

ACCESS SERVICES FOR LONG TERM SUPPORTS AND SERVICES
RFP # 3000012190
Section 1.6 PROPOSER INQUIRIES

Addendum #5

Part 1 – Written Questions and Answers

Part 2 – Revisions to the RFP

Part 3 – Attachment 3 Proposal and Submission and Evaluation Requirements

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Part 6 – Attachment IX Electronic Vendor Payment Solution

PART 1- Written Questions and Answers

	Document Reference	RFP Section Number	Section Heading	RFP Page Number	Vendor Question	OAAS Response
1	RFP	1.7	Schedule of Events	5	Will Proposers have an opportunity to ask additional questions or request clarifications after November 22, 2021, in response to any RFP amendments or the posting of written responses?	No, the current Schedule of Events in Section 1.7 provides deadlines for written questions and responses for October 25, 2021 and January 26, 2022, respectively. Nevertheless, all addendums will be published in LaPAC.
2	RFP	2.1.4.3	Telephone Access and Automated Call Distributor	8	Will OAAS please confirm the requirement to allow a caller to reach a live operation by dialing a number is only during Business Hours?	Yes, the requirement that a caller reach a live operator is only during Business Hours.

3	RFP	2.1.4.4.1	Telephone Access and Automated Call Distributor	8	Will OAAS please confirm the 5% Abandonment Rate will only be calculated on calls received during Business Hours?	Yes, the 5% Abandonment Rate will be calculated only on calls received during Business Hours.
4	RFP	2.1.4.5.2	Telephone Access and Automated Call Distributor	8	How long must the Contractor retain complete call records and details?	The Contractor must retain complete call records for ninety (90) Calendar Days.
5	RFP	2.1.5.1	Telephone Call Recording System	8	The RFP requires recordings to be readily available to OAAS and the Contractor must have the capacity to store 5% of calls for the entire contract term. How long with the Contractor be required to keep the remaining 95%?	The remaining ninety-five percent (95%) of call recordings must be retained for a minimum of ninety (90) Calendar Days.
6	RFP	2.1.7.1.1	Performance Indicator	9	Will OAAS please confirm the second attempt to return a call must occur on the second business day after a message is left?	Additional attempts may be made on day one but, if a successful call is not completed on day one, an additional attempt must be made on day two. If unsuccessful on both day one and day two, the requirement to promptly return calls and messages is considered met/satisfied.

7	RFP	2.4.2.1.1	Performance Indicator	13	Will OAAS please confirm the obligation to complete LOCETs on the same day is only if the LOCET can be completed during business hours?	All LOCETS must be completed on the same day the call is received, if the call is received during Business Hours. If a call is initiated prior to the end of Business Hours, it is the expectation that the LOCET will be completed at that time.
8	RFP	2.4.2.1.1	Performance Indicator	13	If a phone request for a LOCET is made on a Friday, the Contractor would need to complete the LOCET on the weekend in order to achieve 100% compliance with the two Calendar Days requirement. Will OAAS please confirm its intent to have the Contractor perform LOCETs on weekends?	See revision 5 in part 2 of this addendum.
9	RFP	2.4.6.1	Send appropriate notices for Level of Care screening decisions	15	Is the Contractor responsible for mailing costs anytime something is required to be sent to an applicant or will those be pass through costs to the State? If the Contractor is expected to pay, what is the historical average annual volume of notices mailed to applicants?	Yes, the Contractor is responsible for expenses incurred for mailing any correspondence required under the terms of any contract resulting from this RFP. The costs proposed in the Cost Template must be fully burdened. Refer to Detail of Notices Generated and Mailed in the procurement library.
10	RFP	2.5	Perform Comprehensive Assessments for LTPCS Applicants and Participants	16	Can face-to-face assessments be conducted virtually?	Virtual assessments are permitted for the duration of the declared COVID-19 public health emergency only. In-person is and will continue to be the standard for face-to-face assessments.

11	RFP	2.14.3.2	Participate in Appeals	24	The RFP requires Contractor staff that participate in hearing to complete a hearing status report on the same day as the hearing. Given the possibility hearing may occur late in the workday, will OAAS amend this requirement to require status reports on the next business day after the hearing?	See revision 7 in Part 2 of this addendum.
12	RFP	4.1.16	General Requirements	40	The Contractor is required quarterly to provide all computer code and source files associated with applications, operating software, middleware, and networking hardware and software programs and tools developed to fulfill requirements of the contract. What does OAAS expect the Contractor will be required to develop under this contract and will OAAS claim ownership of such developments?	The Contractor will be responsible for developing, procuring and/or maintaining hardware and software resources that are sufficient to successfully perform the services detailed in the RFP. OAAS will not claim ownership of such developments.
13	RFP	5.1	General Requirements	50	The RFP requires Proposers to submit the Ownership Disclosure Form (Attachment XI) with the proposal, and the instructions for such Form either requires the Proposer to provide a Louisiana Medicaid Provider Number or leave the field blank if the application is for a new Medicaid provider number. Will OAAS please clarify whether all Proposers and the Contractor are required to have a Louisiana Medicaid Provider Number? If required, must Proposers have the Medicaid Provider Number at the time of its Proposal submission, or will the submission of Attachment XI be acceptable?	The successful Proposer will be required to have a Louisiana Medicaid Provider Number. However, Proposers are not required to have a Louisiana Medicaid Provider Number at the time proposals are submitted. For Proposers who do not have a Louisiana Medicaid Provider Number, that field on the Ownership Disclosure Form (Attachment XI) should be left blank.

14	RFP	6.8.4.1	Performance Indicator	57	Will OAAS please define “Contractor’s data” and explain how the 100% requirement will be measured given any CAP report may also require the inclusion of State or third party data?	LDH will specify the data required to be included in the CAP reports upon its approval of a CAP. If the CAP requires data from the State, then the State will provide such data. Third party data will be required only if the third party is a subcontractor of the Contractor. Contractor’s data pertains to any and all data/reports that are housed in the Contractor’s system, as it relates to the CAP.
15	RFP	6.8.4.3	Performance Indicator	57	How will the Contractor know in advance what the “edit specifications/review guidelines set forth by LDH” are and how can such potentially subjective criteria be determined to meet a 99.5% performance indicator?	LDH will specify the edit specifications/review guidelines for determining accuracy of data in the CAP reports upon its approval of a CAP.
16	RFP	6.12.1	Imposing Liquidated Damages	58	Will OAAS please amend the RFP or otherwise confirm the imposition of Liquidated Damages will be limited to those areas within the Contractor’s control and any liquidated damages will be reduced to the extent there are contributing factors outside the Contractor’s control or responsibility?	A Proposer seeking a modification of the contract terms set forth in the RFP or its attachments should submit an exception for the Department's consideration in accordance with Section 7.28 of the RFP.
17	RFP	8.1.2.3	Overview	75	In order to measure the 80% threshold of LOCET compliance, what will constitute a “representative sample” and will such sample threshold be mutually agreed to in advance?	A representative sample is a statically valid random sample with a 95% confidence level. OAAS will determine the sample threshold, which will be provided during Phase 3 of the transition.

18	RFP	10.2.1	Amendments	87	Will OAAS please confirm amendments to the contract will include equitable adjustments to the Contractor's compensation if an amendment will materially increase the Contractor's scope or cost of performance?	OAAS cannot provide a blanket commitment at this time, but LDH will exercise reasonableness when negotiating with the Contractor about increased costs to the extent that an amendment materially increases the scope of work.
19	RFP	10.12.3	Substitution of Personnel	91	Will OAAS please amend the RFP or otherwise confirm the requirement to obtain the State's prior written consent only applies to key staff positions?	See revision 16 in Part 2 of this addendum.
20	RFP	10.19.1	Indemnification	93	Standard industry practice often specifies indemnification applies to third party claims and permits contractors to have control of the defense of claims in order to provide a more effective and timely defense. Will OAAS please amend the RFP and modify the indemnification to (1) specify that the indemnification only applies to third party claims, (2) permit the Contractor to have control of the defense of the claim, (3) require the State to give the Contractor prompt notice of the claim, and (4) require the State to give reasonable assistance in connection with the Contractor's defense of the claim?	A Proposer seeking a modification of the contract terms set forth in the RFP or its attachments should submit an exception for the Department's consideration in accordance with Section 7.28 of the RFP.
21	RFP	10.33	Reporting Changes	98	Will OAAS please amend the RFP to change the 24 hours notification requirement to a one business day requirement in order to avoid delivery notices on weekends and holidays?	A Proposer seeking a modification of the contract terms set forth in the RFP or its attachments should submit an exception for the Department's consideration in accordance with Section 7.28 of the RFP.

22	Attachment II - Contract	12	Ownership of Proprietary Data	2	Upon a termination or expiration of the contract, will OAAS please confirm the requirement that non-third party materials related to the Contract and/or obtained or prepared by the Contractor will become property of the State excludes pre-existing materials or materials developed outside of the Contract but used in connection with the contract and as such would remain owned by the Contractor or the applicable third party?	A Proposer seeking a modification of the contract terms set forth in the RFP or its attachments should submit an exception for the Department's consideration in accordance with Section 7.28 of the RFP.
23	Attachment II- Contract	13	Subcontracting	3	If a Proposer has disclosed the identity of subcontractor(s) together with the scope of work to be subcontracted in its Proposal, will OAAS confirm the award of the contract is deemed approval of all named subcontractors and a separate approval is not required?	No, the contract award is not an automatic approval of named subcontractors. See Section 5.6, Requirements Regarding Major Subcontractors, which requires the fulfillment of several conditions before the Contractor's Major Subcontractors will be approved by the Department.
24	Attachment II- Contract	42	Contractor must comply with the Office of Technology Services (OTS) Information Security Policy	5	Will OAAS please amend the RFP to delete the MARS-E requirement from the Standard Contract Form or otherwise clarify MARS-E will not be required in the Contractor's eventual contract? Merely having CMS data does not necessitate MARS-E and such a requirement will increase cost and potentially reduce competition by deterring otherwise qualified potential Proposers from submitting a Proposal.	A Proposer seeking a modification of the contract terms set forth in the RFP or its attachments should submit an exception for the Department's consideration in accordance with Section 7.28 of the RFP.

25	RFP	2.1.	Call Center Operations to Provide Effective Information and Referral	7	What is the volume of inbound calls, handled by a contact center agent for all calls, referenced in this RFP, by week, month, and year for the past 12 months for the purposes of accurately staffing?	Refer to Annual Contractor Volumes 1-1-2017 through 7-31-2021 and Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the volume of calls by month and year. This information is not tracked by week.
26	RFP	2.1.	Call Center Operations to Provide Effective Information and Referral	7	What is the volume of outbound calls handled by a contact center agent for all calls referenced in this RFP, by week, month, and year for the past 12 months for the purposes of accurately staffing?	Refer to Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the volume of calls by month and year. This information is not tracked by week.
27	RFP	2.1.	Call Center Operations to Provide Effective Information and Referral	7	What is the volume of inbound calls for the last 12 months handled by the IVR that terminate in the IVR by week, month, and year for the purposes of accurately estimating costs?	Refer to Annual Contractor Volumes 1-1-2017 through 7-31-2021 and Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the volume of calls by month and year. This information is not tracked by week.
28	RFP	2.1.	Call Center Operations to Provide Effective Information and Referral	7	What is the average handle time (talk-time plus after call work) for all inbound calls, excluding phone-based screenings as referred to in section 2.4., for the last 12 months by week, month, and year for the purposes of accurately staffing?	This information is not tracked.

29	RFP	2.1.	Call Center Operations to Provide Effective Information and Referral	7	What is the average handle time (talk-time plus after call work) for all outbound calls, excluding phone-based screenings as referred to in section 2.4., for the last 12 months by week, month, and year for the purposes of accurately staffing?	This information is not tracked.
30	RFP	2.1.	Call Center Operations to Provide Effective Information and Referral	7	What self-service tools are presently in place by the current contact center such as IVR, web site FAQ's, etc.?	The current Contractor utilizes the ADC system and the OAAS Program Face Sheets on the LDH website (also found in the procurement library).
31	RFP	2.1.4.2.	Call Center Operations to Provide Effective Information and Referral	8	How many toll-free numbers will the Contractor be expected to port over to the contact center?	The Contractor must provide a single toll free number that will be used for both inbound calls and the outbound caller ID.
32	RFP	2.1.5.1.	Call Center Operations to Provide Effective Information and Referral	9	Will the 5% of all calls that are recorded for the entire term of the contract be turned over to the OAAS at the end of the contract or are they to be deleted by the Contractor?	The 5% of calls will be turned over to the State upon expiration or termination of the contract.

33	RFP	2.1.9.1.	Call Center Operations to Provide Effective Information and Referral	10	Can you please provide a further definition of "maintain a current directory?" For example, will the Contractor be given a file to update changes in the directory, or will the Contractor be expected to conduct provider outreach services in order to maintain the directory.	See revision 4 in Part 2 of this addendum.
34	RFP	2.1.9.1.	Call Center Operations to Provide Effective Information and Referral	10	What does OAAS consider a "local gap in services"? For example, does "local" mean city, county, PACE sites, or other?	OAAS considers a local gap in services to be a lack of an available service and/or resource required to meet the needs of LTPCS participants in a specific geographic area, including, but not limited to a town, city, parish, or region of the State.
35	RFP	2.1.10.2 / 2.3.1. / 2.4.5. / 2.4.6. / 2.8.3. / 2.10. / 2.12.	Multiple Sections (Mail)	Multiple Pages	What is the current volume of all mailed written materials referenced in this RFP by week, month, and year for the purposes of accurately estimating mailing costs and staffing?	Refer to the "Detail of Notices Generated and Mailed" document in the procurement library for the volume of mailings by year. This information is not tracked by week or month.
36	RFP	2.1.10.2 / 2.3.1. / 2.4.5. / 2.4.6. / 2.8.3. / 2.10. / 2.12.	Multiple Sections (Mail)	Multiple Pages	Do the mailings referenced in this RFP include any bound materials such as books, multi-page brochures, or other mailings of four or more pages? If yes, what is the volume of these written materials, including Voter Registration mailings, by week, month, and year for the purposes of accurately estimating mailing costs?	Mailings do not include books or multi-page brochures. However, most mailings will include more than four (4) pages. iHC assessment approval and denial packets will be at least 20 – 30 pages, unless printed double sided.

37	RFP	2.4.	Provide Level Of Care Screening and Program Eligibility Determination for All OAAS LTSS Applicants	12	What is the volume of phone-based screening for individuals requesting OAAS long term support and services, by LTSS, HCBS waiver, PACE, LTPCS, and nursing facility admission for the past 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the volume of calls by month and year. This information is not tracked by week.
38	RFP	2.4.	Provide Level Of Care Screening and Program Eligibility Determination for All OAAS LTSS Applicants	12	What is the average handle time (talk-time plus after call work) of the phone-based screening for individuals requesting OAAS long-term support and services, by LTSS, HCBS waiver, PACE, LTPCS, and nursing facility admission, for the past 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the “average handle time” and “after call work time” (inbound and outbound) of calls by month and year. This information is not tracked by week.
39	RFP	2.3.1.	Initiate and Assist Individuals in Voter Registration at Specified Times	11	Please define "hand delivery" as stated in the last sentence of this section?	Hand delivery means delivery by the Contractor rather than the United States Postal Service or courier.
40	RFP	2.3.1.	Initiate and Assist Individuals in Voter Registration at Specified Times	11	What is the volume of hand delivered confirmation letters for the last 12 months by week, month, and year for the purposes of accurately staffing?	This information is not tracked.

