as the services have been provided within the last three years?	See Amendment #1, D.
44.	Section 7.0 Proposal Submission <u>Section 6.2.D.9</u> Processing of Payments to Enrollees for Incurred Transportation Expenses <u>Section 6.2.D.14</u> Organizational Support and	This section requires bidders to include a "sample monthly report." This report will take up a significant portion of the 5-page limit and will take away from the other sections to be included in this limit. Will DOH consider removing this requirement or allow bidders to provide the sample report outside of the page limitation? Section 7.1.7, States Appendices should not be submitted. Responses should be contained within page limitations as referenced in item #7. If any appendices are submitted, they will not be evaluated.	See Amendment #1, items E through N. No. Attachments are not allowed.

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	Experience (10 page limit)	<p><u>Section 6.2.D.9</u> States that our response is to include a sample monthly report including the type of information that will be reported and,</p> <p><u>Section 6.2.D.14.d</u> Response will include an organizational chart outlining the structure that will be used for this project and depicting the relationship with management staff and,</p> <p><u>Section 6.2.D.14.e</u> Describe the background and experience of the officers, executives and core management staff that would be assigned to manage the contract, and the location of the office from which each staff will work. Describe your anticipated staffing pattern relative to this transportation management RFP and related job descriptions for each position responsible for both administration/management and direct service delivery. Specify the staffing level, job descriptions and qualifications for each member of the core New York City Transportation management team.</p> <p>Considering the page limitations, will DOH either allow for specific attachments or increase the page limits so that bidders may accommodate these requests?</p>	
45.	Section 6.2.D.15 Conflict of	Conflict of Interest (6.2.D.15) and Transition Plan (6.2.D.16)	The Conflict of Interest and Transition Plan have no page limits.

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	Interest, Section 6.2.D.16 Transition Plan Section 7.0 Proposal Submission	<p>There is no page limit associated with this section and it is a requirement to submit. Is there a specific page count bidders should limit their response to?</p> <p>Section 7.0.1 States: All hard copy proposal materials should be printed on 8.5" x 11" white paper (two-sided)</p> <p>In reference to the page limits, are the limits to be based on the page numbering or the actual number of individual sheets of paper?</p>	See Amendment #1; items E through N.
46.	Proposal Submission Section 6.2.D.14 Organizational Support and Experience	<p>The RFP requires bidders to provide "job descriptions for each position responsible for both administration/management and direct service delivery." Providing job descriptions for every proposed position would undoubtedly exceed the 10-page limit for this response section.</p> <p>Will DOH remove this requirement or allow bidders to provide job descriptions outside of the page limitations?</p>	<p>See Amendment #1; items E through N.</p> <p>No. Attachments are not allowed.</p>
47.	Section 3.0: Scope of Work Section 7.0 Proposal Submission	<p>Do bidders need to include DOH's RFP questions in the Technical Response?</p> <p>If so, can these be included at a font smaller than 11 points?</p>	The question is unclear, therefore, no answer can be provided.

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48.	Section 7.0 Proposal Submission	Can figures and/or charts be less than 11-point font?	Yes, tables and charts may use a smaller font provided they are legible.
49.	Proposal Submission Attachment B Proposal Document Checklist	Is this checklist to be returned with the proposal response package? If yes, please indicate the submittal location/order.	The checklist form should be submitted as part of the Administrative Proposal.
50.	Proposal Submission Section 3.2.1 Operate a Primary Call Center for Medicaid Eligible Individuals or Their Representatives Section 3.2.2 Process Requests for Medical Transportation	<p>3.2.1.i and 3.2.2.m Both sections state: The transportation manager will have the ability to adequately respond to an acute event such as a major weather event, industrial or transit accident, act of terror or other acute situation that disrupts telephone and/or transportation services in New York City.</p> <p>These questions are the same. Considering the RFP instruction to not be repetitive, would DOH please consider removing one of these questions?</p>	<p>No. The Department will not consider removing one of these questions as they ask different questions.</p> <p>Section 3.2.1.i, "Operate a Primary Call Center for Medicaid Eligible Individuals or Their Representatives" asks bidders to describe how the transportation manager will establish a system for managing transportation for Medicaid enrollees during a natural disaster or any other acute emergency event.</p> <p>Section 3.2.2.m, "Process Requests for Medical Transportation", asks bidders to describe how they will have the ability to adequately respond to an acute event such as a major weather event, industrial or transit accident, act of terror or other acute situation.</p>

