



**HHS Medicaid Enterprise Quality Assurance (QA) RFP
RFP #18-630-8000-0003**

RESPONSES TO QUESTIONS

	RFP SECTION	SECTION TITLE	PAGE	OFFEROR'S QUESTION	HSD'S RESPONSE
1.	II. MMISR APPROACH	II.A. MMISR APPROACH TABLE 1 – PROJECT TIMELINE	8	HSD has just released the Quality Assurance module (RFP# 18-630- 8000-0003) and in the timeline of the RFP releases of the modules there is no timeframe for the Population Health Management module. Do you still plan to issue an RFP for this specific module? If so, may I know when?	<p>Some of the components from the Population Health module were moved to the Quality Assurance and Benefit Management Services modules.</p> <p>The procurement strategy for the health outcomes-focused analytics have yet to be determined. As specified in Section II.A page 8 - Following all of the MMISR modular procurements, an outcomes-based management contract will help New Mexico realize the vision for a health outcomes-focused approach to serving the needs of New Mexico citizens and to managing and delivering services and benefits.</p>
2.	I. INTRODUCTION	I.C. SCOPE OF PROCUREMENT	2	If we bid on this project and win, will this preclude us from bidding on the future call center project coming out of NM-HSD?	No. As specified in Section I.C., each Offeror may win no more than two MMISR procurements, although the selected SI Contractor may not win any other procurement as the Prime Contractor. The selected QA Contractor may be a subcontractor on other MMISR contracts.
3.				Have the Modules 1 & 2, awardees been announced?	The awardee for the System Integrator has been announced. The Data Services module awardee has not been announced.



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4.			Can I get a copy of the RFP sent to me?	The RFPs are posted on HSD's website at http://www.hsd.state.nm.us/LookingForInformation/open-rfps.aspx .
5.			Can you email me a copy of any specifications and/or documents associated with this project?	Please see the HSD's website for Open RFPs and the Procurement Library for documents associated with the project http://www.hsd.state.nm.us/LookingForInformation/open-rfps.aspx and https://nmhsd-public.sharepoint.com/Pages/HSDProcurementLibrary.aspx .
6.			Can you please tell us where we can locate the RFP or when the RFP is going to be released?	The RFPs are posted on HSD's website at http://www.hsd.state.nm.us/LookingForInformation/open-rfps.aspx .
7.			How do I register to receive HSD RFP notifications?	State Purchasing Division online vendor registration: http://www.generalservices.state.nm.us/statepurchasing/FAQs_1.aspx .
8.			Have you selected the Systems Integrator (SI) for the HHS 2020 – Medicaid Enterprise Management Information System? <ul style="list-style-type: none"> • If so, what is the timeframe for their onboarding? • If you have not, in the interest in getting the state a wider SI 	The SI Contractor has been selected. The Contractor has been onboarded.



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				bid pool, would the state consider accepting additional submissions?	
9.				Would the state consider further modularizing the QA RFP and procuring aspects separately?	No. The Offeror may subcontract parts of the QA RFP. However, the Prime Contractor is responsible for delivering all components of the QA RFP.
10.	II.A. MMISR APPROACH	II.A. MMISR APPROACH TABLE 1 – PROJECT TIMELINE	8	Can the state share an updated timeline for the Unified Public Interface (UPI) procurement and/or other module procurements?	Yes. The State will be launching a website that will include this information. The timeline for the other modules is included in the Introduction.
11.	APPENDIX H	1.02	81	As part of Eligibility Quality Control, does DHS expect the vendor to evaluate recipients for indications of inappropriate enrollment, such as death, incarceration, residence out of state, etc.?	Yes. As a part of the EQC auditing process.
12.	APPENDIX H	PROGRAM INTEGRITY	81-85	Is DHS interested in solutions that can identify hidden elements of risk or ineligibility among the Enterprise’s provider enrollment? Examples would be license sanctions/revocations across all 50 states, deceased or incarcerated indications, or appearance on Federal exclusion lists?	The State’s expectation is that provider management, as part of the BMS module would have this capability. If the QA Offeror already has these as part of their services or recommending it, please do specify in your proposal response your recommendation and the benefit to the State.



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13.	APPENDIX H	1.04 & 1.05	81	<p>These Program Integrity requirements reference clinically approved guidelines for episodes of care that typically require commercially-available Grouper tools.</p> <ul style="list-style-type: none"> • Does the HSD currently utilize any episode of care grouper tools within its Enterprise? • Is the state expecting episode of care grouper tools in any other vendor? <ul style="list-style-type: none"> ○ If so, should bidders be prepared to use the same tool as is being supplied internally or through other vendor contract? <p>Combining these analytic reference function could avoid inconsistent data results across the Enterprise – and cost savings for DHS, as opposed to purchasing groupers within two distinct contracts.</p>	<p>No. The State does not currently use such a Grouper.</p> <p>It is unknown at this time if another Contractor may bring these tools. The Offeror should be prepared to integrate with other Contractor tools. The Offeror should make a recommendation for such a Grouper and specify any advantages to the State.</p>
14.	APPENDIX H	1.39 - Offeror shall describe how its proposed services, in coordination with SI security, capture, store	84	Can DHS please describe expected use cases for Electronic Signature capability?	At a minimum, the ability to use electronic signature would be required where a “wet signature” is currently required.



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		and provide access to electronic signatures.			
15.	APPENDIX H	1.47 - Offeror shall describe how its proposed services automatically utilize oversight reporting files from MCOs.	85	Can DHS please provide greater detail concerning the Oversight Reporting Files that the State receives from MCOs? Any information concerning format, information and data contained within these files, or general data layouts if possible would be helpful.	Currently, files are typically in Excel. However, the State needs to accept other formats such as PDF, Word Documents, flat files, etc. The Offeror is encouraged to visit the Centennial Care 2.0 website at http://www.hsd.state.nm.us/centennial-care-2-0.aspx which includes the Centennial Care reports in the Procurement Library.
16.	APPENDIX H	1.53 - Offeror shall describe how its proposed services provide Users access to its modeling tools to enable Users to share the same system-of-record semantic model and metadata. Offeror shall describe how its proposed Business Services, in conjunction with the Data Services module, provides a robust and centralized way for Users to search, capture, store, reuse and publish metadata objects, such as	85	<p>This requirement spells out responsibilities for the QA vendor to work in coordination with the Business Services vendor to provide a common set of modeling tools and ensure consistency across data repositories.</p> <ul style="list-style-type: none"> • Can DHS please describe a few examples of use cases for which this coordination would apply so that vendors can get a clear understanding of the division of responsibility between the QA and the Business Services vendors? 	The State assumes the reference to business services vendor is the Data Services Contractor. The State is expecting the QA Contractor to be a provider and consumer of data from the Data Services solution and the system migration repository. The State will require documentation of data models, definitions, etc. from the QA Contractor in order to support reporting and other data uses.



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		dimensions, hierarchies, measures, performance metrics/key performance indicators (KPIs) and report layout objects and parameters.			
17.	II.A. MMISR APPROACH	II.A. MMISR APPROACH TABLE 1 – PROJECT TIMELINE	8	I had a question regarding the Benefit Management Services module for the MMISR Solution. Would it be possible to find out if the department anticipates the procurement for this module in 2018 or 2019?	The State anticipates releasing the RFP for the Benefit Management Services module in 2018.
18.				Does the Benefit Management Services module fall within the scope of the current contract with Conduent (contract# PSC 10-00-18244), the current MMIS vendor, or is this a brand-new requirement for the MMISR Solution?	There are components and aspects in the Benefit Management Services module that fall within the scope of the current Conduent contract. However, there are additional components and aspects in the Benefit Management Services that are outside the current scope of the current Conduent contract.
19.				Can you let us know if a partial bid is acceptable or does HSD require bidders to respond to the entire RFP scope and requirements?	The State requires potential Offerors to respond to the entire RFP scope and requirements. The State will award the QA Contract to a single Offeror who will be the Prime Contractor. The Offeror may subcontract parts of the QA RFP. However, the Prime Contractor is



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					responsible for delivering all components of the QA RFP.
20.				Is HSD looking to award a single BPO contractor or could there be multiple contractors?	The State will award the QA Contract to a single Offeror who will be the Prime Contractor. The Offeror may subcontract parts of the QA RFP. However, the Prime Contractor is responsible for delivering all components of the QA RFP.
21.				Regarding the MMIS System Integrator RFP (RFP# 17-630-4000-0002), is this procurement already awarded? <ul style="list-style-type: none"> If so, may I know who was the awarded vendor and the contract term? 	The SI Contractor has been selected. The Contractor has been onboarded. The contract can be found on the website under MMIS contracts: http://www.hsd.state.nm.us/LookingForInformation/medical-assistance-division.aspx .
22.		Program Integrity - General		Can HSD please provide the number of anticipated State users of the Program Integrity system? Can HSD please comment generally on the level of vendor staff support required for these program integrity requirements? Any direction on the division of labor between state and vendor investigators resulting from this procurement would be appreciated.	The State is unable to determine the program integrity functionality that is being referenced. Therefore, the State is unable to comment generally on the level of Contractor staff support required. The State is expecting Offerors to propose solutions as outlined in the RFP.
23.	APPENDIX H	Program Integrity -Item 1.07		This requirement references members by peer group – can DHS please provide	Member peer groups could be by medical conditions, disease management programs,



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				examples of member peer groups that would apply within this requirement?	geography, socioeconomic status, gender, etc.
24.	APPENDIX H	Program Integrity – Item 1.37		Can HSD please provide examples of data categories that would be suppressed via this requirement? Does the suppression of data results apply to providers?	Some examples would include: all members in Santa Fe County except for those in a health homes; an analysis of all pediatric providers except for those in specific geographic areas; a FADS analysis except specific providers identified by the State, SNAP cases in Sierra County except those cases with a single mother with two children under three years old. Yes. Suppression ability applies to any peer group or individual member within the peer group.
25.		Contractor Role	9	Can a technical requirement be provided to understand what integration points would be required from a QA services provider prior to final submittal of the proposal? Requirement: The paragraph states that integration to the SI vendor's solution will be required.	The QA module must utilize a Service-Oriented Architecture (SOA) compliant Application Programming Interface (API). The QA module will integrate with the System Integrator's Enterprise Service Bus (ESB) that will be capable of end to end connections to all other MMISR modules, shared services, and legacy systems.
26.	VI. CONDITION S GOVERNING	A. 7 PROPOSAL OFFER FIRM	23	Will the State please confirm if this requirement should responded to in the Offeror's submission, if so what location?	Section VI does not require a response. However, the completion and submission of APPENDIX C acknowledges acceptance



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	THE PROCUREMENT			Requirement: Responses to this RFP, including proposal prices for services, will be considered firm for one hundred twenty (120) calendar days after the due date for receipt of proposals or ninety (90) calendar days after the due date for the receipt of a best-and-final offer, if the Offeror is invited or required to submit one.	of Conditions Governing the Procurement as required in Section VI.
27.	VI. CONDITIONS GOVERNING THE PROCUREMENT	A. 8. DISCLOSURE OF PROPOSAL CONTENTS	23	<p>Will the State please confirm the method and when Offeror's are to provide the below written request for confidentiality?</p> <p>Requirement: If a request is received for disclosure of data for which an Offeror has made a written request for confidentiality, State Purchasing Division (SPD) or the Agency shall examine the Offeror's request and make a written determination that specifies which portions of the proposal may be disclosed.</p>	<p>This requirement is intended to address when the State receives an IPRA for records. At that time, SPD will evaluate if records or portions thereof can be released.</p> <p>The Contractor must mark as confidential per Section VI, Conditions Governing the Procurement, Part B, Explanation of Events, Part A, General Requirements, 8. Disclosure of Proposal Contents defines how to request confidentiality or SPD will automatically release.</p>
28.	VI. CONDITIONS GOVERNING THE PROCUREMENT	A. 16. OFFEROR TERMS AND CONDITIONS	24	<p>Will the State please confirm where in the response structure the Offeror's should include proposed alternative language?</p> <p>Requirement: Section or in the appendices, the Offeror must propose</p>	Proposed alternative language may be provided in additional items in binder 1 (see page 32), proposal content and organization #13 additional items.