41	RFP	2.4. / 2.5. / 2.6.	Multiple Sections	Multiple Pages	By type of assessment, what is the total number of face-to-face assessments by week, month, and year for the last 12 months for the purposes of accurately staffing?	Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 in the procurement library for Total Assessments by month and year. This information is not tracked by week.
42	RFP	2.4. / 2.5. / 2.6.	Multiple Sections	Multiple Pages	By type of assessment, what is the average duration of face-to-face assessments by week, month, and year for the last 12 months for the purposes of accurately staffing?	The time it takes to complete each face-to-face assessment is not tracked
43	RFP	2.4. / 2.5. / 2.6.	Multiple Sections	Multiple Pages	By type of assessment, what is the average number of face-to-face appointments missed by applicants and participants by week, month, and year for the last 12-months for the purposes of accurately staffing?	Refer to Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the volume of calls by month and year. This information is not tracked by week.
44	RFP	2.8.	Develop Plan of Care for LTPCS Participants	20	What is the volume of Plans of Care developed for LTPCS Participants for the last 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 in the procurement library for the volume of Plans of Care by month and year. This information is not tracked by week.
45	RFP	2.8.	Develop Plan of Care for LTPCS Participants	20	What is the average duration of developing a Plan of Care for LTPDC Participants for the last 12 months by week, month, and year for the purposes of accurately staffing?	The time it takes to develop each Plan of Care is not tracked.

46	RFP	2.13.	Perform Phone Follow-Up to Confirm Service Delivery	22	What is the volume of Phone Follow-Up to Confirm Service Delivery calls for the last 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the volume of calls by month and year. This information is not tracked by week.
47	RFP	2.13.	Perform Phone Follow-Up to Confirm Service Delivery	22	What is the average handle time (talk time plus after call work) for Phone Follow-Up to Confirm Service Delivery calls for the last 12 months by week, month, and year for the purposes of accurately staffing?	This information is not tracked.
48	RFP	2.14.	Participate in Appeals	23	What is the volume of Appeals for the last 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 in the procurement library for the Number of Appeals by month and year for 2017 – 2019. Refer to Appeals History 2020 for information regarding appeals occurring in 2020. This information is not tracked by week.
49	RFP	2.14.	Participate in Appeals	23	What is the volume of Appeals hearings for the last 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 in the procurement library for the Number of Hearings Completed by month and year for 2017 – 2019. Refer to Appeals History 2020 for information regarding appeals completed in 2020. This information is not tracked by week.
50	RFP	2.15.	Participant and Service Monitoring for All LTPCS Participants	24	What is the volume of Participant and service monitoring functions calls for the last 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 and Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the volume of Client Monitoring Calls and Participant and

						Service Monitoring Calls by month and year. This information is not tracked by week.
51	RFP	2.15.	Participant and Service Monitoring for All LTPCS Participants	24	What is the average handle time (talk time plus after call work) for Participant and service monitoring calls for the last 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the average handle time for Participant and Service Monitoring calls by month and year. This information is not tracked by week.
52	RFP	2.15.3.	Participant and Service Monitoring for All LTPCS Participants	25	What is the volume of face-to-face visits for the last 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 in the procurement library for the volume of Initial Assessments and Client Monitoring Visits by month and year. This information is not tracked by week.
53	RFP	2.15.3.	Participant and Service Monitoring for All LTPCS Participants	25	What is the average duration of face-to-face visits for the last 12 months by week, month, and year for the purposes of accurately staffing?	This information is not tracked.
54	RFP	2.15.3.	Participant and Service Monitoring for All LTPCS Participants	25	What is the number of face-to-face appointments that are missed by the Participant for the last 12 months by week, month, and year for the purposes of accurately staffing?	Refer to Additional Contractor Call Volumes 10-2020 through 10-2021 in the procurement library for the number of face-to-face appointments that are missed by Participants by month and year. This information is not tracked by week.

55	RFP	2.25.7.	Provide Adequate Training for All Contractor Staff	31	What is the average time, in minutes, that it takes for the average Assessor to complete the re-certification process?	The re-certification process takes approximately 1,800 minutes total (approximately 30 hours).
56	RFP	2.27.3.2.2.	Develop and Implement a Quality Assurance and Quality Improvement Plan	33	Can you please further define "third party"? Is this third-party provided by the Contractor? Is this third-party part of OAAS? Is the third party an external third party outside of OAAS or the Contractor?	The third party is a trained LOCET staff member, employed by the Contractor.
57	RFP	7.13, 7.18.7	Number of Copies	66	Please confirm that One (1) Original (clearly marked "Original") and seven (7) numbered copies of the technical proposal is required for both technical binders (Part I of Attachment V). Section 7.18.7: The response to the Mandatory Requirements Section (Part I of Attachment V) should be in a separate binder for hard copy submissions and must be clearly labeled with contents.	Confirmed
58	RFP	7.13.1.3	Number of Copies	66	Please confirm that one redacted hard copy is required.	A redacted hard copy proposal is required only if applicable.

59	Attachment V	N/A	Instructions	1	Instructions state that “The Proposer should complete only the first column of this form to provide an index referencing the location of your response to each item listed (page and section number)”; the first column states “Page # of Response in Proposal”. Please confirm if vendors should put Section # in the first column.	Contractor should put actual page number(s) containing the response to each question.
60	RFP	2.6.1	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	Instructions state that “The Contractor will use the EVV system for all face-to-face visits. The Contractor shall provide assessors with equipment needed, (e.g., laptops, mobile devices, tablets or other equipment and connectivity), to use the EVV system and to meet the workflow expectations noted within this RFP.” Do the current EVV users use Mobile devices in the field? Do they use a cell phone or a Tablet? Does the State EVV system mandates a mobile device use?	The current Contractor’s EVV users use a Contractor issued smart phone. Other EVV users (provider agencies) use tablets. The State’s current EVV system requires a mobile device, capable of accessing the internet and the GPS location must be turned on in order for the geolocation to be picked up by the State’s EVV system.
61	RFP	4.8.1	Other Electronic Data Exchange	44	What document management system is the State using at present?	The State currently utilizes a proprietary document management system provided by the current contractor.
62	RFP	2.1.6	SCOPE OF WORK	9	What tracking system does the State use at present?	The current contractor utilizes a proprietary system to track referrals.

63	RFP	3.3.4	Staffing Requirements for Telephone Counselors, Assessment Specialists, Assessment Specialist Supervisors and Staff Assigned to Technical or Management Positions	53	Can the State clarify if this requirement applies to technical help desk support staff?	Staff providing Systems Help Desk services under 4.7.1.1 of this RFP must have Bachelor's degree and at least one (1) year of experience to a Human Services Field.
64	RFP	4.4	Systems and Technical Requirements	41	What data/reporting elements are expected to come out of the contractor's system(s) vs. state systems?	All reporting provided for in the RFP is expected to come out of the Contractor's system.
65	RFP	2.1	Scope of Work	7	What is the average handle time for information and referral incoming calls?	This information is not tracked.
66	RFP	2.1.7	Scope of Work	9	What is the average handle time for outbound case monitoring calls?	This information is not tracked.
67	RFP	2.4.4	Scope of Work	14	How many applicants need a disability determination referral?	For 2019, there were approximately 965 applicants who required a disability determination by Medicaid. For 2020, there were approximately 853 individuals who required a disability determination by Medicaid.

68	RFP	2.4.5	Scope of Work	14	What is the volume requiring loc screens that result in a request for medical data when ITC criteria is not met?	Refer to Annual Contractor Volumes for Period 01-01-2017 through 07-31-2020 in the procurement library for the volume of Physician Medical Data Forms (# MEDDET) mailed, reviewed, denied, incomplete, or approved for calendar year 2019. This information was not tracked prior to January 2019.
69	RFP	2.4.1.2	Scope of Work	12	Is the time listed for the face-to-face assessment just for the assessment or does it include travel time?	No, it does not include travel time. It is the estimated time it takes to complete an assessment.
70	RFP	2.7	Scope of Work	20	What % of face to face visits includes voter registration assistance?	LDH does not track the number of face-to-face visits that include the provision of voter registration assistance.
71	RFP	2.8	Scope of Work	20	During the face to face visit what is the average length of time to complete the plan of care?	This information is not tracked.
72	RFP	2.1	Scope of Work	21	Is the freedom of choice confirmation tracked in the contractor's system or entered directly into Data Management Contractor's system?	The freedom of choice confirmation is received by the Contractor, scanned into the Contractor's system (in the Participant's record), and the data is passed to the Data Management Contractor in a nightly data feed.

73	RFP	2.1.10	Provide written information	10	There are certain sections in the Scope of work that call out the particular work is only to be performed for Personal Care services (for example: 2.5-comprehensive assessment, 2.6-conduct face-to-face visits, 2.8-develop plan of care, 2.10-provide freedom of choice, 2.12-distribute plan of care for LTPCS participants) whereas other sections of the scope do not specifically identify the work is for a specific program (2.7-Adhere to expectations for essential workflow elements, 2.9-Emergency plan, 2.14-participate in appeals). Can the bidder assume that all scope sections that DO NOT specifically call out LTPCS refer to all LTSS programs identified in the RFP?	<p>No. Sections 2.7 (Adherence to Expectations for Essential Workflow elements), 2.9 (Emergency Plan), and 2.14 (Participant in Appeals) refer to the LTPCS scope of work.</p> <p>Other than LOCETs completed for the HCBS Wavier Registry and Nursing Facility Admissions, the Scope of Work in this RFP pertains to LTPCS.</p>
74	RFP	2.4.6	Send appropriate notices for Level of Care Screening decisions	15	*Does the OAAS system generate any letters, or will all letters be generated by the contractor/contractor's system?	All letters/notices must be generated by the Contractor/Contractor's system.

75	RFP	2.1.5	Telephone Access and Automated Call Distributor (ACD)	7	<p>Re. 2.1.4.1 The 1-800 number and the ACD shall provide prompt (within four (4) rings or less) live answering during Business Hours (8:00 am to 5:00 pm CT M-F)....?</p> <p>Question: Will LDH consider revising language to say "The 1-800 number and the ACD shall be configured to provide the prompt (within four (4) rings or less) live answering during...."?</p> <p>Rationale: The Contractor is often not in control of whether the 1-800 carrier, telephony carrier and CCaS contractor complies with the configuration set by the contractor. i.e. We can configure it to pick up within 4 rings, but have no control over whether the other entitles comply with our configuration?</p>	A Proposer seeking a modification of the contract terms set forth in the RFP or its attachments should submit an exception for the Department's consideration in accordance with Section 7.28 of the RFP.
76	RFP	2.13	Perform Phone Follow-up to Confirm Service Delivery	23	<p>*Does "Perform Phone Follow-up to Confirm Service Delivery" apply only to LTPCS or does it apply to all programs applicable to this RFP?</p> <p>*If this item applies to other non LTPCS programs, how is the contractor notified if/when it is time to perform phone follow-up to confirm service delivery?</p>	Section 2.13 Performing Phone Follow-up to Confirm Service Delivery pertains to LTPCS services only.
77	RFP	2.15.7	OAAS may, at its discretion, direct that certain types or percentages of visits be conducted on an	25	<p>What criteria or rational prompts the request for the contractor to conduct unannounced visits? What is the volume of requests for unannounced visits?</p>	Although this request is infrequently made of a Contractor by LDH, we do expect the Contractor to conduct unannounced visits, if requested by the Department. Unannounced visits may become necessary, as determined by LDH in its sole discretion. Reasons may include but are not limited to: potential program fraud, inability to contact recipient for ninety (90) Calendar Days,

			unannounced basis			emergencies, or at the discretion of OAAS for the purpose of quality assurance and monitoring. Unannounced visits are not currently tracked.
78	RFP	2.16	Additional Participant Contacts	26	<p>*What is the anticipated or historical volume of requests by the contractor to conduct additional participant contacts by telephone?</p> <p>*Does this item apply to only LTPCS or to all programs addressed in the RFP?</p>	<p>Because this requirement is related to emergency situations, it is difficult to predict the requested number of calls. These calls are dependent upon which region in Louisiana has been affected by said emergency event.</p> <p>This requirement is only for LTPCS participants.</p>
79	RFP	2.18.2.1	Performance Indicator: On e hundred percent (100%) of discovered instances of on-compliant provider service delivery shall be reported to the service provider agency within one (1) Business day and resolved within ten (10)	27	<p>*What is the definition of "resolved?" How can the contractor be held to "resolve" the issue that is potentially out of the contractor's control? (i.e. participant of family delays or avoids selecting a new provider, provider is uncooperative, new provider is not available or not taking cases, etc.)?</p>	<p>Resolved does not always mean services have resumed. Resolved can mean services have resumed or that the recipient has been offered a freedom of choice to change agencies, but as long as the provider documents their attempts to resolve the situation.</p> <p>Steps the Contractor would be expected to take:</p> <ul style="list-style-type: none"> • Contractor is expected to discuss situation with participant • Contractor is expected to inform provider agency of non-compliance issue and obtain information on how provider agency plans to remedy non-compliance issue • Contractor is expected to make any necessary referrals (APS, EPS, OAAS) for non-compliance, abuse or neglect

			Business Days of discovery			<ul style="list-style-type: none"> Contractor is expected to inform the participant that they are permitted to change provider agencies and provide the freedom of choice form to the participant.
80	RFP	2.25.1.1, 2.27.4, 8.1.1, 8.2	Phase One starts at the Contract Start date and lasts a maximum of sixty (60) calendar days	31, 34, 75, 76	<p>Will OAAS please clarify the contract start date and deliverables due dates in relation to that date?</p> <p>*8.1.1 States "Phase One starts at the Contract Start Date and lasts a maximum of sixty calendar days"</p> <p>*8.2 States Phase One is expected to be 4/15/22 through 6/14/2022? *2.26.1.1 states the contractor shall deliver the Operations manual 30 calendar days prior to the contract start date?</p> <p>*2.27.4 states the contractor shall deliver the QA/QI plan no later than 30 calendar days prior to the contract start date? *Based on these statements, the Operations Manual, Policies and Procedures and QA/QI Plan would be required to be delivered 3/15/22 (a month prior to contract execution)?</p>	See revision number 8 and number 9 in part 2 of this addendum.
81	RFP	2.26	Develop and Maintain Written Operations Manual	31	<p>"OAAS will review and will approve or provide comments."?</p> <p>*How many business days does OAAS anticipate needing for review and approval or comments related to the Operations Manual, Policies and Procedures, etc.?</p>	The time needed for OAAS to complete its review of the Operations Manual, policies, procedures, and other written material that require OAAS approval will depend upon the quality of the materials submitted.