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51.	<p>Proposal Submission Section 6.2.D.1 Call Center Activities</p> <p>Section 6.2.D.14 Organizational Support and Experience</p>	<p>In keeping with the RFP requirements to not be repetitive, please clarify how these 2 questions are different and what DOH is expecting in the evaluation of these requirements.</p> <p>6.2.D.1.d 3) where your call center will be located. If a backup call center is proposed, describe how such an arrangement benefits the Medicaid program.</p> <p>6.2.D.14.c. - The bidder must indicate that the backup call center (if using a Backup Call Center) (see section 3.2.1.h) will be located and operated in the Continental USA. The bidder should identify the actual or anticipated location of the backup call center, if known (see Sections 3.1.1, Location of Core Management Team & Primary Call Center and Backup Call Center and 8.1 Pass/Fail Assessment (Mandatory Requirements)).</p>	<p>While these two (2) questions are similar, there are differences.</p> <p>6.2.D.1.d, item 3, under “Call Center Activities” asks the bidder to describe where the call center will be located and how such an arrangement benefits the Medicaid program.</p> <p>6.2.D.14, item c, under “Organizational Support and Experience” is a mandatory requirement if using a backup call center. The bidder must indicate that the backup call center (if using a Backup Call Center) (see section 3.2.1.h) will be located and operated in the Continental USA.</p>
52.	<p>Proposal Submission Section 6.2.D.14 Organizational Support and Experience</p>	<p>Section 6.2.D.14.a requires: Describe how the bidder meets the required minimum of three (3) years' experience in managing the delivery of non-emergency Medicaid transportation services in a metropolitan area.</p> <p>New York City's medical transportation program is one of the largest and most complex programs in the country. In order to ensure responses are received from qualified bidders only, would DOH</p>	<p>The definition of a “metropolitan area” is as follows. A metropolitan area, sometimes referred to as a metro area or just metro, is a region consisting of a densely populated urban core and its less-populated surrounding territories, sharing industry, infrastructure, and housing.</p> <p>The definition does not include population density of specific geographic parameters.</p>

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		<p>consider defining the minimum criteria necessary to satisfy the Department's definition of "metropolitan area"?</p> <p>When defining, please include specific geographic parameters, minimum lives covered (>1,000,000 Lives), and volume of trips (>2,000,000 trips).</p>	
53.	Public/Mass Transportation	The post trip verification of 50% of MetroCard trips is much higher than industry average – would DOH consider lowering that requirement as long as the vendor can certify established processes to reduce fraud, waste, and abuse?	No. Post trip verification will be needed only for public transportation passes distributed by the Transportation Manager.
54.	Public/Mass Transportation Section 3.2.8 Quality Standards	<p>Section 3.2.8 states: The transportation manager will perform and document a post-trip verification review on 50% of all trips for which a MetroCard was provided, and a minimum of ten percent (10%) of other trips and include problem areas such as after-hours transportation, and verify that the trips are for legitimate medical services. During the term of the contract, the Department of Health reserves the right to change the percentage of required trip verifications, up to 100%, with notification to the transportation manager.</p> <p>Due to the sheer volume of Mass Transit utilizers, the requirement that 50% of all trips must undergo post-trip verification will require a significant amount of additional resources to manage.</p>	Please refer to the response provided to Question 53 and Question 83.

