New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
1.	General	Is the DOH satisfied with the current contractor's work?	This question is not relevant to the submission of a proposal under this RFP.
2.	General	Why is the NYS MIF DOH out to bid?	This question is not relevant to the submission of a proposal under this RFP.
3.	General	What is the current rate billed per enrollee by the current contractor?	This question is not relevant to the submission of a proposal under this RFP. This information can be requested through a Freedom of Information Law (FOIL) Request by following the link here.
4.	General	How many Case Managers are providing services by the current contractor?	This question is not relevant to the submission of a proposal under this RFP. It is expected the contractor will have an adequate staffing plan to comply with regulatory requirements and meet the needs of the enrollees. This information can be requested through a Freedom of Information Law (FOIL) Request by following the link here.
5.	General	How many enrollees are non-English speakers or are assisted by non-English speakers?	This question is not relevant to the submission of a proposal under this RFP. Translation services are required, and this number will change as new enrollees comes in. Currently, it is a very small percentage, mostly Spanish speaking.
6.	General	What foreign countries are the enrollees residing in?	Although it is possible that additional countries could be added as Enrollee

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
			counts change, currently they include El Salvador, Ireland, Mexico, Paraguay, and United Kingdom.
7.	General	The RFP requires that three separate bidders are required. What happens if there are less than three? Does the bid process cease and the incumbent retains the contract?	The RFP does not require three separate bidders. The only section that references "minimum of three (3) required bids" in this RFP is in Section 4.4.1 Environmental Modification (EMOD) & Vehicle Modification (VMOD) Prior Authorization. Those sections refer to enrollee claims review processes, not the bidding process for this contract.
8.	General	Please supply a copy of an EOB that is currently being used with the enrollees.	The Department will not share this information prior to contract award. The format will be developed between the selected Contractor and the Department, and will be subject to Department's final approval.
9.	General	Funding for the Fund is only extended through 2025 and the New York State Legislature has not made the funding permanent. Please explain what happens in the event the funding is not secured and what guarantees would the State provide in terms of compensation?	General funding for the program is guaranteed on an annual basis per PHL 2999-I(5).
10.	General	Does the DOH plan to conduct finalist capabilities presentations? If so, what is the expected date?	No.
11.	General	Does the pharmacy benefit management contract fall under this scope and would it	It is the Department's intent to contract with a single vendor for the

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
		be transferred to the new contractor? Or does it fall under a separate contract?	administration of all of the claims, inclusive of pharmacy. However, interested vendors may choose to sub-contract with a PBM to handle pharmacy claims, and such an arrangement is contemplated by the RFP. The vendor must disclose any such arrangement in its proposal.
12.	General	Is there a data feed between the current pharmacy benefit company and the current program administrator?	Data is shared between the current pharmacy benefit company and the current program administrator.
13.	General	Please provide the growth in the number of enrollees on annual basis since the Fund's inception.	This information is available publicly on the NYS MIF Website under "Actuarial Reports."
14.	General	Will we have the state's 3M software access to price hospital/facility claims to obtain the Medicaid/Medicare rates?	Yes, the vendor will have access to Medicaid rates.
15.	General	We presume the MIF still coordinates with the school's IEP program and will not cover services that are covered by this program?	MIF is expressly barred by regulation from paying for services covered under an IEP. See 10 NYCRR 69-10.1(z)(1).
16.	Section 1: Calendar of Events (Page 4)	Is there an anticipated award date?	Although there is an anticipated contract start date of July 3, 2024 (see Calendar of Events, p. 4), the Department does not have a specific timeline for the award date.
17.	Section 2.1: Introductory Background (Page 4-5)	Of the seven enrollees that are treating outside of the U.S., in what countries do they reside?	Please see response to Question #6.