82	RFP	2.4	Provide Level Of Care Screening and Program Eligibility Determination for all OAAS LTSS Applicants	12	Is there a backlog of LOC evaluations the contractor will be expected to address?	LDH does not anticipate there will be an accumulation of uncompleted level of care evaluations for the Contractor to complete. However, the Contractor will be required to immediately take over all work currently in progress by the outgoing contractor, during the appropriate phase.
83	RFP	2.6	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	Is there a backlog of LCPCS comprehensive face-to-face assessments the contractor will be expected to address?	No, but the incoming Contractor will be responsible for completing previously scheduled face-to-face assessments during the appropriate phase of the transition period.
84	RFP	2.1	Call Center Operations to Provide Effective Information and Referral	7	Can the state please provide the average handle time for information and referral incoming calls?	See response to Question #65.
85	RFP	2.15	Participant and Service Monitoring for All LTPCS Participants	24	Can the state please provide the average handle time for outbound monthly case monitoring calls?	See response to Question #66.
86	RFP	2.4.5	Make appropriate Level of Care	14	Can the state please provide the volume or percentage of Level of Care screenings result in a request for medical data when ITC data is not met?	See response to Question #68.

			screening decisions			
87	RFP	2.4.1.2	Tools used for Level of Care Screening, Eligibility Determination and Resource Allocation for OAAS LETSS Applicants	12	Does the level of effort given for the face-to-face (1 hour - 1.5 hours) include travel time?	See response to Question #69.
88	RFP	2.7.1.1	Adhere to Expectations for Essential Workflow Elements	20	Can the state please provide the volume or percentage of face to face visits that include voter registration assistance?	See response to Question #70.
89	RFP	2.8	Develop Plan of Care for LTPCS Participants	20	During the face to face visit, what is the average length of time to complete the plan of care?	See response to Question #71.
90	RFP	2.10	Provide Freedom of Choice of Providers to LTPCS Participants	21	Is the freedom of choice confirmation tracked in the contractor's system or entered directly into Data Management Contractor's system?	See response to Question #72.
91	RFP	2.1	Call Center Operations to Provide Effective	7	Can the state please provide historical information and referral call volume?	Information and Referral Calls: 2017 – 10,907 2018 - 3,681 2019 – 3,171

			Information and Referral			
92	RFP	2.4	Provide Level of Care Screening and Program Eligibility Determination for All OAAS LTS Applicants	12	Can the state please provide historical level of care screening and determinations volume?	Refer to Annual Contractor Volumes for Period 01-01-2017 through 07-31-2020 in the procurement library for the Total LOCETS and Total Assessments completed by month and year.
93	Cost Template	Cost Template 1	Cost Template 1	Cost Template 1	Can the state please provide historical appeal volume for each assessment?	Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 in the procurement library for the volume of Appeals by month and year. This information is not tracked by assessment type.
94	RFP	3.2	Key Staff Positions	35	Can the state please confirm each of the three required positions need to be full-time employees?	Confirmed.
95	Cost Template	Cost Template 1	Cost Template 1	Cost Template 1	Out of the 1,544 face-to-face monthly assessment volume, how many are initial assessments versus recertifications?	This number is used solely for the purposes of evaluating costs. The rate for initial assessments and recertification assessments shall be the same.
96	RFP	2.15	Participant and Service Monitoring for All LTPCS Participants	24	Are the quarterly in-home visits required under Case Management included in the face-to-face assessment volume?	No. These are separate requirements. Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 in the procurement library for the volume of Initial Assessments, Re-Assessments, Plans of Care and Client Monitoring by month and year.

97	RFP	General	General	General	Can the state please provide a volume projection for the term of the contract? If not, does the state expect significant volume fluctuation during the contract term?	<p>LDH cannot provide projections for the term of the contract.</p> <p>Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 in the procurement library for the historical volume by month and year.</p>
98	RFP	4.1.1	General Requirements	38	Other than call center capabilities and scheduling contractor resources to perform assessments, what IT functions are expected to be provided by / performed in contractor IT systems?	<p>The Contractor's system must be able to complete all functions required to successfully perform the services detailed in this RFP, including but not limited to:</p> <ul style="list-style-type: none"> • Sending nightly data feeds to the Data Contract Manager • Receiving and processing nightly data feeds from the Data Contract Manager • Sending weekly data files to Medicaid • Receiving and processing weekly data files from Medicaid • Generate notices • Develop real time reports that are housed in the Contractors system that can be pulled the LDH/OAAS LTC Access Contract Manager and OAAS Data Analytics Team at any point • Develop ad hoc reports • Receive and process data feeds from the Fiscal Intermediary • Interoperate with State systems • Sending information to and from OPTS • Receiving information to and from OPTS

						<ul style="list-style-type: none"> • Processing information to and from OPTS • House all incoming/outgoing faxes, emails, or other documentation received in a participants record • Capture provider selection • Capture plan of care begin/end certification dates, along with having the ability to edit • House call interaction
99	RFP	4.1.6	General Requirements	38	Although specifics are to be determined after award – what general types of data are to be collected in contractor systems and transmitted to LDH?	<p>The Contractor's System must collect and transmit sufficient data to successfully perform the services detailed in this RFP, including but not limited to:</p> <ul style="list-style-type: none"> • All notices generated, date generated, and dates mailed. • Provider selection information, address of provider, and phone number of provider. • Prior Authorization information and plan of care begin and end dates. • All phone call/email interaction. • All responsible representative information. • All incoming and outgoing mail pertaining to a participant/applicant. • All incoming faxes and emails pertaining to a participant/applicant.

100	RFP	4.2.3	HIPAA Standards and Code Sets	40	Which of the X12 transactions are required to be implemented to complete the SOW?	<p>As set forth in 4.2.3 and 4.2.5, transaction types may include, but are not limited to, the following:</p> <ul style="list-style-type: none"> • ASC X12N 834 Benefit Enrollment and Maintenance; • ASC X12N 270/271 Eligibility/Benefit Inquiry/Response; and • ASC X12N 278 Utilization Review Inquiry/Response. <p>However, transaction types are subject to change and the Contractor shall comply with applicable Federal and HIPAA standards and regulations as they occur.</p>
101	Attachment V	35a.	Integrated Software Systems	15/21	How would the Contractor's system connect with LDH systems to achieve interoperability? (API, web services, file exchanges, etc.). ?	See Attachment XII in part 5 of this addendum.
102	Attachment V	35a.	Integrated Software Systems	15/21	In general, how would the Contractor's system connect with LDH systems to achieve interoperability? (API, web services, file exchanges, etc.).	See response to Question #101.
103	RFP	7.13	Number of Copies of Proposals	66	May bidders provide the Redacted Copy in electronic version only, such as USB?	If a Proposer designates part of the proposal that contains a trade secret and/or privileged or confidential proprietary information as "confidential" in order to claim protection, if any, from disclosure, in accordance with 17.14.3 of this RFP, the Proposer shall submit one redacted hard copy (7.13.1.3) and one electronic redacted

						copy of the proposal on a USB flash drive (7.13.1.5).
104	RFP	7.8.3	Determination of Responsibility	65	Given the length of our audited financial statements (more than 200 pages), can Bidders provide these documents in electronic format only, such as USB?	The Proposer must submit one (1) original and seven (7) numbered copies of their audited financial statements for the last two (2) years, as well as, a searchable electronic copy of on two (2) separate USB flash drives.
105	RFP	7.13	Number of Copies of Proposals	66	The process of printing/compiling printed proposals is a hands-on process that requires multiple persons in close proximity; no way to social distance. In the interest of both sustainability and spread of illnesses, please consider a change of delivery requirements from hard copy to an all-electronic submission, preferably via email or Portal upload. If not possible, we recommend 1 original in print with multiple USBs for copies.	The RFP mandates hard copies.
106	RFP	8.3.4	Transition Period Requirements and Penalties	77	This section refers to a written work plan (Transition/Implementation Plan) due to LDH within thirty (30) Calendar Days from the contract award date. Please explain what is meant by a written work plan? Is the written work plan a narrative document or a project schedule?	The Transition/Implementation Plan should detail the Proposer's plan and schedule for completing the work necessary for timely and successful completion of each of the Readiness Review and Transition Period requirements.
107	Attachment V	N/A	N/A	N/A	Please confirm that a project transition schedule is not required to be submitted with this proposal.	A project transition schedule is not required to be submitted with the proposal.
108	RFP Transition Requirements	8.1	TRANSITION REQUIREMENTS Overview	91	Please confirm that the Three Phase Transition requirements are only applicable to a "new, incoming contractor" as stated in Section 8.1 and not an incumbent vendor. Additionally, please confirm that Payment terms by the phased	The transition plan requirements are only applicable to a new, incoming contractor. Payment terms per the phased transition are only applicable to a new, incoming contractor.

					transition are only applicable to a new incoming contractor.	
109		Attachment VII - Cost Template	Cost Template Part 1	Cost Template Part 1	Please confirm that the pricing for an incumbent contractor would be based on actual volumes by month from the start date of the new contract for Face to Face assessments, Case Monitoring, and Plans of Care and a fixed monthly fee for Administrative services.	Confirmed.
110		Attachment VII - Cost Template	Cost Template Part 1	Cost Template Part 1	Please confirm that Row 9 "Total Monthly Cost Proposal" should also include the row 43 Total Administrative cost. The row 9 total currently only includes the sum of the transaction based activities on row 44 through row 46.	Confirmed. See attachment VII in part 4 of this addendum.
111	Attachment V	PART II	Corporate Experience	3, 4, 5	Will the State confirm the experience and contracts information required for the Corporate Experience section of the proposal response must be only for the prime bidder and not include information from subcontractors?	Yes, as stated.
112	RFP	7.21.1.3	Scoring for Veteran-Owned and Service-Connected Disabled Veteran-Owned Small Entrepreneurs (Veteran Initiative) and Louisiana Initiative for	72, 73	<p>1. Will the State confirm the calculation of Veteran and Hudson points awarded for a Proposer, that is not a certified Veteran or Hudson Initiative small entrepreneurship, is the percent of total bid price projected to be performed by Veteran/Hudson firms, multiplied by the appropriate number of evaluation points (54 for Veteran firms and 45 for Hudson firms)? For example, a Proposer projecting 5% of contract work to be performed by a Veteran firm, and an additional 5% performed by a Hudson firm, would be awarded a total of 4.95 points (5% of 54 points plus 5% of 45 points)?</p> <p>2. Further that the total bid price is the Proposer's</p>	<p>1) The Proposer shall receive points equal to the net percentage of contact work which is projected to be performed by or through certified small entrepreneurship Subcontractors, multiplied by the appropriate number of evaluation points. The proposer should comply with 7.21.1.4.3 in providing the scope of work information so LDH can determine if there is any duplication or overlap.</p> <p>2) No, the proposer's total monthly cost will not be multiplied by 36. As stated in 7.20.1.2., the</p>

			Small Entrepreneurs (Hudson Initiative) Programs Participation		total monthly price for all services in Attachment VII, Cost Template multiplied by 36 months? 3. Also, that the amounts used for expenses paid by volume are the unit prices bid multiplied by the estimated volumes listed in Attachment VII?	<p>Proposers shall receive points for cost based on the following formula:</p> <p>CCS = (LPC /IPC) *112</p> <p>-CCS = Computed Cost Score (points) for Proposer being evaluated</p> <p>-LPC = Lowest Total Monthly Cost Proposal of all Proposers</p> <p>- IPC = Individual Total Monthly Cost Proposal (Line 9 in the "Access RFP Cost Template," Attachment VII).</p> <p>3) Yes, the Cost provided by the Proposer for "6. Price per Face-to-Face Assessment," "7. Price per Plan of Care," and "8. Price per participant cost of case monitoring" will be multiplied by the estimated Monthly Volume totals to determine the estimated Monthly Total.</p>
113	RFP	General	n/a	n/a	Please confirm that all visits will be conducted face-to-face?	See response to Question #10.
114	RFP	General	n/a	n/a	During phone and face-to-face in-home monitoring interviews, can you more fully describe what information is needed from the recipient especially as it relates to suspected neglect and abuse?	The Contractor will be given a monitoring form that must be completed, which will contain the required questions to ask.
115	RFP	General	n/a	n/a	What would be the anticipated number of monthly phone monitoring calls?	See response to Question #50.

116	RFP	General	n/a	n/a	What would be the anticipated number of quarterly face-to-face in-home visits?	Refer to Annual Contractor Volumes for Period 01-01-2017 – 07-31-2020 in the procurement library for the volume of Client Monitoring Visits by month and year.
117	RFP	General	n/a	n/a	During appeal hearings, can you more fully describe what information is needed from the recipient to file an appeal request for their specific service program?	Appeal requests will be filed with the Division of Administrative Law, not the Contractor. Should the Contractor receive an appeal request, it should be forwarded to the Division of Administrative Law.
118	RFP	General	n/a	n/a	What would be the anticipated number of monthly appeals?	See response to Question #48.
119	RFP	Table of Attachments	n/a	n/a	Please confirm if Attachment IX Electronic Vendor Payment Solution is to be submitted with proposals.	No. The Proposer is not required to submit Attachment IX with their proposal.
120	RFP	7.14.1	n/a	n/a	The RFP States "Any proposal copyrighted or marked as confidential or proprietary in its entirety may be rejected without further consideration or recourse." Please clarify what is meant by copyrighted in its entirety. Most proposals carry the © symbol after their company name, which is placed on the footers of all pages.	If the entirety of the proposal is intended to be marked "proprietary and confidential," then it will not be evaluated. This does not refer to a copyright mark for an entity logo.

121	Attachment V	Part X, #35	Integrated Software Systems	15/21	In question #35 it says "For questions 34a and 34b". It appears this should be "35a and 35b", please confirm.	See Attachment V in part 3 of this addendum.
122	RFP	4.1.2, 4.1.3	General Requirements	38	1. Does the Contractor data system (non-web-based applications) need to be NIST compliant? 2. Does it only apply to web-based applications?	See Section 10.35 of this RFP.
123	Attachment XI	5.1	Ownership and Disclosure Information Entity/Business	66	Please advise where to include Attachment XI in proposals.	See revision 11 in part 2 of this addendum.
124	Attachment V	7.17.1.2	Proposal Submission	68	Page 1 of Attachment V states that it should be provided as Appendix A of proposals, while RFP section 7.17.1.2 states it should be included after Attachment I. Please confirm location	See revision 11 in part 2 of this addendum.
125	Attachment V, Part XIII	7.17.1.2.13, ATT V, Part XIII.39	Cost	68, 20/21	Section 7.17.1.2.13 refers to section as "Cost", while Attachment V Part XIII refers to it as "Contract Transitions". Kindly please clarify which is correct.	See revision 11 in Part 2 and Part XIII in part 3 of this addendum.
126	RFP	7.18	Proposal Format	69	7.18.6, 7.18.7 and 7.18.8 provide instructions on how to submit Parts I-XIV, but there is no mention of Part XIII Cost. Kindly confirm that Part XIII Cost is to be submitted in a separate binder.	See revision 13 in Part 2 of this addendum.

