PRE-PROPOSAL MEETING
FOR
PROGRESSION OF MEDICAID INTEGRATED DELIVERY NETWORK FOR DUALLY-ELIGIBLE INDIVIDUALS IN MARYLAND

CONTRACT NO.: DHMH/OPASS 17-17478

FEBRUARY 13, 2017
201 West Preston Street
Room L-2
Baltimore, Maryland

10:00 a.m. - 10:35 a.m.

PRESENT FROM DHMH:

DANA WRIGHT, Contract Officer
DARLENE WALKER
JANELLE ROBINSON, Minority Business Enterprise
AARON LARRIMORE, Office of Health Care Financing
JOHN GULLUCCI
ALEXANDRA LOIZIAS
TRICIA RODDY
LAURA GOODMAN

ALSO PRESENT:

RYAN BENSON, Lewin Group
ROBERT ATLAS, EBG Advisors
ANN RASENBERGER, EBG Advisors
BOB MARCHESE, Applied Technology Services
DR. DAVID DALTON, Wellness Teladoc
THERESA BOYLE, AP Ventures
ELIZABETH JACKSON, AP Ventures
LESLIE GREENWALD, RTI International
DIANNE HEFFRON, Mercer

REPORTED BY: KATHLEEN A. COYLE, Notary Public

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P R O C E E D I N G S

MS. WRIGHT: Good morning everyone. We're going to get started. Good morning and welcome to the pre-proposal conference for the progression of Medicaid integrated delivery network for dually eligible individuals in Maryland. My name is Dana Wright from the Office of Procurement and Support Services. And what I'm going to do is I'm going to start at my right with introductions around the room.

MR. LARRIMORE: My name is Aaron Larrimore.

MS. LOIZIAS: I'm Alex Loizias.

MS. GOODMAN: Laura Goodman.

MS. RODDY: Tricia Roddy.

MS. GREENWALD: Leslie Greenwald from RTI.

MS. BOYLE: Theresa Boyle with AP Ventures.

MS. JACKSON: Liz Jackson with AP Ventures.

MR. MARCHESE: Bob Marchese, Applied Technology Services.

MS. RASENBERGER: Ann Rasenberger, EBG Advisors.

MR. ATLAS: Bob Atlas, EBG Advisors.

MR. GULLUCCI: I'm John Gullucci of the Office of Procurement Support Services.

MS. WALKER: I'm Darlene Walker.

MS. ROBINSON: Janelle Robinson, Director of the MBE program.

MS. WRIGHT: Thank you. I'm going to start with the overview of the procurement process. Once again, this is for the progression of Medicaid integrated delivery network for dually eligible individuals in Maryland. DHMH/OPASS number 17-17478; eMaryland Marketplace number MDM0031030970. Good morning again. My name is Dana Wright from the Office of Procurement and Support Services, OPASS for short. I am here to help you understand the process for this procurement. In case there is a need for clarification after this meeting, I can be reached at (410) 767-5741. My email address is DHMH.solicitationquestions@Maryland.gov.

The Department of Health and Mental Hygiene, Office of Planning, is seeking a contractor to provide support for the progression of a integrated delivery

network serving individuals duly enrolled in Medicaid and Medicare (duals IDN) in the State of Maryland.

The Department intends to make one award as a result of this RFP. See RFP section 1.15 for more information. There is a sign in sheet available for you. It is very important that everyone sign in if there is a need to contact you as a result of this meeting, we will be able to do so more easily. Feel free to leave your business cards with us. As you know, the contract resulting from this solicitation will be for one year.

Carefully review section one, general information, beginning with page eight of the RFP. All subsequent documentation regarding this solicitation will be posted on eMaryland Marketplace and Department of Health and Mental Hygiene websites. Please remember that in order to receive a contract award a vendor must be registered on eMaryland Marketplace. Registration is free. Review subsection 1.8 for details.

I would like to stress to everyone today that when we get to the Q&A portion of the meeting we ask

that everyone who asks a question will also submit the same question to the Department in writing for clarification purposes. The Q&Q along with the minutes and other documentation will be posted on eMaryland Marketplace and Department of Health and Mental Hygiene websites as quickly as possible.