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		Please describe the Department's reasoning / justification for such increased costs?	
55.	Public/Mass Transportation	Regarding clients, using Public transportation: Can you provide more parameters than what is listed?	The question is unclear and, therefore, no response can be provided.
56.	Public/Mass Transportation	Will the Broker be responsible for distributing tokens, passes or vouchers for passengers? Is there a preferred paper method, or can the process be digital?	Many facilities participate in the PTAR system and the Transportation Manager currently does not manage these trips. For trips to facilities that do not participate in the PTAR system, the Transportation Manager would be responsible for distributing public transit passes. The preferred method of distribution is at the discretion of the Public Transit Authority agency.
57.	Public/Mass Transportation Section 3.2.2 Process Requests for Medical Transportation	This section states: g. The transportation manager will enroll in the "Public Transportation Automated Reimbursement" (PTAR) system. Enrolling in the PTAR system will allow the transportation manager to be reimbursed for the cost of purchasing MetroCards that will be distributed by the Transportation manager to the eligible enrollees who use mass transit to get to and from medical appointments, including methadone maintenance treatment programs (MMTP). This section leads bidders to believe that advanced funding will be required for the purchase and distribution of MetroCards through the PTAR system.	Please refer to Amendment #1, B. Please refer to the response provided in Question #83 for mass transit trips per month.

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		If the above assumption is accurate, please provide an estimate of the dollar amount needed per month in order to advance funding for MetroCards through the PTAR system.	
58.	Public/Mass Transportation Section 3.2.8 Quality Standards	Is the 50% post-trip verification requirement reliant on the awarded vendor distributing MetroCard's to all enrollees eligible? OR Will the 50% verification be done by the Transportation Manager while DOH continues to administer the program directly?	Please refer to the response provided to Question #56.
59.	Public/Mass Transportation	If DOH plans to continue administration of the mass transit program directly, will the Transportation Manager be provided with a daily/monthly list of MetroCard recipients for which verification could be made?	If the Department continues to manage the PTAR system, the transportation manager will not be expected to provide verification of those trips handled through the PTAR system.
60.	Public/Mass Transportation Section 6.2.D.2 Processing Requests for Transportation	Section 6.2.D.2.j states: Describe the process of how MetroCards will be ordered and disseminated to eligible enrollees who use mass transit to travel to and from medical appointments, including methadone maintenance treatment programs (MMTP). The Mass Transit program, including MetroCard distribution, is currently managed by DOH directly. 60 a) Does the Department intend for the awarded vendor to be responsible for the administration of the Mass Transit program, including the	60 a) No, the Department does not intend the Transportation Manager to be responsible for the administration of the Mass Transit program. The Department manages PTAR.

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		<p>distribution of MetroCards under the new contract?</p> <p>60 b) If no, would DOH please consider removing all requirements around MetroCards?</p> <p>60 c) If so, please describe how responsibility for the program will be transferred including the timeline for implementation and approach. Additionally, please describe how the Department plans to notify enrollees of this change.</p>	<p>Yes, the Transportation Manager will be responsible for the distribution of the MetroCards for enrollees traveling to non - PTAR-participating facilities.</p> <p>60 b) Not applicable.</p> <p>60 c) Not applicable.</p>
61.	Public/Mass Transportation	<p>Please also include an explanation of how transit passes are currently distributed.</p> <p>Please describe in detail how the Mass Transit program and associated PTAR system are currently administered.</p>	<p>Enrollees who live more than a half-mile from the covered Medicaid service and are able to use the bus or subway can receive a roundtrip MetroCard fare.</p> <p>Transportation Managers distribute MetroCards to enrollees who are attending Medicaid covered services at non-participating PTAR facilities. PTAR participating facilities distribute MetroCards directly to enrollees.</p>
62.	Public/Mass Transportation	Please provide the total number of trips assigned to Mass Transit per month in 2015 and Q1 2016.	In calendar year 2015, there were approximately 90 trips via mass transit arranged. In the first quarter of 2016, approximately 22 trips for mass transit were arranged. These are approximate, not actual numbers. The actual numbers may be higher or lower.

