COMMONWEALTH of VIRGINIA

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES
600 East Broad Street, Suite 1300
Richmond, VA 23219

September 25, 2008

ADDENDUM No. 2 TO VENDORS:

Reference Request for Proposal: RFP 2008-02
Dated: August 13, 2008
Due: November 14, 2008

Below are updates that may delete, add, modify or clarify certain aspects of the aforementioned RFP. Please incorporate as necessary.

Page 2-4 §2.1.10 Proposal Protocol:

ADD - Electronic copy of Offerors project work plan <u>shall</u> be submitted in Microsoft Project. However, the electronic submission of the redacted copy (proprietary and confidential information removed) shall be in PDF format.

Page 2-7 §2,1,14 Evaluation Factors, Table 2.1.14: Must Have Factors:

DELETE - Factor (6) (see below).

6.	~~(M) Offeror must submit a signed copy of the Appendix A.II Service Level Methodology.~~

Page 2-11 §2.2 Proposal Format, Table 2.2: Proposal Format:

DELETE - Contractor's Optional Appendices to Proposals (see below).

1.	~~Contractor's Optional Appendices to Proposals~~	~~Any optional information Offeror may wish to submit, not including pricing data.~~

Page 2-15 §2.3 OFFEROR PROFILE, subsection Supplier Small Business, third paragraph, first sentence:

CHANGE - "Offerors are encouraged to provide a Small Business Subcontracting Plan…", to "Offerors <u>shall submit</u> a Small Business Subcontracting Plan…".

Page 2-19 §2.4 DMAS Standard Agreement RFP 2008-02, fourth paragraph, last sentence:
CHANGE - "The Service Level methodology must be referenced in Appendix A, RFP Required Forms and Explanations" to "The Service Level Methodology that applies to the Service Level Agreement against which contractors performance is measured is defined in Appendix A.II".

Page 4-39 §4.1.4 Documentation Management, first paragraph, last sentence:
CHANGE - Appendix A.I to Appendix E.I.

Page 4-52 §4.1.7.4 Offeror Proposed Enhancements (Optional), 2nd to last sentence:
DELETE – Reference to Schedule B-2 (see below).

"The cost for the Offeror's proposed enhancements must be included in Section II, Optional Enhancements to MMIS on Schedule B-1 ~~and Schedule B-2~~".

Page 4-53 §4.1.8.1 Takeover, 5th paragraph:
CLARIFY – "Day" is defined as business day.

Appendix E.I, Page E.I -21, Matrix Header 4.1.2.18 DMAS Technology Applications:
CHANGE - Numbering for header should be referenced as 4.1.2.19(see below).

	~~4.1.2.18~~ 4.1.2.19 DMAS Technology Applications	Yes/No/ Future	

Appendix E.I, Page E.I-33, #149:
CHANGE - Replace requirements 153-157 with requirements 150-154 (see below).

149.	Is the Offeror providing an optional proposal for an Executive Support System? If yes, describe the approach and respond to the remaining requirements in this section. If the Offeror is not providing a proposal for an Executive Support System, requirements ~~153-157~~ 150-154 do not apply.		

Appendix E.I, Page E.I-34, #155:
CHANGE – Replace requirement 159 with requirement 156 (see below).

155.	Is the Offeror providing any additional proposals for recommended enhancements that would benefit the Medicaid program through cost savings, operational efficiencies, improved customer service, or some other tangible benefit such as a higher level of MITA conformance? If yes, describe each proposed enhancement as it relates specifically to the Virginia MMIS in terms of systems changes, operational changes, or a combination of both. Provide a detailed description of the scope of the change, impacted aspects of the MMIS, and the specific anticipated benefits. If the Offeror is not proposing any additional enhancements, requirement ~~159~~ 156 does not apply.		

Appendix E.I, Page E.I-34, #156:
CHANGE – Replace Section V, Other Costs with Section II, Optional Enhancements to MMIS (see below).

156.	**Does the Offeror understand that any of its proposed enhancements must be included in Section ~~V~~ II, ~~Other Costs~~ Optional Enhancements to MMIS on Schedule B-1, and that any reductions to other costs that would accompany an enhancement must also be identified?**		

Appendix F.I, Page F.I – 7, Matrix Header 5.2.1.1 Web-based Enrollment:
CHANGE - Numbering for header should be referenced as 5.1.2.1(see below).

	~~5.2.1.1~~ 5.1.2.1 Web-based Enrollment	**Yes/No/ Future**	

Appendix G.I, Page G.I-2, #18:
DELETE – Bullet #1 "CMS certified" (see below).

18.	**Does the Offeror propose a Drug Rebate system that adheres to the CMS Drug Rebate Program and meets the following criteria?** • **~~CMS certified;~~** • **meets OBRA 90 requirements;** • **DRA 2005 requirements; and** • **Keeps current with new CMS requirements as part of the proposed system.** **Please describe any criteria not met and describe the approach.**		

See Attachment 1 for list of additional questions posed by Offerors and the Department of Medical Assistance Services response.

Please Note: Some questions may take additional time in order to generate an adequate response. If you do not see a response to a question you have submitted, please monitor the DMAS and eVA website for future addendums.

Note: A signed acknowledgment of this addendum must be received by this office either prior to the due date and hour required or attached to your proposal response. Signature on this addendum does not substitute for your signature on the original proposal document. The original proposal document must be signed.