Carefully review subsection 1.9, questions, on page 12 regarding how to submit questions subsequent to this pre-proposal conference. Questions to myself with a copy to the procurement coordinator shall be submitted via the DHMS.solicationquestions@Maryland.gov website. Questions should be submitted no later than five days prior to the proposal due date. I, based on the availability of time to research and communicate an answer, shall decide whether an answer can be given before the proposal date. So try to get your questions to us as soon as possible.

Subsection 1.30, page 19, is regarding payment by electronic funds transfer. Carefully review this clause. By submitting a response to this solicitation the offeror agrees to accept payments by

electronic funds transfer unless the State Comptroller's Office grants an exemption. Payment by EFT is mandatory for contracts exceeding $200,000. This section goes into detail on how to register or request an exemption.

A four percent MBE goal has been established for the contract resulting from this RFP. This information can be found in section one, subsection 1.33. Be sure to complete the MDOT certified MBE utilization and fair solicitation affidavit, attachment D1. This attachment must be provided in a separate sealed envelop.

A one percent VSBE goal has been established for this contract resulting from this RFP. This information can be found in section one, subsection 1.41. Be sure to complete the VSBE utilization affidavit, attachment M1. This attachment must be provided in a separately sealed envelope.

At his time Janelle Robinson will provide additional information relating to the MBE and VSBE requirements. Thank you, Janelle.

MS. ROBINSON: Good morning. I'm Janelle Robinson, director of the MBE program. The MDOT certified MBE utilization and fair solicitation affidavit, attachment D1, must be fully and accurately completed and submitted along with your bid or proposal. Failure to do so will result in your bid or proposal being deemed non-responsive. On the D1 form you must first acknowledge and express your intention to meet the overall MBE goal percentage established for this solictiation. You must also enter any subgoals that have been established for this solicitation. If no subgoals are established for this solicitation do not enter any information regarding the percentages for African American, Hispanic American, Asian American, or women-owned businesses in section one.

The MBE participation schedule should include the names of the minority business enterprises that you intend to use to meet the required MBE goal, along with their federal employment identification number, their MDOT/MBE certification number, as well as their certification category. Only MDOT/MBE certification is

acceptable. MBE certification from another entity or jurisdiction will not be accepted. Additionally, the percentage of the total contract value to be provided by the particular MBE should be entered as well as a specific description of the work that is to be performed by that particular MBE. In summary, you will break down the specific MBE status of the particular MBE subcontractors, and this should be equal to or exceed the MBE goals established for this solicitation.

Within 10 working days of receiving notice that your firm is the apparent awardee, you must submit your outreach efforts compliance statement, which is attachment D2, and your subcontractor project participation certification, attachment D3. You may request a waiver of the MBE goal, and within 10 working days of receiving notice that your firm is the apparent awardee, you must submit all required waiver documentation in accordance with COMAR 21.11.03.10.

Please carefully review the liquidated damages provisions in the solicitation regarding compliance with the MBE rules and regulations. Per new

regulations, the MBE prime contractors may count 50 percent towards the established subcontracting goal and 100 percent towards one of the categories of subgoals that they are certified for.

It's really important that the D1 is submitted in a separate sealed envelope and accurately completed. And it's very important. I'm the first step. If it's wrong, it's deemed non-responsive and OPASS never even opens the proposal or the technicals, or anything. So it's very important that it's filled out correctly.

The VSBE utilization affidavit and subcontractor participation schedule, which is attachment M1, must be fully and accurately completed as submitted along with your bid or proposal. Failure to do so may result in your bid or proposal being deemed non-responsive. On the M1 form you must first acknowledge and express your intention to meet the overall VSBE goal percentage established for this solicitation. The VSBE subcontractor participation schedule should include the names of the veteran owned

business enterprises that you intend to use to meet the required VSBE goal, along with their DUNS number. Only United States Department of Veterans Affairs certification is acceptable. Verify on vetbiz.gov. VSBE certification from another entity or jurisdiction will not be accepted. Additionally, the percentage of the total contract value to be provided by the particular VSBE should be entered as well as the specific description of the work that is to be performed by the particular VSBE.