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				specific, alternative language in writing and submit it with its proposal.	
29.	VII. RESPONSE SPECIFICATI ONS	A. 3. PROPOSAL FORMAT	31	<p>Will the State please consider adding Staffing Tables, Work Plan and Implementation Schedule to the list of response items not included in the three hundred (300) page limit?</p> <p>Requirement: Response must be no more than three hundred (300) pages in length excluding the title page, table of contents, tabs, pricing, resumes, financial statements, the mandatory State required forms and examples of documents.</p>	<p>Amendment 1-</p> <p>The Offerors responses must be no more than three hundred (300) pages in length excluding the title page, table of contents, tabs, pricing, resumes, financial statements, the mandatory State required forms, detailed work plan, detailed implementation schedule and examples of documents. The Offeror is expected to include in the three hundred (300) page limit a summary work plan with milestones and a summary implementation schedule.</p>
30.	VII. RESPONSE SPECIFICATI ONS	A. 3. PROPOSAL FORMAT	31	<p>Will the State please confirm that Binder 2 Cost Proposal Narrative, Implementation Assumptions, and Implementation Schedule are not included in the three hundred (300) page limit?</p> <p>Requirement: Response must be no more than three hundred (300) pages in length excluding the title page, table of contents, tabs, pricing, resumes, financial statements, the mandatory State required forms and examples of documents.</p>	<p>Binder 2 Cost Proposal is not included in the three hundred (300) page limit.</p> <p>The Offerors responses must be no more than three hundred (300) pages in length excluding the title page, table of contents, tabs, pricing, resumes, financial statements, the mandatory State required forms, detailed work plan, detailed implementation schedule and examples of documents. The Offeror is expected to include in the three hundred (300) page limit a summary work plan with milestones and a summary implementation schedule.</p>



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31.	VII. RESPONSE SPECIFICATI ONS	A. 2. NUMBER OF COPIES Binder 1	31	Question: Will the State please define the use of "secure" below? Requirement: (1) a version in secure PDF;	"Secure" to mean HIPAA compliant.
32.	VII. RESPONSE SPECIFICATI ONS	A. 2. NUMBER OF COPIES Binder 1	31	Will the State please confirm the 10MB limit below is per file, and not for the proposal submission? Requirement: Electronic versions of the proposal must not exceed 10 MB.	Amendment 1 – Electronic versions must not exceed 10 MB per file, not for the proposal submission.
33.	VII. RESPONSE SPECIFICATI ONS	A. 2. NUMBER OF COPIES	31	Will the State please clarify whether the Confidential/Proprietary response content should be segregated from the hard copy Technical Submission binders and located in a different binder? Or is the State referring to the redacted electronic response being in the same order/structure as the hard copy submission? Requirement: Any and all confidential or proprietary information shall be clearly identified and shall be segregated in the electronic version, mirroring the hard-copy submission(s).	The State is referring to the redacted electronic response being in the same order/structure as the hard copy submission (and shall be clearly identified). The completion and submission of APPENDIX C acknowledges acceptance of Conditions Governing the Procurement as required in Section VI. Section VI, Conditions Governing the Procurement, Part B, Explanation of Events, Part A, General Requirements, 8. Disclosure of Proposal Contents defines how to request confidentiality. 8. Disclosure of Proposal Contents Proposals will be kept confidential until negotiations and the award are completed by the Agency. At that time, all proposals



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					<p>and documents pertaining to the proposals will be open to the public, except for material that is clearly marked proprietary or confidential. The Procurement Manager will not disclose or make public any pages of a proposal on which the potential Offeror has stamped or imprinted "proprietary" or "confidential" subject to the following requirements:</p> <p>a) Proprietary or confidential data shall be readily separable from the proposal to facilitate eventual public inspection of the non-confidential portion of the proposal.</p> <p>b) Confidential data is restricted to:</p> <p>(1.) Confidential financial information concerning the Offeror's organization;</p> <p>(2.) Data that qualifies as a trade secret in accordance with the Uniform Trade Secrets Act (UTSA), Sections 57-3A-1 to 57-3A-7 NMSA 1978.</p> <p>PLEASE NOTE: Offerors shall not designate the price of products offered or the cost of services proposed as proprietary or confidential information. If a request is received for disclosure of data for which an Offeror has made a written request for confidentiality, State Purchasing Division</p>
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					<p>(SPD) or the Agency shall examine the Offeror's request and make a written determination that specifies which portions of the proposal may be disclosed. Unless the Offeror takes legal action to prevent the disclosure, the proposal will be so disclosed. The proposal shall be open to public inspection subject to any continuing prohibition on the disclosure of confidential data.</p> <p>Section VII. Response Specifications, Part A, Response Format and Organization, 2. Number of Copies, outlines how to deliver confidential material.</p> <p>Each Offeror shall deliver:</p> <ul style="list-style-type: none">• Binder 1: one (1) original and six (6) identical hard copies of their Technical proposal and required additional forms and material. The original and each copy shall be in separate, labeled binders. Any confidential information in the proposal shall be clearly identified and easily segregated from the rest of the proposal. Binder 1 MUST NOT include any cost information. <p>In addition, the entire proposal including all materials in Binder 1 (not Binder 2) shall be submitted on a single CD.</p>
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					<p>Contents of Binder 2 must be submitted on a separate CD. Proposals submitted on CD must include THREE versions: (1) a version in secure PDF; (2) a version in unsecured Microsoft WORD and/or Excel to enable the Department to organize comparative review of submitted documents; and (3) a redacted PDF for release to public under Inspection of Public Records Act requests. Electronic versions of the proposal must not exceed 10 MB. Security policies do not allow the State to receive electronic copies via a USB drive. Within each section of the proposal, Offerors should address the items in the order in which they appear in this RFP. All forms provided in this RFP must be thoroughly completed and included in the appropriate section of the proposal. All discussion of proposed costs, rates or expenses must occur only in Binder #2 on the cost response form.</p> <ul style="list-style-type: none">• Binder 2: one (1) original and six (6) copies of their Cost proposal. The original and each copy shall be in separate, labeled binders.• One (1) electronic version, in addition to the one stated in the Binder 1 of the proposal containing ONLY the Technical proposal. This copy MUST NOT contain
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					<p>any cost information. Acceptable formats for the electronic version of the proposal are Microsoft Word, Excel and PDF.</p> <ul style="list-style-type: none"> • One (1) electronic version of the Cost proposal. Acceptable formats for the electronic version of the proposal are Microsoft Word, Excel and PDF. <p>Any and all confidential or proprietary information shall be clearly identified and shall be segregated in the electronic version, mirroring the hard-copy submission(s).</p> <p>Any proposal that does not adhere to the requirements of this Section may be deemed non-responsive and may be rejected on that basis.</p>
34.	VII. RESPONSE SPECIFICATIONS	VII. C. 2. LIST OF REFERENCES	34	<p>Will the State please clarify the maximum of 5 references:</p> <p>Does the State mean the maximum for each service is 5? TPL, RAC, FADS, Audit Coordination, Quality Reporting, Coordination of Efforts/Projects</p> <p>Requirement: Offerors shall provide a minimum of three (3) and no more than five (5) references from similar large-scale Projects performed for private,</p>	<p>The Offeror shall provide a minimum of three (3) and no more than five (5) references in total. The State expects the references submitted to be reflective of similar large-scale projects including services referenced in the RFP such as, TPL, RAC, FADS, Audit Coordination and Quality Reporting, etc.</p>



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				State or large local government clients within the last three (3) years.	
35.	VIII. EVALUATION	VIII. A. EVALUATION POINT SUMMARY	36	<p>Will the State please confirm where in their response structure the Offeror's should respond to Vision for QA?</p> <p>Requirement: Technical Response - Vision for QA</p>	As indicated in Table 3 of Section VIII. A. Evaluation Point Summary, Technical Responses should include Vision for QA and Statement of Work (Appendix G). See Page 37 #1 Technical Responses.
36.	APPENDIX B	COST RESPONSE FORMS	42	<p>Will the state consider adding a breakout for implementation costs? Upon certification, NM would receive a 90% match for all implementation costs associated with the QA module.</p>	No.
37.	APPENDIX G	1.1 COMPLETE BPO SERVICES	55	<p>Will the state please provide additional context around the Child Support Enforcement System Replacement Project, and your vision of how the QA Module services would support?</p> <p>Requirement: HSD may, as planning evolves, request the QA Contractor to extend support to the Child Support Enforcement System Replacement (CSESR) Project or to other HHS 2020 initiatives in the future to the extent that these initiatives align with and benefit from the HHS 2020 Framework.</p>	At this time, the State has not identified any services that are a part of the QA RFP that would be relevant to the Child Support Enforcement Replacement Project but may in the future.



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38.	APPENDIX G	2.1 SUBCONTRACTORS	56	Will the State please confirm the Section Number for: 2.1 Subcontractors should be 1.2 Subcontractors, as there is also 2.1 The BPO Services in Appendix G?	Amendment 1 – Appendix G, Section 1, 2.1 Subcontractors change to Section 1,1.2 Subcontractors.
39.	APPENDIX G	2.3.1 THIRD PARTY LIABILITY OBJECTIVES	59	Will Contractor receive data regarding pension plans and retirement benefits? Requirement: The Contractor must recover on multiple coverage types (Commercial Medical Insurance; Medicare; Medicare Advantage; Estate Recovery; Trust accounts; Children with Special Health Care Needs (CSHCN); retirement benefits; pension plans; casualty recoveries including but not limited to worker compensation claims, auto liability coverage, and medical malpractice) and apply different rules based upon State configurable criteria.	The State is expecting Offerors to seek this data as part of the services associated with this RFP.
40.	APPENDIX G	2.3.1 THIRD PARTY LIABILITY OBJECTIVES	59	Does the State consider Contractor's best practices when configuring its criteria? Requirement: General	The State will consider Offerors best practices when configuring criteria.
41.	APPENDIX G	2.6 RECOVERY AUDIT CONTRACTOR – MANAGEMENT OF RECOVERY ABD	64	Will the State please clarify, whether you are considering Estate and Credit Balance recoveries a part of TPL? Historically Estate and Credit balance recoveries are TPL components.	Both Estate and Credit Balance Recoveries are a part of TPL.



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		AUDIT RESPONSIBILITIES		Requirement: • Supplement recovery activities through pursuit of post payment recovery, including estate and credit balance recoveries, and cases and recoveries made pursuant to eligibility;	
42.	APPENDIX G	2.6 RECOVERY AUDIT CONTRACTOR – MANAGEMENT OF RECOVERY ABD AUDIT RESPONSIBILITIES	65	Will the state please clarify if Offeror's will be able to recover credits from the State's Dialysis centers? Requirement: General	If the Dialysis Center is paid in error, including when the recipient should have been enrolled in Medicare, then it is eligible for recovery.
43.	APPENDIX H	Third Party Liability - 2.16	87	Is the State seeking only recovery services, or is the State seeking that offeror establish and administer a program for the review of Special Needs Trusts (IDTs, Special/Supplement Need Trusts, Pooled Charitable/Non-Profit Trusts) for the State? Requirement: Offeror shall describe how its proposed services provide for non-insurance based recovery types (e.g., Estate Recovery; Income Diversion Trust (IDT) accounts; Special/Supplement Need Trusts; Pooled Charitable/Non-Profit Trusts; CSED recoveries; and Children with Special Health Care Needs (CSHCN), and remainder beneficiary payments from an annuity or trust) and describe	The State is only seeking recovery services and not program establishment or administration.



