

Request for Proposals

RFP #18714

Actuarial Rate Certification Services and Support

AMENDMENT #1

March 23, 2021

The following are official modifications, which are hereby incorporated into RFP #18714: Actuarial Rate Certification Services and Support.

Deleted language appears in strikethrough ("~~xxx~~") and added language appears in red text.

The information contained in this amendment prevails over the original RFP language.

Bidders should review all documents in their entirety to ensure all amended language is incorporated into proposals.

4.4 Staffing

A. Staffing Requirements

The Contractor will assume responsibility for organizing and training a staff to support tasks as described in 4.2. The Contractor will also be responsible for coordinating and managing all tasks assigned. To accomplish this, the Contractor shall:

1. Dedicate a core team consisting of approximately 10-15 staff including individuals with the appropriate experience and credentials, who will be working directly with DOH staff on a consistent basis. The Contractor ~~is~~ **will be** required to house this core team, ~~permanently, for the duration of the contract,~~ in a single location within a fifteen (15) mile radius of the Capitol building in Albany, New York within four (4) months of ~~signing the contract~~ **notification from the Department. Given the current pandemic, the Department will not require an on-site or local Contractor presence until Department staff return to the office.** Locality of this team is crucial, as it is expected of the team to work closely with DOH. The cost of this team should be included in Part A of the Cost Proposal, under the Deliverable Based Section Staffing of the core team will be subject to DOH approval. The team must consist of:
 - a. At least one (1) member being a certified actuary; and
 - b. Two (2) project coordinators who possess the appropriate knowledge and skills to assist DOH with the tasks outlined in this RFP. Skills include but not limited to strong management skills necessary to coordinate activities, analyze data, prepare rate packages and reports and respond to DOH's management information needs. One project coordinator will be dedicated to all MC rate setting and related tasks and one project coordinator will be dedicated to service based payment rate related tasks. These project coordinators should be the sole liaisons between DOH and the Contractor. DOH should be able to direct all questions, and other correspondence to these individuals. These individuals are expected to be available to respond to DOH's management information needs on a daily basis via telephone and/or e-mail and to coordinate bi-weekly status meetings to apprise DOH of any issues and status updates. The project coordinators shall be part of the core team, located in the office described in Section 4.5.1.
2. Dedicate an on-site analytic team of 3-5 staff who have the authority to provide recommendations and distribute information to DOH and stakeholders on MC rates. This team will be expected to work full time at One Commerce Plaza, Albany, NY with the OHIP MC Rate Setting team **within 4 months of notification from the Department. Given the current pandemic, the Department will not require an on-site or local Contractor presence until Department staff return to the office.** Within this team, at least two (2) staff must have experience with large datasets, MC encounter data, knowledge of the State's Medicaid data systems, X12 Electronic Data Interchange (EDI) and National Council for Prescription Drug Programs (NCPDP) data format standards, Medicaid programs and be proficient in Standard Query Language (SQL) Tableau, and or Statistical Analysis

System (SAS). At least one (1) staff must be an actuary. All staff leads should have the internal authority to release information and analysis to DOH for direct release to the MCOs. **When the Department is directed to return to the office**, space, computers and phones will be provided to the **Contractor's** on-site team. The cost of this team should be included in Part A of the Cost Proposal, under the Deliverable Based Section.

D. Technical Proposal Narrative

The technical proposal should provide satisfactory evidence of the Bidder's ability to meet, and expressly respond to, each element listed below.

Elements of the technical proposal are as follows:

1. Organization, Personnel and Experience

- a. Bidders should provide, in relation to responsibilities set forth in Section 4.0 of this RFP and referenced attachments:
 - i. A description of the bidder's organizational structure, background and experience as it relates to the MC programs and MC rate methodologies as defined in Section 4.1 of this RFP;
 - ii. An organizational chart which clearly demonstrates how the bidder intends to staff, as required in Section 4.4 of this RFP, and manage rate setting functions, as defined in Section 4.2 of this RFP for each of the following MC programs:
 - MMC
 - HARP
 - HIV/SNP
 - EP
 - MLTCP
 - PACE
 - MAP
 - FIDA
 - MA
 - FIDA-IDD
 - iii. A description of the bidder's understanding and experience in conducting and certifying the rate setting functions as defined in Section 4.2 of this RFP for each of the following MC programs:
 - MMC
 - HARP
 - HIV/SNP
 - EP
 - MLTCP
 - PACE
 - MAP
 - FIDA
 - MA
 - FIDA-IDD
 - iv. A description of the bidder's organizational structure, background, understanding and experience as it relates to staffing and managing the projects as defined in Section 4.3 of this RFP;
 - v. A description of the bidding organization's data processing and analytical experience and capabilities, relevant to Sections 4.2 and 4.3 of this RFP, including any technologies, special techniques, skills or abilities that the organization considers necessary to accomplish the goals and objectives of this RFP;
 - vi. A summary of bidder's training initiatives utilized to ensure that all staff that will be assigned to this contract will be appropriately trained and that training protocols provide for consistency among all staff.

The bidder's experience should be relevant to the scope of work to be performed in accordance with this RFP. Experience gained within the last five years should be included.