Within 10 working of receiving notice that your firm is the apparent awardee you must submit your subcontractor project participation schedule, which is attachment M2. You may request a waiver of the VSBE goal, and within 10 working day of receiving notice that your firm is the apparent awardee you must submit all required waiver documentation in accordance with COMAR 21.11.13.07. In the summary you will enter the total VSBE participation. And this should be equal to or exceed the VSBE goal established for this solicitation.

Does anyone have any questions?

MS. WRIGHT: Thank you, Janelle.

MR. ATLAS: question on the VSBE.

MS. ROBINSON: Sure.

MR. ATLAS: There's not an MDOT certification for VSBE?

MS. ROBINSON: No. VSBEs are certified through Department of Veterans Affairs. So they get the DUNS numbers. And MDOT don't have anything to do with that program. Anybody else?

(No response.)

MS. WRIGHT: Points to emphasize. The procurement method used for this solicitation is competitive sealed proposals. There are several steps involved in this method, so your attention to the solicitation document is crucial to the successful submission of your proposal.

The scope of work, background, and purpose is listed in section three, subsection 3.1, on page 29. The subsection goals -- sorry. The subsection gives an outline of the responsibilities of the contractor. The

program, in its overview, will go over specific requirements listed in this section.

The scope of work requirements listed in section three, subsection 3.2, begins on page 29. This is the meat of the solicitation that will give you a clear understanding of what the Department expects of the successful offeror and the provisions of the services.

Proposal format. Offerors are required to submit their responses to the RFP in two parts. Section four, proposal format, beginning on page 37, clearly lists all submission requirements. Your proposal shall be submitted in separate volumes. Volume one, technical proposal, separately sealed. Volume two, financial proposal, separate sealed.

Subsection 4.2, proposals, page 37, volume one, technical proposals list all the documents and information required with your technical proposals.

Submission format. The following number of technical proposals are required: One original unbound, four unbound copies, one electronic version

(CD or DVD) in Microsoft Word format, and a second electronic version in searchable pdf format (CD or DVD) for Public Information Act (PIA) requests. This copy shall be re-deactivated (sic) so that confidential and/or proprietary information has been removed.

Within five days of being notified of its recommendation for award, the offeror must complete and submit contract affidavit set forth in attachment C. If there is a question of who your resident agent is please call the State Corporate Chapter Division at (410) 767-1330. The office is located at 301 West Preston Street.

Please note that the contract shall not be effective until the contract affidavit is signed and returned after official notification.

To simplify the submission, subsection 4.4, the technical proposal, page 38, shows where documents and information shall be included in the technical proposal.

Section 4.5, volume two, financial proposal, page 44. Under separate sealed cover from the

technical proposal and clearly identified in the format identified in section 4.2 proposals, the offeror shall submit one original unbound copy, four unbound hard copies, and one electronic version (CD or DVD) in MS Word of the financial proposal.

The financial proposal instructions can be found on page 100. The financial proposal form is Attachment F, financial proposal form. Comments and notes regarding the financial proposal form are on page 100. If there are any questions regarding the financial proposal form please direct them to the program staff present here today.

The Evaluation Committee, evaluation criteria and selection procedure are outlined in section five, beginning on page 45. Your proposals will be evaluated by a committee organized for that purpose and will be based on the criteria set forth in the RFP.

The technical criteria, listed in descending order of importance, can be found in subsection 5.2, page 45, with the financial criteria listed in subsection 5.3, page 46.

The selection procedure is highlighted in section 5.5, page 46. As noted, the contract will be awarded to the responsible offeror that submitted the proposal determined to be the most advantageous to the State. In making the most advantageous proposal determination technical factors will receive greater weight than financial factors.

Documents required upon notice of recommendation for contract award is listed in section 5.6, page 47.

Other than composing your technical and financial proposals, the most important matter is to get your proposals to us by date, time and location listed. Your proposals are due no later than Monday, March 6, 2017, at 2:00 p.m. The address for receipt of proposals is listed in the key information summary sheet. No proposals will be accepted after 2:00 p.m. Please note that the proposals come to the Department of Health and Mental Hygiene Headquarters, at 201 West Preseton Street, to my attention, in room 416A. Please address your proposal packets to the same address

listed. The three acceptable means of delivery of proposals are in subsection 4.3, under delivery. The U.S. Postal Service, hand delivery by offeror (ask for a receipt), hand delivery by commercial carrier (ask for a receipt).