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63.	Public/Mass Transportation	Please provide the total number of mass transit trips by treatment type for calendar year 2015 and Q1 2016.	<p>The Department does not have the total number of mass transit trips by treatment type. However, the Department has the total number of mass transit trips for calendar year 2015 and the first quarter of 2016. See table below.</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: center;">Month/Yr.</th> <th style="text-align: center;">Mass Transit</th> <th style="text-align: center;">Month/Yr.</th> <th style="text-align: center;">Mass Transit</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Jan-15</td> <td style="text-align: center;">4</td> <td style="text-align: center;">Sep-15</td> <td style="text-align: center;">12</td> </tr> <tr> <td style="text-align: center;">Feb-15</td> <td style="text-align: center;">5</td> <td style="text-align: center;">Oct-15</td> <td style="text-align: center;">18</td> </tr> <tr> <td style="text-align: center;">Mar-15</td> <td style="text-align: center;">6</td> <td style="text-align: center;">Nov-15</td> <td style="text-align: center;">0</td> </tr> <tr> <td style="text-align: center;">Apr-15</td> <td style="text-align: center;">10</td> <td style="text-align: center;">Dec-15</td> <td style="text-align: center;">10</td> </tr> <tr> <td style="text-align: center;">May-15</td> <td style="text-align: center;">10</td> <td style="text-align: center;">Jan-16</td> <td style="text-align: center;">8</td> </tr> <tr> <td style="text-align: center;">Jun-15</td> <td style="text-align: center;">10</td> <td style="text-align: center;">Feb-16</td> <td style="text-align: center;">8</td> </tr> <tr> <td style="text-align: center;">Jul-15</td> <td style="text-align: center;">0</td> <td style="text-align: center;">Mar-16</td> <td style="text-align: center;">6</td> </tr> <tr> <td style="text-align: center;">Aug-15</td> <td style="text-align: center;">12</td> <td></td> <td></td> </tr> </tbody> </table>	Month/Yr.	Mass Transit	Month/Yr.	Mass Transit	Jan-15	4	Sep-15	12	Feb-15	5	Oct-15	18	Mar-15	6	Nov-15	0	Apr-15	10	Dec-15	10	May-15	10	Jan-16	8	Jun-15	10	Feb-16	8	Jul-15	0	Mar-16	6	Aug-15	12		
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64.	Public/Mass Transportation	Please provide the total costs associated with MetroCard mailings in 2015 and Q1 2016.	The Department does not have this information.																																				
65.	Reimbursement Section 3.1 General Performance Standards/ Expectations	<p>Page 9, section 3.1 RFP states, "Medicaid-enrolled transportation providers will receive reimbursement from the Department of Health, not from the transportation manager."</p> <p>Will the State consider a proposal that responsibly presents an alternative transportation provider compensation methodology, that fulfills the State's goal for quality standards, "that address such</p>	No. The Department will not consider any alternative method of compensation to transportation providers. Note that the Transportation Manager is not responsible for paying enrolled transportation providers.																																				

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		issues as: failure to meet appointments; timeliness of pickup and delivery; refusals to take longer, less-profitable trips; total travel time; driver behavior; vehicle cleanliness and perceived safety; Medicaid enrollee comfort; Medicaid enrollee complaints and medical practitioner complaints."?	
66.	Reimbursement	Please clarify provided statistics on total transportation spend in NYC for CY2015 (\$548.3 million); would this represent payments to transportation providers managed only through the current Medicaid Transportation Manager or this is overall spend related to all non-emergency and emergency transportation?	<p>\$548.3 million spent in calendar year 2015 was the total amount spent for providing Medicaid fee-for-service transportation in New York State.</p> <p>None of this cost was related to contractor reimbursement.</p>
67.	Reimbursement Section 2.3 Term of Agreement	Please confirm the initial three months of implementation, prior go live, would be compensated using same PMPM rate quoted in Attachment C.	The contractor will not be paid until they are actually conducting transportation management services, which will begin on January 23, 2017.
68.	Reimbursement Section 3.1 General Performance Standards/Expe ctations	Please clarify statement: "For example, trips that are scheduled within similar time frames and with similar pick-up and drop-off locations can be grouped to maximize efficiency. In instances where such efficiencies are found and approved by the Department of Health, the transportation manager is required to work directly with the medical practitioners (as appropriate) and transportation provider/s in scheduling and providing transportation in order to maximize	<p>Medicaid enrolled Transportation Providers who wish to propose a group ride opportunity are required to submit a per enrollee cost to the Transportation Manager. Proposals along with other criteria, i.e., number of complaints, fleet size, etc., are evaluated by the Department who then determines if any of the proposals will offer a cost savings benefit.</p> <p>The Transportation Manager will not negotiate a reduction in fee paid by the Department.</p>

