

**ADDENDUM ONE
QUESTIONS and ANSWERS**

Date: December 4 , 2019

To: All Vendors

From: Jennifer Crouse/Holly Glasgow, Buyers
Department of Health and Human Services, Procurement

RE: Addendum for Request for Information EX MAN to be opened December 20, 2019 at 2:00 p.m. Central Time

Questions and Answers

Following are the questions submitted and answers provided for the above mentioned Request for Information. The questions and answers are to be considered as part of the Request for Information. 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.			Do you know who the incumbent vendor was for this project?	There is not an incumbent vendor for this service.
2.			Next, do you have an estimate of the contract value?	A future contract value is unknown.

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3.			<p>Are you looking to replace the current environment listed below? Or simply looking to add an Experience Management solution to the current environment?</p> <p>CURRENT ENVIRONMENT MLTC receives feedback in a variety of ways and mediums. Citizens applying for benefits and current beneficiaries addressing issues of eligibility contact ACCESSNebraska via phone, mail, or online and can work with DHHS Eligibility Teammates at local field offices. Citizens contact MLTC through DHHS social media channels. Providers engage with a many different areas of MLTC for many reasons.</p>	<p>MLTC is looking to add an Experience Management solution to the current environment.</p>
4.	3.2.	5	<p>Who is to be included in the survey? Does this include all beneficiaries from Nebraska Total Care (Centene); UnitedHealthcare Community Plan of Nebraska; WellCare of Nebraska; and MCNA Dental, as well as Heritage Health once that program begins?</p>	<p>MLTC is seeking information and potential demonstrations from SMEs, vendors, etc. regarding services and tools for Experience Management to improve the experience of beneficiaries and providers – which may or may not include surveys.</p> <p>The whether the scope is to include beneficiaries served through managed care and/or fee-for-service is undetermined at this time. MLTC encourages suggestions from SMEs, vendors, etc.</p>
5.	3.2.	5	<p>Does MLTC have a specific question set or topics they want to have included in the survey?</p>	<p>MLTC is seeking information and potential demonstrations from SMEs, vendors, etc. regarding services and tools for Experience Management to improve the experience of beneficiaries and providers – which may or may not include surveys. MLTC encourages suggestions from SMEs, vendors, etc.</p>

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6.	3.2.2.	5	Does MLTC intend to include a physician engagement survey that Medicaid providers would take to provide their feedback as well?	<p>MLTC is seeking information and potential demonstrations from SMEs, vendors, etc. regarding services and tools for Experience Management to improve the experience of beneficiaries and providers – which may or may not include surveys.</p> <p>It is the intent of the Division to understand and positively influence the provider experience. MLTC encourages suggestions from SMEs, vendors, etc.</p>
7.	3.2.3.	5	Does MLTC wish to include ACO programs as part of the experience management program to help improve the health of the population?	SMEs, vendors, etc. are encouraged to offer information regarding this topic if they choose.
8.	3.4.	5	Is there a specific date/timeframe for the program to be launched?	Not at this time.
9.	3.4.	5	Will this be a point in time (e.g. annual) or ongoing survey process?	MLTC is seeking information and potential demonstrations from SMEs, vendors, etc. regarding services and tools for Experience Management to improve the experience of beneficiaries and providers – which may or may not include surveys. MLTC is focused on the right efforts, at the right time to best understand and positively impact the beneficiary and provider experience.
10.	3. Description & scope of work, 3.2.1	5	For “improving beneficiary experience of care” – would you be evaluating that beneficiary’s experience with a provider, with the four managed care entities, MLTC, or all of the above? Or something else?	All of the above. Similarly, the provider’s experience with MLTC, the MCEs, and beneficiaries. Also, SMEs, vendors, etc. should not feel limited to provide a response if they have different suggestions.
11.	3.4.3.	5	Regarding “a formal means to take action,” who do you envision (what roles or divisions) getting these results to empower them to take action?	Primarily MLTC. It may also include partners, e.g. sister DHHS Divisions and other stakeholders, in efforts lead by MLTC.
12.	3.1	5	How do you intend to measure success of your Experience Management program or were you hoping for guidance from the vendor?	MLTC has some initial ideas about how we will measure success but the Division requests guidance from the vendor(s).

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13.	3.2.1, 3.2.2	5	What is the primary objective of this initiative, other than simply improving beneficiary and provider experience of care? For example, do you have specific goals around measuring and increasing trust, driving more services to the digital channel, reducing employee churn, innovating faster?	The primary objective is to improve the beneficiary and provider experience within Nebraska Medicaid. The examples provided may be strategies or tactics to continuously improve the beneficiary and provider experience. MLTC invites information regarding this objective and strategies and tactics from SMEs, vendors, etc.
14.	3.3	5	Is it possible to estimate the average monthly volumes of a) beneficiaries and b) providers who contact MLTC with questions in each of the mediums described (mail, phone, online, field offices, social media)?	It would be possible to estimate the volume; however, estimates for these mediums are not readily available as there is not a current process in place to track this information.
15.	3.3	5	Who in your organization will be using the feedback and what kinds of actions would you expect to take that you aren't taking (or aren't taking optimally) now?	MLTC envisions in the future that the leadership of the Division will use the feedback to improve and/or guide business decisions about internal and external operations.
16.	3.3	5	Who will be managing this initiative? Will it be managed centrally or in the different areas of the organization that it covers?	The requested information, of who will be managing this initiative, may be provided if a contract award is executed from a Request for Proposal. MLTC senior leaders will be involved in the process of deciding what actions to take based on the feedback, prioritizing actions, etc.
17.	3.3	5	What do you plan to do differently, compared to how feedback is used today?	As stated in 3.4, today the Division does not have: <ol style="list-style-type: none"> 1. Formal processes and procedures to collect customer feedback; 2. A means to analyze quantitative and qualitative feedback; and 3. A formal means to take action based on analyzed feedback. What the change looks like in practice depends on the results of the RFI amongst other decision points.
18.	3.3	5	Do you expect the initiative to cover all of the mediums described (mail, phone, online, field offices, social media)?	The initiative may cover all the mediums described; the Division invites information from SMEs, vendors, etc. on this matter.

This addendum will become part of the proposal and should be acknowledged with the Request for Information.