2. Implementation Plan

- a. Bidders should propose a plan for implementing the activities and data responsibilities set forth in Sections 4.0 - 4.5 of this RFP. The plan should include at a minimum:
 - i. A description of the bidder's plan to develop or assist in development of the rate methodology (if not prescribed by law); determine, certify, update, and defend, when necessary, actuarially sound rates for the following programs:
 - MMC
 - HARP
 - HIV/SNP
 - EP
 - MLTCP
 - PACE
 - MAP
 - FIDA
 - MA
 - FIDA-IDD
 - ii. A description of the bidder's plan to develop, support, certify and/or modify a risk adjustment methodology for the following programs:
 - MMC
 - HARP
 - HIV/SNP
 - EP
 - MLTCP
 - PACE
 - MAP
 - FIDA
 - FIDA-IDD
 - iii. A description of the bidder's plan to perform all Task Order Related Projects including:
 - Encounter Reimbursement
 - Budget Neutrality
 - Service Based Payment Rate Setting
 - Policy and Financial Management Consulting Services
 - iv. A description of the bidder's plan to perform and meet all reporting requirements associated with Section 4.5 of this RFP;
 - v. An identification of the bidder's timeframes for tasks to be completed to ensure timely implementation of the proposed tasks by the dates proposed in Section 4.1. Consideration of timing should be given for DOH edits and reviews;
 - vi. A description of electronic data processing equipment to be utilized;
 - vii. A descriptions of all computer software to be utilized;
 - viii. A description of a Quality Control Plan for the work covered by this RFP;
 - ix. A description of the methods to be utilized to maintain the level of cooperation with DOH necessary for proper performance of all contractual responsibilities and to apprise DOH of any issues and status-;
 - x. A description of the bidder's plans to comply with all privacy and security policies and procedures

identified in Section 4.6 of the RFP;

xi. A description of the bidder's plan to provide the transition identified in Section 4.7 of the RFP.

6.3 Cost Proposal

Submit a completed and signed **Attachment B – Cost Proposal**. The Cost Proposal shall comply with the format and content requirements as detailed in this document and in Attachment B. Failure to comply with the format and content requirements may result in disqualification.

The bid price is to cover the cost of furnishing all of the said services, including but not limited to travel, materials, equipment, overhead, profit and labor to the satisfaction of DOH and the performance of all work set forth in said specifications.

- A. Payments for all work related to the development and calculation of the annual Managed Care rates for the following programs (see Section 4.2.A) will be made once work is completed and the supporting documentation and rate certification is submitted to DOH and approved. The programs for which one payment shall be made for the initial rate and one payment for each modification are:

Managed Care Program	Rate Develop	Original Rate Package Effective Date	Anticipated Number of Annual Modifications to Original Rate Package*
a. Mainstream Managed Care	Annually	April 1	2 to 3
HIV/SNP	Annually	April 1	2 to 3
HARP	Annually	April 1	2 to 3
b. <i>MLTC Programs</i>	-	-	-
MLTCP	Annually	April 1	4 to 5
PACE	Annually	April 1	4 to 5
MAP	Annually	April 1	4 to 5
FIDA	Annually	April 1	4 to 5
c. MA	Annually	January 1	0
d. Essential Plan	Annually	January 1	1 to 2
e. FIDA-IDD	Annually	January 1	2 to 3

**Rates may be updated more frequently, based on determinations made by the DOH.*

- B. Payment for all work related to the development and calculation of the annual Managed Care risk scores for the following programs (see Section 4.2.B) will be made once work is completed and the supporting documentation is submitted to DOH and approved. The programs for which one payment shall be made for the initial risk score completion and one payment for each modification are

<u>Managed Care Program</u>	<u>Risk Score Develop</u>	<u>Risk Score Effective Date</u>	<u>Anticipated Number of Annual Modifications to Original Risk Score*</u>
a. Mainstream Managed Care	Annually	April 1	1 to 2
HIV/SNP	Annually	April 1	1 to 2
HARP	Annually	April 1	1 to 2
b. <i>MLTC Programs</i>	-	-	-
MLTCP	Annually	April 1	1 to 2
PACE	Annually	April 1	1 to 2
MAP	Annually	April 1	1 to 2
FIDA	Annually	April 1	1 to 2
c. Essential Plan	Annually	January 1	1 to 2
d. FIDA-IDD	Annually	January 1	2 to 3

- C.** ~~D.~~ Modifications for the Managed Care rates and Risk Scores outlined above shall be billed on a deliverable basis. A payment shall be made for the development and calculation of each rate modification requested by DOH once the work is completed and supporting documentation and rate certification is submitted to DOH and approved. The anticipated number of modifications outlined in the above table are to assist in your price determination. Actual number of needed rate modifications may vary and will be made per DOH's request. These modifications may include, but are not limited to, recipients' age, gender, category of eligibility, level of care, and geographic location.
- D.** ~~E.~~ Payments for service based payment rate setting, financial management and other consultative assistance outlined in Section 4.3 will be made on an hourly basis, in compliance with a developed task order detailing the scope of the work and the staff needed to complete the work. Monthly vouchers may be submitted once the progress report has been submitted to DOH in the agreed format. The requirements for the progress report are included in Section 4.5.B.
- E.** ~~F.~~ All bidders are required to complete the attached Cost Proposal Form (Attachment B). Bidders shall be evaluated on their given prices for each program and their given per hour rates for the job categories listed in Attachment B.
- a. It is estimated that billable hours for the contract period, shall be divided among the three Staff Levels as 30% for Level 1, 45% for Level 2 and 25% for Level 3. Percent of billable hours is based on historical data and both the proportions of hours and actual hours will likely vary from these estimates. See Attachment C: Cost Proposal for specific details on each staffing level.
- F.** ~~G.~~ Subcontractor billing arrangements are not subject to the same requirements as this RFP and should be agreed upon between the contractor and the subcontractor, prior to payment for work completed. The contractor should include on the monthly progress report, the subcontractor's work performed and may bill the State the same hourly rate as the contractor or a lump sum price.
- G.** ~~H.~~ All administrative and travel shall be included in the prices included in the Cost Proposal.