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		<p>these efficiencies while adhering to the Department of Health's quality standards".</p> <p>Would the Medicaid Transportation Manager be required to negotiate reduction in fee paid by DOH or is this strictly related to creating efficiencies for transportation providers?</p>	
69.	Reimbursement	<p>What is the current mileage reimbursement rate for non-emergency medical transportation for New York Department of Health?</p>	<p>Mileage reimbursement will be paid according to the current IRS mileage reimbursement rate, currently 54 cents per loaded mile for volunteer drivers and 19 cents per loaded mile for self-drivers, or drivers who are in-home caregivers or friends.</p> <p>Attachment L, "Medicaid Transportation Program Policy Regarding Reimbursement of Travel-Related Expenses", is a general document that is periodically updated to outline allowable reimbursement of enrollee travel related expenses. The Transportation Manager will use this to develop a document specific to the region they are managing.</p>
70.	Reimbursement	<p>Please provide information regarding the current benefits and co-pays for the current employees to include drivers and staff. Please include as many specifics as possible.</p>	<p>The Department does not maintain this information.</p>
71.	Reimbursement	<p>Related travel expenses. Is the Broker responsible for reimbursing the member for overnight lodging and meals? Will we bill the Agency? Is this part of the PMPM? What is the utilization for the last 12 months?</p>	<p>Yes, the Transportation Manager is responsible for reimbursing an enrollee's lodging and meals. Please refer to Attachment L, "Medicaid Transportation Program Policy Regarding Reimbursement of Travel-Related Expenses".</p>

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			<p>Yes, the transportation manager will bill the agency for a pass through payment as per Section 3.2.10: Processing of Payments to be made to Enrollees for Incurred Transportation Expenses.</p> <p>No, the enrollee's lodging and meals are not part of the Per Member Per Month (PMPM) payment to the contractor for their transportation management services. Regarding utilization, please refer to Question # 82.</p>
72.	Reimbursement	Please provide the PMPM rate paid to the current Transportation Manager for the last two years, as well as a copy of the current agreement between DOH and the Transportation Manager.	<p>The Department is unable to share this information. A FOIL request for the underlying contract or procurement record containing the requested information, may be made by contacting the Department's Records Access Officer at foil@health.ny.gov.</p> <p>Information for submitting FOIL requests can be found at: https://www.health.ny.gov/regulations/foil/howto.htm</p> <p>For the full value of the current contract please view: http://www.openbooknewyork.com/</p>
73.	Reimbursement	Does the Broker have to bill 3rd party insurance and if so, how?	No. The Transportation Manager will not bill 3 rd party insurance.
74.	Staffing	Please provide a listing of the positions, and corresponding number of FTE for each position, currently provided by the contractor(s) for this operation. Please indicate whether these positions are 100% dedicated to this contract.	The Department does not maintain this information.