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
18.	Section 2.1: Introductory Background (Page 4-5)	Do the same criteria in terms of timeframes and SLA's apply to those members who reside outside of the U.S.?	Yes.
19.	Section 2.1: Introductory Background (Page 4-5)	For the enrollees residing outside of the U.S., how are the EMOD's and VMOD's handled and do the same rules apply as to obtaining three bids?	Yes, the same rules apply to obtaining three bids as they are regulatory requirements (10 NYCRR 69-10.7).
20.	Section 4: Scope of Work	There are no details relating to Project Management procedures and/or coordination with the Department. Does the Department have an estimated hours per week for meetings between DOH and staff?	On average it is estimated meetings would occur approximately five (5) hours per week. This would vary according to the needs of Program and the vendor. The Department anticipates additional time/meetings would be needed at the beginning of the contract. Per the RFP, "The Staffing and Organization Plan must include how the Contractor plans to make available the appropriate staff for calls with the Department, as needed, to discuss Fund processes, requests for information, complaints and any other request, issue or concern raised by the Department (p. 17)."
21.	Section 4.2: Application Review and Enrollment Process (Page 8-9)	Regarding ID cards, are cards to be issued separately for medical and prescription benefits? Please provide a sample card(s).	There is no requirement that separate ID cards be issued for medical and prescription benefits if all information is contained in one card. A sample ID card is available on the MIF website

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
			under "[For Enrollees," "Enrollee Handbook.](#)"
22.	Section 4.2: Application Review and Enrollment Process (Page 8-9)	For Case Managers and UM do they need to be licensed in NY, the state the member lives in or both?	Case Managers are not required to be licensed in New York State.
23.	Section 4.2: Application Review and Enrollment Process(Page 9)	English, Haitian Creole, Korean, Russian, Chinese and Spanish are the languages listed. Please provide the approximate percentage of active enrollees that comprise each language. Are there any other languages that the contractor is expected to support?	Executive Order No. 26 requires it be provided in English and ten qualifying non-English languages.
24.	Section 4.2: Application Review and Enrollment Process (Page 9)	Is it required that all written materials are in English, Haitian Creole, Korean, Russian, Chinese and Spanish?	Please see response to Question #23.
25.	Section 4.3: Case Management	Please provide copies of the current statistics, record and claim histories requirements.	This information will not be shared with the bidding community prior to contract award. Please see Section 4.3 of the RFP for more information.
26.	Section 4.3: Case Management	Are Case Managers expected to be on call/ available after standard hours for any type of crisis intervention?	It is expected the contractor will have an adequate staffing plan to meet regulatory requirements and enrollee needs. Please refer to the MIF Regulations 10 CRR-NY 69-10.4(a)(7) for more information on Case Management.
27.	Section 4.3: Case Management (Page 2)	What monthly information does the DOH require for reporting of Case Manager services currently? Is there a sample report	Please see response to Question #25.

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
		or listing of required information to be reported on monthly?	
28.	Section 4.3 Case Management (Page 9)	Does the DOH have a list of reports or communication formats that are already approved for the required monthly or quarterly reporting by the case management vendor to the DOH?	Samples are not available; formats and requirements will be determined during contract execution.
29.	Section 4.3 Case Management (Page 9)	Please expand on the expectations/requirements surrounding backup documentation that will suffice as acceptable.	All backup or supporting documentation within an Enrollees' Case Management File has to be in a searchable system which is capable of producing Department required reports such as case management histories by Enrollee, and any other types of summary reports as requested by the Department.
30.	Section 4.3 Case Management (Page 9)	Does the DOH have a prepared document that will be used in the enrollee's orientation outlining claims processing, the appeals process, FAQ's, list of already-approved available resources as vendors for environmental/DME/assistive technology and required format to obtain such services?	There are resources available, but it is expected that the contractor would contribute to the development of a standardized orientation.
31.	Section 4.3: Case Management (Page 10) [Timeframes and Deliverable Table]	This section states initial assessment of the enrollee is preferably in person or via video technology. Is it acceptable for the initial assessment to be conducted via phone call? What percentage of the initial assessment of the enrollee are conducted in-person vs. via video technology?	It is preferred that the initial assessment be conducted in person, next best option would be via video technology to allow for 'face-to-face' interaction to understand and identify enrollee needs.

