

# ADDENDUM ONE QUESTIONS and ANSWERS

Date: August 10, 2020

To: All Bidders

From: Julie Schiltz, Nancy Storant Buyer(s)  
AS Materiel State Purchasing Bureau

RE: Addendum for Request for Proposal 6325 Z1 to be opened on September 15, 2020, at 2:00 P.M. Central Time

## Questions and Answers

Following are the questions submitted and answers provided for the above mentioned Request for Proposal. The questions and answers are to be considered as part of the Request for Proposal. It is the Bidder's responsibility to check the State Purchasing Bureau website for all addenda or amendments.

| <u>Question Number</u> | <u>RFP Section Reference</u> | <u>RFP Page Number</u> | <u>Question</u>   | <u>State Response</u>   |
|------------------------|------------------------------|------------------------|---|---|
| 1                      | Option 2.3.c                 | 33                     | Is there an existing DSH survey template to use or will the awardee be responsible for creating the survey?   | The Contractor shall be responsible for creating the survey.  |
| 2                      | Option 2.3.c                 | 33                     | Are DSH survey responses to be sent electronically or via the mail?   | The Contractor shall collect DSH survey responses. The State does not have a preference to the method of distribution, however the distribution method should be outlined in the bidder's response.   |
| 3                      | Option 2.3.j                 | 33                     | What are Nebraska Medicaid's expectations for DSH payment-related data management services, and what will be their scheduling, development, and reporting requirements for DSH payment data analysis? | The Contractor shall manage the hospital historical payment data and annually (during the DSH calculation process) analyze the hospitals historical DSH payment data against the hospital specific DSH limit. The contractor will report and discuss any anomaly with DHHS prior to the payment to the hospitals. |
| 4                      | Option 2.3.o                 | 33                     | Can you provide an estimation of the level of effort required from the awardee and the frequency of state fair hearings?  | The State has not had a DSH payment hearing within the last decade. Should there be a hearing, the Contractor's DSH legal, DSH financial and DSH regulatory subject matter experts shall testify at the State Fair Hearing.   |

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| 5  | Option 5, 2     | 40      | Are there any technical requirements for the data transfers with provider groups?<br><br>Will PHI and/or PII be shared in these data transfers?  | No. The data transfer will be between The State and the contractor.<br><br>PHI and/or PII shall be shared in these data transfers.   |
| 6  | Option 5.2.f.   | 40      | Will DHHS provide the information required to make this calculation, or will the contractor be required to obtain it from the MCOs?              | The State shall provide the necessary claims data and rates required to make this calculation.   |
| 7  | Option 5.2.j    | 40      | Are the data analysis requirements limited to the quarterly reporting listed at Section 2//1, or will additional analysis projects be performed? | Yes, the data analysis requirements are limited to the quarterly reporting listed in Section V.E.2.j.i.  |
| 8  | Option 6.F.1    | 41      | Will the awardee be responsible for purchasing licenses for the 3M Core Grouping Software?   | Yes.   |
| 9  | Option 6.4.     | 42      | Does the rebasing take into account MCO data?<br><br>If so, will that data be supplied, or will the contractor need to obtain it from the MCOs?  | Yes, the rebasing takes into account the MCOs' data.<br><br>The claims data will be supplied by DHHS.  |
| 10 | Option 6.c.ii.b | 42      | Is 3M's Core Grouping Software provided as part of the contract, or will this need to be procured by the contractor?                             | See response to question 8.  |
| 11 |                 |         | What is the budget that has been approved or allocated for this effort?  | Bidders should provide a response that best meets the requirements of the RFP.   |
| 12 |                 |         | Is there an incumbent for this work? If so, who is that incumbent and what is the total contract value?  | Please see the following links to review current contracts for similar services.<br><br><a href="#">67958 O4</a><br><br><a href="#">58871 O4</a><br><br><a href="#">90187 O4</a> |
| 13 |                 |         | For Option 6 Section 4 Rebasing – What is the frequency of this task?  | Refer to section V.F.4.a. of the RFP.  |
| 14 |                 |         | For Option 6 Section 6 EAPGs – What is the frequency of this task?   | Implementation is a one-time service. It is anticipated that updates will be required every 3-5 years.   |
| 15 | Section 5.D     | Page 37 | Is there a funding cap for Option D?   | No.  |