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				the processes related to each recovery type.	
44.	APPENDIX H	Third Party Liability - 2.16	87	<p>If not, how will the State provide the information needed for offeror to establish and administer a Special Needs Trust Payback Recovery program?</p> <p>Requirement: Offeror shall describe how its proposed services provide for non-insurance-based recovery types (e.g., Estate Recovery; Income Diversion Trust (IDT) accounts; Special/Supplement Need Trusts; Pooled Charitable/Non-Profit Trusts; CSED recoveries; and Children with Special Health Care Needs (CSHCN), and remainder beneficiary payments from an annuity or trust) and describe the processes related to each recovery type.</p>	The State will refer such cases and related information to the Contractor on a case-by-case basis.
45.	APPENDIX H	Service Expectations, 7.03	98	<p>Will the State please clarify the requirement below, as it appears to be an incomplete?</p> <p>Requirement: Offeror shall describe how its proposed services are a complete and provide for the future needs of the MMISR Framework and one which complies with CMS guidance on modularity and integration.</p>	<p>Amendment 1 –</p> <p>Offeror shall describe how its proposed services are a complete service that provides for the future needs of the MMISR Framework and one which complies with CMS guidance on modularity and integration.</p>



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46.	APPENDIX G	Services Expectations - 7.01	98	<p>Data Integration – Will the state require the SI to utilize the same file formats/layout for claims, eligibility and provider data that the current MMIS supplies to vendors today? Doing this will reduce the cost of implementing a new data feed as well as minimize any risk to delaying recoveries for claims paid under the new financial module.</p> <p>Requirement: Offeror shall describe how its proposed services integrate with the SI's Integration Platform</p>	The State intends to utilize some existing formats and layouts and leverage new formats and layouts as appropriate.
47.	APPENDIX H	Certification - 9.05	102	<p>Will the State please provide what is viewed as the "end of the HHS 2020 Project"?</p> <p>Requirement: Offeror shall acknowledge its understanding that the State expects to achieve MITA Level 4 by the end of the HHS 2020 Project, and shall conduct such mapping as may be necessary to demonstrate Offeror's understanding of the expectations of the State and CMS.</p>	As noted in the States Certification Plan, the State's plan to reach MITA Maturity Level 4 is a five (5) year plan, which means that the new system will be ready for certification before the State reaches full Maturity Level 4 in some areas. As part of the process to achieve Level 4, the State will require its modular Contractors to develop a roadmap that will outline their plan for reaching Level 4.
48.	APPENDIX K	Quality Assurance Performance Measures	127	Will the State please clarify for Configuration Management changes to the environment would there be an ability to have predefined accepted	Yes, for predefined accepted changes by the State.



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				<p>changes that would not require written notification and approval as there may be leverages of shared systems and standard maintenance changes required?</p> <p>Requirement: The QA Contractor will not perform any changes including configurable items and business rules which impact HSD without the prior written approval of HSD via the Change Control and Release Management processes. HSD will use an emergency approval process to expedite urgent changes necessary to support maximum system availability.</p>	
49.	APPENDIX K	Quality Assurance Measures - #7	128	<p>Not all systems / tools that will be used to deliver the services outlined in the RFP will be access by the state or providers 24/7, only during normal business hours. Will the state decrease the system availability requirements to only applications or systems that impact claim payment or access to care?</p> <p>Requirement: QA Contractor shall provide all components of the QA Module available for production processing 99.999% of the time, three-hundred sixty-five (365) days per year.</p>	No.



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				Maintenance downtime hours approved on exceptional basis do not apply to this standard.	
50.	APPENDIX K	Quality Assurance Measures - #12	128	<p>PI Onsite – Will the state define when onsite reviews are required and under what scope of work? Credit balance and LTC reviews sometimes warrant onsite reviews due to the size of the provider or expected review volume, but are typically handled as a desk review. Should we assume that this applies to the FADS scope?</p> <p>Requirement: QA Contractor must perform on-site reviews of Provider facilities as required by federal regulation and within thirty (30) calendar days (whichever is less) when directed by the State and capture and provide the site review information within thirty (30) calendar days to the responsible PI unit.</p>	The scope of the onsite reviews is still to be determined.
51.	APPENDIX K	Quality Assurance Performance Measures #8	129	<p>Will the State please provide when testing and implementation are expected to be completed by the State?</p> <p>Requirement: QA Contractor shall deliver the contracted fully functioning integrated QA Module services within</p>	Testing and implementation will be dependent upon Offerors Work Plan and when these services will be available for testing. Implementation will be dependent upon parallel operation and CMS certification of the MMIS Solution.



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				thirty (30) days of the agreed Go-Live release date.	
52.	APPENDIX K	Quality Assurance Performance Measures, OPS, 17, TPL	130	<p>Will the State please provide what triggers the clock to start running on the 30 days to initiate recovery?</p> <p>Requirement: QA Contractor must identify possible eligible incidents of casualty recovery, and initiate casualty recoveries within thirty (30) calendar days and initiate follow up within ninety (90) calendar days of no response.</p>	The clock starts on the date and at the time a claim with an accident diagnosis is received in the MMIS.
53.	APPENDIX K	Quality Assurance Performance Measures, OPS, 14, 15, & 16, TPL	130	<p>Will the State please specify to which TPL services this applies?</p> <p>Requirements: QA Contractor must perform automatic TPL identification, of all Members, through data matching daily.</p> <p>QA Contractor must initiate TPL validation attempts within ten (10) calendar days of potential TPL identification and initiate follow up within forty-five (45) calendar days of no response.</p> <p>QA Contractor must initiate TPL recovery attempts, for those claims that meet the threshold and time-frames for</p>	This applies, at a minimum, to commercial health insurance and Medicare. Please include in your response any other types of automated TPL identification your services provide.



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				recovery, within seven (7) calendar days of potential recovery identification and initiate follow up within thirty (30) calendar days of no response.	
54.	APPENDIX K	Quality Assurance Performance Measures #14	130	<p>Will the State define daily matching of all members? From our experience member State eligibility does not vary from day to day, therefore matching on all members daily will not yield better results but increase cost for the State. Will the State remove all members and replace with newly enrolled Medicaid members to take advantage of best practices process and streamline cost savings?</p> <p>Requirement: QA Contractor must perform automatic TPL identification, of all Members, through data matching daily.</p>	The State’s intent is that the matching is done at go-live for all members; daily for any new member; and when a member record is added, updated, or deleted.
55.	APPENDIX K	Quality Assurance Measures - # 18 and #19	130	TPL 7 day window for CI bill and Pay and Chase – TPL recoveries are typically cyclical meaning recoveries are coordinated with providers and carriers on a monthly basis or less frequent in order to limit abrasion, leverage process efficiencies and automation. Will the state remove the 7 day requirement in order follow best	<p>Amendment 1 –</p> <p>The State will remove the 7 day requirement and revise to say “less than or equal to 30 days” thereby allowing for any Contractor frequency less than or equal to 30 calendar days.</p>



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				<p>practices and to take advantage of system automation capabilities?</p> <p>Requirements: QA Contractor must initiate recovery of claims of identified as "pay and chase" within seven (7) calendar days of and initiate follow up within thirty (30) calendar days of no response.</p> <p>QA Contractor must initiate recovery within seven (7) calendar days of RAC funds or follow-up within thirty (30) calendar days of no response.</p>	
56.	APPENDIX K	Quality Assurance Measures - #16	130	<p>TPL 30 day follow up – Our system automatically follows up when no response is received within 45 days, as there are months that have 31 days, which would impact meeting this SLA. Will the state amend the follow requirement from 30 days to 45 in order take advantage of automation?</p> <p>Requirement: QA Contractor must initiate TPL recovery attempts, for those claims that meet the threshold and time-frames for recovery, within seven (7) calendar days of potential recovery identification and initiate follow up within thirty (30) calendar days of no response.</p>	<p>To clarify, the State is not setting boundaries by months but by calendar days. The State expects a system that can be configured to follow up within 30 calendar days when no response is received.</p>



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57.	<p>VII. RESPONSE SPECIFICATI ONS</p> <p>APPENDIX D</p>	VII.C.2. LIST OF REFERENCES	34 and 47	<p>Will the State please confirm the State requires the Offeror's to send Appendix D to the Procurement Manager for submission to identified references?</p> <p>Requirement: Per Data Ser 1763040000003 HHS 2020 MMISR-DS QA - Answers to Questions 51, 67, 82, and 94</p>	<p>As indicated in Section VII.C.2, Offerors are required to send the Reference Questionnaire Form, APPENDIX D, to each business reference listed. The business reference, in turn, is requested to submit the completed Reference Questionnaire Form, APPENDIX D, directly to the Procurement Manager, as described in Section D of the Introduction. It is the Offeror's responsibility to ensure the completed forms are received on or before the proposal submission deadline for inclusion in the evaluation process.</p> <p>As indicated in APPENDIX D, as part of the RFP process, the State of New Mexico requires Offerors to submit a minimum of three (3) business references. The purpose of these references is to document Offeror's experience relevant to the scope of work in an effort to establish Offeror's responsibility.</p> <p>Offeror is required to send the following reference form to each business reference listed. The business reference, in turn, is requested to submit the Reference Questionnaire directly to: Jade Hunt, Procurement Manager</p>
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					HHS 2020 – MMISR QUALITY ASSURANCE RFP #18-630-8000-0003 Medical Assistance Division 2055 South Pacheco Street, Suite 500 Santa Fe, NM 87504-2348 Phone: (505) 827-7710 Fax: (505) 827-7222 Email: JadeN.Hunt@state.nm.us
58.		A. RESPONSE FORMAT AND ORGANIZATION	Multiple Locations	Will the State please confirm that due to potential duplication or similar answers the Offerors may cross-reference location of response for requirements: examples: Project Management, Staffing, and Method(ology), Plan, and Approach requirements due to page limitations? Requirement: In each section of the proposal, Offerors should address the items in the order in which they appear in this RFP.	The State will allow Offerors to cross-reference location of responses for requirements.
59.				Is a partial bid acceptable or does the State require bidders to respond to the entire RFP scope and requirements?	The State requires potential Offerors to respond to the entire RFP scope and requirements.
60.				Is the State looking to award a single contractor or could there be multiple contractors awarded for this RFP?	The State will award the QA Contract to a single Offeror who will be the Prime Contractor. The Offeror may subcontract



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					parts of the QA RFP. However, the Prime Contractor is responsible for delivering all components of the QA RFP.
61.				What technology from the SI and Data Services projects will be offered and leveraged for this and future RFP modules?	<p>The SI will be implementing an Enterprise Service Bus (ESB), Systems Migration Repository (SMR), Master Data Management (MDM), Identity and Access Management (IdAM), Electronic Content Management (ECM) and other shared services. The SI contract is on the HSD website under MMIS: http://www.hsd.state.nm.us/LookingForInformation/medical-assistance-division.aspx.</p> <p>The Data Services technology is not available to be disclosed at this time due to ongoing procurement.</p>
62.				Is the State open to receiving non-solicited bids for technology components which maybe leveraged across multiple RFPs and the broader State health care services enterprise, e.g. CORE compliant EDI transaction processing and validation?	No.
63.	APPENDIX G	Section 2.8 Quality Reporting	65	Technology supporting the Quality Reporting capabilities may have applicability beyond this RFP perhaps as part of the State’s Outcomes Based and Value Based Contracting/Payment	The State encourages Offerors to respond with features unique to their proposal that would benefit the State.



