

Vermont Agency of Human Services (AHS) – Global Commitment to Health EQRO RFP
Bidder Questions and AHS Responses: December 7, 2015

Bidder Questions Received on VT Global Commitment to Health EQRO RFP & AHS Responses

Reference	Bidder Question	AHS Response
Page 12 of 52, 2.3.7	What does the AHS consider a "fair portion" of the purchases and contracts for supplies and services to be assigned to a small business, minority business, or a woman-owned business?	There is no set formula for this. We expect bidders to make a best attempt at using Minority Based and Woman Owned businesses whenever possible.
Page 12 of 52, 2.3.7	Does the SBE/MBE/WBE need to be certified within the state of VT?	No
Page 12 of 52, 2.3.7	How does contracting with an SBE/MBE/WBE affect the evaluation criteria?	It does not
Page 14 of 52, 2.4.4	Please clarify that the correct due date for the proposals is December 23, 2015.	Closing date for receipt of proposals is December 23, 2015.
Page 14 of 52, 2.4.4	Please verify the date proposals must be received by the State is December 23, 2015 instead of November 23, 2015.	Closing date for receipt of proposals is December 23, 2015.
Page 16 of 52, 3.2.1, Para. 1	Should bidders include a separate section with hourly rates for technical assistance as part of the cost proposal?	Bidders should include a separate section with hourly rates for technical assistance as part of the cost proposal.
Page 16 of 52, 3.2.1 Page 26 of 52, 4.4 Page 29 of 52, 5.3	For purposes of work plan development, please confirm the end-date of the initial contract period. Is it January 14 as stated in Section 3.2.1, or, should the end date be listed as February 14, 2018, as noted in Section 4.4 and 5.3?	End date of the initial contract period is February 14, 2018.
Page 16 of 52, 3.2.1, Para. 4	Please clarify this statement, as it appears the requested EQRO activities are described within Section 3 of the RFP, e.g., the annual mandatory activities and an annual technical report. Is AHS referring to the possible addition of optional activities? If so, will the bidder be responsible for including the additional optional Year 1 activities released at the bidders' conference on November 30th in the technical and pricing proposal due on December 23, 2015?	The contract is for mandatory EQR-related activities.
Page 16 of 52, 3.2.1	The RFP states, "The EQRO Contract for external quality review activities encompasses the time period February 15, 2016 through January 14, 2018." Should this be February 14, 2018 instead of January 14, 2018?	End date of the initial contract period is February 14, 2018.
Page 17 of 52, 3.2.1.1	Please confirm the Performance Improvement Project topics: Follow-up After Hospitalization for Mental Illness and Increasing Adherence to	Current EQRO contract requires the validation of one Performance Improvement Project (i.e.,

	Evidence-Based Pharmacy Guidelines for Members Diagnosed with Congestive Heart Failure?	Follow-Up After Hospitalization for Mental Illness). The new EQRO contract will require the validation of two Performance Improvement Projects.
Page 18 of 52, 3.2.1.2, Line 2	How many measures are anticipated to be reported using medical record data/chart review? If chart review is required, will internal staff be utilized, and if so, will they need technical assistance or training prior to medical record abstraction?	AHS anticipates two of the plan measures to be reported using medical record data/chart review. Internal staff will be utilized in this process. The staff has received training re: the process – but some technical assistance is anticipated.
Page 18 of 52, 3.2.1.2, Line 7	Should the bidder assume the same number of measures would be audited in future years, but they may consist of both HEDIS and non-HEDIS, or would the number of measures increase? How many non-HEDIS measures will AHS require the MCE to report?	AHS does not anticipate that the number of audited measures will significantly increase in future years (current number is 15). The inclusion of Managed Long Term Services and Supports (MLTSS) in the waiver might require the validation of some non-HEDIS measures though.
Page 19 of 52, 3.2.1.4	In regard to communications and meetings, would AHS prefer any in person/face-to-face meetings over teleconference calls?	Currently – all communications and meetings are conducted electronically – less face-to-face meetings associated with on-site compliance w/standards reviews & performance measure validation activities. This approach has proven to be effective.
Page 21 of 52, 4.1	In addition to the Transmittal Letter, please clarify what other signed documents should be included in this section.	There is no other signed documents
Page 21 of 52, 4.1, 4.2	Per the RFP instructions at 4.2, Section 1 of the Proposal is to be titled, “Original Signed Documents.” Please clarify that only the hardcopy marked “original” needs to have an original signature on the required signed documents and that the other 3 hard copies can have copies of the required signed documents.	That is correct. Only the Hardcopy has an original signature
Page 21 of 52, 4.2	There is no Appendix listed in the proposal sections. Is it acceptable to submit Sample Reports, Financial Statements, and other additional information that may be of interest to AHS in an Appendix?	It is acceptable for bidders to submit Sample Reports, Financial Statements, and other additional information that may be of interest to AHS in an Appendix.
Page 22 of 52, 4.2.2	Would AHS please clarify whether each section and subsection is to be individually paginated, or is the entire response to be continuously paginated?	The preference would be to have the entire document continuously paginated. This will not disqualify the package however if it is not done that way
Page 24 of 52, 4.3.1, #2	Please clarify what is meant by “their corresponding data sources” in relationship to the bidder describing its previous relevant experience with	AHS asking bidders to include their previous relevant experience with Medicaid claims data.

