

**REQUEST FOR PROPOSAL**  
**Developmental Disabilities Administration (DDA)**  
**QUALITY IMPROVEMENT ORGANIZATION SERVICES (QIO)**  
**MDH/OPASS #19-17890/MDM0031039377**

Questions and Answers #3 09/19/2018						
Question	Page #	RFP Section Number or Name	Question	MDH Response	Follow-Up Question	MDH Add'l Response
1.	21	2.3.8	It is stated that, "The data system must be functional within 120 days of the Go-Live Date of the Contract." Please confirm this refers to 120 business days after the Go-Live Date.	Calendar days	There are two separate answers to questions about the 120 days that provide conflicting information. One says calendar and the other says business. Please clarify whether this requirement is 120 business days or 120 calendar days? We recommend it be business days.	As earlier corrected, both references are to calendar days.
			"The data system must be functional within 120 days of the Go-Live date of the Contract." Is this 120 Business Days?	Yes		
2.	67	Financial Proposal Form – B-2	The Financial Proposal Form for Option Year 1 and Option Year 2 does not include an estimate or a place for capturing the cost of performing critical incident reviews. Please confirm that critical incident reviews are not included as part of the scope for these years. Otherwise, please provide an updated file that includes both the category and estimate to be completed in these years.	See Attachment QIO RFP Claim Activity	Within the Financial Proposal Form, Option Years 1 and 2 do not have a place to include a price for reviewing critical incidents. We understand from the RFP that critical incident reviews are a required activity in all years of the contract and believe that the pricing form should request a price for these reviews in <i>each</i> year of the contract, including the two Option Years. Will DDA revise the Financial Proposal Form accordingly? If not, please explain if and how prices should be provided for these reviews in the option years.	No pricing is solicited for critical incident reviews in the option years because MDH does not anticipate any need for the selected vendor to perform critical incident reviews in the option years.