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				efforts. Can you elaborate on the potential to leverage Quality Reporting beyond this RFP?	
64.	APPENDIX G	Section 2.8 Quality Reporting	65	What quality metrics are of the highest priority to the State to support the Quality Reporting requirement?	The State expects the winning Contractor to comply with the requirements in Appendix G and H.
65.	APPENDIX G	Section 2.8 Quality Reporting	65	Is the State currently collecting data to support the reporting of these quality metrics and if so what are those data sources?	Currently the MCOs provide HSD with HEDIS and CAHPS results. The other quality metrics are captured by requesting encounter data that fit the technical specifications of the measures. Additionally, the MMIS desires to receive quality reports made available by other sources and the QA contractor is expected to combine State data as part of Section 2.8 Quality Reporting requirements.
66.	APPENDIX G	Section 2.8 Quality Reporting		Does the State currently have infrastructure in place to collect/report on quality data and if so is the intent to replace this with the new solution?	The State does not currently have infrastructure in place to support capture of all the data in this section. The intent of the MMISR Project is to provide this infrastructure.
67.	APPENDIX B	COST RESPONSE FORM #2 COST RESPONSE FORM #3	43 & 44	For the contingent-based fees, what was the rate of recovery for RAC and TPL for the last 3 years under the current contract? Within Cost Form #2, does the State want the fees to be represented as a	The State will add recovery reports to the Procurement Library. Amendment 1 –



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				fixed fee or a percentage based on amount of recovery?	<p>Within APPENDIX B - COST FORM #2, all Contingency Fee Based Components should be represented as percentage rates.</p> <p>Within APPENDIX B - COST FORM #3, all Contingency Fee Based Components should be represented as percentage rates in pricing for option contract extension years.</p>
68.	APPENDIX G	1.1	55may as planning evolves, request the QA Contractor to extend support to the Child Support Enforcement System Replacement (CSESR) Project or to other HHS 2020 initiatives. Does the State want vendors to design their solutions for additional data feeds at this time? If so, can the State identify those agencies, files, etc. to be included?	At this time, the State has not identified any services that are a part of the QA RFP that would be relevant to the Child Support Enforcement Replacement Project but may in the future.
69.	APPENDIX G	2.6	64	Does the State expect the Contractor to provide a certain number of staff to support the RAC services? If so, what is that number? What is the current staffing level supporting the RAC services?	<p>It is the State's expectation that the Offeror have the expertise to perform resource assessment and provide sufficient qualified staff to meet the requirements, services and performance measures as part of this RFP.</p> <p>Currently, the RAC staffing is within the purview of the current Contractor and is not specified in their contracted scope of work with the State.</p>



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70.	APPENDIX G	11.2	77	Conversion Plan -- What data is the vendor expected to convert, and what is the approximate total size of the data to be converted?	The data that is expected to be converted will be based on the Offerors needs in order to provide the services that are proposed. The State is unable to determine the size of the data until the Offerors needs are known.
71.	APPENDIX I	2.0	104	Compensation -- How can the contract language stipulate fees not to exceed, although RAC and TPL are contingent-based fees? The total amount payable to the Contractor under this Agreement, including gross receipts, tax, and expenses, shall not exceed (AMOUNT?) in FYXXXX(?).	There are separate cost forms to address contingency and non-contingency based fees.
72.		Exhibit I		What is the State's position on limited liability? Current sample contract terms have no relevant clauses -- Is there another contract we should reference?	Proposed alternative language may be provided in additional items in binder 1 (see page 32, proposal content and organization #13 additional items).
73.	VII. RESPONSE SPECIFICATI ONS	VII.A.2	30	Any confidential information in the proposal shall be clearly identified and easily segregated from the rest of the proposal. Can the State clarify what is meant by "easily segregated"?	Easily segregated means those sections with confidential information can be cleanly extracted from the rest of the proposal.
74.	VII. RESPONSE SPECIFICATI ONS	VII.A.4	32	Can the State clarify what tab order it wishes to have the Technical Binder broken into? (The order on page 32 contradicts what is on the bottom of pages 33 and 38.)	The items on page 33 and 38 are included in items on page 32. As such, please follow the format outlined on Page 32, in Section VII.A.4 Proposal Content and Organization



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					<p>Binder 1: Technical proposal. <i>No cost information in Binder 1.</i></p> <ol style="list-style-type: none"> 1. Table of Contents 2. Signed Letter of Transmittal Form (APPENDIX C) 3. 2 Page Summary of Offeror's Approach 4. List of References 5. Financial Stability Documents 6. Performance Bond Capacity Statement 7. Signed Campaign Contribution Disclosure Form (APPENDIX E) 8. Signed New Mexico Employee Health Coverage Form (APPENDIX F) 9. Signed Pay Equity Statement 10. Signed Eligibility Statement 11. Response to Specifications (APPENDIX G) 12. Response to Specifications (APPENDIX H) 13. Additional items (including Required Sample Documents if not included in separate binder)
75.	VII. RESPONSE SPECIFICATIONS	VII.C.3 FINANCIAL STABILITY DOCUMENTS	34	Will the State allow vendors to provide a link to financial documents as a means to limit the file size?	Financial Statements are not part of the three hundred (300) page limit. The State requires hard copy files for the procurement file. In addition to the hard



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					copy, a synopsis with a link for accessing financial documents may be included.
76.	APPENDIX H	3	103	Does the Workplan Timetable count in the 300-page limit?	No.
77.	APPENDIX H	5.11	93	Offeror shall describe how its proposed services provides the relevant information required by auditors in the format requested. What is the requested format?	The format is dependent on the auditor and can be on an audit by audit basis (e.g., file, Excel, Word).
78.	APPENDIX H	Intro	80	Can the State elaborate on how we are to respond to the requirements template and the definitions provided? (YesMMIS, Yes, NoDDI, No) ... for each applicable requirement, Product Type (SaaS, PaaS, COTS, OS, ECS, NCS), if it is currently Deployed (YesMMIS, Yes, NoDDI, No) and if it has been Security Tested and passed within the last 12 months, more than 12 months or not security tested (12, 12+, No). Should we create a specific table with 3 columns (product type, deployed, security tested) for each requirement? Please define: OS, ECS, NCS, YesMMIS, NoDDI.	<p>The Offeror can provide the information in each requirement’s text response or can create a table for the requirement number (Offeror’s requirement text response and 3 columns [product type, deployed, security tested]). Either format is acceptable.</p> <p>Product Type: SaaS-Software as a Service PaaS-Platform as a Service COTS-Commercial Off the Shelf OS-Open Source Solution ECS-Existing Custom Solution (Offeror already has a custom solution) NCS-New Custom Solution (Offeror does not have a custom solution but recommends and commits to developing a custom solution)</p> <p>Deployed:</p>



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					<p>YesMMIS – Yes, deployed in an MMIS Yes – Yes, deployed in other than an MMIS NoDDI – Not deployed but in DDI phase MMIS or other No – Not deployed or in DDI</p> <p>Security Tested and Passed: 12 – Yes has been security tested and passed within the last 12 months (MMIS or other deployment) 12+ – Yes has been security tested and passed in greater than the last 12 months (MMIS or other deployment) No – No, has not been security tested and passed in any deployment</p>
79.				Will the State provide results on cost avoidance and recoveries from the past 3 years of its program integrity efforts?	The State will add recovery reports in the procurement library. Currently, the State are unable to calculate accurate cost-avoidance information.
80.				Will the State provide a functional organization chart with head counts for the department including the PI, TPL, RAC, and Audit teams?	No.
81.				How many current cases exist and will need to be loaded into the new QA solution? Will the State provide the total file sizes of all the cases, as the attached	This activity is conducted by a third party Contractor and such data is unavailable. The State, however, expects Offerors to have the expertise to estimate workloads



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				files, images, and documents could vary by case?	based on their experience given the size of NM and the Medicaid population.
82.	APPENDIX H	1.14	82	Offeror shall describe how its proposed services provide PI case management and utilizes case management information from other Stakeholder systems for the coordination of PI activities. What Stakeholder systems is the State referring to?	Examples of stakeholder systems include eligibility and enrollment systems in use by State agencies, systems used by MCO's and providers' systems.
83.	APPENDIX H	1.02	81	What other non-Medicaid programs does the State want to support using EQC and CPAS? Does the State have an existing process for EQC and CPAS?	Examples include but are not limited to: SNAP, TANF, LIHEAP. The State does not have an existing process for EQC and CPAS.
84.	APPENDIX H	4.02	91	Can the State provide a few use cases of how they would use reports that are integrated with State-specific data?	An example would be Medicaid FFS reported under a HEDIS format, any reports in Appendix G – Section 2.8 to compare NM specific measures against national and regional published measures. Offerors are encouraged to provide their vision on Quality Reporting and the benefit it would present to the State.
85.	I. INTRODUCTION	I.C. SCOPE OF THE PROCUREMENT		Please confirm that the implementation time frame is included as part of the 4-year contract length.	The implementation time frame is included as part of the 4-year contract length.
86.		Program Integrity support, including Third-Party Liability	5	Please provide a copy of HMS' contract for the New Mexico Human Services Department (that covers TPL, RAC and	The HMS contract is on the HSD website under MMIS:



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		(TPL), Fraud and Abuse Detection Services (FADS), audit coordination and compliance;		other services) in the MMISR Procurement Library.	http://www.hsd.state.nm.us/LookingForInformation/medical-assistance-division.aspx .
87.			16	We respectfully request the State add a second round of questions.	To meet the procurement schedule, the State will not add a second round of questions.
88.	VI. CONDITIONS GOVERNING THE PROCUREMENT	<p>VI. B. EXPLANATION OF EVENTS</p> <p>16. Offeror Terms and Conditions</p> <p>Should an Offeror object to any of the Agency's terms and conditions, as contained in this Section or in the appendices, the <u>Offeror must propose specific, alternative language in writing and submit it with its proposal.</u> Contract variations received after the award will not be considered. The Agency may or may not accept the alternative language. Offerors agree that requested language must be agreed to in writing by the Agency to be</p>	24-25	<p>Would the State clarify where in the proposal response bidders should provide specific alternative language to terms and conditions, should they choose to?</p> <p>Is the Additional Items section of Binder 1 permissible for this content since the State suggests including the Required Sample Documents to be placed in a separate binder?</p>	Proposed alternative language may be provided in additional items in binder 1 (see page 32, proposal content and organization #13 additional items).