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
			The Department does not have the information available for the percentages.
32.	Section 4.3: Case Management (Page 10) [Timeframes and Deliverable Table]	This section states Initial Case Management Plan must be approved by the Department. What is the timeframe for the DOH to approve the Initial Case Management Plan?	The Department would need a minimum of ten (10) business days to review and approve the Initial Case Management Plan.
33.	Section 4.3: Case Management (Page 10) [Timeframes and Deliverable Table: Quarterly]	Will the evaluation regarding the enrollee's strengths/support system/factors related to care be completed by the case manager or the treating physician?	This is expected of the Case Manager.
34.	Section 4.3: Case Management (Page 10) [Timeframes and Deliverable Table: Quarterly]	Will the reassessment regarding enrollee's needs be completed by the case manager or the treating provider?	This is expected of the Case Manager.
35.	Section 4.3: Case Management (Page 10) [Timeframes and Deliverable Table: Quarterly]	Does the DOH currently have emergency materials that it supplies to families regarding steps taken in a crisis situation, have a list of alternative provider sources available should there be a service interruption?	The Vendor will be responsible for generating this information and researching alternative providers, though the MIF has no legal obligation to guarantee provider access to any enrollee.

Please refer to the MIF Regulations 10 NYCRR 69-10.4(a)(7) for more information on Case Management. |
| 36. | Section 4.3: Case Management (Page 10) [Timeframes and | What steps are the case managers expected to take in case of need to assist with crisis intervention? | Please refer to the MIF Regulations 10 NYCRR 69-10.4(a)(7) for more information on Case Management. |

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
	Deliverable Table: Quarterly]		
37.	Section 4.3: Case Management (Page 10) [Timeframes and Deliverable Table: Quarterly]	What staffing requirements does the DOH have regarding the enrollee's case?	It is expected that the chosen vendor will have adequate staff to meet the needs of the enrollees.
38.	Section 4.3: Case Management (Page 10) [Timeframes and Deliverable Table: Quarterly]	Does the DOH have communication templates or report styles that are commonly used and approved of communication between two case managers working with one enrollee and how to coordinate such activity?	It is expected that the chosen vendor will create their own communication templates for communication between two case managers working with one enrollee.
39.	Section 4.3: Case Management (Page 10) [Timeframes and Deliverable Table: Quarterly]	Is any case manager's POC given priority over another? If so, please explain the nature of those circumstances.	The Department will work with the Contractor after contract approval in such instances.
40.	Section 4.3: Case Management (Pages 10 and 11) [Timeframes Table: Ongoing]	Does the DOH currently have approved communication tools used between stakeholders for the purpose of reimbursement for services?	This information is available publicly on the NYS MIF Website, under "Fund Operations Forms and Instructions".
41.	Section 4.3: Case Management (Pages 10 and 11) [Timeframes Table: Ongoing]	Does the case manager document the case record regarding the enrollee's medical condition and the progress made or does the treating provider?	This is expected of the Case Manager.
42.	Section 4.3: Case Management (Pages 10 and 11) [Timeframes Table: Ongoing]	Does the DOH have approved templates that can be utilized to communicate change of case manager to enrollee?	The chosen vendor may develop templates to communicate a change of case manager to an enrollee via the enrollee's preferred method of communication.

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
43.	Section 4.3: Case Management (Pages 10 and 11) [Timeframes Table: Ongoing]	What is the criteria for the DOH to decide to change a case manager?	This question is not relevant to the submission of a proposal under this RFP.
44.	Section 4.3: Case Management (Pages 10 and 11) [Timeframes Table: Ongoing]	Does the DOH have specific approved vendors who are utilized within the system to review external appeals?	Per the RFP, "If an enrollee requests an external appeal after denial the Contractor must have a mechanism of external appeals for prior approval of experimental/investigational services."
45.	Section 4.3: Case Management (Pages 10 and 11) [Timeframes Table: Ongoing]	The table states "Maintain staffing levels as approved by the department to ensure that a comprehensive Case Management Plan is prepared for each enrollee." What is the DOH criteria/requirements for case management staffing for this enrollee population? Please provide the percentage or number of change in Case Manager requests have been made over the course of the past 5 years?	It is expected that the chosen vendor will have adequate staff to meet the needs of the enrollees.