127	RFP	N/A	General	N/A	For each of the calendar years 2017, 2018, and 2019, please provide: a. Outbound call volumes b. Call average handle time c. Volume of face-to-face assessments by parish	a. Refer to Additional Contractor Volumes 10-2020 through 10-21 for the volume of outbound calls by month and year. b. Call average handle time is not tracked. c. This is not tracked.
128	RFP	N/A	General	N/A	Please describe the Vendor's responsibilities for screenings, assessments, plans of care, freedom of choice, or follow up confirmation of service delivery for new or already served individuals during a state or local emergency, such as when relocations of individuals are required due to a hurricane, or when individuals may be unreachable due to the effects of a hurricane.	The Contractor's responsibilities with respect to screenings, assessments, plans of care, freedom of choice or follow up confirmation of service delivery do not change during a state or local emergency.
129	RFP	1.2.1	Purpose of Request for Proposals (RFP)	3	The RFP states, "The purpose of this RFP is to solicit proposals from qualified organizations that can provide access to the key Long Term Supports and Services (LTSS) programs listed in 1.1.8 and do so in a manner that provides informed choice and assures access to services." The RFP does not have a section 1.1.8. Please clarify.	See Revision 2 in Part 2 of this addendum.
130	RFP	2.1.3.1	Call Center Operations to Provide Effective Information and Referral	7	The RFP notes that the contact center shall disseminate information to callers regarding "OAAS program options as noted in Sections 1.1.7. through 1.1.9.5."	See Revision 3 in Part 2 of this addendum.

					However, there is no section 1.1.7 through 1.1.9.5. Please clarify.	
131	RFP	2.1.4.2	Telephone Access and Automated Call Distributor (ACD)	7-8	<p>The RFP states, "The 1-800 number and the ACD shall provide prompt (within four (4) rings or less) live answering during Business Hours (8:00 am to 5:00 pm Central Time M-F) excluding official State holidays."</p> <p>With a call flow when a caller dials the 800 number, is presented with some basic menu options, and then is queued to an agent, please confirm that "4 rings" refers to the amount of time between the caller making their menu selection and their speaking to an agent.</p>	Confirmed.
132	RFP	2.1.8.1.3	Provide program choice information	10	<p>The RFP includes a performance indicator for e-mailing Local Governing Entities in the event a warm hand off cannot be completed at the time of the call: "Performance Indicator: The Contractor will email the LGE, within twenty-four (24) hours of the call, in those instances in which the warm hand off could not be completed at the time of the call."</p> <p>Please change the requirement to 1 business day, or allow an exception for calls requiring a warm transfer late in the day before a weekend or holiday.</p>	This performance indicator will not be changed.

133	RFP	2.1.9	Utilize a current statewide comprehensive resource directory of long term supports and services	10	Please confirm that the Contractor would receive the existing directory from the incumbent or the Department, and the Vendor would maintain that existing directory.	The Contractor is required to develop and maintain their own resource directory.
134	RFP	2.1.9	Utilize a current statewide comprehensive resource directory of long term supports and services	10	Please describe the expected format of the resource directory.	<p>This must be accessible to all staff at all times, including OAAS staff, in real time.</p> <p>The resource directory should include the following (at minimum):</p> <ul style="list-style-type: none"> • Resource Name • Resource Phone Number • Resource Address • Services provided by this resource • Basic eligibility requirements to access resource • Areas (Cities, Parishes, Regions) served by this resource • Any other information Contractor deems fit.
135	RFP	2.1.9	Utilize a current statewide comprehensive resource directory of long term supports and services	10	<p>Please further describe the processes and expectations for contractors regarding maintenance of the resource directory. For example:</p> <p>a) Does the state provide updated provider information?</p> <p>b) Is the Contractor required to perform outreach to obtain updates?</p> <p>c) Is the Contractor expected to update the</p>	See Revision 4 in Part 2 of this addendum.

					resource directory in response to data obtained through the LT-PCS process? d) Do providers or resource entities update the resource directory themselves?	
136	RFP	2.1.9	Utilize a current statewide comprehensive resource directory of long term supports and services	10	The RFP states: "The Contractor shall also establish a system to identify local gaps in services and report to OAAS." Please provide additional detail regarding this requirement and expected requirements of the Contractor system.	See response to question 34.
137	RFP	2.1.10.1	Provide written information	10	Will all written materials be generated in the Contractor system? Or will there be written materials generated in a State or 3rd party system that the Contractor is responsible for mailing to applicants and families?	All written materials will be generated in the Contractor's system.
138	RFP	2.2	Call Center Location	10-11	Would OAAS permit some or all of the call center operations to be performed in a remote/work-from-home capacity?	A Proposer seeking a modification of the contract terms set forth in the RFP or its attachments should submit an exception for the Department's consideration in accordance with Section 7.28 of the RFP.
139	RFP	2.4.1	Tools used for Level of Care Screening, Eligibility Determination and Resource Allocation	12	Please describe OAAS LOCET training - is training virtual or onsite or both?	The LOCET training will be conducted in person.

			for OAAS LTSS Applicants			
140	RFP	2.4.1	Tools used for Level of Care Screening, Eligibility Determination and Resource Allocation for OAAS LTSS Applicants	12	Please describe OAAS LOCET training - how many hours is training and over what time period?	The LOCET training is expected to be take approximately 1 Business Day (6-8 hours).
141	RFP	2.4.1	Tools used for Level of Care Screening, Eligibility Determination and Resource Allocation for OAAS LTSS Applicants	12	Please describe OAAS LOCET training - is training available as new assessors are onboarded?	For initial onboarding, all staff will be trained at the same time. OAAS will provide additional training during and immediately after the transition for new staff. After the transition period, the train-the-trainer method will be used and the Contractor will be responsible for training new hires.
142	RFP	2.4.1	Tools used for Level of Care Screening, Eligibility Determination and Resource Allocation for OAAS LTSS Applicants	12	Please describe OAAS LOCET training - does the OAAS provide on-demand education videos, or Louisiana specific level of care guides as supplements to training?	OAAS will provide training material to LOCET staff.

143	RFP	2.4.1.1	Provide Level Of Care Screening and Program Eligibility Determination for All OAAS LTSS Applicants	12	Please provide a copy of the LOCET.	This document cannot be shared until the contract is awarded.
144	RFP	2.4.1.1	Provide Level Of Care Screening and Program Eligibility Determination for All OAAS LTSS Applicants	12	What languages is the LOCET available in?	The LOCET is available in English only. The Contractor is responsible for providing oral interpretation services to callers and written translation of documents.
145	RFP	2.4.2.1	Timely Level of Care Screening using the Level of Care Eligibility Tool	13	Are the NF LOCET and the Community option LOCETs two different versions of the same tool?	Yes, the Nursing Facility LOCET and community option LOCET are different versions of the same tool. The differences will be explained during training.
146	RFP	2.4.2.1	Timely Level of Care Screening using the Level of Care Eligibility Tool	13	If the NF LOCET and community option LOCETs are two versions of the same tool, what percentage of items do they share?	See response to question 145.

147	RFP	2.4.2.1	Timely Level of Care Screening using the Level of Care Eligibility Tool	13	If there are two versions of the LOCET, and they share items, must the Vendor administer shared items twice to the individual and/or their representative to satisfy the requirement noted in 2.4.2.1?	If an applicant calls to complete both a community option LOCET (LTPCS, PACE, or Wavier) and a Nursing Facility LOCET, then both LOCETS must be completed in their entirety.
148	RFP	2.4.2.1.3	Timely Level of Care Screening using the Level of Care Eligibility Tool	13	The RFP includes: "Performance Indicator: For applicants who are identified and referred by OAAS as active protective services clients, and who are in a hospital, ninety-five percent (95%) of LOCETs will be completed on the same day as the phone request. One hundred percent (100%) shall be completed in two (2) Calendar Days after the call." Would the Department consider business days instead of calendar days?	See revision 6 in part 2 of this addendum.
149	RFP	2.4.5.1.2	Make appropriate Level of Care screening decisions	14	For each of the calendar years 2017, 2018, and 2019, please provide the annual volume of LTPCS cases that require mailing the Physician Medical Data form to the physician for a medical deterioration review.	Refer to Annual Contractor Volumes for Period 01-01-2017 through 07-31-2020 in the procurement library for the volume of Physician Medical Data forms (# MEDDET) mailed in calendar year 2019. This information was not tracked for calendar years 2017 and 2018.
150	RFP	2.4.5.1.2	Make appropriate Level of Care screening decisions	15	For each of the calendar years 2017, 2018, and 2019, what was the average time from request to receipt of the completed Medical Data Form?	Applicants have thirty (30) days to submit the document back to the Contractor. 2017: approximately 15.21 days 2018: approximately 15.65 days 2019: approximately 15.02 days

151	RFP	2.4.6 AND 2.6.7	Send appropriate notices for Level of Care screening decisions AND Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	15 AND 19	For each of the calendar years 2017, 2018, and 2019, please provide the annual volume of LOC: a) Initial Approvals b) Initial Denials c) Recertification of need and status change approvals d) Recertification of need and status change denials	2017 a) Initial Approvals – 2,994 b) Initial Denials -1,717 c) Recertification of need and status change approvals – 6,573 d) Recertification of need and status change denials - 852 2018 a) Initial Approvals – 3,045 b) Initial Denials -1,378 c) Recertification of need and status change approvals – 7,217 d) Recertification of need and status change denials - 843 2019 a) Initial Approvals – 3,321 b) Initial Denials -1,691 c) Recertification of need and status change approvals – 7,089 d) Recertification of need and status change denials - 684
152	RFP	2.6	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	What percent of face-to-face interRAI-HC assessments occur in hospital settings vs. in-home settings?	The following percentages represent assessments in a hospital setting. 2017 – 0.0065% 2018 – 0.0020% 2019 – 0.0025%

						<p>The following percentages represent in-home assessments:</p> <p>2017- 99.3%</p> <p>2018- 99.8%</p> <p>2019- 99.7</p>
153	RFP	2.6	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	Please describe any observational skill demonstration or knowledge testing that must be passed/completed at the conclusion of initial training on the interRAI for assessors to be certified on the interRAI.	In order to be certified to administer the interRAI HC assessment, an individual must complete the training specified by OAAS, then achieve a passing score on the competency-based evaluation. To pass the competency-based evaluation, the individual must demonstrate the ability to properly complete the interRAI HC assessment by administering a field assessment and conducting a one-on-one review of that assessment.
154	RFP	2.6	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	During the ongoing COVID-19 pandemic, has OAAS permitted interRAI-HC assessments to be performed telephonically or via telehealth?	Yes, OAAS received approval from CMS to complete the interRAI HC assessments virtually. This approval expires upon expiration or termination of the COVID-19 public health emergency.
155	RFP	2.6	Conduct Face-to-Face Assessment Visits for LTPCS	16	During emergent situations or with prior approval, would OAAS permit interRAI-HC assessments to be performed telephonically or via telehealth in the new contract term?	See response to Question #10.

			Applicants and Participants			
156	RFP	2.6.1	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	What will the EVV system be used to record, e.g., individual, reason for visit, visiting professional role and name, and the start and finish of onsite assessment visits.	<p>For the purpose of the Contractor's work, the EVV system will record the following:</p> <ul style="list-style-type: none"> • Name of Participant • Assessor Name • Assessment Type • Clock in date and time • Clock out date and time • Geolocation of clock in and clock out
157	RFP	2.6.2	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	Please describe OAAS interRAI HC training - is training virtual or onsite or both?	The interRAI HC assessment training includes an online course and a 2 day in-person training.
158	RFP	2.6.2	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	Please describe OAAS interRAI HC training - how many hours is training and over what time period?	The required online course, which must be completed prior to the in-person training, takes approximately two (2) hours. The two (2) day in-person training will be approximately sixteen (16) hours. After completing training, assessors are required to pass an exam. The assessor has five (5) business days to complete the exam and is given three (3) attempts (on separate days to pass). If the exam is not passed by the third attempt, the assessor must complete the two (2) day in-person training again.

159	RFP	2.6.2	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	Please describe OAAS interRAI HC training - is training available as new assessors are onboarded?	For initial onboarding, all staff will be trained at the same time. Depending upon the number of individuals to be trained, the training may be split into two (2) groups. After the initial onboarding, OAAS will conduct an interRAI HC assessment training once per month.
160	RFP	2.6.2	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	Please describe OAAS interRAI HC training - does the OAAS provide interRAI HC manuals, on-demand education videos, or Louisiana specific guides as supplements to training?	<p>OAAS will provide all training materials, such as PowerPoints, exercises, and hand outs, for individuals being trained.</p> <p>OAAS will provide an initial set of interRAI HC assessment manuals that remain property of LDH. The Contractor will be responsible for purchasing any additional manuals needed. OAAS training staff may provide education videos and/or written guidance periodically. OAAS will be available for technical assistance regarding any interRAI HC assessment questions.</p>

161	RFP	2.6.4	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	16	<p>The RFP states, “Contractor must review the Participants Medicaid eligibility to ensure the Participant is a correct Medicaid type case and category code to receive LTPCS services.”</p> <p>Please clarify how the Contractor is expected to access Medicaid eligibility data, e.g., through manually logging into the EMEVS, through a live data feed to the Contractor’s system, etc.</p>	<p>The Contractor will access the MMIS system using the Web and a log in.</p> <p>The State will provide specific training on the MMIS system.</p>
162	RFP	2.6.5 AND 2.6.6.1	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	17-18 AND 19	Please describe OAAS continued participation review training - is training virtual or onsite or both?	The training will be conducted in person.
163	RFP	2.6.5 AND 2.6.6.1	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	17-18 AND 19	Please describe OAAS continued participation review training - how many hours is training and over what time period?	<p>Training on Level of Care and program eligibility will be conducted as part of the LOCET and interRAI HC assessment trainings.</p> <p>LOCET Training – The required LOCET training consists of an eight (8) hour mandatory classroom (face-to-face) training for all staff completing and supervising the completion of LOCETs. After the mandatory class room training, each supervisor will complete one-on-one training, with OAAS or its designee, utilizing live calls from the phone queue. Upon OAAS’s satisfaction that supervisors have the knowledge and understanding, the train-the-trainer method</p>

						<p>will be used, wherein the supervisors will complete the one-on-one training, utilizing live calls to train LOCET staff.</p> <p>See responses to Questions #157 and 158. A separate training on the Statement of Medical Status form will take approximately 4 hours.</p> <p>After the initial onboarding, the Contractor will be responsible for training new employees.</p>
164	RFP	2.6.5 AND 2.6.6.1	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	17-18 AND 19	Please describe OAAS continued participation review training - is training available as new assessors are onboarded?	<p>For initial onboarding, all staff will be trained at the same time. Depending upon the number of individuals to be trained, the training may be split into two (2) groups.</p> <p>OAAS will provide additional training for new staff for a period of time, after which, the train-the-trainer method will be used and the Contractor will be responsible for training new hires.</p>
165	RFP	2.6.5 AND 2.6.6.1	Conduct Face-to-Face Assessment Visits for LTPCS Applicants and Participants	17-18 AND 19	Please describe OAAS continued participation review training - does the OAAS provide manuals, on-demand education videos, or Louisiana specific guides as supplements to training?	OAAS will provide a prerequisite online video that outlines how to accurately determine where a participant meets level of care and program eligibility criteria. There are no manuals or videos for the Statement of Medical Status. The Contractor will be provided with necessary training materials at the time of training.
166	RFP	2.8	Develop Plan of Care for LTPCS Participants	21	<p>The RFP states, "If the POC is approved, a final POC will be mailed to the Participant."</p> <p>To fulfill this requirement, please confirm the Contractor may provide the printed POC at the time of the assessment.</p>	No, the Contractor must mail the final plan of care packet to the Participant no more than fifteen (15) Calendar Days prior to end of the certification period.