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		<p>included in the contract. If any requested alternative language submitted is not so accepted by the Agency, the attached sample contract with appropriately accepted amendments shall become the contract between the parties.</p>			
89.	<p>VI. CONDITION S GOVERNING THE PROCUREMENT B – Explanation of Events</p>	<p>VI. B. EXPLANATION OF EVENTS</p> <p>31. Disclosure Regarding Responsibility</p> <p><i>RFP proposal should include all disclosures.</i></p> <p>Any prospective Contractor and any of its Principals who enter into a contract greater than sixty thousand dollars (\$60,000.00) with any State agency or local public body for professional services, tangible personal property, services or construction agrees to</p>	28	<p>Can this disclosure statement (since no form provided) be provided in the Additional Items section of the proposal?</p>	<p>Yes. The State will allow this Disclosure Regarding Responsibility to be provided in the Additional Items section of the proposal.</p>



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		disclose whether the Contractor, or any principal of the Contractor's company:			
90.	VII. RESPONSE SPECIFICATION	<p>VII. A. RESPONSE FORMAT AND ORGANIZATION</p> <ul style="list-style-type: none"> • Binder 2: one (1) original and six (6) copies of their Cost proposal. The original and each copy shall be in separate, labeled binders. • One (1) electronic version, in addition to the one stated in the Binder 1 of the proposal containing ONLY the Technical proposal. This copy MUST NOT contain any 	31	<p>Would the State clarify what is meant by "any and all confidential or proprietary information shall be clearly identified and shall be <u>segregated</u> in the electronic version...?"</p> <p>Is it permissible for bidders to create an electronic PDF of the proposal submission with all confidential or proprietary information redacted (blacked out)?</p>	<p>Any propriety and financial information for private companies. Please refer to Section VII.A.2. Offeror can submit an electronic PDF, however, as specified in Section VII, Response Specifications, Part A, Response Format and Organization, 2) Number of Copies, "Any and all confidential or proprietary information shall be clearly identified and shall be segregated in the electronic version, mirroring the hard-copy submission(s)."</p>



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		<p>cost information. Acceptable formats for the electronic version of the proposal are Microsoft Word, Excel and PDF.</p> <ul style="list-style-type: none"> • One (1) electronic version of the Cost proposal. Acceptable formats for the electronic version of the proposal are Microsoft Word, Excel and PDF. <p>Any and all confidential or proprietary information shall be clearly identified and shall be segregated in the electronic version, mirroring the hard-copy submission(s).</p>			
91.	VII. RESPONSE SPECIFICATIONS	VII.A.3. Hard copy proposals shall be submitted typewritten, Times Roman twelve	31	Several requested documents/samples do not comply with font restrictions and they are not available in a native MS Office format for font adjustments.	The State may allow exceptions to be made for forms that have already been created.



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		(12) (tables and graphics may be in 10-pt font), on standard eight and a half (8½) by eleven (11) inch paper (larger paper is permissible only for charts, spreadsheets, etc.) and shall be placed in the binders with tabs delineating each section.		Please confirm that it is permissible to submit those documents as is.	
92.	VII. RESPONSE SPECIFICATI ONS	VII.A.3 Hard copy proposals shall be submitted typewritten, Times Roman twelve (12) (tables and graphics may be in 10-pt font), on standard eight and a half (8½) by eleven (11) inch paper (larger paper is permissible only for charts, spreadsheets, etc.) and shall be placed in the binders with tabs delineating each section.	31	The RFP requires Bidders to respond using 12-point font. May Bidders use a smaller, still readable font for each of the following? a) headers and footers b) requirement text	Amendment 1 – The Offeror may use 10-point font for headers and footers and the text for the requirement question. The text for the requirement question will still be included in the response and cannot exceed three hundred (300) page limit. The requirement response must be in 12-point font.
93.	VII. RESPONSE SPECIFICATI ONS	VII.A.3. Hard copy proposals shall be submitted typewritten, Times Roman twelve (12) (tables and graphics may be in 10-pt font),	31	Would the State confirm double-sided print for the hard copy submission is permissible?	The State confirms double-sided print for the hard copy submission is permissible. The response must be no more than three hundred (300) pages in length excluding the title page, table of contents, tabs, pricing, resumes, financial statements, the



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		on standard eight and a half (8½) by eleven (11) inch paper (larger paper is permissible only for charts, spreadsheets, etc.) and shall be placed in the binders with tabs delineating each section.			mandatory State required forms and examples of documents.
94.	VII. RESPONSE SPECIFICATIONS	VII.A.3 Response must be no more than three hundred (300) pages in length excluding the title page, table of contents, tabs, pricing, resumes, financial statements, the mandatory State required forms and examples of documents	31	Would the State confirm that Appendix G and H are part of “the mandatory State required forms” and don’t count towards the 300-page limit?	Offerors responses to APPENDIX G and H are not excluded from the three hundred (300) page limit as indicated in Section VII.A.3.
95.	VII. RESPONSE SPECIFICATIONS	VII.C.3 Offerors must submit copies of the most recent year’s independently audited financial statements and the most current 10-K, as well as financial statements for the preceding three (3) years, if they exist.	34	Given the length of our audited financial statements (more than 200 pages), can Bidders provide these documents in electronic format only?	Financial Statements are not part of the three hundred (300) page limit. The State requires hard copy files for the procurement file. In addition to the hard copy, a synopsis with a link for accessing financial documents may be included.



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96.	APPENDIX G	<p>2.1 Subcontractors</p> <p>The use of subcontractors is acceptable with prior approval by HSD. The Prime Contractor...</p>	56-57	<p>It appears that Appendix G contains out of order sections and duplicate section numbering beginning with section 2.1 Subcontractors. Would the State please fix this starting on page 56 so bidders can structure their response correctly?</p>	<p>Amendment 1 –</p> <p>Appendix G, Section 1, 2.1 Subcontractors changes to Section 1,1.2 Subcontractors.</p>
97.	APPENDIX H	<p>In addition to responding to the numbered requirements above in this APPENDIX, Offeror is required to respond to the following:</p> <p>...</p> <p>5. Explain how your business services enable cost-effective, high-quality QA operations and maintenance and ensure cost-effective, over the life of the contract. Explain how your approach will result in satisfaction of the CMS and State expectation that Quality Assurance will focus on ensuring the integrity and interoperability of the MMISR Solution.</p>	102-103	<p>Would the State please confirm that the additional questions that need to be addressed at the end of Appendix H requirements should conclude with #6, not #7?</p>	<p>Amendment 1 –</p> <p>Appendix H, additional questions, #7 changes to #6.</p>



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		7. Explain your ability and willingness to meet the preliminary set of SLAs and LDs in Appendix K - HHS 2020 Performance Measures. During contract negotiations, the Contractor and State will collaborate to define the SLAs which will be included in the contract. Offeror should understand and agree there will be SLAs that cannot be defined during contract negotiations for operations and will require future Contractor and State collaboration.			
98.				Would the State be willing to include a <i>force majeure</i> provision?	The State does not understand why this question is being asked and needs more context.
99.	APPENDIX I	Immediately upon receipt by either the Agency or the Contractor of notice of termination of this Agreement, the Contractor shall: 1) not	105	Will the State please consider amending this language to state that the Contractor will be reimbursed within thirty (30) calendar days of final billing for any completed or partially completed deliverables and services provided by Contractor prior and through the	Proposed alternative language may be provided in additional items in binder 1 (see page 32), proposal content and organization #13 additional items.



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	<p>incur any further obligations for salaries, services or any other expenditure of funds under this Agreement without written approval of the Agency; 2) comply with all directives issued by the Agency in the notice of termination as to the performance of work under this Agreement; and 3) take such action as the Agency shall direct for the protection, preservation, retention or transfer of all property titled to the Agency and records generated under this Agreement. Any non-expendable personal property or equipment provided to or purchased by the Contractor with contract funds shall become property of the Agency upon termination and shall be submitted to the agency as soon as practicable.</p>		<p>effective date of termination in addition to reimbursement for sunken costs?</p>	
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	100. APPENDIX I	<p>The terms of this Agreement are contingent upon sufficient appropriations and authorization being made by the Legislature of New Mexico for the performance of this Agreement. If sufficient appropriations and authorization are not made by the Legislature, this Agreement shall terminate immediately upon written notice being given by the Agency to the Contractor. The Agency's decision as to whether sufficient appropriations are available shall be accepted by the Contractor and shall be final. If the Agency proposes an amendment to the Agreement to unilaterally reduce funding, the Contractor shall have the option to terminate the Agreement</p>	105	<p>Will the State please consider amending this language to state that the Contractor will be reimbursed within thirty (30) calendar days of final billing for any completed or partially completed deliverables and services provided by Contractor prior and through the effective date of termination in addition to reimbursement for sunken costs?</p>	<p>Proposed alternative language may be provided in additional items in binder 1 (see page 32), proposal content and organization #13 additional items.</p>
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		or to agree to the reduced funding, within thirty (30) days of receipt of the proposed amendment.			
101.	APPENDIX I	The Contractor shall defend, indemnify and hold harmless the Agency and the State of New Mexico from all actions, proceeding, claims, demands, costs, damages, attorneys' fees and all other liabilities and expenses of any kind from any source which may arise out of the performance of this Agreement, caused by the negligent act or failure to act of the Contractor, its officers, employees, servants, subcontractors or agents, or if caused by the actions of any client of the Contractor resulting in injury or damage to persons or property during the time when the Contractor or any	110	Would the State please confirm that Contractor's indemnification is limited to third party claims?	This contract article can be discussed during contract negotiations with the selected Contractor.



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		<p>officer, agent, employee, servant or subcontractor thereof has or is performing services pursuant to this Agreement. In the event that any action, suit or proceeding related to the services performed by the Contractor or any officer, agent, employee, servant or subcontractor under this Agreement is brought against the Contractor, the Contractor shall, as soon as practicable but no later than two (2) days after it receives notice thereof, notify the legal counsel of the Agency and the Risk Management Division of the New Mexico General Services Department by certified mail.</p>			
102.	APPENDIX I	<p>The Contractor shall defend, indemnify and hold harmless the Agency and the State of</p>	110	<p>Would the State please confirm that the proposer will not be required to indemnify the State for any portion of the</p>	<p>This contract article can be discussed during contract negotiations with the selected Contractor.</p>



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	<p>New Mexico from all actions, proceeding, claims, demands, costs, damages, attorneys' fees and all other liabilities and expenses of any kind from any source which may arise out of the performance of this Agreement, caused by the negligent act or failure to act of the Contractor, its officers, employees, servants, subcontractors or agents, or if caused by the actions of any client of the Contractor resulting in injury or damage to persons or property during the time when the Contractor or any officer, agent, employee, servant or subcontractor thereof has or is performing services pursuant to this Agreement. In the event that any action, suit or proceeding related to the services performed by the Contractor or any</p>		<p>claim that is the result of the State's acts or failure to act? Would the State please confirm that Contractor's indemnification obligations are for damages attributable to Contractor's negligent acts or omissions?</p>	
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		officer, agent, employee, servant or subcontractor under this Agreement is brought against the Contractor, the Contractor shall, as soon as practicable but no later than two (2) days after it receives notice thereof, notify the legal counsel of the Agency and the Risk Management Division of the New Mexico General Services Department by certified mail.			
103.	APPENDIX K		127-131	Would the State be willing to include an annual cap on Liquidated Damages assessed pursuant to Appendix K?	This can be discussed during contract negotiations with the selected Contractor.
104.	APPENDIX G	2.3.1 TPL Objectives	59	<p>Could the State please provide:</p> <p>1) the amount of TPL cost avoidance and recovery not attributable to MCOs for the most currently available year; and</p> <p>2) the annual volume and dollar amount of TPL recoveries for FFS claims for the most currently available year?</p>	The State will add the latest (2017) recovery report to the procurement library.



