

STATE OF CALIFORNIA
CORRECTIONAL HEALTH CARE SERVICES
8260 Longleaf Drive, Elk Grove, CA 95758



May 19, 2014
Request for Proposal (RFP) #HCPNTPA13366
Healthcare Provider Network and Third Party Administrator Services

Addendum # 5

RESPONSES TO BIDDERS' QUESTIONS

Question Number	RFP Section and Page #	Bidder Question	CCHCS Response
RFP-Q39		<p>Will this bid offer multiple awards? Or, are you seeking to award an all-in-one service contract award?</p> <p>We provide TPA services to Non-Profit FQHC Community health care clinics. Will this previous experience qualify us to be competent to respond to this solicitation?</p>	<p>This Request for Proposal requires that any bid submitted, must contain all components through a single contractor or in conjunction with one or more subcontractors. RFP Page 8, Number 4, Scope of Service - Paragraph 2, discusses the requirement for multiple vendors coordinating a single bid.</p>
RFP-Q40		<p>Is the transcript and sign-in sheet available from the bid conference?</p>	<p>No. As stated in the Bidders' Conference, no attendance was taken.</p> <p>No questions were received during the conference.</p> <p>The power point presentation for the Bidders' Conference is available on the CPHCS website and Bidsync.</p>

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RFP-Q41	6.3.D.1.c p. 42 of 200	Does the bidder (Contractor) also need to sign and submit a self-certification form? RFP requirements c.i and c.ii indicates Contractor and Providers while c.iii indicates Contractor or Provider.	No. The Contractor shall be aware of the Orientation Requirements and ensure they enforce and maintain the signed self-certification form that all network providers who are performing specialty services on site at any CDCR institution or facility have read and understand the requirements in the orientation manual. The Contractor must provide copies of the certifications, on demand by CDCR/CCHCS.
RFP-Q42	6.3.D.3.c.i p. 49 of 200	<p>RFP states, "In the event of a cancellation due to mechanical failure of a unit or staffing not available the Contractor shall provide the requested medical imaging service within two (2) business days of the originally scheduled service. Penalties will accrue if service is not provided within the required timeframes."</p> <p>Will the Contractor be subject to penalties if the CDCR institution or DJJ facility requests the service be rescheduled within 3, 4, or more days?</p>	Yes. Impact and cost to the State due to a last minute cancellation still exist. This does not relieve the vendor's contractual obligation to ensure services originally scheduled. The RFP language was modified thru addendum #4, to reflect the remedy as Liquidated Damages and not as a penalty.
RFP-Q43	8.8.B.10 p. 118 of 200	<p>The language contained in the RFP does not explicitly state whether a Knox-Keene license is a requirement of this solicitation. Further, RFP8.8.B.10 does not provide any specific citation in the "resulting agreement" (Exhibits A-G) pertaining to a Knox-Keene license.</p> <p>Please clarify if a Knox-Keene license is a requirement, or consider modifying the Section 10 title.</p>	Yes, licensure under the Knox-Keene Health Care Service Plan Act of 1975 (Health & Safety Code § 1340 et seq.) is a requirement of the contract.

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RFP-Q44	6.3.A. , item 11 p.24	<p>Will the contractor be responsible for displaying the rates “by provider” so designated staff at the institutions can view the rates online? Or will the contractor be expected to make available provider tiering by rates?</p> <p>Does this clarification still apply?</p>	<p>The contractor will be responsible to include in the proposal a method for institution/facility staff to view the directory for access to determine the best value provider while ensuring and maintaining access to and continuity of care for the patient.</p> <p>Example: One provider is at 120% of Medicare and is 10 miles from the institution and a second provider is at 100% of Medicare located 20 miles from the institution. Both provide the same levels of care, so without an institution knowing the Medicare rate or tier level at or below 110% percent of Medicare they might choose the closer provider and cost the State a higher cost for the service.</p>
RFP-Q45		Who is on the evaluation committee?	The composition of the evaluation committee is confidential until after the evaluation process has been completed and the contract has been awarded.
RFP-Q46		What is the court appointed special assistant's name and contact information?	The <i>Plata</i> Court appointed the Court's special assistant Starr Babcock to act in this role and more recently appointed Lee Kemper to act in this role, and the Court of course reserves the right to substitute a different designee to serve in this role. Contact information is confidential, and in any event, all communications related to this contract's solicitation shall be directed only in the manner set forth in the RFP.

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RFP-Q47	Section 6.3.D.10 Quality Reports, Part a	<p>This section reads as follows: <i>Health Care Network Provider shall provide at least quarterly quality reports, which include but not limited to, any CDCDR patient-inmate cases where the patient-inmate experienced an event that would trigger reporting as "Inpatient Quality Indicator" or "Patient Safety Indicator".</i></p> <p><i>Describe your solution and the process in detail that you would establish to address this requirement.</i></p> <p>Please provide detail regarding what is considered an "inpatient quality indicator" or "patient safety indicator." Is CDCR referring to the Agency for Health Care Research & Quality (AHRQ) patient safety indicators? Further, please provide information regarding the scope of the quarterly quality reports required.</p>	<p>We are requesting that a reporting mechanism be developed for the health care provider network to review incidents of clinical concern that have been reported to it by CCHCS. The incidents would pertain to its provider network. Ideally, quarterly reviews would be scheduled between the health care provider network clinical team and CCHCS. The issues to be reported by CCHCS and reviewed by the Health Care Provider Network team may include Agency for Health Care Research & Quality patient safety indicators (AHRQ), National Safety Forum patient safety indicators (NSF), Serious Reportable Events (SRE), or other indicators of delivery system issues, patient care issues, or health care quality issues that occur within the contracted network.</p>
RFP-Q48		Can we submit questions after the final question submittal date of May 5, 2014?	Bidders can submit questions after the submittal deadline. However, per RFP section 8.6, CCHCS makes no guarantee that all questions submitted will be answered.
RFP-Q49		Can proposers or their designees meet with CCHCS staff regarding RFP 12265?	No.

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RFP-Q50	Section 7.2 Evaluation Process, step 2, p. 92; Table 2.2.B, Cost Scoring, p. 96; Table D, p. 101-109; Table E, p. 110-111	<p>The Table 2- Cost Scoring states that the "% of Medicare" guarantees contained in Table D...will be inserted into Table E to create a percent over the 2012/13 medical costs.</p> <p>There are inconsistencies between Table D and Table E for which bidders require guidance.</p> <ul style="list-style-type: none"> • Table E contains institution "HQTR" that is not listed in Table D • Table D contains institutions CAC and CHCF which are not included in Table E • Table D consolidates the DJJ facilities under NCYCC while Table E includes separate entries for NAC, OHC and PINE. <p>Please clarify how bidders are to complete Tables D and E for these specific discrepancies.</p>	Table D and Table E were modified thru addendum #4. The modifications clarify this question.

Please continue to check these websites for updates to the RFP and corresponding documents:

http://www.cphcs.ca.gov/project_rfp.aspx

or

www.BidSync.com