167	RFP	2.8	Develop Plan of Care for LTPCS Participants	21	<p>The RFP states, "If the POC is approved, a final POC will be mailed to the Participant."</p> <p>To fulfill this requirement, please confirm the Contractor may provide POC via electronic method – secure email or portal – if agreed by participant.</p>	Confirmed.
168	RFP	2.10.1	Provide Freedom of Choice of Providers to LTPCS Participants	22	<p>The RFP states, "The Contractor shall provide the Participant with a freedom of choice listing of available service provider agencies and shall explain the freedom of choice process."</p> <p>Please provide more information on how the Contractor accesses the freedom of choice listing of service provider agencies:</p> <ul style="list-style-type: none"> a. In what system is it managed today? b. What are the expected Contractor tasks associated with hosting/managing this list? c. Where does the Contractor input the Applicant's selection of Provider? 	<ul style="list-style-type: none"> a. The Freedom of Choice data is hosted in the Fiscal Intermediary's system. b. The Contractor's system must receive and process the Freedom of Choice data file nightly. c. The Contractor's system must capture the provider selected and send provider selection updates to the Data Management Contractor nightly.
169	RFP	2.13.1	Perform Phone Follow-Up to Confirm Service Delivery	23	Please indicate how the Vendor accesses confirmation of issuance of prior authorization by the Data Management Contractor.	The Data Management Contractor will provide a nightly data feed to the Contractor containing the prior authorization number and the date created/issued.

170	RFP	2.14.1 AND 2.14.3	Participate in Appeals	23 AND 24	For each of the calendar years 2017, 2018, and 2019, please identify whether any docketed appeals did not result in an appeal hearing	2017 – 154 appeals did not result in a hearing 2018 – 155 appeals did not result in a hearing 2019 – 135 appeals did not result in a hearing
171	RFP	2.14.3	Participate in Appeals	24	For each of the calendar years 2017, 2018, and 2019, please confirm what percentage of annual appeals participation by Vendor staff is conducted by phone and what by onsite attendance.	2017 – .0014% of appeals conducted in person (2 appeals total) 2017 – 99% of appeals conducted via phone 2018 – 0% appeals were in person 2018 – 100% of appeals conducted by phone 2019 – 0% appeals were in person 2019 – 100% of appeals conducted by phone 2020 – 0% of appeals were in person 2020 – 100% of appeals conducted by phone
172	RFP	2.15	Participant and Service Monitoring for All LTPCS Participants	24	Does the OAAS have a specific provider quality questionnaire or protocol that the Vendor is to complete as part of the provider quality review? If so, please provide the protocol.	No.
173	RFP	2.15.3	Participant and Service Monitoring for All LTPCS Participants	25	In what system does the Vendor check for documentation of the Participant's Worker Back-up Plan?	This Participant's Worker-Back-up Plan is not currently maintained in any specified system.
174	RFP	2.16	Additional Participant Contacts	26	For each of the calendar years 2017, 2018, and 2019, please provide the volume of additional	This information is not tracked.

					participant contacts (when emergency situations warranted) that were expected to be provided.	
175	RFP	2.21	Provide Adequate Training for Development of Plan of Care	28	Please confirm that the OAAS system serving as capture for the interRAI permits use of interRAI-HC clinical assessment protocols (CAPS) for the Contractor's use in developing plans of care.	The Contractor will be required to develop Plans of Care utilizing the template provided by OAAS. OAAS plans implement a web-based Plan of Care in 2022, which will be hosted in the OAAS system.
176	RFP	2.25.7	Provide Adequate Training for All Contractor Staff	31	Please describe the activities required for assessors to be recertified every three years.	In order to be recertified for the interRAI HC assessment, assessors must complete rectification training and pass the interRAI HC recertification exam.
177	RFP	4.1.3	General Requirements	38	<p>The RFP states, "All Contractor applications, operating software, middleware, and networking hardware and software shall be able to interoperate as needed with LDH's systems and shall conform to applicable standards and specifications set by LDH."</p> <p>Please define "interoperate." For example, is there an expectation that the Contractor applications will receive information from LDH's systems, pass information to LDH's systems or both (receive and pass)? If so, please describe.</p>	See revision 10 in part 2 of this addendum.
178	RFP	4.4	OAAS Systems	41	Please provide more information regarding the functionality of the "OAAS identified assessment system." For example, does it support scheduling/assignment of the assessment to a field assessor, or is that the responsibility of the Contractor's system?	OPTS (the OAAS identified assessment system) does not support scheduling/assignment of assessments to a field assessor. This is the responsibility of the Contractor.

179	RFP	4.4	OAAS Systems	41	Please confirm the OAAS identified system provides data on assessment completion volumes and completion timelines.	OPTS does not provide data on assessment completion volumes and completion timelines. This is the responsibility of the Contractor.
180	RFP	4.4	OAAS Systems	41	For all state systems (OPTS, OAAS identified assessment system, LaSRS EVV system, and SharePoint), please describe how the Contractor's staff will access (web portal, VPN, etc.).	OPTS and the EVV System will be accessed using the web. The Contractor will not have access to the OAAS SharePoint site.
181	RFP	4.4	OAAS Systems	41	Please provide more information about the expected requirements of the Contractor's system vs. the systems provided by the State.	The Contractor's system should include necessary functionality to execute the deliverables and report out information described in the RFP. The State's system houses demographic information, LOCET, the interRAI HC assessments, and the LTPCS electronic Plan of Care. See response to question 98
182	RFP	7.12.1	Hard Copy Proposal Submission	65	Due to the ongoing COVID-19 pandemic, will there be someone onsite to receive the proposal submission? If that cannot be guaranteed, will the Customer accept electronic submissions?	Yes, OAAS staff are onsite and available to receive the proposal submissions. No, electronic submissions will not be accepted.
183	RFP	7.12.1	Hard Copy Proposal Submission	65	Due to the ongoing COVID-19 pandemic, our proposal signatories are spread out across different jurisdictions. Please confirm the Customer will accept electronic signatures.	The State will accept electronic signatures as provided by LAC 4:I.701 et seq. See revision # 18 in part 2 of this addendum.
184	Annual Contract or Volumes for Period	N/A	Comprehensive LTSS Data January 1, 2019-	1-6	For each of the calendar years 2017, 2018, and 2019, what percent of face-to-face interRAI-HC assessments were cancelled and required rescheduling?	Refer to procurement library document titled Additional Call Volumes. See table titled By Type of Assessment, Average Number of Face-to-Face Appointments Missed

	01-01-2017 through 07-31-2020		December 31,2019			
185	Annual Contract or Volumes for Period 01-01-2017 through 07-31-2020	N/A	Comprehensive LTSS Data January 1, 2019- December 31,2019	3 of 6	<p>Please clarify the MedDet volumes added into the 2019 reporting:</p> <p>“MedDet” – are these the volume of LTPCS applications which required a Request to Physician for Medical Data?</p>	Correct.
186	Annual Contract or Volumes for Period 01-01-2017 through 07-31-2020	N/A	Comprehensive LTSS Data January 1, 2019- December 31,2019	3 of 6	<p>Please clarify the MedDet volumes added into the 2019 reporting:</p> <p>“MedDet Reviews” – are these the volume of Requests to Physician for Medical Data where the form was returned from the Physician?</p> <p>Are these volumes already included within the Recipient Correspondences counts (or are these in addition)?</p>	<p>“#MedDet Reviews” represents the number of forms returned by physician/applicant and reviewed by the Contractor.</p> <p>Yes, these volumes are included within the Recipient Correspondence counts.</p>
187	Annual Contract or Volumes for	N/A	Comprehensive LTSS Data January 1, 2019-	3 of 6	<p>Please clarify the MedDet volumes added into the 2019 reporting:</p> <p>“MedDet Denied,” “MedDet Incomplete,” and</p>	“#MedDet Denied” represents the number of forms reviewed by the Contractor and ultimately denied.

	Period 01-01- 2017 through 07-31- 2020		December 31,2019		“MedDet Approved” – are these the outcomes of the MedDet Reviews?	<p>“#MedDet Incomplete” represents the number of forms reviewed by the Contractor and found to be incomplete.</p> <p>“#MedDet Approved” represents the number of forms reviewed by the Contractor and ultimately approved.</p>
188	Attachment VII – Access RFP Cost Template	N/A	N/A	N/A	Comparing the cost form for face-to-face assessments and case monitoring to 2019 actuals, the 2019 actuals were ~30% lower in volumes. To assist Vendors to appropriately forecast volumes and calculate staff, please clarify what has driven the difference between the volumes assumed in the cost form and the actual performance volumes from 2019.	The number on the cost form is used solely for the purposes of evaluating costs.

Access Services for Long Term Supports and Services
RFP # 3000012190
REVISIONS TO THE RFP

PART 2- Revisions to the RFP

Revision 1 **Table of Contents is hereby amended to read as follows:**

Attachment XII Enterprise Architecture Integration Requirement for Enterprise/Statewide Systems – Revised 6/21/2021

Revision 2 **Section 1.2.1 Purpose of Request for Proposals (RFP) is hereby amended to read as follows:**

The purpose of this RFP is to solicit proposals from qualified organizations that can provide access to the key Long Term Supports and Services (LTSS) programs listed in 1.1.3 and do so in a manner that provides informed choice and assures access to services.

Revision 3 **Section 2.1.3.1 Call Center Operations to Provide Effective Information and Referral is hereby amended to read as follows:**

OAAS program options as noted in Section 1.1.3 and any other new Home and Community-Based Services developed by OAAS;

Revision 4 **Section 2.1.9.1 Call Center Operations to Provide Effective Information and Referral is hereby amended to read as follows:**

The Contractor shall develop and maintain an up to date directory of long term supports and services and other community resources for informational and referral purposes, and care planning. The Contractor shall also establish a system to identify local gaps in services and report to OAAS.

Revision 5 **Section 2.4.2.1.1 Provide Level of Care Screening and Program Eligibility Determination for All OAAS LTSS /Timely Level of Care Screenings using the Level of Care Eligibility Tool is hereby amended to read as follows:**

Performance Indicator: For applicants in hospitals, ninety-five percent (95%) of LOCETs will be completed on the same day as the phone request. One hundred percent (100%) shall be completed in two (2) Business Days after the call.

Revision 6 **Section 2.4.2.1.3 Provide Level of Care Screening and Program Eligibility Determination for All OAAS LTSS /Timely Level of Care Screenings using the Level of Care Eligibility Tool is hereby amended to read as follows:**

Performance Indicator: For applicants who are identified and referred by OAAS as active protective services clients, and who are in a hospital, ninety-five percent (95%) of LOCETs will be completed on the same day as the phone request. One hundred percent (100%) shall be completed in two (2) Business Days after the call.

Revision 7 Section 2.14.3.2 Participate in Appeals is hereby amended to read as follows:

Designated Contractor staff who participate in the hearing shall complete a hearing status report on the same day as the hearing and submit this information to OAAS. Hearing status reports must be submitted to OAAS prior to 4:30 pm CT, on the day of the hearing, unless the hearing ends after 4:30 pm CT. In instances where the hearing ends after 4:30 pm CT, the hearing status report shall be submitted immediately after the appeal has ended.

Revision 8 Section 2.26.1.1 Develop and Maintain Written Operations Manual is hereby amended to read as follows:

Performance Indicator: The Contractor Operations Manual shall be delivered in electronic format to OAAS for review and approval thirty (30) Calendar Days after to the Contract Start Date for review and approval by OAAS. The Contractor shall cooperate with OAAS to develop and maintain the protocols and business rules designed for the contract.

Revision 9 Section 2.27.4 and Implement a Quality Assurance and Quality Improvement Plan is hereby amended to read as follows:

The initial QA/QI plan shall be delivered to OAAS for review and approval no later than thirty (30) Calendar Days after to the Contract Start Date. OAAS will review and provide comments for needed revisions. If revisions are required, the Contractor shall have ten (10) Business Days to make revisions and to resubmit the plan to OAAS for approval.

Revision 10 Section 4.1.17 to include Sections 4.1.17.1 through 4.1.17.8 General Requirements is hereby added to read as follows:

The Contractor will develop a solution that utilizes each of the OTS Enterprise Architecture (EA) components described in Attachment XII Enterprise Architecture Integration Requirements. EA will provide additional functionality to the system by re-using components so that these functional areas are not duplicated within the proposed solution. The following are EA components that are expected to be used with the proposed solution:

- 4.1.17.1 API Gateway (APIGW)
- 4.1.17.2 Enterprise Service Bus (ESB)
- 4.1.17.3 Identity Access Management (IAM)
- 4.1.17.4 Data Warehouse (DWH)
- 4.1.17.5 Electronic Document Management System (EDMS)
- 4.1.17.6 Master Data Management (MDM)
- 4.1.17.7 Consumer Communications
- 4.1.17.8 Business Rules Engine (BRE)

Revision 11 Section 7.17.1.1 Technical and Cost Proposal Content is hereby amended to read as follows:

- 7.17.1.1 Technical Proposal
- 7.17.1.2 The completed and signed Attachment I, which is the certification statement.
- 7.17.1.3 The completed Attachment V which consists of the following sections:
 - 7.17.1.3.1 Mandatory Requirements
 - 7.17.1.3.2 Corporate Experience
 - 7.17.1.3.3 Organizational Structure
 - 7.17.1.3.4 Call Center Operations
 - 7.17.1.3.5 Telephonic Screening for Functional Eligibility
 - 7.17.1.3.6 Perform Face-to-Face Assessments for Program Eligibility and Service Planning
 - 7.17.1.3.7 Perform Care Planning
 - 7.17.1.3.8 Monitoring of Care Plan
 - 7.17.1.3.9 Appeals
 - 7.17.1.3.10 Integrated Software Systems
 - 7.17.1.3.11 Example Scenarios
 - 7.17.1.3.12 Contract Transitions
 - 7.17.1.3.13 Cost
 - 7.17.1.3.14 Veteran Hudson Initiatives
- 7.17.1.4 The completed Attachment VI, which provides the template for summarizing corporate experience
- 7.17.1.5 The completed and signed Attachment XI, which is the Ownership and Disclosure Information Entity/Business Form.
- 7.17.1.6 The completed Attachment VII, which is the cost template.

Revision 12 Section 7.18.7 Proposal Format is hereby amended to read as follows:

Responses to Parts I through XII and XIV should be included in one binder for hard copy submissions and must be clearly labeled with contents. The Proposer should duplicate Attachment V **“Proposal Submission,”** Parts I through XII and XIV and use as the index for each hard copy submittal. The response to each Part should be clearly labeled. Attachments should only be provided as requested in the **“Proposal Submission,”** and should be clearly labeled, including the Part and question number from the Requirements document.

Revision 13 Section 7.18.8 Proposal Format is hereby amended to read as follows:

Response to Part XIII should be included in a separate binder for hard copy submissions and must be clearly labeled with contents.

Revision 14 Section 7.19.6 Proposal Format is hereby amended to read as follows:

Scoring will be based on a possible total of four hundred forty-eight (448) points, and the proposal with the highest total score shall be recommended for award.