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105.	APPENDIX G	2.3.1 TPL Objectives	59	What is the volume and dollar amount of "pay and chase" claims processed by the State for the most currently available year?	The State will add the latest (2017) recovery report to the procurement library.
106.	I. INTRODUCTION VI. CONDITIONS GOVERNING THE PROCUREMENT	I. C. SCOPE OF THE PROCUREMENT VI. A.7 GENERAL REQUIREMENTS	2 & 23	<p>Based on the schedule outlined in this RFP for the QA Module, the earliest that a Contract Award would be issued for the MMISR QA would be November 12, 2018 and with potential protest periods, an Offeror is not likely to have been fully and finally approved until late November/early December, 2018, with a likely effective date being January 1, 2019 and continuing for as long as December 31, 2026. Similarly, an offeror to the MMISR QA may itself or through an affiliate, still be seeking approval to enter into a Centennial Care MCO Contract while HSD is evaluating MMISR QA Proposals.</p> <p>It is therefore possible that post submission of the MMISR QA Proposal, the Offeror or its affiliate, may be awarded a Centennial Care MCO Contract even though at the time the MMISR QA Proposal is submitted, that would not be the case as of January 1, 2019.</p>	<p>Per 1.4.1.35 NMAC, MODIFICATION OR WITHDRAWAL OF PROPOSALS: Proposals may be modified or withdrawn prior to the established due date in accordance with 1.4.1.20 NMAC of this rule. The established due date is either the time and date announced for receipt of proposals or receipt of modifications to proposals, if any; or, if discussions have begun, it is the time and date by which best and final offers must be submitted by short-listed offerors.</p> <p>A conflict of interest may exist when an Offeror qualifies for approval to enter into a Centennial Care Managed Care Organization (MCO) contract and also a contract for the MMISR QA, Benefit Management Services (BMS) and/or Financial Services with the State; this includes an Offeror that is a Prime Contractor and/or a Subcontractor. To avoid the conflict, HSD, in its sole discretion, has the right to deny approval for the Offeror to enter into a MMIS/MMISR and/or MCO contracts.</p>



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				<p>In light of these RFP provisions and the overlapping schedules of the separate QA Module and Centennial Care MCO Contract RFPs, would HSD please clarify the following about Section I(C) and VI(A)(7): If an Offeror submits a proposal to the MMISR QA RFP that includes a Conflict of Interest Disclosure Statement and Mitigation Plan about potential organizational conflicts of interest given the relationships and interests of Offeror's affiliates and if, at the time the MMISR QA Proposal is submitted, neither the Offeror nor its affiliate has been qualified for approval as a Centennial Care MCO contractor effective January 1, 2019, would the State:</p> <ol style="list-style-type: none">1) Permit the Offeror to withdraw its MMISR QA Proposal if its affiliate becomes qualified for approval as a Centennial Care MCO contractor effective January 1, 2019, and2) Not disqualify the Offeror's MMISR QA Proposal but instead consider on the merits the Offeror's Conflict of Interest Disclosure Statement and Mitigation Plan and award the QA Contract to the	
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				Offeror if the Offeror's affiliate were not qualified for approval as a Centennial Care MCO Contractor effective January 1, 2019?	
107.	III. CONTRACT OR ROLE & APPENDIX G	III. CONTRACTOR ROLE REQUIREMENT 9.04 CERTIFICATION	10 & 102	Of the five main QA services (TPL, FADS, audit coordination and compliance, RAC, and Quality Reporting), which specific modules does the State intend to submit to CMS for certification? For example, RAC services and systems are generally not submitted for CMS certification.	The State will seek certification on the entire MMIS-R. Within the MMIS MECT checklist set, there is a separate checklist for TPL and Program Integrity. However, there are a set of core checklists that apply across all the modules and include requirements related to (e.g.; security/privacy; integration; interfaces; access to data; standards) each module or component must meet those checklist requirements. Please refer to Addendum 18 in the procurement library. Also, the contractor must collaborate with HSD in the development and implementation of the RAC Program that complies with all requirements and expectations set forth in Final Rule CMS-6034-F.
108.	VI. CONDITION S GOVERNING THE PROCUREMENT	VI. A. 4 GENERAL REQUIREMENTS	22	The Contractor is required to list any proposed subcontractors and it may not enter into any Subcontract without advance written approval of the Agency. For those subcontractors that are named and submitted along with an Offeror's proposal, will the Agency's acceptance of an offeror's proposal constitute	Yes.



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				acceptance of any proposed subcontractor(s)?	
109.		2.3 PI Support (TPL, FADS, Audit Coordination)	58	Does the phrase "and recovery activities" apply to each of TPL identifications, fraud and abuse (FADS) audits identifications, and RAC audit identifications? Please specifically identify each function that the Contractor is expected to conduct recovery activities, and for each such function, the required scope of recovery activity.	The Contractor is expected to perform recovery activities for TPL and RAC. The Contractor is not expected to perform recovery activities for FADS and Audit, rather the Contractor is expected to perform FADS and Audits tasks to identify potential recoveries and forward the data to the appropriate entity for recovery.
110.		2.3 PI Support (TPL, FADS, Audit Coordination)	58	Will the State's Fiscal Agent, future Financial Services Contractor, or other contractor conduct offsets to obtain recoveries for fee for service overpayments and receivables identified by the QA Contractor?	Yes. It is possible the FS Contractor will conduct offset (recoup) from future payments, but that is NOT the only anticipated way to recover/satisfy receivables.
111.		2.3 PI Support (TPL, FADS, Audit Coordination)	58	Please confirm that managed care overpayments and recoveries are in scope for Program Integrity and RAC work (as confirmed for TPL work on p. 59).	The Contractor can attempt recovery of MCO Encounter/Claim if the MCO has not initiated recovery within 12 months.
112.		2.3 PI Support (TPL, FADS, Audit Coordination)	58	MCOs are generally paid on a capitation basis, and they in turn frequently pay their providers on a fee for service basis. Since there are multiple MCOs, and each provider	MCO Encounter/Claim overpayments/recoveries are not mandatory for the QA Contractor. The Contractor can attempt recovery of MCO



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			<p>contract is negotiated separately, there are likely to be multiple contracts that each provider has with the individual MCOs. Each of these contracts will have separate and distinct financial and payment terms between the MCO and provider. If the Contractor is not aware of these financial terms, it will be virtually impossible to reprice an overpayment or underpayment determination to provide an accurate demand or notification to the provider. Even if they receive this information from the State or the MCOs, the additional burdens of implementation, administration, and cost considerations impacting the RACs will be significant.</p> <p>Questions:</p> <p>1) Will the RAC Contractor have access to this information summarized by the MCOs (or the State) in order to calculate overpayments and underpayments? If not, for the vendor to perform any of this work will be costly and time consuming.</p> <p>2) If the answer to the above question is no, how does the State envision the RACs be able to determine the amount</p>	<p>Encounter/Claim if the MCO has not initiated recovery within 12 months.</p>
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				<p>of the overpayment or underpayment? and; How will the providers know how much to remit (or the amount of offset) for an overpayment?</p>	
113.		2.3 PI Support (TPL, FADS, Audit Coordination)	58	<p>Is it the State's intent that the claims identified as overpayments would be denied in full, then be allowed to be rebilled (if they are eligible for rebilling)?</p> <p>If the answer to this question is no, please specify exactly how the denial, adjustment, and recoupment process will work.</p> <p>As part of the explanation, please also identify how the RAC would be paid on an overpayment that is allowed to be rebilled (i.e. on the entire claim that was recouped, the difference in the rebill, or some other way), and how this will be determined?</p>	<p>No, it is not expected the entire claim would be denied. It is expected the Contractor would identify which claims require an “adjustment” and the amount (recovery) to be applied to each line.</p> <p>Since the claim would not be rebilled the RAC would evaluate the claim based upon the final paid amount. It is anticipated the QA Contractor or others identification of claim for review would result in the claim being identified for review/recovery.</p>
114.	APPENDIX G	2.3 PI Support (TPL, FADS, Audit Coordination)	58	<p>How would the contingency payments for managed care recoveries and underpayments be reconciled for invoicing purposes?</p>	<p>The Offeror is expected to recommend a solution to reconciliation. The Offeror can attempt recovery of MCO Encounter/Claim if the MCO has not initiated recovery within 12 months. With respect to capitation over or underpayments, the State expects the only time the Offeror would</p>



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					recover would be when the EQC process identifies an error in eligibility that impacts the MCO roster, and thus the PMPM payments.
115.	APPENDIX G	2.3 PI Support (TPL, FADS, Audit Coordination)	58	Will the MCOs perform offsets to obtain managed care overpayments identified by the Contractor?	The Offeror is expected to recommend a solution for collection of Contractor identified recoveries. The Contractor can attempt recovery of MCO Encounter/Claim if the MCO has not initiated recovery within 12 months. With respect to capitation over or underpayments, the State expects the only time the Contractor would recover would be when the EQC process identifies an error in eligibility that impacts the MCO roster, and thus the PMPM payments.
116.		2.3.3 Fraud and Abuse Detection Services Objectives--and --6.2 Provide QA Components	61 and 72	Please identify the total number of all anticipated State QA Contractor system Users, the modules it intends to access (FADS, RAC, TPL, Audit Coordination, Quality Reporting), and identify the anticipated number of Users by each specific Agency or Bureau (e.g. HSD OIG, MFCU, QB, PPB, CCCB, etc.) This information is necessary to adequately scope and size the system.	The State anticipates up to 200 users of the QA Contractor's systems and is unable to break it down by module or specific agency or bureau. The State anticipates most access of the QA Contractor's systems to be through the State's Unified Portal and API's.



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117.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	<p>We understand the vision of HHS2020 is to leverage technology across the enterprise where possible.</p> <p>Based on the current timeline for the QA implementation, what will be the source of encounter and other managed care data that is delivered to the Contractor? Is it a single source from the State, or will each MCO send data to the Contractor?</p>	Initially, the QA Contractor will be receiving data from the MCO's. HSD will be moving to a single source as part of the HHS2020 vision.
118.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	Will the managed care claims always be eligible for recovery by both the MCO and the RAC at the same time, or will the MCOs be ineligible or time barred from audit and recovery after a certain time period has elapsed?	The Contractor can attempt recovery of MCO Encounter/Claim if the MCO has not initiated recovery within 12 months.
119.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	If the RAC and the MCO can both pursue audits and recoveries at the same time, what is the mechanism by which the State will determine who will recover on the claim (e.g., whether the QA Contractor will receive full credit) in which an MCO and the QA Contractor identify an overpayment or underpayment on a claim at the same time?	The Contractor can attempt recovery of MCO Encounter/Claim if the MCO has not initiated recovery within 12 months.



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120.	2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	65	Is the QA Contractor expected to operate a lockbox for voluntary provider repayments?	No. The Contractor is expected to direct entities providing voluntary repayments to the appropriate HSD division (HSD Administrative Services Division).
121.	2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	65	What are the current medical record request limits for the RAC program for each provider type?	There are no specified limits, however; HSD does approve record request letter templates that the Contractor would use to assure that requests are reasonable and necessary.
122.	2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	65	Please list all provider and claims types that are in scope for RAC work (fee for service and MCO).	All claim and provider types are in scope except for those identified in Question 123. [Provider type 344-HCBS/claim type W, and Provider type 221-IHS/Tribal 638 (regardless of claim type) and providers with "IHS Indicator" marked (regardless of claim type) are typically excluded on a project by project basis.]
123.	2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	65	Please list all provider and claim types that are specifically excluded from RAC work (fee for service and MCO).	Provider type 344-HCBS/claim type W, and Provider type 221-IHS/Tribal 638 (regardless of claim type) and providers with "IHS Indicator" marked (regardless of claim type) are typically excluded on a project by project basis.
124.	2.6 Recovery Audit Contractor	65	What are the RAC lookback periods for fee for both service and managed care claims?	There is a three (3) year lookback for both FFS and MCO claims. However, the Contractor can only attempt recovery on



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		- Management of Recovery and Audit Responsibilities			MCO claims if the MCO has not initiated recovery within 12 months.
125.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	65	Please provide the amount of RAC recoveries for the last 5 years, broken out by provider/claim type for each year.	Only 2016 and 2017 data are available. The State will add Recovery reports to the procurement library.
126.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	65	What will the source(s) be for the post payment fee-for-service claims data (e.g., existing MMIS, Data Services, or Financial Services contractors)?	Data Services will be the source for post payment fee-for-service claims data.
127.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	65	Will there be any other data sources for which the Contractor will need to create an interface (e.g., pharmacy claims)? If so, please list and describe the total number of data sources that will be supplied for RAC work.	Available through the Integration Platform (IP).
128.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	65	Will the Contractor receive the same contingency rate percentage for Medicaid damages recovered by the MFCU where those damages are assessed as part of civil or criminal proceedings initiated against a provider as a result of a RAC audit(s) or RAC referral, as the RAC would receive in overpayments identified and recovered?	This can be discussed during contract negotiations with the selected Contractor.