	Medicaid recipients.	
Page 24 of 52, 4.3.3 – Responses to Section 3.2.1.2 of the RFP (bottom of page 24)	The statement above does not seem to relate to the PMV activity. Please clarify what is required.	Please replace 4.3.3 #2 with the following: <i>Describe the proposed validation activities, technical methods of data collection and analysis, and any pre-audit strategies and/or on-site activities for measures requiring administrative data as well as those requiring medical record review.</i>
Page 25 of 52, 4.3.6	How many years of work plans should the bidder submit with the proposal (e.g., Year 1 only, or Years 1 and 2)?	The bidder should submit two years of work plans with the proposal (i.e., one for Year 1 and one for Year 2).
Page 26 of 52, 4.4.1	Please clarify where we can find the information in Section 4.7 because we cannot locate that section in the External Quality Review of Global Commitment to Health Waiver Request for Proposal issued November 9, 2015.	Please disregard the reference to Section 4.7 found in 4.4.1
Page 26 of 52, 4.4.2	Section 4.4.2 Cost Proposal Administrative Costs states, "Telephone and Communications-The bidder is responsible for all communications costs." Please define the reference "Communications"?	Communications are considered any means of communications. Mail, phone, postage, fax.
Page 26 of 52, 4.4.2	Section 4.4.2 Cost Proposal Administrative Costs states... "The bidder is responsible for all communications costs." However please refer to the Statement of Work Section 3.2.1.4.A, page 20 Communications and Meetings which requires...."specific meetings may take place via telephone or video-conferencing". Also 4.4.3 Cost Form and Section 4.4.4. Cost Form Section E. Telephone Toll Charges and Telecommunications on pages 27-28 refers to the inclusion of communications costs for this RFP. Can a Contractor submit costs for Telephone and Telecommunications charges under the guidelines of Section 4.4.4.E on page 28 of the RFP?	We expect, and have always had the contractor responsible for communication costs. This has not been an issue in the past and we don't expect it to be going forward. The form in Section 4.4.3 is just a sample of a form that we use for contractors to submit expenses, etc. for reimbursement. Not all of those costs are allowed on all contracts.
Page 27 of 52, 4.4.3	Section 4.4.3 Example Cost Form, please define Column 1: Category/Personnel and Column 2: # Staff cost elements. Which of the examples below best represent what the State is requesting for these cost elements? Example 1: Should the Cost Form Column 1 Category list each proposed Personnel "Group" such as Project Director, Key Staff, Lead Staff, Support Staff then coincide with Column 2 with the # of Staff in each Personnel "Group"?	I think that Example 3 is the best representation of what the State is looking for. Please keep in mind that the form is just an example. It is not required to be used for the cost proposal.

	<p>Example 2: Should the Cost Form Column 1 list each Personnel "Level" such as Project Director, PMV Lead, etc., then coincide with Column 2 with the # of Staff for each Personnel "Level"?</p> <p>Example 3: A combination of both Examples 1 & 2:</p> <table> <tr> <td>Personnel:</td> <td>#Staff</td> </tr> <tr> <td>Key Staff</td> <td></td> </tr> <tr> <td> Project Director</td> <td>1</td> </tr> <tr> <td>Lead Staff</td> <td></td> </tr> <tr> <td> PMV Lead</td> <td>1</td> </tr> <tr> <td> PIP Lead</td> <td>1</td> </tr> <tr> <td>Support Staff</td> <td>2</td> </tr> </table>	Personnel:	#Staff	Key Staff		Project Director	1	Lead Staff		PMV Lead	1	PIP Lead	1	Support Staff	2	
Personnel:	#Staff															
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Page 28 of 52, 4.4.4	<p>Please refer to RFP Page 28, 4.4.4 Products & Services Ineligible for Profit, Sections a. through k. Our rationale for fee is specified in Federal Acquisition Regulations FAR 15.404-4 (c)(4)(i)B), whereas Fee is applied to all costs pursuant to federal regulation allocation requirements and in compliance with Cost Accounting Standards (CAS). FAR 15.404-4 (c)(4)(i)B), states..."Profit or fee objectives do not necessarily represent net income to contractors. Rather, they represent that element of the potential total remuneration that contractors may receive for contract performance over and above allowable costs. Just as actual costs may vary from estimated costs, the contractor's actual realized profit or fee may vary from negotiated profit or fee, because of such factors as efficiency of performance and the contract type. "</p> <p>Following the guidelines of federal regulations, would the State consider the application of a fee to Administrative/Other Costs in the 4.4.3 Cost Form?</p>	Please clarify this question.														
Page 31 of 52, 6.3.1, f.	Please clarify where Appendix A can be found in the RFP.	This should have said Appendix 1														
Page 39 of 52, Attachment C	The required amount is blank. What level of professional liability insurance is the State requiring?	There is no professional liability insurance required for this contract.														
NA	Does AHS have a budget for EQRO services? What is the value of the current EQRO contract?	The value of the current EQRO contract is approximately \$200, 000 per year OR \$400,000 for the two year period.														