The information pertaining to the percentage is not available. |
| 46. | Section 4.3: Case Management (Pages 10 and 11) [Timeframes Table: Ongoing] | What percentage of the initial assessment of the enrollee are conducted in-person vs. via video technology? | Please see response to Question #31. |
| 47. | Section 4.4: Prior Approval Requirements & Responsibilities | Please provide the current process including timeframes for those enrollees who are designated with an expedited approval and what criteria is used to determine who is eligible for expedited approval? | Please refer to the MIF Regulations 10 NYCRR 69-10.15 for more information on the Prior Approval Process and expedited approvals. |

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
48.	Section 4.4: Prior Approval Requirements & Responsibilities	The last paragraph of this section reads: "If an enrollee requests an external appeal after denial the Contractor must have a mechanism of external appeals for prior approval of experimental/investigational services." What is meant by "external appeals"? Is this considered a reconsideration?	Please refer to the MIF Regulations 10 NYCRR 69-10.16 for more information.
49.	Section 4.4: Prior Approval Requirements & Responsibilities	Does the DOH have a list of qualified Emod evaluator or must we develop that from scratch. Should the cost of the evaluators be incorporated into our fee, or is that a separate expense bill	The cost of Emod evaluators should not be incorporated, as those services are generally contracted directly with the Department. The Department has a list of contracted Emod Evaluators that will be utilized, but the chosen vendor may be expected to assist with identifying out-of-state evaluators.
50.	Section 4.4.1: Environmental Modification (EMOD) & Vehicle Modification (VMOD) Prior Authorization (Page 12)	In instances where the Department chooses to review EMOD prior authorizations, would the Department accept a *recommendation* within 30 days, rather than a *determination*, to allow for time for the Department to review and discuss with the Contractor?	A determination must be issued within 30 days from the date *all necessary documentation* in support of the request has been received. See 10 NYCRR 69-10.6. Under such circumstances, a recommendation would not be legally compliant.
51.	Section 4.4.1: Environmental Modification (EMOD) & Vehicle Modification (VMOD) Prior Authorization (Page 12)	Can the DOH provide sample (redacted) Emod and Vmod reports?	Samples are not available and will not be shared with the bidding community.
52.	Section 4.4.1: Environmental Modification (EMOD) & Vehicle	Does the DOH consider the current Emod process acceptable or is a complete overhaul required?	This question is not relevant to the submission of a proposal under this RFP.

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
	Modification (VMOD) Prior Authorization (Page 12)		
53.	Section 4.4.1: Environmental Modification (EMOD) & Vehicle Modification (VMOD) Prior Authorization (Page 12)	What were the total number of claims processed for the 928 enrollees (in 2022); how many were foreign claims? How many Emods are there on average?	In 2022, there were approximately 73,500 claims processed for payment. This excludes claim denials. There were approximately 540 international claims. Currently, there are approximately 40 Emods. This number may not be reflective of the typical amount due to the impact of the public health emergency.
54.	Section 4.6: Provider Services (Page 14)	How are provider payments currently made outside of the U.S. and in what currency?	Payments to providers outside the U.S. follow the same processes as domestic payments except that is the vendor must also determine whether the claim may be covered by a national health care plan.
55.	Section 4.6: Provider Services (Page 14)	Is the contractor to complete data conversion of open and historical matters into their electronic system? a. If there is to be a data conversion - how many sources of data are to be converted? b. What system(s) does the MIF data currently reside? Does The New York State Department of Health own the system? If not, who does? c. Are there document images that need to be converted?	It is anticipated that program data will be transferred from the current contractor directly to the new contractor. In addition, the Department will share any necessary data currently in its possession or obtained at that time from the current contractor. Whether a data conversion will be required depends upon the respective systems in use by the parties and how they propose to perform the duties specified in the RFP.