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129.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	Many appeal cases can take months or years to finalize. Will the Agency agree to extend the period by which the Contractor will receive a contingency fee by at least 18 months for any cases that are in appeal status as of the date of the contract's termination or expiration, but the appellate results are not finalized within six months?	This can be discussed during contract negotiations with the selected Contractor.
130.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	What is the scope and historical frequency of testimony in support of administrative actions in the event of an appeal?	The expectation is that the Contractor will provide testimony when necessary, however within the span of the current contract (2015), no testimony was required.
131.		2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	In addition to testimonial support, what is the historical annual volume of appeals that a Contractor is required to support?	The expectation is that the Contractor will provide support for the Fair Hearing process when necessary, however within the span of the current contract (2015), no cases were referred to Fair Hearings.
132.	APPENDIX K	Quality Assurance Performance Measures, Ops 19	130	What does the Agency mean by "within seven (7) calendar days of RAC funds"? Is there a word or phrase missing in this section?	Amendment 1 – QA Contractor must initiate recovery of claims identified for RAC recovery within seven (7) calendar days of RAC recovery identification and follow-up within thirty (30) calendar days of no response.



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133.	APPENDIX G	2.8 Quality Reporting	65	Please provide further detail regarding who the reports will be distributed to (e.g., MCOs, provider practices, etc.) and the frequency of distribution.	The State is unable to provide who the reports will be distributed to and the frequency.
134.	APPENDIX G	2.8 Quality Reporting	65	Please provide further details about what State-specific data will be include (e.g., clinical/social determinants of health).	Please see Addendum 13 – HHS 2020 Data Needs for Reporting. The Contractor is expected to conduct, participate and have input in design sessions.
135.	APPENDIX G	2.8 Quality Reporting	65	Please provide further details on how the reports are expected to integrate with State-specific data. Should the contractor submit the reports in a certain format? Should the contractor submit the underlying data in a certain format that conforms to the State's requirements?	The State's expectation is that the Contractor will submit the underlying data and reports in a certain format that conforms to the State's requirements.
136.	APPENDIX H	Program Integrity 1.01	81	We understand the State has engaged multiple pilot projects to expand the use of primary care and advance value based payment reform. Could the State please identify the specific quality measures that have been and are currently being used to date?	The MCOs provide HSD with reports on utilization management, quality improvement and disease management as well as their audited HEDIS reports and CAHPS reports. The MCOs provide specific member records as requested for HSD audits. Reports in Appendix G – Section 2.8 to compare NM specific measures against national and regional published measures.



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137.	VI. CONDITIONS GOVERNING THE PROCUREMENT	VI. B.5	16	<p>Answers to questions may lead to follow up questions.</p> <p>Should clarification be required on any answers provided by the State, would Offerors be able to submit clarification requests on those responses to enable clear proposals?</p>	To meet the procurement schedule, the State will not add a second round of questions.
138.		13	20	<p>What amount does the State anticipate requiring for the bond? Will it be a set amount or a percentage in terms of contract value?</p>	The State is unable to determine this amount at this time. It will be a set amount based on the contract value.
139.		C.3.	34	<p>10-K documents can be voluminous. Does the State want hundreds of pages of hard copies or would the State prefer and accept a summary of an Offeror's financial reports in the hard copy submission along with the required financial documents in the electronic submittal as well as a website link to the investor tab where all visitors have access to the financial documents?</p>	Financial Statements are not part of the three hundred (300) page limit. The State requires hard copy files for the procurement file. In addition to the hard copy, a synopsis with a link for accessing financial documents may be included.
140.	APPENDIX C		46	<p>Section IV of the RFP is Definitions, not Conditions Governing the Procurement. Will the State please confirm not only the section number but also the page numbers of the conditions the Offeror is required to accept?</p>	<p>Amendment 1 –</p> <p>APPENDIX C.7, Conditions Governing the Procurement as required in Section IV C.1 changes to Conditions Governing the Procurement as required in Section VI.</p>



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					Offeror is required to accept all items under Conditions Governing the Procurement, pages 16-30.
141.		6. Configure and Provide QA Components	72	<p>Offerors cannot with any degree of accuracy predict the magnitude of future changes to CMS or State requirements or their impact on scope.</p> <p>Will the State please amend the RFP or otherwise clarify that should any change in applicable federal and State laws or regulations result in a material change to either scope or price, the parties shall negotiate an equitable adjustment to the Contract scope and/or price?</p>	No.
142.	APPENDIX G & APPENDIX H	9.2 Additional Key QA Personnel Requirements Additional questions 2.E	75 & 103	Page 75 states Key Personnel must be committed for at least 6 months, whereas section 2.E. on page 103 requires Offeror to provide assurance proposed Key Personnel will be in place for the initial year of the contract. Will the State please clarify the applicable standard?	Amendment 1 – Key Personnel who are proposed by Offeror must be the Personnel for the initial year of the contract (except due to uncontrollable circumstances defined by Offeror and agreed to by the State).
143.		14. Certification	79	The RFP requires the Contractor to “ensure” Module Federal Certification. The Contractor’s role in connection with Certification is to assist the State but the State, under applicable federal regulations, has the	This can be discussed during contract negotiations with the selected Contractor.



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				<p>responsibility for obtaining it. In addition, Certification may not have been granted but not due to any failure by the Contractor to provide the required assistance and not due to the Contractor's acts or omission.</p> <p>In light of the foregoing, will the State amend the RFP (or otherwise clarify its willingness to negotiate mutually acceptable language) to clarify Certification means either that Certification has been granted or has not been granted for reasons other than the failure of Contractor to provide the required assistance or the Contractor's acts or omissions?</p>	
144.		Sample Contract	104	<p>The RFP does not contain a mutual exclusion of liability for consequential, incidental indirect, or special damages. The presence of such an exclusion would benefit the State by:</p> <ol style="list-style-type: none"> 1. Encouraging financially responsible and responsive Offerors to bid where they might not otherwise out of concern for the open ended nature of their liability; 2. Receiving lower pricing as an Offeror does not have to "price" their unlimited liability risk into their bid; 	Proposed alternative language may be provided in additional items in binder 1 (see page 32), proposal content and organization #13 additional items.



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				<p>and</p> <p>3. Limiting the State’s own liability in so far as the exclusion of damages would be mutual in nature.</p> <p>In light of the foregoing, will the State please either amend the RFP to contain a mutual exclusion of consequential, incidental indirect, and special damages, or otherwise clarify its willingness to negotiate something mutually acceptable that addresses this issue?</p>	
145.		Sample Contract	104	<p>The Sample Contract can result in potentially unlimited liability to a Contractor for claims arising out of the RFP. Would the State amend the RFP to contain a commercially reasonable limitation of liability cap or otherwise indicate its willingness to negotiate acceptable language that addresses the issue?</p> <p>Such a limitation may encourage financially responsible and experienced offerors to bid who might not otherwise bid due to the absence of this provision, and offer lower pricing since offerors would not have to "price the risk" associated with the absence of this provision.</p>	Proposed alternative language may be provided in additional items in binder 1 (see page 32), proposal content and organization #13 additional items.



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146.		20. Indemnification	110	<p>The Contractor is required to indemnify the State from claims and liabilities of any kind. Standard industry practice often specifies indemnification applies to third party claims and requires prompt notification of a claim.</p> <p>Will the State please either amend the RFP to specify indemnification only applies to third party claims and requires the State to promptly notify the Contractor of the claim and control the defense, or otherwise clarify its willingness to negotiate language mutually acceptable that addresses the issues?</p>	Proposed alternative language may be provided in additional items in binder 1 (see page 32), proposal content and organization #13 additional items.
147.		3. Business Associate Obligation for Notification	118	<p>Will the State please amend the RFP or otherwise clarify its willingness to negotiate a notification period of five business days?</p> <p>The law permits even longer periods before notification is required and does so in order that the notice can have more meaningful content.</p>	Proposed alternative language may be provided in additional items in binder 1 (see page 32), proposal content and organization #13 additional items.
148.		Proposal Addendum 11, Overview of the NM Medicaid Program, Section II.	3	For each provider and supplier type in scope for RAC work, please identify the annual number of claims and spend for each category of provider for both fee	The State is unable to determine this at this time.



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		Covered Services		for service and managed care claims and encounters.	
149.	APPENDIX G	2.3.1 Third Party Liability (TPL) Objectives	59	<p>Can the State provide clarification on which population the QA contractor will have primary responsibility to do identification, verification and recovery of Commercial policies for?</p> <p>Does the QA contractor have primary responsibility for TPL for the Fee-for-service population, as well as any money not collected by an MCO in a timely manner?</p> <p>What is the timeframe that the MCO has to collect money before the QA Contractor can attempt recovery?</p>	As all Members (in FFS or MCO) are Medicaid Members and come through the ASPEN system for eligibility it is expected the Contractor would identify and validate other coverage for all. It is expected the Contractor will perform recovery for all FFS claims. For Members enrolled in an MCO it is expected the MCO will cost avoid for known TPL. The Contractor can attempt recovery on MCO claims if the MCO has not initiated recovery within 12 months.
150.	APPENDIX H	TPL, 2.01	86	<p>Can the State please specify for which population this requirement pertains?</p> <p>Is this for MCO or FFS? Please provide the total number of lives for each population.</p>	As all Members (in FFS or MCO) are Medicaid Members and come through the ASPEN system for eligibility it is expected the Contractor would identify and validate other coverage for all. It is expected the Contractor will perform recovery for all FFS claims. For Members enrolled in an MCO it is expected the MCO will cost avoid for known TPL. The Contractor can attempt recovery on MCO claims if the



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					<p>MCO has not initiated recovery within 12 months.</p> <p>Additional information can be found at HSD's informational website http://www.hsd.state.nm.us/LookingForInformation/medicaid-eligibility.aspx.</p>
151.	APPENDIX H	TPL, 2.09	87	Can the State please clarify what it means by "case"? Is this in reference to commercial insurance and recovery or to casualty recovery?	In requirement 2.09, this is specifically related to the TPL information for the Member. It could be, but is not limited to, commercial insurance or casualty. In this instance, "case" means all pertinent information for the recovery.
152.	APPENDIX G	2.1, Subcontractors	56	This item appears out of sequence and there is already a 2.1 in Section G for BPO Services. Should this item be renumbered as Appendix G, 1.1, Subcontractors?	Amendment 1 – Appendix G, Section 1, 2.1 Subcontractors changes to Section 1, 1.2 Subcontractors.
153.	APPENDIX H	Question 7	103	This item appears out of sequence. Should this question be renumbered as Question 6 in order to maintain continuity in the numbering?	Amendment 1 – Appendix H, additional questions, #7 changes to #6.
154.	II. MMISR APPROACH	II. A. 1 MMIS MODULES AND SERVICES PROCUREMENTS	4	Upon which premises shall the Enterprise Service Bus mentioned in the RFP reside? Are there specific standardized data elements preferred by the State to	The Enterprise Service Bus will reside in the State's data center in Santa Fe, NM. The State is currently working to standardize data elements and will work



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				accomplish data interoperability, or shall the QA contractor assume any viable service-oriented data element is applicable?	with the selected Offeror to accomplish data interoperability.
155.	APPENDIX H	1.31, Program Integrity	83	<p>What data can the State make available to the QA contractor, in addition to MMIS data, that can be used for Medicaid Eligibility Quality Control?</p> <p>If the QA Contractor identifies other State-maintained datasets that would be relevant to eligibility, will the State assist the QA contractor in securing access to those datasets?</p>	<p>The State intends to make data available through the Integration Platform via the Enterprise Service Bus.</p> <p>Identification of data sources / data sets is anticipated during the configuration sessions. To the extent possible, the State and the SI Contractor will work with the QA Contractor to obtain the required datasets.</p>
156.	APPENDIX G	2.3.3, FADS Objectives	60	<p>To what extent will QA Contractor staff be expected to evaluate and take action on individual case leads produced by the FADS system?</p> <p>Or does the State expect to conduct all reviews of individual case leads and request contractor support for those efforts as needed?</p>	The State's expectation is that the FADS process will review and identify potential cases, forward all pertinent information to the appropriate State unit, and provide support to that unit.
157.	VII. RESPONSE SPECIFICATIONS	C. Other Requirements, 2. List of References	34	How will 3 submitted references be evaluated on the 30 point scale, and how would this differ if a Contractor submits 5 references?	A maximum of 30 points will be awarded based on a minimum of three (3) references.