3.	N/A	Financial Proposal Form – B-2	On the financial form, under Section 2.3.6-CQL Accreditation and 2.3.7-Enhanced Funding for QIO Services, it discusses not exceeding dollar amounts. It shows the multiplier is NTE \$125,000 for each Section of 2.3.6 and NTE \$100,000 for Section 2.3.7. There are no final amounts stipulated on the form.	Correct. The Offeror needs to enter their proposed amount.	<p>Please confirm, as was discussed at the pre-bid meeting, that the “not to exceed” (NTE) dollar amounts for 2.3.6 associated with the CQL accreditation and 2.3.7 associated with the QIO enhanced funding was an error and that vendors should submit their proposed costs on the Financial Proposal Form without this financial limit. Please also update the form without any NTE amount accordingly.</p> <p>Also, as the costs of working on CQL network accreditation (2.3.6) will be substantial and ongoing, would the DDA consider making this a monthly cost rather than one time or annual cost and reflect that accordingly on the Financial Proposal Form?</p>	The Financial Form has been revised, eliminating the NTEs previously included.
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4.	N/A	Pre-Bid Conference Minutes	Please also confirm that, as captured in the Pre-Bid Conference Minutes, the selected Contractor will complete Qualified Provider Reviews on all DDA providers, not just those providing Coordination of Community Services (e.g., CLS, DAY, EDC, FSS, IFC, ISS, PS, RC, RES, SDFM, and SE). Please also confirm that these reviews would be in addition to the required annual reviews (i.e., 6) of CCS Providers.	The RFP requires Qualified Provider Reviews on ONLY CCS agencies.	<p>It was acknowledged during the pre-bid meeting, and reflected in the minutes, that quality reviews would have to be done for all providers, not just CCS ("Response: Yes, all DDA providers should be receiving reviews."). There is also, within section 2.2.5.1 (d) Qualified Provider Reviews, a reference to performing "reviews of DDA provider qualifications." Furthermore, it is a requirement for CQL accreditation that a certain percentage of providers (other than CCS) will need to have a Basic Assurances Review, if not a Qualified Provider review.</p> <p>The Qualified Provider Review category on the Financial Proposal Form (i.e., 2.3.2.5.4) is now limited to six (6) CCS reviews. In which category of the Financial Proposal Form should proposers include the other provider reviews? Can the Financial Proposal Form be amended to include these costs on a separate line called CQL Basic Assurances Reviews, or will DDA allow these costs to be included in the line for Qualified Provider Reviews without the restriction to six (6) CCS reviews?</p> <p>If these costs are not captured in a separate line or within the Qualified Provider Review category (i.e., 2.3.2.5.4), please let us know what category they should be included in the Financial Proposal Form.</p>	The pre-bid comments are hereby revised. The RFP requires Qualified Provider Reviews on only CCS agencies.
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5.	N/A	Financial Proposal Form – B-2	<p>The Financial Proposal Form requests a total price for “Year One.” The “Period of Performance,” begins Jan 1, 2019 and extends to June 30, 2022 (approximately 42 months (page 125, 3.1)), and the RFP requires development of a procedure manual over the first six months--“within 120 business days of go live date” (page 11, 2.3.1.2.3.). The RFP furthermore states that the “contractor may not begin work tasks until the manual is approved and a written Notice to Proceed is provided by the contract monitor.”</p>	<p>The "Period of Performance begins January 1, 2019 and extends to December 31, 2022. The financial proposal for Year One would extend from approximately January 1, 2019 to December 31, 2019, comprising a 12-month period total.</p>	<p>Based on the answer provided by DDA, the period of performance is now a four-year (4-year) period starting on January 1, 2019 and ending December 31, 2022. Please confirm that this period of performance is correct. If so, will the RFP be amended accordingly, and will a new Financial Proposal Form be reissued to reflect this change?</p> <p>If this is not correct, please clarify the correct dates for the Period of Performance and confirm its correlation to the Financial Proposal Form.</p>	<p>The prior MDH response is hereby amended to change “2022” to “2023.” The contract will contain a 3-year base term plus two 1-year options.</p>
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6.	N/A	Financial Proposal Form – B-2	<p>Please confirm that the financial proposal for Year One would extend from approximately January 1, 2019 to June 30, 2020, comprising an 18- month period total. Year One should include the first six-month period required to develop the procedure manual (120 business days) and the remaining 12 months. When the vendor receives a “Notice to Proceed” (following acceptance of the procedure manual) they may then begin the “work tasks,” at which point the selected vendor would begin completion of Level of Care, Service Record, Critical Incident, Qualified Provider, and Utilization Reviews and National Core Indicator Surveys at the volume(s) captured within Year One of the Financial Proposal Form. Please also confirm that the required quantities of tasks set forth for Year One in the Financial Proposal form would apply to that 12- month period following the Notice to Proceed.</p>	<p>Year One is January 1, 2019 to December 31, 2019.</p>	<p>There are requirements to work with DDA and produce a project plan and other documents (e.g., a final procedure manual) within 120 business days of the go-live date. These documents must be completed and approved by DDA in advance of the issuance of a Notice to Proceed, which must be issued before the vendor can begin the work tasks listed in 2.3.2, 2.3.3, and 2.4.5 of the cost Financial Proposal Form. If Year One is January 1, 2019 to December 31, 2019, this would result in having approximately six (6) months to perform actual work tasks outlined in the scope (e.g., NCI surveys, qualified provider reviews, critical incident reviews, utilization reviews, etc.) which are listed as an annual quantity on the Financial Proposal Form. Will the quantity of reviews and other work tasks listed in 2.3.2, 2.3.3, and 2.4.5 of the Financial Proposal Form be pro-rated for the time available (to remain consistent with the monthly sampling methodology set forth in 2.3.2.3 on page 12) so that the vendor would not be expected to perform a year’s quantity of reviews in approximately half a year? Instead would the vendor, for instance, perform about 190 service record reviews in year one rather than 380?</p>	<p>Each year consists of one year of service. MDH will not pay start-up costs.</p>
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**\*\*\*\*Please use revised Financial Proposal \*\*\*\***