Please remember that after this pre-proposal conference prospective offerors may have questions answered that may help them understand the RFP, et cetera. Just keep in mind that the answers to your questions, if they are significant in nature, shall be posted on eMaryland Marketplace and Department of Health and Mental Hygiene websites. Therefore, please allow significant time for this to occur.

If you have any comments or questions about the procurement process please contact me at (410) 768-5741. Again, my email address is Dhmh.soliciationquestions@maryland.gov And good luck.

Right now I'm going to to turn it over to you for any background purposes and the scope of work. Thank you.

MR. LARRIMORE: Thank you guys for being

here. This project is a continuation of a project that the Department launched in 2015. We are endeavoring to design and implement what we're calling the integrated delivery network for dual eligibles or IDN for short.

As I hope you've seen on our website, we are intending to move forward with an accountable care organization, or an ACO construct, for that IDN. Sort of the two main features of that ACO that we're excited about moving forward with is that it joins the total cost of care for Medicare and Medicaid into its benchmark, and it links a provision of care coordination across the two programs. The program must also work seamlessly with the Au Pair model and hospital global budgets.

Again, the Department did complete a SIM grant, a State Innovations Model grant on the initial design of this model. And you can see the result of all that work on our website. That was described in the RFP. And if you're looking for sort of a good point, we definitely recommend that you take a look at

the website, take a look at the concept paper that is on there, and take a look at the stakeholder engagement process, the slides, the notes, everything that we've put on there, so you have a good idea of what we're looking to continue.

The terms of the scope, we intend to move forward with task orders. They will be awarded on as needed basis. And I think you can sort of read, and I think it's 3.2.1 here, exactly how that process moves forward.

For the areas of effort we've broken it into four general areas. The first is project management. We'd like to sort of keep in touch with our contractors. So the expectation is weekly phone meeting, also some in-person meetings as they need to come about. But weekly phone calls and notes distributed afterwards.

Area effort two is the model and waiver refinement. I believe probably a lot of folks are familiar with an 11/15 waiver. It's something that I think a lot of consultants or individuals in the world

of Medicaid or health care financing have some familiarity with. We would be looking to do an 11/15 to secure the Medicaid authorities to do this model. What you may not be familiar with is what we have called the model for CMMI, because that's something that's typically been a internal process to CMMI. The model is essentially the same thing as an 11/15 approach. It would require a narrative and an explanation of sort of the financial arrangement that we'd like to put into place. It may not ask for the same sort of needs as an 11/15. We're not going to have to break individuals up into Medicaid eligibility groups, MEGS, we wouldn't have to conduct a bunch of new trial day tests, per se. But there will be that financial component. But in terms of sort of thinking about what you'll need to plan for the model, think about sort of the narrative of 11/15.

Within the model and waiver design we've identified five areas that we think are of the most importance. Governance, the attribution of individuals to a particular ACO, quality metrics, provider

enrollment, provider engagement, and the payment, the sort of the construction of how we will pay the ACOs.

We have also listed the assistance in the creation of RFPs and other implementation activities as part of the scope of work. We would then expect to kind of work that out in the task order process.

Stake holder engagement is also a area of effort that's very important to us. This is how we see that you'll be able to get the feedback and input you would need to be able to construct the IDN. We will issue task orders that will clearly describe stakeholder activities, such as staffing, conducting a stakeholder work group. So you'll have the ability to develop a work plan in line with the activities and the required outcomes. Basically what we're really looking for in that process is agendas, facilitation of the meeting, slides. So the logistics we would handle in house, the Department would. But you would be seen to lead the meetings.

Finally, the last area of effort is the recommendations on ongoing organizational needs to

support the duals IDN model. What we're looking for here is a report that gives recommendations on the organizational structures, and staff roles for the Department to oversee the duals IDN model once it's fully designed.

And that is sort of in a nutshell what we're looking for in the scope.

MS. WRIGHT: Any question?