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| 16 | Section 5.D.3  | Page 37     | <p>The link provided in Option D: Number 3 - State Unit on Aging funding Formula Requirements (<a href="https://legcounsel.house.gov/Comps/Older%20Americans%20Act%20Of%201965.pdf">https://legcounsel.house.gov/Comps/Older%20Americans%20Act%20Of%201965.pdf</a>) redirects to a "PAGE NOT FOUND" site on the House Office of the Legislative Counsel website. Can the State provide an updated link?</p>  | <p><a href="https://acl.gov/sites/default/files/about-acl/2020-04/Older%20Americans%20Act%20Of%201965%20as%20amended%20by%20Public%20Law%20116-131%20on%203-25-2020.pdf">https://acl.gov/sites/default/files/about-acl/2020-04/Older%20Americans%20Act%20Of%201965%20as%20amended%20by%20Public%20Law%20116-131%20on%203-25-2020.pdf</a></p>  |
| 17 | Section 5.D.6-8  | Pages 38-39 | <p>For Option D, can SUA provide more information about how they are currently operationalizing the following:</p> <ul style="list-style-type: none"> <li>• Number of persons with a disability or self-care difficulty</li> <li>• Number of persons with Alzheimer's Disease or other neurocognitive disorders</li> <li>• Number of persons with the greatest economic need</li> <li>• Number of persons with the greatest social need</li> <li>• Number of persons with the greatest psycho-social need</li> <li>• Number low income individuals</li> <li>• Number minority individuals</li> <li>• Number of rural individuals</li> <li>• Number of persons with limited English proficiency</li> <li>• Number of medically underserved</li> </ul> | <p>Appendix H (Intrastate Funding Formula) in the Aging State Plan details how Census data is currently used. The Aging State Plan can be found here: <a href="http://dhhs.ne.gov/Medicaid%20SUA/Aging%20State%20Plan.pdf">http://dhhs.ne.gov/Medicaid%20SUA/Aging%20State%20Plan.pdf</a></p> <p>Funding for the Aging &amp; Disability Resource Center is detailed at: <a href="http://dhhs.ne.gov/Medicaid%20SUA/SFY%2021%20ADRC%20Funding%20Description.pdf">http://dhhs.ne.gov/Medicaid%20SUA/SFY%2021%20ADRC%20Funding%20Description.pdf</a></p> |
| 18 | <p>V. PROJECT DESCRIPTION AND SCOPE OF WORK, F. OPTION 6: HOSPITAL INPATIENT REIMBURSEMENT, 6. SCOPE OF WORK: ENHANCED AMBULATORY PATIENT GROUP (EAPG), d. EAPG Updates – Per DHHS request</p> | 43          | <p>Will EAPG updates include hospital EAPG base rates?</p> <p>If so, when is DHHS' next plan hospital EAPG rebasing?</p>   | <p>Yes, the EAPG updates will include the hospitals EAPG base rates.</p> <p>The State anticipates to rebase the hospital EAPG base rates no earlier than 2023 and no later than 2025.</p>   |

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| 19 | <p>V.PROJECT DESCRIPTION AND SCOPE OF WORK, D. OPTION 4. 1. Project Overview : Automating the funding formula for the aging network would replace the State's existing set of excel spreadsheets and manual entry to calculate...</p> | 37    | <p>Would a new Excel-based solution be acceptable, or is the State's preference to have a solution using an alternative platform?</p>   | <p>The State has no preference. Bidder should provide a response that best meets the RFP requirements.</p> |
| 20 | V.A.2.  | p.29  | <p>This section provides a link to a document containing the LTC Roster which appears to include a listing of all licensed nursing facilities in the state totaling 210 plus 19 Alzheimer facilities. Is there a separate listing of the ICF/DD facilities?</p>   | <p>Attachment D has been added. Please refer to attachment D.</p>  |
| 21 | V.A.4.b.i.  | p.29  | <p>This section indicates that the contractor will be performing "desk audits" of the provider's 6/30/xx cost reports each year. Will the contractor develop the "desk audit" program subject to the Department's approval, or is there a standard desk review program that the Department intends for the contractor to utilize?</p> | <p>The Contractor shall develop a standard desk audit process, to be approved by DHHS, in writing.</p>     |
| 22 | V.A.4.c.i. and ii.  | p. 30 | <p>With regards to the high risk field audits, and the non-high risk field audits, will the contractor develop the "field audit" program subject to the Department's approval, or is there a standard "field audit" program that the Department intends for the contractor to utilize?</p>  | <p>The Contractor shall develop a standard field audit process, to be approved by DHHS, in writing.</p>    |

This addendum will become part of the RFP and should be acknowledged with the Request for Proposal response.