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75.	Transportation Providers Section 2.1 Introductory Background	Page 5, Section 2.1 RFP states, "New York's Medicaid program covers non-emergency medical transportation provided via non-emergency ambulance, ambulette, taxi, livery, mass transit, personal vehicle, commercial travel (i.e., airplane, bus, and train) and other modes as applicable to the individual enrollee." Will the State consider the use of Independent Driver-Providers operating under a Transportation Network Company (TNC) license as an ambulatory solution?	Yes, the Department will consider the use of Independent Driver –Providers for livery provided service, as long as the "independent" livery drivers' contract is with a base livery company who is an enrolled Medicaid provider. See Attachment N of the RFP.
76.	Transportation Providers Section 3.1 General Performance Standards/ Expectations	Page 7, Section 3.1 RFP states "The Department of Health expects the transportation manager to work with the Department to ensure trips are assigned to quality transportation providers and to identify transportation providers who do not comply with the Department's quality standards." Will you please clarify, that the transportation manager does not recruit nor credential transportation providers, nor ensure that the network providers are credentialed and operating lawfully per Section 365-h of Social Services Law, to perform transportation for State Medicaid purposes (with the exception of providing training and the reporting to State concerns)?	The Transportation Manager is responsible for all components described in this RFP.
77.	Transportation Providers	a) Please provide the number of unique volunteers used in last two years.	77 a) The Department does not track these data. 77 b) Please see Question # 83.

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		<p>b) Please provide average number of trips per year.</p> <p>c) In instances of urgent transportation need, is the ability to utilize a taxi partner an option?</p> <p>d) How many transportation providers are currently supporting the operations of this contract? Can a list of current transportation providers be supplied?</p>	<p>77 c) When urgent transportation is needed, the majority of the time an enrolled provider can be identified to perform the trip. When an enrolled provider cannot be identified, the Transportation Manager may need to seek the services of a commercial or non-enrolled provider. Only in rare circumstances will a non-enrolled provider be used.</p> <p>77 d) There are many Medicaid enrolled livery, ambulette, and ambulance transportation providers that are assigned trips in NYC. These providers have no contractual relationship with the Transportation Manager and therefore are not directly "supporting the operations of this contract". While there is not a complete list available at this time, there are approximately 135 livery, 119 ambulette and 18 ambulance providers available for NYC transports.</p>
78.	Transportation Providers	Will the Department please provide a list of current commercial transportation providers?	The Department does not maintain this information.
79.	Transportation Providers Section 3.2.8 Quality Standards	Section 3.2.8 states: "The plan should include the following transportation provider quality standards that address such issues as: failure to meet appointments; timeliness of pickup and delivery; refusals to take longer, less-profitable trips; total travel time; driver behavior; vehicle cleanliness and perceived safety; Medicaid enrollee comfort; Medicaid enrollee complaints and medical practitioner complaints. For example, the transportation manager shall	The Department will work with the transportation manager to ensure all of the required information is obtained from the transportation providers during the completion of the trip attestation process.

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		<p>develop a plan to review each transportation provider's compliance with the Department of Health's policies regarding pick up and wait times."</p> <p>Without modifications to the current process, the broker will be unable to accommodate to the level of driver/vehicle quality standards without support from the DOH.</p> <p>Will the State work with the successful bidder to make it mandatory for the transportation providers to provide pick-up/drop-off time, total travel time, vehicle assigned, etc. during the trip attestation process?</p>	
80.	<p>Transportation Providers</p> <p>Section 6.2.D.7 Quality Standards</p>	<p>RFP states: Provide details of the evaluation plan to be developed and how it will be implemented. Include procedures to measure provider's quality of performance. The evaluation plan should include trip and expenditure data collection and analysis, as well as measuring the level of consumer satisfaction.</p> <p>Please confirm that DOH will support the broker by requiring the transportation providers to supply the information necessary to allow for measurement of quality of performance per the above requirement (pick-up / drop-off times, total travel time, vehicle assigned, etc.)</p>	<p>Yes. The Department will work with the Transportation Manager to obtain information necessary to measure quality performance of transportation providers.</p>