Revision 15 Section 10.35.1 Cybersecurity Training is hereby amended to read as follows:

In accordance with La. R.S. 42:1267(B)(3) and the State of Louisiana’s Information Security Policy, if the Contractor, any of its employees, agents, or subcontractors will have access to State government information technology assets, the Contractor’s employees, agents, or subcontractors with such access must complete cybersecurity training annually, and the Contractor must present evidence of such compliance annually and upon request. The Contractor may use the cybersecurity training course offered by the Louisiana Department of State Civil Service without additional cost.

For purposes of this Section, “access to State government information technology assets” means the possession of credentials, equipment, or authorization to access the internal workings of State information technology systems or networks. Examples would include but not be limited to State-issued laptops, VPN credentials to access the State network, badging to access the State’s telecommunications closets or systems, or permissions to maintain or modify IT systems used by the State. Final determination of scope inclusions or exclusions relative to access to State government information technology assets will be made by the Office of Technology Services.

Revision 16 Section 00.12.3 Employment of Personnel is hereby amended to read as follows:

The Contractor's key personnel assigned to the Contract shall not be replaced without the prior written consent of the State. Such consent shall not be unreasonably withheld or delayed provided an equally qualified replacement is offered. In the event that any State or Contractor personnel become unavailable due to resignation, illness, or other factors, excluding assignment to a project outside the contract, outside of the State's or Contractor's reasonable control, as the case may be, the State or the Contractor shall be responsible for providing an equally qualified replacement in time to avoid delays in completing tasks. The Contractor will make every reasonable attempt to assign the personnel listed in his proposal.

Revision 17 Section 7.20.1 Cost Evaluation is hereby amended to read as follows:

The total possible points for the cost proposal shall be one hundred twelve (112) which represents twenty-five (25%) percent of the total maximum points for the entire proposal.

Revision 18 DEFINITIONS is hereby amended to read as follows:

Original – denotes must be signed in ink or an electronic signature as provided by LAC 4:I.701 et seq.

LOUISIANA LTSS ACESS CONTRACTOR
PROPOSAL SUBMISSION
RFP # 3000012190

PROPOSER NAME:

THE PROPOSER MUST COMPLETE THIS FORM AND SUBMIT IT WITH THE PROPOSAL

In responding to this RFP, the Proposer should adhere to the specifications outlined in Section 7.0 of the RFP. The proposal should address all requirements listed in this attachment and should provide, in sequence, the information and documentation as required. The Proposer should complete only the first column of this form to provide an index referencing the location of your response to each item listed (page and section number). This completed form should be included Attachment I of your proposal. The LDH Proposal Review Team will review the proposer’s response to the RFP as outlined in this evaluation tool.

Any contract resulting from this RFP process shall incorporate by reference the respective proposal responses to all items as a part of said contract.

All Mandatory Requirements listed here must be included in the proposal. The LDH Division of Contracts and Procurement Support will review the proposal to determine if the Mandatory Requirement Items (below) are submitted and complete and mark each with included or not included.

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Page # of Response in Proposal	PART I MANDATORY REQUIREMENTS Any proposal submitted without all mandatory requirements will be disqualified from the evaluation process immediately.		Included	Not Included	Score
	1.	Provide the Proposal Certification Statement (Attachment I) completed and signed, in the space provided, by an individual empowered to bind the Proposer to the provisions of this RFP and any resulting contract. The Proposer must sign the Proposal Certification Statement without exception or qualification.			N/A
	2.	Provide a statement signed by an individual empowered to bind the Proposer to the provisions of this RFP and any resulting contract guaranteeing that there will be no conflict or violation of the Ethics Code if the Proposer is awarded a contract. Ethics issues are interpreted by the Louisiana Board of Ethics. (See Section 7.4 of the RFP.)			N/A
	3.	The Proposal shall include with its proposal copies of audited financial statements for the last two (2) years, including at least a balance sheet and profit and loss statement, or other appropriate documentation, which would demonstrate to LDH the Proposer's financial resources sufficient to conduct the project (See Section 7.8.3 of the RFP).			N/A

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Page # of Response in Proposal	PART II Corporate Experience		Recommended Page Limit	Points Allowed	Score
	4.	Describe your experience in managing long term care access services. Include how long you have been performing services required by this RFP, the contract location(s), populations served, number of participants, and contract scope (e.g., call center operations, telephonic screening for eligibility, assessments for program eligibility, care plan development and monitoring, and appeals).	3	5	
	5.	<p>Provide a listing of all of your organization's contracts for long term supports access services within the last five (5) years (including your parent organization, affiliates, and subsidiaries); or</p> <p>If your organization has not had any contracts for long term supports access services within the last five (5) years, identify the Proposer's ten (10) largest (as measured by number of participants served) contracts for other populations within the last five (5) years.</p> <p>The listing of contracts should be complete in the table format provided in Attachment VI. For each contract identified, provide each of the following items as a column in the table: the trade name, a brief description of the scope of work (including whether the Proposer was responsible for the provision of long term support services, etc.), the duration of the contract, the contact name, email and phone number for the contract monitor, the number of participants and the population types, and the role of major subcontractors, if any.</p> <p>LDH/OAAS may contact references and monitors for additional information that will be used in evaluating this proposal.</p>	See Attachment VI	4	

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Page # of Response in Proposal	PART II Corporate Experience (continued from Previous Page)		Recommended Page Limit	Points Allowed	Score
	6.	<p>For any of your organization's contracts listed in response to Question 4, has the other contracting party notified the Proposer that it has found your organization to be noncompliant with and/or in breach of the terms of your contract? If yes: (1) provide a description of the events concerning the non-compliance and/or breach, specifically addressing the issue of whether or not it was due to factors beyond the Proposer's control;(2) Was a corrective action plan (CAP) imposed? If so, describe the steps and timeframes in the CAP and whether the CAP was completed; (3) Was a sanction imposed? If so, describe the sanction, including the amount of any monetary sanction (e.g., penalty or liquidated damage); and (4) was the breach the subject of an administrative proceeding or litigation? If so, what was the result of the proceeding/litigation?</p> <p>Include your organization's parent organization, affiliates, and subsidiaries in this response.</p>	Unlimited	5	
	7.	<p>Identify whether your organization has had any contract listed in response to Question 4 terminated or not renewed within the past five (5) years. If so, describe the reason(s) for the termination/nonrenewal, the parties involved, and the address and telephone number of the client; and</p> <p>If the contract was terminated/non-renewed, based on your organization's performance, describe any action taken to prevent any future occurrence of the problem leading to the termination/non-renewal.</p> <p>Include your organization's parent organization, affiliates, and subsidiaries in this response.</p>	Unlimited	5	

Page # of Response in Proposal	PART II Corporate Experience (continued from Previous Page)		Recommended Page Limit	Points Allowed	Score
	8.	Identify and describe any regulatory action, or sanction, including both monetary and non-monetary sanctions imposed by any federal or state regulatory entity against your organization within the last five (5) years. In addition, identify and describe any letter of deficiency issued as well as any corrective actions requested or required by and any federal or state regulatory entity within the last five (5) years that relate to Medicaid contracts. Include your organization's parent organization, affiliates, and subsidiaries in your response to question.	Unlimited	5	
	9.	State whether or not your organization is currently the subject, or has recently (within the past five (5) years) been the subject, of a criminal or civil investigation by a state or federal agency. If your organization has recently been the subject of such an investigation, provide an explanation with relevant details and the outcome. If the outcome is not in favor of your organization, provide the corrective action plan implemented to prevent such future offenses.	45	5	
			Total Possible Score for Part II		29
			Total Points Scored		

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Page # of Response in Proposal	PART III Organizational Structure		Recommended Page Limit	Points Allowed	Score
	10.	Describe your organization's number of employees and location of offices. Submit an organizational chart (marked as Chart A of your response) showing the structure and lines of responsibility and authority in your company. Include your organization's parent organization, affiliates, and subsidiaries that will support this contract. Include the structure of your organization's LTSS access operations, including how it relates to the broader organization.	5	6	
	11.	Provide a narrative description of the proposed project team, its participants, and organizational structure along with an organization chart for this contract (marked as Chart B) including but not limited to positions in Sections 3.1 and 3.2 of the RFP and executive management positions. Indicate the FTE for each position / role dedicated to this contract. Indicate which positions will be located in Louisiana.	4	9	
	12.	Provide resumes for any identified staff, or if no one has been identified, outline qualifications for key personnel. Include resumes for any relevant subcontractor staff. Resumes should include experience with proposer; previous experience in projects of similar scope and size; and educational background, certifications, licenses, special skills, etc.	Unlimited		

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Page # of Response in Proposal	PART III Organizational Structure (continued from Previous Page)		Recommended Page Limit	Points Allowed	Score
	13.	Provide the following information:	N/A	9	
	a.	A description of the relationship between your corporate headquarters and your state level operations. Discuss how corporate involvement, resources and oversight will help to assure successful implementation and operation in Louisiana. Give examples from other contracts.	3		
	b.	A statement of whether you intend to use major subcontractors (as defined in the RFP Glossary), and if so, provide the names and mailing addresses of the subcontractors and a description of the scope and portions of the work for each major subcontractor. Specify whether the subcontractor is currently providing services for you in other states and where the subcontractor is located.	Unlimited except that Scope of Work for Subcontractors is one (1) page each		
	c.	Clear identification, if known, of subcontractor personnel. Provide the same information requested for the proposer’s personnel.	Unlimited		
	d.	A description of how you intend to monitor and evaluate subcontractor’s performance.	2		
	e.	Identification of any legal or contractual compliance issues which may have occurred in other states related to any subcontractors your organization has used.	6		
			Total Possible Score for Part III		24
			Total Points Scored		

Page # of Response in Proposal	PART IV Call Center Operations		Recommended Page Limit	Points Allowed	Score
	14.	Where will your call center be located?	1	6	
	15.	Describe your organization's experience in operating call centers. Include a description of all services offered in each call center. Cite specific contracts under which these services are/were provided. Provide the annual call volume each call center handled. Describe how this experience will help form your work in Louisiana and state what you might do differently for this contract.	4	9	
	16.	Describe in detail your experience in providing information and referral services and access to long term supports and services. What strategies would you use to formulate this work in Louisiana?	6	9	
	17.	Describe your experience in fulfilling the requirements of the National Voter Registration Act	2	3	
	18.	Describe the measures you have used in other contracts to assure the quality of your call center operations. Include any lessons learned and how you would adapt those to operations of a call center in Louisiana.	4	6	
			Total Possible Score for Part IV		33
			Total Points Scored		

Page # of Response in Proposal	PART V Telephonic Screening for Functional Eligibility		Recommended Page Limit	Points Allowed	Score
	19.	Describe your experience performing telephonic program screening. Specify if the screening is/was related to determining non-financial program eligibility. Cite specific contracts referenced for this answer. Indicate the annual volume of telephonic screening performed.	4	10	
	20.	Describe your organization's experience in use of an eligibility tool for functional eligibility screening. Include a description of the tool(s) use/used and the criteria used for screening. Cite specific contracts under which these services are/were provided. Describe how this experience will help form your work in Louisiana and state what you might do differently for this contract.	4	10	
	21.	Describe the measures you use/have used in other contracts to assure quality operations with telephonic screening of requestors of long term supports and services. Describe any sampling methods you use/used and the training you provide/have provided to the staff performing telephonic screening. Include the training methods, the frequency training is/was conducted, and any other pertinent details.	3	9	
			Total Possible Score for Part V		29
			Total Points Scored		

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Page # of Response in Proposal	PART VI Perform Face-to-Face Assessments for Program Eligibility and Service Planning		Recommended Page Limit	Points Allowed	Score
	22.	Describe your organization's experience in conducting face to face assessments for the populations you served. Cite specific contracts under which these services are/were provided. Provide the annual volume of face to face assessments your organization performed. Describe how this experience will equip you for work in Louisiana and state what you might do differently for this contract.	5	9	
	23.	Describe your approach in maintaining the timeliness of face to face assessments for those persons in special situations, such as those who are protective service clients and those who are in nursing facilities at the time the request for services is made. How successful are/were you in maintenance of timeliness for these assessments? Cite specific contracts in which these measures are/were used. How would you modify your processes for Louisiana?	4	9	
	24.	Describe your experience in the use of the interRAI HC assessment. Include how you use/used the tool, and for what purpose(s). Cite specific contracts in which you use/used the interRAI HC assessment. How would you adapt your assessment processes to fulfill the requirements of this contract? If your company has no experience with the interRAI HC (assessment, state what tool(s) you use/used to determine program eligibility and service planning and describe your assessment process. How you would adapt those processes in Louisiana?	5	9	
	25.	Describe your experience with determinations of functional eligibility for long term care programs. Specify under which contracts you perform/performed these determinations. How will you adapt your functions to meet the requirements of this contract?	5	9	

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Page # of Response in Proposal	PART VI Perform Face-to-Face Assessments for Program Eligibility and Service Planning (Continued from Previous Page)		Recommended Page Limit	Points Allowed	Score
	26.	Describe the measures you use/have used in other contracts to assure quality operations with performance of face to face assessments and the determination of program eligibility. Describe any sampling methods you use/used and the training you provide/provided to the staff performing face to face assessments. Include the training methods, the frequency training is/was conducted, and other pertinent details.	5	9	
			Total Possible Score for Part VI		45
			Total Points Scored		

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Page # of Response in Proposal	PART VII Performing Care Planning		Recommended Page Limit	Points Allowed	Score
	27.	Describe your organization's experience in development of plans of care for individuals using community-based long term supports and services. Cite specific contracts under which care planning is/was provided. Specify if this experience is/was with the elderly and/or individuals with adult onset disabilities. Describe how this experience will help form your work in Louisiana and state what you might do differently for this contract.	4	9	
	28.	Provide a detailed description of the structure of the care plans developed during other contracts. Include the focus of the care plans and the methods of information gathering which are/were used in addition to the assessment tool. Cite the specific contracts under which these methods are/were used.	4	8	
	29.	Describe the measures you use/have used in other contracts to assure quality operations with care planning for the populations you served. Indicate any sampling measures you use/used to audit your staff's performance with care planning. Also describe the training you provide/provided to the staff performing this function. Include the training methods, the frequency training is/was conducted and other pertinent details.	4	9	
			Total Possible Score for Part VII		26
			Total Points Scored		

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Page # of Response in Proposal	PART VIII Monitoring Care Planning		Recommended Page Limit	Points Allowed	Score
	30.	Describe your organization's experience in monitoring service delivery to individuals receiving long term supports and services. Include a description of the methods you use/used to complete this function and your success with it. Include the frequency which you contact/contacted individuals receiving services and the specific information sought during these contacts. Cite specific contracts under which these services are/were provided. Describe how this experience will help form your work in Louisiana and state what you might do differently for this contract.	4	9	
	31.	What is/was your approach when it is/was determined that an individual is/was not receiving the services as required by the plan of care? Indicate the steps taken to remedy the situation. How would you adapt your processes to meet those required by this contract?	3	8	
	32.	Describe the measures you use/have used in other contracts to assure quality operations with participant and service monitoring for the populations you serve/served. Indicate any sampling measures you use/used to audit your staff's performance with participant and service monitoring. Also describe the training you provide/provided to the staff performing this function. Include the training methods, the frequency training is/was conducted, and other pertinent details.	4	9	
			Total Possible Score for Part VIII		26
			Total Points Scored		

