

New York State Department of Health
Independent Evaluation of the New York State Medicaid Redesign Team, Section 1115 Demonstration
RFP # 20020
Questions and Answers
December 3, 2018

Question #	Corresponding RFP Section	Bidder's Question	Answer
1	3.1	<p>A. What is the definition of "direct business relationship" related to in the RFP? (Name of bidder) has worked in various capacities with the Department of Health, providers, and MCOs over the years and any clarification you could provide would be incredibly helpful and appreciated. Before we put effort into proposal development, we'd like to confirm that our prior work for the Department on the 1115 waiver program does not preclude us from serving the Department for this initiative. Also, could you please clarify the meaning of "direct business relationship" as specified in the minimum qualifications below?</p> <p>B. And, do the two referenced directories include all entities for which DOH requires attestation regarding no direct business relationship?</p> <p>Minimum Qualifications</p> <p><i>NYSDOH will accept proposals from organizations with the following types and levels of experience as a prime contractor.</i></p> <ul style="list-style-type: none"> <i>A minimum of three (3) years' experience conducting large-scale (at least one million lives), multi-year program evaluations, including completion of at least one such evaluation;</i> 	<p>A. For this procurement, the Department defines a "direct business relationship" as a situation in which a bidder/prime contractor or any proposed subcontractors are employed by a Medicaid Managed Care (MMC) plan.</p> <p>We have amended Section 3.1 of the RFP to remove the prohibition of a direct business relationship with an MMC plan's network providers.</p> <p>Additionally, if a bidder/prime contractor or any proposed subcontractors has a direct business relationship with an MMC plan, the bidder or any proposed subcontractors may propose an operational and information firewall that would eliminate the likelihood of any conflict of interest.</p> <p>Note: At the time of bid, if an operational and informational firewall is being proposed, the bidder/prime contractor and any proposed subcontractors must attest that the firewall will be established prior to commencement of work and will provide for an independent and unbiased evaluation without the influence of any MMC plans.</p>

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		<ul style="list-style-type: none"> • A minimum of three (3) years of experience performing statistical analyses using claims and encounter data; • A minimum of three (3) years of experience performing each of the following: <ul style="list-style-type: none"> ○ statewide or CMS designated Medicaid region comparisons, ○ longitudinal evaluations, and ○ collecting and analyzing qualitative and quantitative data. <p><i>At the time of bid, the bidder and any proposed subcontractors must attest to not having any direct business relationship with any of the MMC plans or their network providers. The prime contractor and any subcontractors utilized must continue to refrain from any direct business relationship with the MMC plans or their network providers for the duration of the contract. The Managed Care Organization Directory by Plan can be found at: https://www.health.ny.gov/health_care/managed_care/plans/mcp_dir_by_plan.htm and the Managed Long-Term Care Plan Directory can be found at: https://www.health.ny.gov/health_care/managed_care/mltc/mltcplans.htm.</i></p>	<p>We have amended Section 3.1 of the RFP to allow for a proposed operational and information firewall.</p> <p>See Amendment #1.</p> <p>B. Yes, with the above referenced amendment, the two (2) referenced directories include all entities for which DOH requires an attestation. As noted above, the qualification for bidders/proposed subcontractors has been amended. See Amendment #1.</p>
2	3.1	Are any vendors precluded from bidding on this procurement due to prior or existing work efforts?	Vendors are not automatically precluded from bidding based on prior or existing work efforts. See answer to Question 1 and Amendment 1.
3	3.1	Did any vendor assist with the Medicaid Redesign? If so, are they able to bid on this procurement?	Yes, vendors assisted with the Medicaid Redesign. They are eligible to bid if they meet the minimum qualifications summarized in section 3.1 of the RFP.
4	3.1	<i>At the time of bid, the bidder and any proposed subcontractors must attest to not having any direct business relationship with any of the MMC plans or their network providers. The prime contractor and any subcontractors utilized must continue to refrain from any direct business relationship with the MMC plans or their network providers for the duration of the contract.</i>	<p>A. "Bidder" is defined as the vendor submitting a proposal in response to this RFP.</p> <p>B. Though this practice would be acceptable, please see the answer to Question 1 and Amendment #1 as the requirement has been changed.</p>