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81.	Utilization	Please provide the number, type (mass transit, lodging, air, etc.) and total cost per month in CY2015 related to direct reimbursements to members, member family or volunteers.	Please refer to the table below for total direct reimbursements per month in calendar year 2015 through May 2016.			
MONTH/YEAR	# TRIPS	LODGING	COMMERCIAL TRANSPORTATION	MILEAGE	MEALS	TOTAL
Jan-15	3	\$1,724	\$6,664			\$8,388
Feb-15	7	\$1,974	\$9,532		\$316	\$11,822
Mar-15	6	\$3,366	\$5,083			\$8,449
Apr-15	6	\$3,518	\$13,186			\$16,704
May-15	8	\$3,999	\$3,355	\$610	\$609	\$8,573
Jun-15	6	\$618	\$6,287	\$88		\$6,993
Jul-15	6	\$1,066	\$6,888			\$7,954
Aug-15	2	\$505	\$118	\$523		\$1,146
Sep-15	5	\$7,617	\$11,600			\$19,217
Oct-15	6	\$10,012	\$131			\$10,143
Nov-15	2	\$13,750	\$14,868			\$28,618
Dec-15	7	\$1,187	\$22,205	\$185		\$23,577
Jan-16	4	\$1,333	\$2,063	\$228		\$3,624
Feb-16	13	\$3,584	\$31,643			\$35,227
Mar-16	10	\$790	\$18,010	\$556		\$19,356
Apr-16	16	\$1,556	\$12,939	\$933	\$467	\$15,895
May-16	14	\$2,578	\$36,156			\$38,734
Total	91					\$264,420
82.	Utilization	May we have the last 12 months of utilization reports, indicating the number enrollees and the number of trips and the % volunteer, mileage reimbursement, public transit, taxi, livery service,	For trip data, including public transit, taxi, livery, ambulette, and non-emergency ambulance, please refer to the response provided to Question #83. Please note however that the number			

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		ambulette, stretcher van, or non-emergency ambulance. Please provide average number of trips per year.	of public transit trips listed does not include those trips that are handled through the PTAR system. For the number of enrollees, please refer to the response provided to Question #34. For mileage reimbursement figures, please refer to the response provided to Question #81.
83.	Utilization	What are the levels of service, by trip count per month for the most recent 12 months, for the following? a) Ambulatory b) Wheelchair c) Bariatric Wheelchair d) Gurney/Stretcher e) Ambulance f) Public Transportation, and g) Mileage Reimbursement	Please refer to table below regarding scheduled trips by level of service, per month for June 2015 through May 2016. For mileage reimbursement data, please see the response to Question #81.

NYC trips by month and level of service, June 2015 through May 2016															
Level of service:	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Total	%	
Advanced Life Support	1,140	1,169	1,169	1,196	1,441	1,309	1,284	1,168	988	1,193	1,155	1,159	14,371	0.2%	
Livery	314,615	319,195	300,528	310,096	334,884	330,478	348,855	320,206	347,654	387,587	362,506	381,727	4,058,331	59.5%	
Ambulette/Ambulatory	184,308	185,014	170,580	169,847	171,804	159,319	162,541	152,325	142,215	153,931	140,473	138,920	1,931,277	28.3%	
Basic Life Support	7,163	7,131	6,811	6,777	7,257	6,616	7,418	7,144	7,302	8,215	7,916	7,704	87,454	1.3%	
Commercial Air	10	7	8	1	3	6	14	8	22	25	28	16	148	0.0%	
Mass Transit	10	0	12	12	18	0	10	8	8	6	2	12	98	0.0%	
Stretcher	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0%	
Wheelchair	63,162	62,873	58,684	60,003	61,359	59,159	63,869	58,199	57,774	64,292	59,684	59,435	728,493	10.7%	
Total	570,435	575,400	537,796	547,943	576,764	556,914	584,048	539,144	556,147	615,496	571,867	589,057	6,821,011	100%	
% ambulette ambulatory	32%	32%	32%	31%	30%	29%	28%	28%	26%	25%	25%	24%	28%		
% livery and/or mass transit	55%	55%	56%	57%	58%	59%	60%	59%	63%	63%	63%	65%	60%		