Page # of Response in Proposal	PART IX Appeals		Recommended Page Limit	Points Allowed	Score
	33.	Describe your organization's experience in preparing for and conducting appeals for participants who fail to meet program requirements. State the annual volume of appeals handled and the percentage of appeals decisions that were upheld. Include a description of the entire process from the receipt of notice of the appeal through the actual appeal hearing and issuance of any required decisions/notifications thereafter. Cite specific contracts under which these services are/were provided. Describe how you will adapt this experience to Louisiana.	4	10	
	34.	What measures do you or have you used in other contracts to assure quality operations in appeals functions? If sampling of cases is/was used, indicate the sampling methods you use/used in the audit process. Cite specific contracts under which these measures are/were used for appeals quality assurance.	3	9	
			Total Possible Score for Part IX		19
			Total Points Scored		

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Page # of Response in Proposal	PART X Integrated Software Systems		Recommended Page Limit	Points Allowed	Score
	35.	For questions 35b you will be asked to discuss integrated software systems and to provide specifics relating to many aspects of integrated software systems.	N/A	N/A	N/A
	35a.	The contractor will use the LDH approved system(s), listed in Section 4.4. These systems contain information relating to the participant’s demographics, phone screenings, assessments, authorized services, billing and appeals. As a contractor, you will need to have a system that addresses functions and requirements not addressed by these systems. Describe any additional system(s) and their functionality that would be used in the performance of this contract. Describe how these systems will integrate with the LDH systems referenced. Include network, hardware and application infrastructure.	10	6	
	35b.	Describe any previous experience where the contractor utilized both state and internal IT systems. Indicate challenges faced with respect to integration. List and describe any issues experienced with production and/or performance of the contractor’s system.	5		
			Total Possible Score for Part X		6
			Total Points Scored		

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Page # of Response in Proposal	PART XI Example Scenarios		Recommended Page Limit	Points Allowed	Score
	36.	<p>The following are examples describing potential or existing participants. Describe the process you would implement for each participant. Address each of the following elements:</p> <ul style="list-style-type: none"> • Referral to community resources; • Required information to be disseminated during an initial call; • Telephonic level of care screening; • Comprehensive assessment; • Evaluation of the quality and accuracy of the assessment; • Development and maintenance of the plan of care; • Monitoring of the plan of care regarding accuracy, quality and needed services; • Maintenance of the participant's demographic information in data systems; • Resolution of conflict and crisis situations. 	N/A	N/A	N/A
	36a.	<p>Example 1</p> <p>Larry is a 45 year old man who has been diagnosed with bi-polar disorder and paranoid schizophrenia. He is supposed to see his psychiatrist every 3 months and is supposed to attend a partial mental health program 3 times per week, to which he is refusing. He currently receives LT-PCS services. At the time of the call it appears he has not been taking his medications. He has changed providers multiple times in the past, with the most recent change last month. He is now calling to file a complaint on the current provider agency and to swap agencies again.</p>	4	6	

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Page # of Response in Proposal	PART XI Example Scenarios (Continuation from Previous Page)		Recommended Page Limit	Points Allowed	Score
	36b.	<p>Example 2</p> <p>Jacob is a 21 year man old who fell off of a ladder 5 months ago. He has just been discharged from a nursing home and lives with paraplegia. Prior to his accident, he was a basketball player for the local community college. He is a friendly person with a positive outlook on life. He currently lives with his family and is calling to request services in the home where he is residing. His family would like for him to participate in activities outside of the home, such as shopping, visiting with family, attending local basketballs games, attending physical therapy and attending church.</p>	4	6	
	36c.	<p>Example 3</p> <p>Josie is an 87 year old female who has been diagnosed with early stage dementia. Josie recently had a stroke and lives at home alone. She has a 75 year old sister who acts as her primary caregiver. Josie's sister's health has declined and she is no longer able to help. Josie not currently receiving formal services but is currently on the Community Choices wait list. Josie's sister is calling in to request assistance.</p>	4	6	
	36d.	<p>Example 4</p> <p>Rachael is a 76 year old female who currently lives with her family. She is an LT-PCS recipient receiving 32 hours of services per week. She lives with diabetes and has a large open sore on her foot, which is not healing. She is seeing her doctor every 2 weeks for medical monitoring. Home Health completes wound care in the home daily. She is on a diabetic diet but does not always like to follow proper eating habits. She also has hypertension, which requires daily medications, as well as, blood pressure readings 3 times per week. Three weeks ago, she had a stroke and requires total assistance with all ADL's. The family is calling and reports Rachael needs additional hours.</p>	4	6	
	36e.	<p>During a face-to-face monitoring visit, Ms. Smith informs your staff that a month ago she thinks the DSW stole money from her. Ms. Smith tells you she has \$75.00 missing from her dresser. When Ms. Smith confronted the DSW about the stolen money, the DSW became</p>	4	6	

		defensive. Ms. Smith did not report the potential theft. Your staff observed several individuals in the home, who appear to routinely go in and out of Ms. Smith's bedroom. The family has reported Ms. Smith being diagnosed with dementia.			
				Total Possible Score for Part XI	30
				Total Points Scored	

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Page # of Response in Proposal	PART XII Contract Transitions		Recommended Page Limit	Points Allowed	Score
	As noted in questions 36 and 37, describe in detail transitions that you have participated in, as either incoming or outgoing contractor. Cite specific contracts and specify whether you were the incoming or outgoing contractor.		N/A	N/A	
	37.	As an incoming contractor, include the following: <ul style="list-style-type: none"> Strategies used to absorb the workload which was handled by an outgoing contractor. How you handled training staff and preparing them with resources needed to fully operate under a new contract. Specify whether a call center was required in the transition process. Include detail on how you initiated the call center operations and whether it was fully functional at the begin date of the new contract. How would you adapt these processes to Louisiana? 	5	9	
	38.	As an outgoing contractor, include the following: <ul style="list-style-type: none"> Strategies used to allow the oncoming contractor access to workloads during transition. How you accomplished data transfer to the oncoming contractor. If you coordinated with the oncoming contractor's staff in training, state what methods were used and when the training process began relative to the go-live date of the oncoming contract. How would you adapt the transition processes to Louisiana? 	5	6	
			Total Possible Score for Part XII		15
			Total Points Scored		

Page # of Response in Proposal	PART XIII Contract Cost		Recommended Page Limit	Maximum Possible Score
	39.	<p>Using Attachment VII, provide your cost of the provision of the services delineated in this RFP.</p> <p>All administrative costs shall be stated as monthly costs, including:</p> <ul style="list-style-type: none"> • Call Center Operations <ul style="list-style-type: none"> ○ Information and Referral ○ Level of Care Screening and Eligibility Determinations • Appeals • Quality Management • General administrative expenses not included in the categories above <p>Cost for assessments, plans of care and participant case monitoring shall be stated as per unit costs.</p>	Unlimited	<p>112</p> <p>See RFP Section 7.19 for details of point calculation</p>
			Total Possible Score for Part XIII	112
			Total Points Scored	

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Page # of Response in Proposal	PART XIV Veteran and Hudson Initiatives	Recommended Page Limit	Maximum Possible Score
	<p>40. If applicable, provide documentation that the proposer (including parent organization, affiliates, and subsidiaries) and/or its subcontractor has been certified by the Louisiana Department of Economic Development as a:</p> <ul style="list-style-type: none"> • Veteran-Owned and, • Service-Connected Disabled Veteran-Owned small entrepreneurship (LaVet), or • Louisiana Initiative for Small Entrepreneurships (Hudson initiative) <p>1.1.1.1. If the Proposer is a certified Veterans Initiative small entrepreneurship, the Proposer shall receive points equal to twelve percent (12%) of the total evaluation points in this RFP.</p> <p>1.1.1.2. If the Proposer is a certified Hudson Initiative small entrepreneurship, the Proposer shall receive points equal to ten percent (10%) of the total evaluation points in this RFP.</p> <p>1.1.1.3. If the Proposer demonstrates its intent to use certified small entrepreneurship(s) in the performance of contract work resulting from this solicitation, the Proposer shall receive points equal to the net percentage of contract work which is projected to be performed by or through certified small entrepreneurship Subcontractors, multiplied by the appropriate number of evaluation points.</p> <p>1.1.1.4. The total number of points awarded pursuant to this Section shall not exceed twelve percent (12%) of the total number of evaluation points in this RFP</p> <p>1.1.1.4.1. If the Proposer is a certified Veterans Initiative or Hudson Initiative small entrepreneurship, the Proposer must note this in its proposal in order to receive the full amount of applicable reserved points.</p> <p>1.1.1.4.2. If the Proposer is not a certified small entrepreneurship, but has engaged one (1) or more Veterans Initiative or Hudson Initiative certified small entrepreneurship(s) to participate as Subcontractors, the Proposer shall provide the following information for each certified small entrepreneurship Subcontractor in order to obtain any applicable Veterans Initiative or Hudson Initiative points:</p>	Unlimited	54

		<p>1.1.1.4.2.1. Subcontractor's name;</p> <p>1.1.1.4.2.2. Subcontractor's Veterans Initiative and/or the Hudson Initiative certification;</p> <p>1.1.1.4.2.3. A detailed description of the work to be performed; and</p> <p>1.1.1.4.2.4. The anticipated dollar value of the subcontract for the three-year contract term.</p>		
			Total Possible Score for Part XIII	54
			Total Points Scored	

Total Score for Proposal (maximum is 448)	
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PART 4 – Attachment VII Cost Template

Cost Template Part 1

Attachment VII

RFP#: 3000012190

ADMINISTRATIVE EXPENSES TO BE PAID MONTHLY FROM THE CONCLUSION OF PHASE THREE OF THE TRANSITION PERIOD UNTIL THE END OF THE CONTRACT PERIOD

Include in each item **1.a, 1.b, 2 and 3** the total cost of labor, education and training, supplies, office space, and contracted / subcontracted / consulting staff.

1. Call Center Operations

a. Information and Referral

Item 1.a TOTAL PER MONTH

b. Level of Care Screening & Eligibility Determination

Item 1.b. TOTAL PER MONTH

2. Appeals

Item 2 TOTAL PER MONTH

3. Quality Management

Item 3 TOTAL PER MONTH

For Item 4 include in this total cost of labor, education and training, supplies, office space, and contracted / subcontracted / consulting staff not included in categories above, **and IT infrastructure**.

4. General Administrative Expenses Not Included In Categories Above

Item 4 TOTAL PER MONTH

5. Total Administrative Cost Per Month

\$

-

For each item above (1.a, 1.b, 2, 3, and 4) enter narrative in Part Two of this attachment specifying details of the estimated Administrative Costs shown above and how you determine these costs.

EXPENSES TO BE PAID BY VOLUME FOR THE ENTIRE CONTRACT PERIOD

6. Price per Face-to-Face Assessment

7. Price per Plan of Care

8. Per Participant Cost of Case Monitoring, inclusive of:

a. Monthly Phone Call

b. Quarterly Home Visit

	Cost	Monthly Volume	Monthly Total
Total Administrative Cost per month (from item 5)	\$ -		\$ -
Price per Face-to-Face Assessment (from line 6)		1544	\$ -
Price per Care Plan (from line 7)		894	\$ -
Price per participant cost of case monitoring (from line 8)		9858	\$ -
9. Total Monthly Cost Proposal			\$ -

ATTACHMENT XII: ENTERPRISE ARCHITECTURE INTERGRATION REQUIREMENTS FOR ENTERPRISE/STATEWIDE SYSTEMS – REVISED 6/21/2021

Louisiana Office of Technology Services

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Technology Overview

The State has made a significant investment in a hardware and software platform to form the foundation for development and hosting of statewide enterprise systems. The Enterprise Architecture (EA) platform consists of eight core components hosted on a hyper converged infrastructure spanning two State-owned data centers in an active-active configuration. This highly available platform (99.99% uptime) should be utilized for all enterprise or mission critical applications. The State has employed the core concepts of the software defined data center (SDDC); converging storage, networking, and compute resources into a single lifecycle model.

The platform is monitored through the coordinated use of the following tools: infrastructure and network monitoring, application performance monitoring (APM), security information and event management (SIEM), and log aggregation. This suite of tools allows the State to track and monitor the overall health and operation of the platform and to quickly respond to performance demands. A significant investment has been made in a DevOps approach and tooling including IT build and deployment automation.

In addition to the EA platform, the EA initiative provides for standardization of other areas of the software development lifecycle (SDLC). The State provides tools for project management, requirements definition, risks, issues, and other project documentation and artifacts. Contractors must use these State provided tools as part of the project management lifecycle.

Key Goals

1. The consuming application platform is irrelevant to the use of the EA component except in the methodology used to integrate. State standards require custom built, transfer, or non-COTS/SaaS systems to be developed in C#.Net although other integrations may exist.
2. All applications or systems integrating into the EA platform must integrate into these components using standard SOAP/REST APIs or connectors or message queues within the ESB or APIGW.
3. All applications or systems integrating into the EA platform must integrate with the Identity Access Management /Single Sign On, API Gateway, and/or Enterprise Service Bus components, irrespective of which of the other components will be used.
4. All integrations must be reviewed and approved through the State's governance processes.

Operations and Governance

The Enterprise Architecture is designed upon the Information Technology Information Library (ITIL) and The Open Group Architectural Framework (TOGAF) frameworks. Integrating solutions shall adhere to the State's Enterprise Architecture Governance processes to include:

- **Change and Release Management**

- Changes to Production must be submitted to the State’s EA Change Control Board (CCB) for evaluation
- **Performance Management**
 - Monitor and Report on Key Performance Indicators in accordance with Industry Best Practices
 - Real-time Business and IT dashboards will be published
 - Integrating systems shall define uptime and performance SLAs as part of any resulting contract
- **Incident and Problem Management**
 - Any event that results in the violation of a Service Level Agreement (SLA) will require a Root Cause Analysis to be performed and reported to the State’s CCB
- **Availability Management**
 - High Availability and Enterprise Business Continuity and Disaster Recovery Plans (eBC/DR) will be tested and certified annually
 - eBC/DR plans will align with agreed upon Recovery Time Objectives (RTO) and Recovery Point Objectives (RPO)

In alignment with TOGAF, the Integrator will align their solution with the State’s Data, Application, and Infrastructure Architectural Domains. All artifacts will be maintained and updated as required to reflect changes to both business strategy and IT technologies.

Software

The eight components include the following:

1. **Identity Access Management/Single Sign On (IAM/SSO)** - All users, both internal and external, are validated through a common security portal using Security Assertion Markup Language (SAML) for authorization and authentication. Users maintain a single account for use across all consuming systems. The use of JSON Web Tokens (JWT) has also been approved.
2. **API Gateway (APIGW)** – Applications communicate through the APIGW to access other enterprise components and to integrate via web services (SOAP or RESTful) to systems both inside and outside of the State’s network.
3. **Enterprise Service Bus (ESB)** – The ESB provides API connections to legacy applications and mainframe systems in addition to providing support for process queues. Access to the ESB is done via web services (SOAP or RESTful) or through message queues.
4. **Master Data Management (MDM)** - Stores common, shareable, reusable records, such as for an “entity” or a “person”, to improve data integrity within and across applications statewide. Use of the MDM is highly encouraged by the State’s Enterprise Data Management group to develop Statewide master person/entity relationships across the enterprise.
5. **Data Warehousing (DWH)** – Statewide data storage system that allows for cross application or even statewide reporting of information.
6. **Electronic Document Storage (EDMS)** - Document storage system that allows flexible and scalable storage of a variety of file types.

