Addendum #3: Additional Revisions

ADDITIONAL REVISIONS TO RFP DOCUMENTS Request for Proposals # 3000011953 Louisiana Medicaid Managed Care Organizations

LOUISIANA DEPARTMENT OF HEALTH BUREAU OF HEALTH SERVICES FINANCING APRIL 17, 2019

Revision No.	Document Reference	Page	Revised Provisions		
1	RFP	6	1.6 Schedule of Events		
			Event	Date	
			RFP advertised in newspapers and posted to LaPac	Monday, February 25, 2019	
			Deadline for receipt of written inquiries	Tuesday, March 12, 2019, 3 PM CT	
			Deadline to answer written inquiries	Friday, April 5, 2019	
			Deadline for receipt of proposals	Monday, April 29, 2019, 3 PM CT	
			On-site presentations	Monday, June 10, 2019 and	
				<u>Tuesday, June 11, 2019</u>	
				Wednesday, May 29, 2019 and	
				Thursday, May 30, 2019	
			Notice of Intent to Award announcement, and	Monday, July 8, 2019	
			14-day protest period begins, on or about	Friday, June 28, 2019	
			Contract execution, on or about	Monday, July 29, 2019	
				Friday, July 19, 2019	
			Readiness reviews / implementation begins, on or about	Thursday, August 1, 2019	
				Monday, July 22, 2019	
			Operational start date, on or about	Wednesday, January 1, 2020	
2	RFP	10	2.3.1 The Proposer shall submit one (1) original hard copy (the Certification Statement must have original signature signed in ink), two (2) five (5) additional hard copies, and ten (10) electronic copies, each on a separate flash drive, of the entire proposal. The Proposer shall also provide two (2) electronic copies of the redacted version, each on a separate flash drive, if applicable based on Section 2.5. All electronic copies must be searchable. No facsimile or emailed proposals will be accepted. For mailing purposes, all packages may be shipped in one container.		
3	Appendix B Model 15		Fee-for-Service (FFS) Rate – For MCO covered services, the reimbursement rate published on		
	Contract		www.lamedicaid.com or on the weekly procedure file sent to the Contractor by the FI, or its equivalent, whichever is most current as of the date of service. Also referred to as the "Medicaid rate".		
			whichever is most current as of the date of service. Also referred	a to as the initiality rate .	
		112	2.9.8.1.8 Notwithstanding the requirements of this Section, the extent necessary to meet the needs of the Contractor's enrollee measures established by the Contractor to control costs and qua Contract nor does it preclude the Contractor from using different than the published <u>Medicaid fee schedule FFS rate</u> , for different same specialty [42 C.F.R. §438.12(b)].	s. These provisions also do not interfere with ality consistent with its responsibilities under this at reimbursement amounts, which may be greater	

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4	Appendix B Model Contract	112	 2.9.8.1.6 For the following qualified providers, the Contractor shall offer a provider agreement and also have LDH's approval prior to terminating the agreements: Louisiana Office of Public Health (OPH); All OPH-certified School Based Health Clinics (SBHCs); All small rural hospitals meeting the definition in the Rural Hospital Preservation Act; Federally Qualified Health Centers (FQHCs); Rural Health Clinics (RHCs) (free-standing and hospital based); Clinics and outpatient providers funded under the HRSA administered Ryan White HIV/AIDS Program; OPH Family Planning clinics and providers, including those funded by Title X of the Public Health Services Act; <u>Opioid Treatment Programs;</u> All providers approved by the LDH PSH program to provide tenancy and pre-tenancy supports for the Louisiana Permanent Supportive Housing program; and Local Governing Entities.
5	Appendix B Model Contract	150	 2.11.12 Payment for Hospital Services The Contractor is not responsible for reimbursement of graduate medical education (GME) payments or disproportionate share hospital (DSH) payments to providers. The Contractor shall use the increased hospital funds received above the base rate (subject to risk adjustment) to the Full Medicaid Pricing, as detailed in Attachment F, Actuarial Rate Certification Letter, for reimbursement of inpatient and outpatient hospital services in compliance with 42 C.F.R. §438.6. 2.11.13 Payment for Ambulance Services The Contractor shall use the increased ambulance services funds received above the base rate (subject to risk adjustment) to the Full Medicaid Pricing, as detailed in Attachment F, Actuarial Rate Certification Letter, for reimbursement of ambulance services in compliance with 42 C.F.R. §438.6. 2.11.14 Payment for Physician Services The Contractor shall use the increased physician services funds received above the base rate (subject to risk adjustment) to the Full Medicaid Pricing, as detailed in Attachment F, Actuarial Rate Certification Letter, for reimbursement of ambulance services in compliance with 42 C.F.R. §438.6. 2.11.14 Payment for Physician Services The Contractor shall use the increased physician services funds received above the base rate (subject to risk adjustment) to the Full Medicaid Pricing, as detailed in Attachment F, Actuarial Rate Certification Letter, for reimbursement of physician services in compliance with 42 C.F.R. §438.6.

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6	Appendix B Model Contract	219	2.16.21.7 An MCO choosing to participate in Approved Incentive Arrangements implemented under this Section shall ensure that any contracts the MCO may have with any third party to fulfill the obligations under this Section contain provisions clearly providing for the MCO's right of recovery in situations whereby LDH recoups MCIP payments from the MCO. LDH reserves the right to recoup in any situation where CMS disallows federal financial participation related to any payments in the MCIP program. An MCO's activities to recover such payments, through recoupment, withhold or otherwise, are not subject to the prior notification requirement under the Fraud, Waste and Abuse Prevention section, or any other notice and reporting obligation set forth in this Contract unless otherwise required by the terms of recoupment specified by LDH under this Section.
7	Appendix B Model Contract	305	 4.10.2 Amounts that exceed or cannot otherwise be collected through the capitated payment deduction shall be due and payable to LDH no later than thirty (30) calendar days following notification to the Contractor by LDH, unless otherwise authorized in writing by LDH. LDH reserves the right to collect interest on unpaid balances beginning thirty (30) calendar days from the date of initial notification. Any unpaid balances after the refund is due shall be subject to interest at the current Federal Reserve Board lending rate or ten percent (10%) annually, whichever is higher. 4.10.23 The Contractor shall reimburse all payments as a result of any federal disallowances or sanctions imposed on LDH as a result of the Contractor's failure to abide by the terms of the Contract. The Contractor shall be subject to any additional conditions or restrictions placed on LDH by HHS as a result of the disallowance. Instructions for returning of funds shall be provided by written notice.
8	Addendum 2	28	[Response to question #112] The denominator is the estimated value of the MCO contract. LDH will project the average contract cost and apply that amount uniformly across all proposers. Medical spend to certified network providers cannot may be included in the numerator. There is no minimum percentage of the subcontracted work.