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# of non-holiday weekdays	22	23	21	22	22	20	22	20	21	23	21	21	258		
# of unduplicated riders	51,037	50,154	49,269	50,329	52,038	50,478	51,523	51,228	52,628	54,604	52,794	53,568			
Total gross trips	570,435	575,400	537,796	547,943	576,764	556,914	584,048	539,229	556,147	615,496	571,867	589,057			
Gross trip utilization	17.0%	17.1%	15.6%	15.9%	16.8%	16.1%	16.8%	15.4%	15.7%	16.3%	16.2%	16.9%			
84.	Utilization	Please provide utilization on the following: a. Total Number of one-way Long Distance Transports b. Total Number of one-way Assistant Transports					For Question 84 (a), please refer to the response provided for Question #81, under “Commercial Transportation”. For Question (b), the Department does not maintain this information.								
85.	Utilization	Please provide data on the actual number of one-way trips by service level: i.e. (sedan, wheelchair van, Stretcher, mass/public transportation (bus, rail & subway)), mileage reimbursement, overnight travel).					Please refer to the response provided to Question #83. For mileage reimbursement and overnight travel data, please refer to the response provided to Question #81.								
86.	Utilization	Please provide current number of one-way trips, by level of service (Ambulatory, Wheelchair Van, Gurney/Stretcher, Mass/Public Transit i.e. bus, rail, subway, mileage reimbursement, and by county for the past 12 months.					The Department does not maintain these data by county. For the total number of trips in all of NYC for the past 12 months, refer to the response provided to Question #81.								
87.	Utilization	Can you provide data on the average mileage by level of service, one way (sedan, Wheelchair Van, Stretcher, and Bariatric)?					The Department does not maintain these data.								
88.	Utilization	Is Non-Emergent Ambulance service included in this RFP? If yes, can you provide utilization data on the actual number of one-way trips by vehicle type, by level of service (ALS, BLS, Bariatric Stretcher), and by county?					Yes. Please refer to the response provided to Question #81.								
89.	Utilization	Will the department please provide 12 months of data regarding the volume of lodging services provided?					Please refer to the response provided to Question #81.								

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90.	Utilization	<p>Can the one-way trip data for calendar year 2015 or 2014 provided be separated by the following, either on a monthly or annual basis?</p> <ul style="list-style-type: none"> • Scheduled trips • Completed trips <p>Trip distribution by:</p> <ul style="list-style-type: none"> • Ambulatory / Wheelchair / Public Transit / Mileage reimbursement • Average trip mileage for ambulatory trips • Average trip distance for urban ambulatory trips • Average trip distance for rural ambulatory trips • Average trip mileage for wheelchair trips • Average trip distance for urban wheelchair trips • Average trip distance for rural wheelchair trips 	<p>The Department does not maintain all of these data. However, please refer to Question 83 for one-way scheduled trip data for June 2015-May 2016.</p> <p>The Department does not maintain trip distribution data.</p>
91.	Utilization	Can average trip distances be provided and broken out by county?	The Department does not maintain this data.
92.	Utilization	Can trip distance mileage averages be provided by trip type (i.e., Ambulatory, wheelchair, reimbursement)?	The Department does not maintain this information.
93.	Utilization	Please provide a one week sample daily trip log, in Excel format, including pick and drop points?	The Department does not maintain this information.
94.	Utilization	Please provide total number of requested legs and unique users by month and mode of transportation for the last 2 years?	Please refer to the response provided to Question #81 for trip data over the last 12 months.
95.	Utilization	Please provide average miles driven per mode of transportation for last two years of operation.	The Department does not maintain these data.

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96.	Utilization	Please provide data, if available, on distribution of trips by travel reason, e.g. Dialysis, Drug treatment, Adult Day Care, Primary Care, etc.	The Department does not maintain these data.
97.	Utilization	How many attendant trips were there in the past 12 months by county?	The Department does not maintain these data.
98.	Utilization	How many out-of-state trips were there in the past 12 months by county?	The Department does not maintain these data by county. For all of NYC, there were 89 out-of-state trips in the past 12 months.