



MARYLAND
DEPARTMENT OF
BUDGET & MANAGEMENT

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Governor

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Lieutenant Governor

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Secretary

DAVID C. ROMANS
Deputy Secretary

Q & A #6
to
Request for Proposals (RFP)
BEHAVIORAL HEALTH & EMPLOYEE ASSISTANCE PROGRAM (EAP) BENEFIT
ADMINISTRATION SERVICES
SOLICITATION NUMBER F10B0400011
June 29, 2010

Ladies and Gentlemen:

The following Questions, which were received by e-mail for the above referenced RFP, are being answered and posted for all Offerors. The numerical sequencing begins with question #103 since questions #85 through #102 were answered in Q&A #5 on June 18, 2010:

103. Question: Question AR-19H: "Full service phone access for the blind." We have the TTY process for the deaf, but we are not sure what kind of full service phone/customer service capacity we would have with blind callers. Can you clarify what this means?

Answer: As described in Attachment J-4: Administrative Requirements, Administrative Requirement-19 h, the Contractor's customer service operation must include the adequate and appropriate access to the customer service system for individuals with disabilities (e.g. TTY and on-line access for deaf, full service phone access for blind). This includes, for example, but is not limited to, TTY and on-line access for deaf, full service phone access for blind including the ability to perform telephonically all customer service activities typically completed via the Contractor's website.

104. Question: Attachment J-16 Deviations Page. In the section where we state our deviations, it looks like the Excel sheet is limited to 15 entries, is that correct?

Answer: Please see response to question #89 on Q&A #5 and Amendment # 3 (REVISED), item 2.

~Effective Resource Management~

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105. Question: The State of Maryland team that presented at the pre-bidders conference, will these individuals be the decision makers on the selection of the vendor and if not, who will be the decision makers for the bid?

Answer: Please see COMAR 21.05.03.03A.(6) (“Initial evaluations may be conducted and recommendation for award made by an evaluation committee. Final evaluations, including evaluation of the recommendation of the evaluation committee, if any, shall be performed by the procurement officer and the agency head or designee.”). As per RFP § 5.5.2, Offerors proposals will first be assessed for compliance with the Offeror Minimum Requirements set forth in **Attachment J-1: Minimum Requirements** of the RFP. If these basic requirements are met, the next level of review will be an evaluation for technical merit. During this review oral presentations and discussions may be held. If an offeror is invited in for oral presentations and discussions, the identity of the evaluation committee members will be revealed at that time.

The identity of the evaluation committee members will not be disclosed prior to this timeframe.

106. Question: When we select the J-6 subcontractor questionnaires that we want to include, it does a couple of things. If we only have 4 or less subcontractor questionnaires selected (J-6a-J-6d), none of Attachment J will print-instead a runtime error comes up. If we select 5 or all 6 questionnaires, then it will print. If we select more than what we have, in our case, we would have 1 or 2 blank questionnaires. Is this acceptable? Also, for those using Amendment 3, it only asks you to select from Ja-Jf.

Answer: Yes, having blank J-6 subcontractor questionnaires is acceptable. It is also acceptable to print each subcontractor questionnaire individually and have each numbered as page 1.

However, if the Offeror prefers, Offerors may utilize the revised version of Attachment J: Technical Proposal in Amendment 4. Please see Amendment # 4, item 5.

107. Question: We assume that you want us to print the "Active Worksheets" and not the "Entire Workbook" from the Excel Printing options. When we select the "Entire Workbook" option, it prints the background coding for the drop downs, then a blank black main menu page, and then the page numbering begins on page 6 at Attachment J-1.

Answer: Yes, that is correct; please print “Active Worksheets.”

108. Question: When printing either the "entire workbook" or just the "active worksheets", Attachment J-16 is not included and you have to go back and print it separately. J-16 then prints as Page 1. Is that acceptable?

Answer: Yes. It is acceptable to print Attachment J-16: Deviations Page separately and have it labeled page 1.

However, if the Offeror prefers, Offerors may utilize the revised version of Attachment J: Technical Proposal in Amendment 4. Please see Amendment # 4, item 6.

109. Question: Also, is it the State's expectation that once we hit the Print Final Documents button that we cannot go back in and make changes to something that we may want to revise?

Answer: It is permissible to go back and change information provided by the Offeror in Attachment J: Technical Proposal and/or Attachment K: Financial Proposal at any time prior to submitting the proposals. Proposals (hardcopy and electronic) received by the submission deadline should be identical and will be reviewed/evaluated according to the requirements identified in Section 5 of the RFP.

110. Question: Attachment K-5 uses dollar weights for each 3-digit zipcode. This method does not reflect natural distribution variations between procedure codes nor zip codes for our patients; therefore skewing a representative and accurate comparison of our average allowed rates to what is displayed in column C. A better approach would be to compute weighted-averages, which address the distribution variations.

Answer: The State is using an evaluative model to rank each Offeror's financial proposal. The procedures and zip codes in Attachment K-5: Physician Network Analysis were selected based on actual utilization and zip code distribution of the State of Maryland's eligible members and plan experience. Attachment K-5: Physician Network Analysis is designed to uniformly capture fees by procedure code for all Offerors regardless of the Offeror's distribution by zip code or procedure. As requested, please provide your allowed charge for each procedure and zip code.

111. Question: Attachments K-6, K-7, K-8 have several blanks in which we did not find corresponding case for the facilities listed in the timeframe requested. This is a natural finding in that two or more separate populations may not have used the same facilities, have the same health risk, or assessed by clinicians with the same, exact diagnoses.

Answer: Please refer to RFP § 4.5.3. E, F and G. Re-price each case as of January 1, 2010, as the claim would be processed based on provider agreements proposed for the State of Maryland program. The claim should be repriced and the required information provided even if an identical claim for the specified provider has not previously been processed by the Offeror.

112. Question: Attachment K-9 incorrectly calculates the discounts shown in columns E and F. OHBS never contracts with discounts shown. However, what is shown in columns C and D are accurate cross-references to other schedules; therefore the problem is computational in nature. As the sheet is encrypted and password protected, we were unable to make the necessary accurate adjustments. Another problem is the distribution weights in column B, that assume the same distribution as our book of business or the same distribution that would ultimately enroll and use facilities.

Answer: The average network discounts shown on Attachment K-9: I. Physician Network Analysis is determined by the ratio between eligible and allowed charges by zip code based on the data entered by the Offeror in Attachment K-5: Physician Network

Analysis. The Average Network discount shown on Attachment K-9: II. Hospital Network Analysis by facility is based on the data entered by the Offeror in Attachments K-6 Inpatient Hospital Analysis and K-7: Partial Hospital Analysis. The eligible charges are the same and fixed for all Offerors allowing for a comparison across Offerors.

Please refer to RFP § 4.5.3 [H] Attachment K-9: Network Analysis Summary. The weighted averages applied to the charges are calculated based on the actual distribution of the State's paid claims for Fiscal Year 2009.

113. Question: Attachment K-10 and all other supporting financial statements are incorrect, as each cross-references to attachments with known problems illuminated above.

Answer: Please see responses to Questions 110, 111 and 112 above.

Should you require clarification of the information provided, please contact me at (410) 260-7374 as soon as possible.

Date Issued: **June 29, 2010**

By: Andrea R. Lockett
<signed>
Procurement Officer