MS. GREENWALD: Leslie Greenwald from TRI. So in order to move forward with the model do you think from a regulatory standpoint you're going 11/15 and like a kind of a CMMI grant? And sort of what happens if there isn't a SIM round three, would you be going to CMMI with kind of a project grant? Sort of what's the section between the 11/15 and the CMMI; do you think you're going to go both routes simultaneously?

MR. LARRIMORE: It's actually very interesting. Because typically when you do a SIM grant you come up with sort of a scope of work in a project that you're then looking for funding for.

MS. GREENWALD: Right. And you have a

design --

MR. LARRIMORE: We've got a design.

MS. GREENWALD: Right.

MR. LARRIMORE: So this is not -- we're actually not going to be dependent upon a SIM round three at all.

MS. GREENWALD: Okay.

MR. LARRIMORE: We would look to sort of existing resources to bring up the program. And part of that existing resources may be resources that we're able to tap from CMMI.

MS. GREENWALD: Right. But what about the regulatory, the ability to vary from the, you know, the Medicare and Medicaid?

MR. LARRIMORE: We would get that from CMMI, from Medicare. And then for the Medicaid side we would expect us, the same sort of regulatory authority from CMCS.

MS. GREENWALD: Gotcha. Okay.

MS. HEFFRON: Dianne Heffron from Mercer. Two questions. So there's no interest in sort of doing

the dual track that was, that came out of rather than doing Medicaid, CMMI, just because that's really more managed care?

MR. LARRIMORE: So I think just for clarification I'll -- so if you're talking about the financial alignment demonstration, we are not seeking to pursue that at this time. That is a model that is devoted towards, as you mentioned, health plans. And we're going to build upon what you could read in a concept paper for the ACOs.

MS. HEFFRON: And second question is, how does -- you mentioned this process, how do they fit in broader scope? You listed a whole bunch of activities, are they going to be able to support that, and looking at staffing, how -- so if you're answering and trying to figure out what the staffing you're going to need for the entire period, will that change as task orders are released? Or how does that work together?

MR. LARRIMORE: I think we do discuss staffing a little bit later in the RFP. I think with the staff that you identify for all of these projects

you should be able to complete the task orders. So it may be -- I think in any type of project you may have one analyst, or one consultant that you lean a little bit more heavily on at sometimes and then less so in others. I think with what you have sort of described here you should be able to accomplish all the task orders.

MR. BENSON: Ryan Benson, Lewin Group. So the RFP mentions that the vendor would work with the states actuaries to refine. Would the vendor be expected to supply a certified actuary as part of that work?

MR. LARRIMORE: Not at this time. No. And you don't need to have -- not at this time and not in the RFP.

MS. GREENWALD: In the RFP you express a preference for people that are local and available face to face meetings. Is that -- does that preference extend to the entire team or is your desire mostly to have at least some subset of the team, particularly the principal consultants available face to face? I guess

where I'm going at is, there's an intersection between having lots of people available and sort of depending on your needs which are going to evolve as the project goes out, some maybe local, some not; so where does the need for local, or the desire for local intersect with just having a really broad bench and being able to draw in a lot of folks?

MR. LARRIMORE: I think you would want to construct the best team that you could possibly construct for purposes of completing this, the RFP, and completing the project. I think what you're speaking about is there was a mention in the RFP about a preference for folks that have some experience in Maryland. And what we're looking for for that is for the contractor we believe that it will be, you know, very, very important to understand some of the nuances and the quirks of the Maryland system. We had a Au Pair, or we had a hospital waiver for 30 some years now. It's evolved to an Au Pair model. It's a very, very complicated model. And we're going to have to work inside of that. So the thought about mentioning

Maryland specifically in that context was to sort of put it out there that we would want any of our contractors to have a strong understanding of how the Maryland model works in order to be able to successfully complete this project.

MS. GREENWALD: So if they could be made available to be here in person but don't necessarily, you know, we don't necessarily have an office down the street.

MR. LARRIMORE: That's perfectly fine.

MS. GREENWALD: So the knowledge of those local issues is really what you're going there, as opposed to necessarily having an entire staff of people who work down the street?

MR. LARRIMORE: That's right.

MR. BENSON: So there's a mention of a parental guarantee on page 15. Is there -- there's not a maximum total value mentioned or maximum contract value. Is that something that's been specified anywhere? Is there a maximum value of all the task orders that would be awarded?