7. **Consumer Communications (CC)** - Allows for the production and distribution of internal and external communications via print, email, and SMS. The CC component fully integrates into the State's Enterprise Print Center for print and mail fulfillment.
8. **Business Rules Engine (BRE)** - Creates and maintains the rules that underlie the decision logic within an application.

Support Tiers

These components are separated into two support tiers. Contractors are required to utilize Tier 1 components for any system integration. Use of Tier 2 components is not mandatory but is highly encouraged where appropriate. The proposer should describe which Tier 2 components they intend to utilize and how they will be utilized.

Tier 1:

- Identity Access Management/Single Sign On
- API Gateway
- Enterprise Service Bus

Tier 2:

- Master Data Management
- Data Warehousing
- Electronic Document Storage
- Consumer Communications
- Business Rules Engine

In addition to these components, the EA system uses many software systems for reporting, monitoring, file transfers, workload scheduling, work management, application lifecycle management, and other ancillary functions.

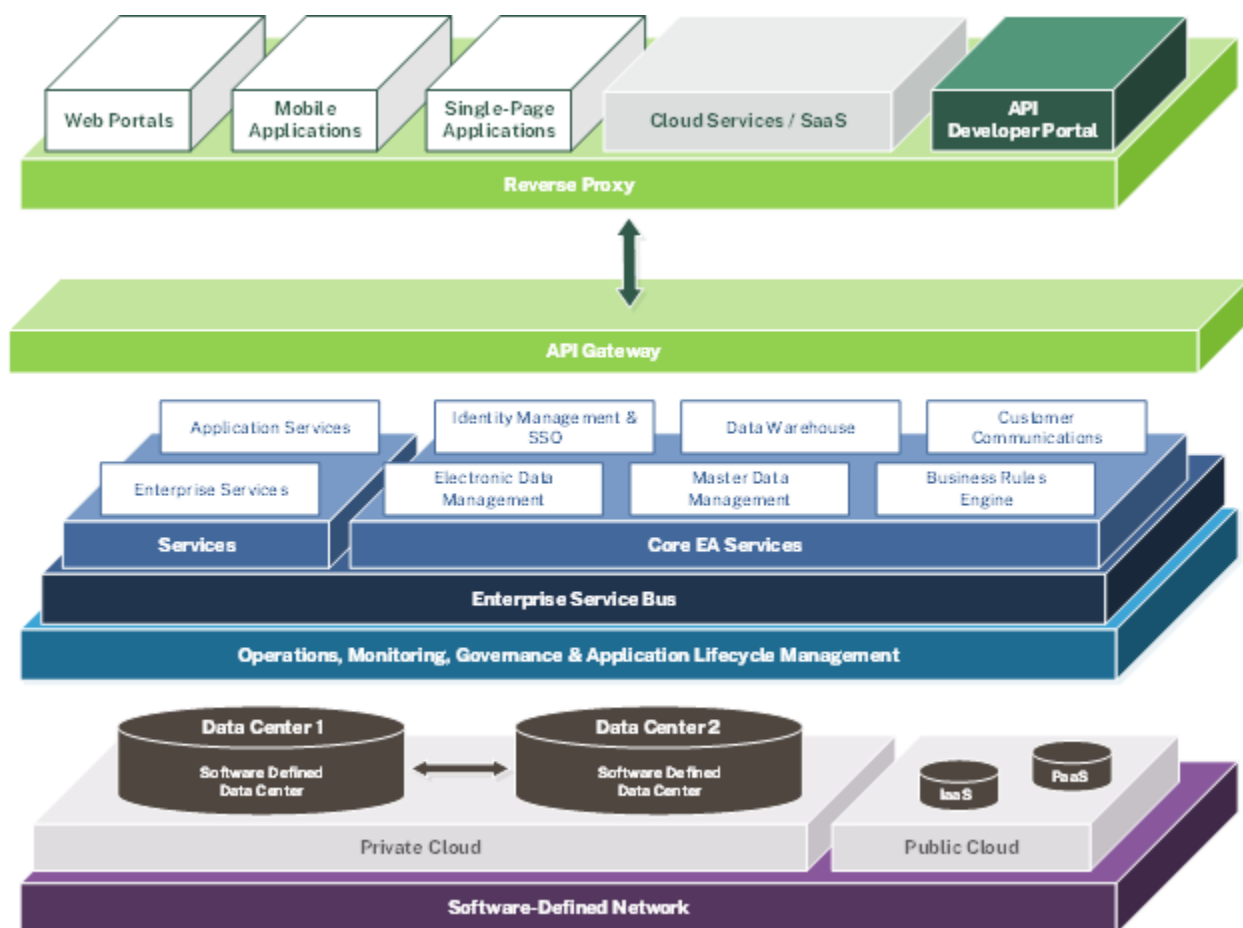


Figure 1 - EA Conceptual Model

Environments

The EA system provides three environments into which consuming systems to integrate. These environments are separated according to the data classification of any data processed by consuming systems, according to the data classifications rules in the OTS Information Security Policy. The three environments are:

1. **Production (PROD)** – Contains all production systems. The use case for this environment is for any production system. This environment is highly available, in an active/active configuration.
2. **Non-Production/Restricted (NPR)** – Contains non-production systems which consume or process restricted information. Use cases for this environment include User Acceptance Testing (UAT), Staging, and Conversion.
3. **Non-Production/Non-Restricted (NPNR)** – Contains non-production systems which consume or process non-restricted information. Use cases for this environment include Development,

System Integration Test (SIT), and Training. This environment is highly available, in an active/active configuration.

Additionally, the EA system has a single **Development (DEV)** environment which is not exposed for consuming system use. The Development environment is used for testing EA platform upgrades, hardware and software updates, and other system changes.

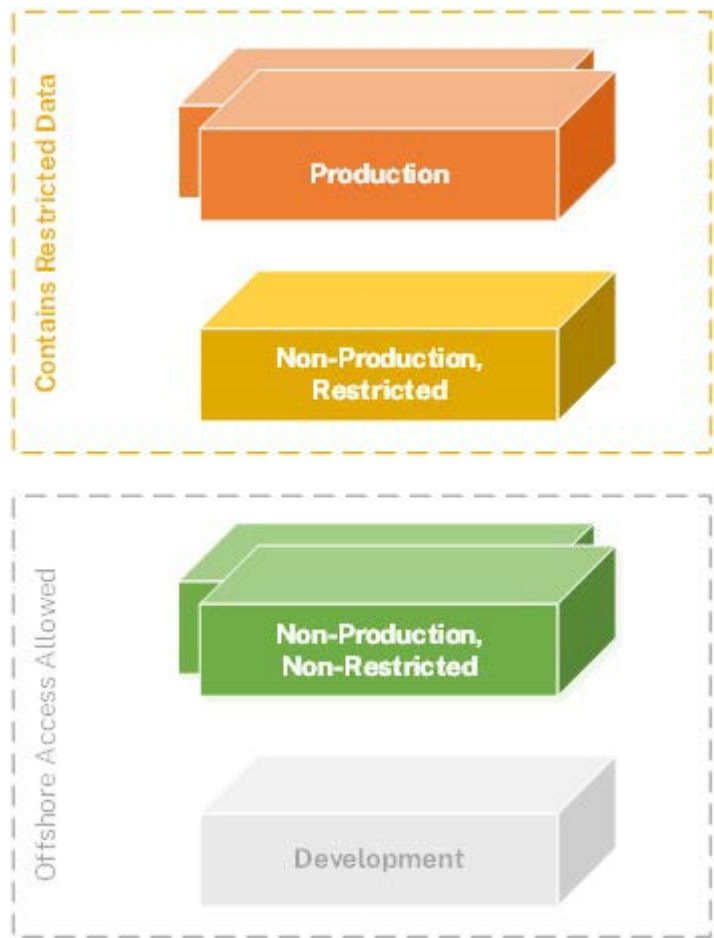


Figure 2 - Environment Design

Technology Stack

Version numbers are shown, where appropriate, and are subject to change

Infrastructure

Item	Vendor	Description	Version
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Nutanix	Nutanix/Dell	Hyper-converged computing with compute, storage and virtualization consolidated into a single appliance	
VxRail	Dell	Hyper-converged computing with compute, storage and virtualization consolidated into a single appliance	
ESXi	VMware		
vCenter	VMware		
NSX	VMware		
SRM	VMware		
Windows Server	Microsoft	Standard OS for Windows	2012 R2
RedHat Enterprise Linux	RedHat	Standard OS for Linux	
MS SQL Server 2014	Microsoft	Enterprise Database/Storage Engine	Enterprise

Core Components

Item	Vendor	Description	Version
Decision Center, Decision Server	IBM	Business Rules Engine (BRE)	v8.x
Exstream	Opentext	Client Communications, Correspondence Generation (CC)	v9.x
Pentaho	Hitachi Data Systems	Data warehouse and Analytics (DWH)	v5.x
Case Foundation, Content Manager, Enterprise Records Foundation	IBM	Electronic Document Management (EDMS)	v5.x
webMethods	Software AG	Enterprise Service Bus (ESB)	v9.x
API Gateway	Broadcom	Enterprise API Gateway	
Identity Manager for Consumers and Business Users, Identity Suite, Single Sign On	Broadcom	Security integration product; includes access management, directory services integration capability, and identity management (IAM/SSO)	v12.x
InfoSphere	IBM	Master Data Management suite (MDM)	

Performance, Monitoring, & Lifecycle Management

Item	Vendor	Description	Version
Bamboo	Atlassian	Continuous Integration, Deployment, and Delivery	
GitHub Enterprise	GitHub	Source Code Repository	2.7
IBM Workload Scheduler	IBM	Job Scheduling	
Jama	Jama Software	Requirements Tracking & Control	
JIRA	Atlassian	Issue & Project Tracking	7.0
McAfee Enterprise Security Manager	Intel	DevOps/Automation	
MoveIT	Ipswitch	Enterprise Managed File Transfer	
Nagios	Nagios	Infrastructure monitoring/alerting	XI
NewRelic APM	NewRelic	Application performance monitoring	
Puppet Enterprise	Puppet	DevOps/Automation	
Splunk	Splunk	Operational Intelligence	

Contractor Requirements for Integration

Proposers shall describe how their solution will integrate with the State's Identity Access Management/Single Sign On system for both internal and external users. Integrating systems must use this system for all authentication and authorization functions.

Proposers shall describe how their solutions will utilize the State's Enterprise Service Bus and API Gateway for all API or real time interfaces, or any interactions with other EA or State technology components. All integrating connections must be made using standard SOAP/REST APIs or connectors or message queues within the Electronic Service Bus or API Gateway. The use of JSON Web Tokens (JWT) may be approved by the State.

Contractors shall utilize the State's MoveIT platform for all file transfers. The preferred connection method is FTPS (FTP over SSL) which requires a server-side CA certificate - no self-signed certificate will be allowed. 256-bit, FIPS 140-2 validated AES encryption is used to protect any transmitted files from unauthorized use, theft, hacking and/or viewing while stored on State resources. PGP/GPG file type encryption is also required with an exchange of public keys.

Proposers shall describe how each Tier 2 component will be leveraged in their solution. If proposing an alternative to one of the Tier 2 components, proposers must describe their alternative solution in detail and explain why the approach is more beneficial to the State. This explanation must include financial and project impacts, preferably in the form of Return on Investment (ROI), and including information regarding any value added in respect to project implementation schedule, ease of implementation, and technology alignment.

If the proposer's solution will not use a Tier 2 component, the Proposer must explain in detail why this approach is necessary and beneficial to the State.

Example Service Level Agreements (SLA)

Technical performance measures for system uptime and system response time shall be evaluated for any interface or portal established by the Contractor and for use by the State, including utilization by state employee, member or provider, State system, or State designee's system(s). The State will measure performance with Service Level Agreements (SLAs) and where necessary penalize the Contractor with Liquidated Damages based on their performance. The State reserves the right to add new Service Level Agreements.

Service Area/Activity	Service Level Agreement	Liquidated Damage
System Performance Measures / System Uptime	Users shall be able to access the SYSTEM twenty-four (24) hours a day, seven (7) days a week, at a monthly uptime of 99.5%, with the exception of planned downtime due to system upgrades or routine maintenance. All planned downtime shall be communicated and agreed to by the State. Measures to be calculated based upon 24 hour periods, to the extent it is requested and mutually agreed upon in writing.	Two thousand dollars (\$2,000) per business day, per instance of non-compliance until compliance is achieved and acknowledged by the State.
System Performance Measures / System Response Time	<p>The System shall have an average response time of two (2) seconds.</p> <p>The average is calculated using the thirty (30) most current, contiguous business days.</p> <p>Transaction time measured using the standard Time to First Byte (TTFB) metric.</p>	Two thousand dollars (\$2,000) per business day, per instance of non-compliance until compliance is achieved and acknowledged by the State.

Attachment IX: Electronic Vendor Payment Solution

In an effort to increase efficiencies and effectiveness as well as be strategic in utilizing technology and resources for the State and Contractor, the State intends to make all payments to Contractors electronically. The LaCarte Procurement Card will be used for purchases of \$5,000 and under, and where feasible, over \$5,000. Contractors will have a choice of receiving electronic payment for all other payments by selecting the Electronic Funds Transfer (EFT). If you receive an award and do not currently accept the LaCarte card or have not already enrolled in EFT, you will be asked to comply with this request by choosing either the LaCarte Procurement Card and/or EFT. You may indicate your acceptance below.

The **LaCarte** Procurement Card uses a Visa card platform. Contractors receive payment from state agencies using the card in the same manner as other Visa card purchases. Contractors cannot process payment transactions through the credit card clearinghouse until the purchased products have been shipped or received or the services performed.

For all statewide and agency term contracts:
Under the LaCarte program, purchase orders are not necessary. Orders must be placed against the net discounted products of the contract. All contract terms and conditions apply to purchases made with LaCarte.

If a purchase order is not used, the Contractor must keep on file a record of all LaCarte purchases issued against this contract during the contract period. The file must contain the particular item number, quantity, line total and order total. Records of these purchases must be provided to the Office of State Procurement on request.

EFT payments are sent from the State’s bank directly to the payee’s bank each weekday. The only requirement is that you have an active checking or savings account at a financial institution that can accept Automated Clearing House (ACH) credit files and remittance information electronically. Additional information and an enrollment form is available by contacting the Office of Statewide Reporting & Accounting Policy at: DOA-OSRAP-EFT@la.gov.

To facilitate this payment process, you will need to complete and return the EFT enrollment form.

If an award is made to your company, please check which option you will accept or indicate if you are already enrolled.

<u>Payment Type</u>	<u>Will Accept</u>	<u>Already Enrolled</u>
LaCarte	_____	_____
EFT	_____	_____

Printed Name of Individual Authorized

Authorized Signature for payment type chosen

Date

Email address and phone number of authorized individual