Addendum #3

WAIVER ASSISTANCE AND COMPLIANCE SECTION
MEDICAL VENDOR ADMINISTRATION
DEPARTMENT OF HEALTH AND HOSPITALS

RFP # 305PUR-DHHRFP-WCSIII-MVA
Proposal Due Date/Time: April 18, 2012
4:00 P. M. CDT

Question	Response
What is the average number of clients per agency?	There is an average of 46 recipients per agency with an active prior authorization as of 3/21/12.
RFP states, 'Team analysis of findings/information – requires the contractor to determine if an expanded survey is needed' Please define & explain the process for an 'expanded survey'.	An expanded survey would be indicated when it is determined by the survey team that additional sampling of agency clients beyond what is sampled in the standard survey needs to be conducted pursuant to concerns identified during the course of the survey. The process would be to include additional record reviews, home visits, or interviews as necessary to answer the questions the team identifies during the analysis of the information and findings.
Regarding Triennial Licensing Surveys, the RFP states, "For the deficient practices identified during the licensing survey, the Contractor will request a plan of correction (POC) from the provider for the HSS' review/approval. What is the timeframe for providers to provide the contractor with the requested POC?	The provider has 10 working days after receipt of the statement of deficiencies to provide the POC to HSS. The provider is not required to submit the POC to the contractor.
Once the POC is received from the provider, what is the timeframe	See response above.

Question	Response
for the contractor to provide HHS with a copy of the provider's POC?	
Upon completion of surveys, what is the timeframe for the contractor to submit the licensing forms and documentation to HSS for review/approval?	As stated in the RFP (Section II, B, 2f-g), the contractor would forward the completed documentation to HSS within 10 working days from the date of the exit conference for providers found to be in substantial compliance. If an immediate jeopardy situation has been identified during the survey and remains unresolved at the time of the exit conference, the contractor must submit the documentation to HSS within 2 working days from the date of the exit conference.
How many follow-up surveys were conducted by HHS in FY 10/11? The RFP states, "Follow up surveys typically shall require onsite survey time of approximately 50% or less than the standard licensing survey time." What amount of time is considered standard licensing survey time under the new consolidated license process?	The number of follow-up surveys conducted in FY 10/11 is not readily available; however, the Department has provided estimates of the anticipated volumes by contract year in Attachment V. The Department does not have sufficient data to determine the survey time under the new consolidated license process. However, the current algorithm indicates that 1-2 surveyors are allowed 5 days to complete a HCBS re-licensing survey. Re-licensure follow-up surveys are allowed 1 surveyor for 3 days; however additional surveyors may be needed if the provider has a substantial number of deficiencies. The number of staff assigned to a complaint depends upon the scope of the allegations, but typically average 1 staff person for 2-3 days.
What is the date of the latest revision to the Department's Complaint Investigation manual?	October 2010
Is the contractor to us the volume estimates given in Attachment V as true estimates for the work required OR are they only for	Yes, the contractor should use the estimates provided in

Question	Response
evaluation purposes?	Attachment V of the RFP.
What is the total number of provider across all the state that would required triennial survey.	Refer to Attachment V of the RFP for current estimates by contract year.
What is the average number of new licensing surveys conducted in the past three years?	This data is not relevant. Refer to attachment V of the RFP for current estimates by contract year.
What is the timeframe within which the contractor is expected to act for the following from the time HS notifies the contractor: • Initial licensing • Follow-up Surveys • Complaint investigations	Initial licensing – the provider applicant will contact the contractor when they are ready for the survey. The contractor shall conduct the initial licensing survey within 21 working days from the date the provider applicant contacts the contractor to inform that they are ready for the initial licensing survey. Follow-up licensing survey– the contractor would be expected to conduct follow-up surveys as directed on the routing sheet from HSS and the follow-up would be expected to be conducted following the provider's last correction date on the POC. The provider is expected to be in compliance within 60 days, unless approval is granted by HSS. The contractor is expected to complete the follow-up survey no sooner than 2 business days and no longer than 60 calendar days following the provider's last correction date on the POC. Complaint investigations – the contractor will initiate complaint investigations based on the triage priority determined by HSS, which will be a 2 working day, 30 calendar days, or next onsite.
Is the contractor also expected to perform compliant investigations that do not require on-site visit? If yes please indicate the average volume of complaint investigations that do not require onsite visit for the past three years.	No, the contractor shall conduct onsite complaint investigations.
Is the contractor required to perform duties with respect to Medicaid certification during both initial and triennial surveys?	Yes, the contractor will ensure providers meet the requirements of the Medicaid Standards for Participation during the initial and

Question	Response
	triennial surveys.
In case of emergency situations would the contractor staff, specifically, staff monitors or supervisors be required to make on-site visits to the providers after business hours?	Yes, however the Department anticipates this will be an extremely rare occurrence.
Is the department amenable to receiving electronic formats of the reports for both monthly and quarterly reports instead of paper copies?	Yes, electronic reports are preferable.
Would you forward the powerpoint presentation if possible?	Yes, please see Attachment 1.
My goal is partner with other vendors, and would you forward the attendee list.	Yes, please see Attachment 2.

Attachment 1

3/22/2012

RFP for a Licensing Contractor for Direct Service Provider Agencies and Non-Waiver Case Management Agencies Providing HCBS

DEPARTMENT OF HEALTH

Bruce D. Greenstein
Secretary

Purpose of the RFP

- Due to staffing shortages and CMS mandates, a contract is necessary for the Department to:
  - verify that HCBS providers initially and continually meet required licensure and/or certification standards;
  - to verify that provider training and criminal background checks are conducted in accordance with state requirements;
  - to identify, investigate, and seek to prevent the occurrence of abuse, neglect, and exploitation;
  - to ensure deficiencies are remediated within required timelines;
  - and to track and report data.

Schedule of Events

- Deadline for Receipt of Written Questions is Monday, March 19, 2012.
- A Response to Written Questions will be provided on March 23, 2012.
- Deadline for Receipt of Written Proposals is April 9, 2012 4:00 PM.
- The Contract is anticipated to begin 7/1/12

Questions???

- Impromptu questions are permitted and spontaneous answers will be provided; however the only official answer or position of the State will be stated in writing in response to written questions.
- Proposers should submit all questions in writing (even if an answer has already been given to an oral question).
- After the conference, questions will be researched and the official response will be posted on the DHH website.

Attachment 2

Licensing Pre-Proposal Conference Sign-In Sheet March 13, 2012

NAME	AGENCY
Rashena T. Casimire	THE ME GOD SEES INC
Ronda Trager	The ME GOD SEES, INC
TERRY COOPER	DHH - HSS
Tricia Canella	eQHealth Solutions
Mayra Yermanni	eQHealth Solutions.
Bob Johannessen	eQHealth Solutia
Jenny Borders	DHH Contracts