MR. LARRIMORE: I would let -- I'm sorry --

MS. WRIGHT: What was the page again?

MR. BENSON: On page 15, the present guarantee. Yeah. The bottom of page 15. Like basically, is there a maximum value of any -- is there a feeling or anything?

MS. WRIGHT: On the bottom of page 15? Okay.

MR. BENSON: Uh-huh. I can submit that in writing.

MS. WRIGHT: Yeah. Can you submit that in writing for me please. Thank you. I'll make a note of it though.

MS. GREENWALD: Do you have in mind or ready the kind of entities, the kind of Maryland entities that will become ACOs, or is that the part of the scope of taking this concept to the next level?

MR. LARRIMORE: I think that would be part of the concept of taking it to the next level. But again, to put in like another plug for our website and our previous work, if you take a look at that you'd have an understanding of the scale of what we're

looking for.

MS. GREENWALD: In the proposal do you have a preference for the depth or level of detail you want a technical proposal to go into?

MR. LARRIMORE: Um, --

MS. GREENWALD: Like, you know, if we deliver, you know, 100 pages of, you know, lots of pros and cons, and this and that, you know, would that be a welcome thing or a burden? Or are you looking for a brief or statement of the technical? I guess what I'm asking is do you have a sort of an ideal page recommendation for, you know, how much we should dump on you for the technicals?

MR. LARRIMORE: I don't believe we have page limits. I woud leave that up to you to decide.

MS. GREENWALD: Okay.

DR. DALTON: You said this is a continuation of what's been done? How long has this project been going on?

MR. LARRIMORE: We kicked off the project in late 2015. So we originally got the SIM grant for the

beginning of 2015. We did some initial planning internally, and sort of began the project in 2015.

DR. DALTON: So everything has been done internally?

MR. LARRIMORE: No. We had a stakeholder process that lasted from February to November of 2016. And we engaged with a lot of stakeholders in a monthly meeting, also a series of subgroups. We also engaged stakeholders that way. And then some other, you know, sort of off line meetings that we take in with stakeholders.

DR. DALTON: Okay. Thank you.

MR. LARRIMORE: Sure.

MS. HEFFRON: So you mentioned earlier this is going to function with Au Pair.

MR. LARRIMORE: Sure.

MS. HEFFRON: Has this year-long process with the dual project functioned within that larger Au Pair so far or is it now going to dovetail into it?

MR. LARRIMORE: It has definitely worked within the existing stakeholder process that the HSCRC

has conducted, and we have met with them and our agency contacts as well to make sure that we're in line.

MS. HEFFRON: Okay.

MR. BENSON: Will these minutes be made available on the website?

MS. WRIGHT: Yes. Do you have any other questions at this time?

(No response.)

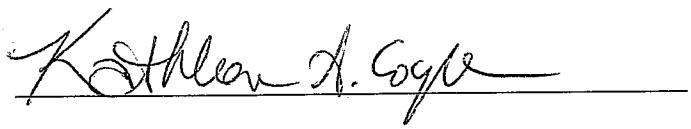
MS. WRIGHT: The minutes and the sign-in sheet will be made available as soon as possible on eMaryland Marketplace if you have any reference. And again, if you have any questions please submit them in writing to the DHMH website. And that way we can review them and get the response out as soon as possible. Okay. Thank you for coming out today. Good luck.

(Whereupon, at 10:35 a.m., the meeting was adjourned.)

CERTIFICATE OF NOTARY

I, KATHLEEN A. COYLE, Notary Public, before whom the foregoing testimony was taken, do hereby certify that the witness was duly sworn by me; that said testimony is a true record of the testimony given by said witness; that I am neither counsel for, related to, nor employed by any of the parties to this action, nor financially or otherwise interested in the outcome of the action; and that the testimony was reduced to typewriting by me or under my direction.

This certification is expressly withdrawn upon the disassembly or photocopying of the foregoing transcript, including exhibits, unless disassembly or photocopying is done under the auspices of Hunt Reporting Company, and the signature and original seal is attached thereto.



KATHLEEN A. COYLE
Notary Public in and for
the State of Maryland

My Commission Expires:

April 30, 2018