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				Is a vendor who submits more than 3 references eligible for more award points than would be possible with only 3 references?	
158.	APPENDIX H	Program Integrity, 1.17	82	Can the State provide an example of "QA User-configured automatic processing and reprocessing of suspect data", and specify whether it is related to case creation or detection/analysis?	An example would be processing three years of claims for FADS detection that identifies suspect claims or providers. Then, if the user wishes to look back further on these suspect providers, the analysis would be reprocessed for user-specified number of years (i.e. seven years). This would include both detection and case creation.
159.	II. MMISR APPROACH	A. MMIS Modules and Services Procurements	4	What is the State's vision for the Medicaid Enterprise Quality Assurance vendor's role in providing input on Security and Governance to the System Integrator (SI) Contractor?	The State welcomes input from all module Offerors on security and governance of the SI contractor.
160.	III. CONTRACT OR ROLE		10	Can the State provide the top 3 functionalities desired by the State which are missing in the current Business Intelligence/reporting and audit systems?	The State has not prioritized top functionality or issues. Minimum functionality is defined in the RFP. The State expects the offeror to demonstrate expertise in this area and suggest areas of concentration that might be most advantageous to the State.
161.	III. CONTRACT OR ROLE		10	Can the State provide the top 3 issues with the current Business	The State has not prioritized top functionality or issues. Minimum functionality is defined in the RFP. The



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				Intelligence/reporting and audit systems?	State expects the offeror to demonstrate expertise in this area and suggest areas of concentration that might be most advantageous to the State.
162.		A. The MMISR Modules and Services Procurements	5	Are there specific protocol requirements for Single Sign-on services?	The State intends to utilize the Oracle IDAM solution for single sign-on services.
163.		Service Expectations # 7.13	99	Will the State Users use the QA module to produce and transfer extracts exceeding 100K records?	The State intends to transfer data from the QA module to repositories designated by the State. The State will leverage tools provided by the QA Contractor and the SI Contractor for data transfers.
164.		Service Expectations # 7.06	99	System capacity and design: How many total Users are expected to access the system and QA module? How many Users will access the QA module concurrently?	The State expects up to 200 users accessing the system and QA module. The 200 users could access the system concurrently.
165.		Service Expectations # 7.06	99	System capacity and design: Please describe expected growth rate of users by year.	The State is unable to determine this at this time.
166.		Service Expectations # 7.06	99	System capacity and design: What is the expected frequency of claim's data refreshes?	The State is unable to determine this at this time.
167.		Service Expectations # 7.06	99	System capacity and design: What are the data retention requirements for the QA module?	The State is unable to determine this at this time.



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168.		Service Expectations # 7.06	99	System capacity and design: What are the audit records retention requirements?	The State is unable to determine this at this time.
169.		Service Expectations # 7.21	100	System capacity and design: What is the current technical stack utilized by the State for database and Business Intelligence/Reporting?	The current stack is going to be replaced by the Data Services module. The State uses DB2 and Cognos for the database and BI/reporting currently.
170.		Service Expectations # 7.18	99	Can the State please confirm that any technology utilized by the vendor in performing the scope of work is to be hosted by the vendor?	Yes.
171.	APPENDIX K	Quality Assurance Performance Measures	127	System Infrastructure and Hosting: Will all MMISR components be hosted on HSD's network (both Production and Disaster Recovery)?	No.
172.	APPENDIX K	Quality Assurance Performance Measures	128	System Infrastructure and Hosting: Please describe the current hosting arrangement for HSD's systems including hosting locations.	The State utilizes multiple information systems. The State is unable to determine which HSD systems this question is referring to. The State hosts many systems in the State's data center in Santa Fe, NM. Some systems are hosted by Contractors in locations across the country and other systems are in the cloud.
173.		Service Expectations # 7.16	99	System Infrastructure and Hosting: Is there a requirement for encryption of data at rest?	Offeror's systems must meet Federal and State security requirements. The QA Contractor shall adhere to all standards established by the SI Contractor and approved by the State related to



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					integration, interoperability, security and transmission of data.
174.	II. MMISR APPROACH		4	System Infrastructure and Hosting: Will the State be involved in the hardware provisioning for MMISR?	The State will not be involved in hardware provisioning for the services provided by the selected QA Contractor.
175.		Service Expectations # 7.18	99	System Infrastructure and Hosting: Will the QA Contractor be responsible for hardware maintenance and administration on HSD's network (both Production and Disaster Recovery)?	The QA Contractor will be responsible for hardware maintenance and administration of the Contractor's solution and system.
176.	APPENDIX H	Service Expectations #7.26	100	Can the State clarify what specific reports are being referred to in this requirement? Is this specifically pertaining to performance management?	The State is requesting the Offeror to identify a list of existing reports that come standard with the Offeror's services. The State is requesting the Offeror to explain how these will be made available to the State. This is not limited to performance management.
177.				Would the State be open to vendors proposing additional, optionally priced, value-add QA services? If so, how would these services be evaluated and scored?	The State is open to Offeror's proposing value added services as part of the overall proposal and solution. Value added services are not priced or scored separately.
178.	APPENDIX G	Section 2.3 PI Support (TPL, FADS, Audit Coordination)	58	Could the State provide the current make up of State staff dedicated to program integrity; including the number of State employees, their roles and	No.



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				responsibilities, and if the plan is to continue in these current roles?	
179.	APPENDIX G	Section 2.3 PI Support (TPL, FADS, Audit Coordination)	58	Is it the State's intention that the QA Contractor will be completely responsible for all data analysis, medical reviews, audits, collections, and other activities?	Yes, within the scope of this RFP.
180.	APPENDIX G	Section 2.3 PI Support (TPL, FADS, Audit Coordination)	58	What role(s) will the State retain (if any) other than oversight related to any of the QA Contractor's services? For example, will Agency employees use the QA Contractor's tools to conduct any of its own data analysis, reviews, or reporting? If so, how many Agency employees will continue to perform program integrity activities in addition to the QA Contractor, and what will their roles entail?	The State will determine its staffing and functions related to the QA Contractor's services after award of the contract.
181.		A. Evaluation Point Summary	36	RFP Table 3 summarizes evaluation factors for this RFP and their associated point values. The table shows a total of 25 points may be awarded for "Vision for QA." Will the State please identify the section of the proposer's response to which this maps? For example, other evaluation factor are clearly mapped to response sections such as Appendix G and Appendix H.	As indicated in Table 3 of Section VIII. A. Evaluation Point Summary, Technical Responses should include Vision for QA and Statement of Work (Appendix G). See Page 37 #1 Technical Responses.



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182.	VIII. EVALUATION	VIII. A. EVALUATION POINT SUMMARY	36	RFP Table 3 summarizes evaluation factors for this RFP and their associated point values. The table shows a total of 65 points may be awarded for "Experience and Personnel." Will the State please identify the section of the proposer's response to which this maps? For example, other evaluation factor are clearly mapped to response sections such as Appendix G and Appendix H.	Offerors are expected to present proposed staffing and key personnel models for this Project (as described in the Scope of Work found in APPENDIX G).
183.	VII. RESPONSE SPECIFICATIONS	A. Response Format and Organization, 3. Proposal Format	31	Will the State consider excluding the project work plan from the 300-page limit?	Amendment 1 – The Offerors responses must be no more than three hundred (300) pages in length excluding the title page, table of contents, tabs, pricing, resumes, financial statements, the mandatory State required forms, detailed work plan, detailed implementation schedule and examples of documents. The Offeror is expected to include in the three hundred (300) page limit a summary work plan with milestones and a summary implementation schedule.
184.	APPENDIX H	Instructions	80	Please verify what the ECS and NCS acronyms stand for.	ECS-Existing Custom Solution NCS - New Custom Solution
185.	VII. RESPONSE	A. Response Format and	31	Because of page limit restrictions, can we reference the requirement number	The State will allow reference of the requirement number in proposals and



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	SECIFICATI ONS	Organization, 3. Proposal Format		and not include all requirement text in our response?	provide the responses in numeric order. The Offeror may use 10-point font for headers and footers and the text for the requirement question. However, that text for the requirement question will still be included in the response and cannot exceed three hundred (300) page limit. The requirement response must be in 12-point font.
186.	APPENDIX G	2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	Will the RAC vendor be supplied a list of claims previously audited and recovered in order to avoid duplication?	Legacy data will be converted and available via the IP and/or Data Services. However, due to current constraints, the State cannot guarantee the ability to systematically identify previously audited and recovered claims. The intent of the new MMIS includes ability to identify claims that have been or are in the process of being recovered to prevent recovery duplication.
187.	APPENDIX G	2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	Will the State please describe its current processes and timelines for provider appeals of audit findings?	Please refer to 8.350.4 NMAC.
188.	APPENDIX G	2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	Please list and describe the systems the RAC vendor will have access to.	The RAC Contractor will have access to their system as well as all data within Data Services through the SI Integration Platform.



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189.	APPENDIX G	2.6 Recovery Audit Contractor - Management of Recovery and Audit Responsibilities	64	Please confirm that the State will pay a contingency fee for both provider underpayments and overpayments.	As all Members (in FFS or MCO) are Medicaid Members and come through the ASPEN system for eligibility it is expected the Contractor would identify and validate other coverage for all. It is expected the Contractor will perform recovery for all FFS claims. For Members enrolled in an MCO it is expected the MCO will cost avoid for known TPL. The Contractor can attempt recovery on MCO claims which the MCO has not initiated recovery in 12 months.
190.	APPENDIX H	Service Expectations 7.20	100	Would it be possible to obtain a copy of the SI security requirements/policies? These may be impactful to the Offeror design and permit the RFP response to describe how the Offeror services will comply with SI security requirements/policies.	These are currently in development but will follow existing Federal and State standards.
191.	APPENDIX H	5.33, Audit Coordination	95	Will HSD procure the access to the PARIS files or does the QA Contractor vendor have the responsibility to obtain the file on behalf of the Agency?	HSD will procure access to the PARIS files.



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192.		2.3.3 Fraud and Abuse Detection Services Objectives	61	Please identify all stakeholders and distinct stakeholder groups for Program Integrity. Please describe the relationship between the stakeholder groups and the QA Contractor with cases that require State input for final resolution.	Examples of stakeholder systems include eligibility and enrollment systems in use by State agencies, systems used by MCO's and providers' systems.
193.	APPENDIX H	1.47 Program Integrity	85	Other than managed care encounters, what information does the state currently receive from the MCOs? Of the information in addition to encounters, will the Agency make this data available to the QA Contractor?	<p>The MCOs provide HSD with reports on utilization management, quality improvement and disease management as well as their audited HEDIS reports and CAHPS reports. The MCOs provide specific member records as requested for HSD audits.</p> <p>The intention is to receive, from the MCO, the data in these reports as well as other data needed by the MMIS. All data within the MMIS will be available, based upon security, to the Contractors.</p>