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		<p>A. What is New York State's definition of "bidder"? As you are probably aware, <i>(name of bidder)</i> as a whole engages with New York State providers and health plans.</p> <p>B. However, would it be acceptable for <i>(name of bidder)</i> to create a team of individuals who will not work with any New York State providers and health plans and thus can meet the RFP's certification requirements?</p>	
5	3.1	<p>Section 3.1 bullet 4 states: <i>At the time of bid, the bidder and any proposed subcontractors must attest to not having any direct business relationship with any of the MMC plans or their network providers. The prime contractor and any subcontractors utilized must continue to refrain from any direct business relationship with the MMC plans or their network providers for the duration of the contract.</i></p> <p>Are national, non-profit, independent, third party evaluators eligible to participate as a Prime or Subcontractor for the NY 1115 Demonstration Evaluation?</p>	<p>It is unclear what is meant by "independent, third party evaluators."</p> <p>Bidders and subcontractors who meet the minimum qualification to bid as delineated in Section 3.1 are not precluded from bidding.</p>
6	3.1	<p>One of our subcontractors is a university-based research center that includes an academic medical center. They do evaluative research for several health care providers. Is doing funded research with and for a provider considered having a "business relationship" with a network provider of Medicaid Managed Care Plans? Would this disqualify faculty associated with this center from working on this project?</p>	<p>Please see the answer to Question 1 and Amendment #1.</p>
7	4.0	<p>Can the state please elaborate on the expectations for qualitative analysis?</p>	<p>The qualitative analysis will look at longitudinal trends in the measures rate, the percentage of the eligible population served over time, and acuity of the population over time.</p>

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8	4.0	Can the state please provide guidance on a reasonable timeline on which they will provide the contractor access to the state's data sources?	As noted in the RFP, bidders should be aware that obtaining data access will require substantial time and effort. It is recommended that the selected bidder begin the process of accessing data shortly after the contract is finalized. Providing that the winning bidder (contractor) has sufficiently completed all the necessary steps described in the RFP related to data access and security, the Department will authorize users and provision accounts for NYS Medicaid systems and data within 30 calendar days of request. All of the other data are aggregate and will be provided within 30 calendar days of the anticipated contract start date of August 1, 2019. The only exception is aggregate data specific to the time period after June 30, 2019; due to a lag, these data are anticipated to be available to the contractor by February 1, 2020.
9	4.0	Has the state converted SAAM data into a digital format that makes it comparable to UAS data?	The MLTC program transitioned from the SAAM assessment to the UAS-NY Community Health Assessment in October 2013. SAAM data are not applicable to this evaluation and are not comparable to the UAS-NY data.
10	4.0	Can the state please provide a rough ballpark for the intended level of effort for this project?	The state is relying on the expertise of the bidders to make this determination.
11	4.0	In the methods section of various research questions under Domain 1, the RFP states "Using NYSDOH calculated rates." Does this mean that DOH will provide all the outcome metrics? Can we check if the programming for these outcome metrics is correct? Can we have the metric(s) modified if we determine there are problems with the measures?	<p>Yes, DOH will provide all the outcome metrics using aggregated data. Specifications and analytical programming for these outcome metrics can also be provided.</p> <p>There should not be any modifications necessary, as the metrics currently contained in the evaluation design have all been tested and validated.</p>

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		<p>On page 8: Goal 4: To stabilize or reduce preventable acute hospital admissions. Question: Is the MLTC population experiencing stable or reduced rates of potentially avoidable hospitalization? Hypothesis: Rates of potential avoidable hospitalizations will remain stable or be reduced over the Demonstration. Methods: Using rates calculated annually by DOH, the Contractor will qualitatively assess if the rate of potentially avoidable hospitalizations are remaining stable or improving over the Demonstration. These results will show the effectiveness of the Waiver in reducing avoidable hospitalizations. Data sources: UAS-NY Community Health data; SPARCS data.</p>	
12	5.6	<p>As a NYS certified WBE organization, is there an opportunity to communicate our interest in participating in the project to potential bidders?</p>	<p>Yes, as per section 5.6 of the RFP, Minority- and Women-Owned Businesses (M/WBEs) may request that their firm's contact information be included on a list of M/WBE firms interested in serving as a subcontractor for this procurement. This list is posted on the RFP web page.</p>
13	6.0	<p>May the contractor propose to collect other qualitative data not currently listed in the proposal?</p>	<p>Yes, bidders may propose to collect additional qualitative data not listed in the RFP.</p>