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
		d. Is there a separate database for pharmacy/prescription benefits?	
56.	Section 4.6: Provider Services (Page 14)	Other than upon loading of a new provider, how frequently does the Contractor need to check provider information against current and potential sanctions?	The Contractor would need to check provider information against current and potential sanctions anytime an Enrollee family member raises a concern about a provider, or anytime there is a change in practice affiliation and/or change in d/b/a of the practice entity. One way to determine this would be billing being submitted on new letterhead by the provider, or written notice of a change in practice affiliation being sent to the enrollee.
57.	Section 4.7: Accounting Processes (Page 15)	Who owns the bank account used for various payments? Currently, who actually makes the payments? What percentage is paid electronically and by check?	NYS Taxation & Finance administers the bank account per Public Health Law PBH § 2999-i(1)(a). The information pertaining to the percentage is not available.

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
58.	Section 4.10: Staffing (Page 17)	Please provide the current program staffing by position, i.e., claims professional, Case Managers, administrative personnel, etc.	This question is not relevant to the submission of a proposal under this RFP. It is expected the contractor will have an adequate staffing plan to comply with regulatory requirements and meet the needs of the enrollees and Department.
59.	Section 4.10.1: Key Staff (Page 18)	The RFP requires the project manager to be PMP-certified. Will noting that a team member is taking a course to and will have completed PMP certification prior to the 7/1/2024 start date be acceptable, or must the identified team member have an active PMP certification at the time the proposal is submitted?	Per the RFP, "the contractor must be prepared to provide detailed resumes for the individuals proposed by the Contractor to perform the Key Staff positions under the Contract." The Project Manager is one of those Key Staff positions, and "Project Management Professional (PMP) Certification from the Project Management Institute (PMI)" is listed as a minimum qualification requirement under 4.10.1: Key Staff.
60.	Section 4.11: Reporting (Page 18)	Please provide samples of all required reports and forms that the contractor will be required to produce/provide as part of the contract.	Samples are not available and will not be shared with the bidding community.
61.	Section 4.11: Reporting (Page 18)	Please provide the quarterly claims reports generated by the current vendor for the past year.	This information is available publicly on the NYS MIF Website under "Actuarial Reports".
62.	Section 4.11: Reporting (Page 18)	The next to the last paragraph reads: "The Contractor must maintain a searchable electronic record keeping system which is capable of producing reports as requested and perform data extracts, at a minimum	Per the RFP, "Before developing or utilizing new Commercial Off the Shelf (COTS) application programs, systems programs, operating systems, website and/or vendor-supplied web portals,

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
		daily." What is meant by a "searchable electronic record keeping system"? If DOH has access to the claims and case management systems, would this meet this requirement?	that will affect the Medical Indemnity Fund (MIF), prior approval must be granted by the Department. The Contractor must provide access to the Department, and any designed entities based on role and access policy approved by the Department. Permissions and privileges to enable access based on user roles and responsibilities must be set upon request from the Department (4.13 Information Technology). The electronic record keeping system(s) would also need to be searchable, and capable of producing reports and performing data extracts.
63.	Section 4.19: Minority & Women-Owned Business Enterprise Participation (Page 26)	In previous agreements, the 10% M/WBE participation applied only to the TPA contract and not to the Fund Administrator contract. Is it DOH's intention to require the 10% M/WBE requirement across the entire program?	Yes. The goal is 10% for eligible expenses over the life of the contract.
64.	Attachment B: Cost Proposal	Can the pricing be on a per member basis or is a fixed annual rate required?	The pricing must be submitted as prescribed in Attachment B: Cost Proposal.

New York State Department of Health
Office of Health Insurance Programs

Request for Proposal (RFP)#20238: Medical Indemnity Fund (MIF) Administration Services
Questions and Answers
April 12, 2023

Question #	Section	Question	Answer
65.	Attachment C: Service Level Agreement (SLA)	For clarification, average speed of answer for TPAs is normally calculated as an "average" across a certain time period (i.e., a month). Can you confirm that it is DOH's expectation that 100% of calls are answered within 30 seconds?	Per the RFP, "All calls will be answered by a live representative within thirty (30) seconds."