Sincerely,

Christopher M. Banaszak
DMAS Contract Manager

Name of Firm: _____

Signature and Title: _____

Date: _____

Attachment 1
RFP 2008-02, Addendum 2
Questions and Responses

Question #	RFP Cite	Vendor Question	DMAS Response
24	General	Are the current staffing levels for the current fiscal agent available?	No.
25	General	There's a reference to proprietary software. As part of the takeover, is it to be assumed that that software or any software that's required by DMAS will be part of that takeover and that transfer, regardless of the proprietary status? In order to provide whatever functionality that proprietary software may be providing today, will the Contractor get the software, or do they have to recreate that functionality?	Offerors must propose comparable solutions. Proprietary software cannot convey with the takeover.

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Question #	RFP Cite	Vendor Question	DMAS Response
26	General	Will the Commonwealth provide detail on rejection/suspension rates? What are the most common errors for initial rejection/suspension? Where in the claims process are rejections and suspensions occurring? What is the current rejection/suspension rate?	In the context of the question, we assume rejection equates to denied claims. The number of claims denied and pended is contained in the Claims Statistics in Appendix E.III. DMAS does not maintain aggregate totals on individual error counts. Virtually all error codes are set during the daily claims adjudication cycle. There are limited error codes that are set in financial processing, such as a budget pend. In fiscal year 2008, there were 36,273,733 fee-for-service claims processed. The breakdown by disposition was: - Paid: 21,633,052 - Denied: 11,351,874 - Pended: 3,253,620 - Budget Pended: 35,187
27	General	Will the Commonwealth grant access to the current plan documents such as Security and Risk Management Plans?	No.
28	General - FAS	Do any software components listed as proprietary have any licensing constraints that would make them difficult to transfer to a new fiscal agent?	See response to Question # 25.

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Question #	RFP Cite	Vendor Question	DMAS Response
29	1.1.2 (p. 1-5)	Given that Sybase is a required tool, can we assume that the license will be re-assigned and that the successful Offeror will receive the tool configuration as part of the turnover? If the configuration of the tool must be redefined by the incoming FAS contractor, will DMAS consider an alternate product solution?	The Sybase license will not be reassigned; however, the tool configuration is included in the takeover. DMAS requires Sybase as part of the takeover of the MMIS.
30	2.1.10 (p. 2-4)	Is page numbering to be consecutive through all sections or can the page numbering restart for each section?	Per section 2.1.10, page numbering is required; However, at the option of the submitting Offeror, page numbering may be consecutive through all sections or may be restarted for each section.
31	2.1.10 (p. 2-4)	Do graphics, tables and/or charts also need to be in 12-point font?	If the Offeror is responding to a table or chart in the RFP, respond in the font in which it is presented. Otherwise, all tables and charts must be in 12-point font. Graphics do not have to be in 12-point font, but Offerors must use a font that is clearly legible to reviewers without the need for amplification.
32	2.1.10 (p. 2-4)	Is 12-point font required for everything? For example, can a smaller font be used in tables, graphics, and captions?	See response to Question # 31.
33	2.1.10 (p. 2-4)	The requirement is that the proposal response be in 12-point font: However, the pricing schedules appear in the RFP in 9-point font. Should the schedules be changed to 12-point when submitting our proposal response?	Offerors may respond to pricing schedules in 9 point font.

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Question #	RFP Cite	Vendor Question	DMAS Response
34	2.1.10 (p. 2-3) 2.1.14 (p. 2-7)	Section 2.1.10 states that the Offeror is to submit a complete separate response to the requirements for the Fiscal Agent Services or Provider Enrollment Services or Drug Rebate Services. Section 2.1.14 Evaluation Factors, Item 3 on Table 2.1.14: Must Have Factors also states that "Offeror must provide a response to Section 2 and a separate response and proposal for each procurement identified. Thus, it appears that only one Section 2 is to be submitted. The Services and Support Management section of 2.3, Offeror Profile (page 2-15) differs based upon the procurement section being addressed. Is it correct to assume that different Section 2s will be required for each procurement option?	A complete and separate response must be submitted for each contract on which an Offeror is submitting a proposal, including Section 2.
35	2.1.10 (p. 2-4)	Given environmental and space concerns, will the Commonwealth reconsider to allow double-sided printing of submitted proposals?	The one (1) original hardcopy shall be printed single sided. The ten (10) hardcopies may be printed double sided.
36	2.1.10 (p. 2-4)	Are the 1" margins the minimum or maximum allowed? Is a gutter to allow room for page holes permitted?	1" margins are the minimum. Yes, a gutter is authorized to allow for page holes.
37	2.1.10 (p. 2-4)	In the electronic submission, are PDF files permitted for scanned, signed forms and other materials that aren't available in Microsoft Word or Microsoft Excel?	Yes.
38	2.1.10 (p. 2-4)	In the electronic submission, may the project work plan be submitted in Microsoft Project?	Project work plans must be submitted in Microsoft Project; However, the electronic submission of the redacted copy (proprietary and confidential information removed) must be in PDF format.
39	2.1.13 (p. 2-6)	When will DMAS post evaluation criteria on the website?	See response to question 2 in Addendum 1.

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Question #	RFP Cite	Vendor Question	DMAS Response
40	2.1.14 (p. 2-7)	Reference: 2. (M) If awarded a contract pursuant to this RFP, Offeror agrees to be bound by all the laws of the Commonwealth of Virginia and all Federal laws and regulations pertaining to this transaction. Question: Table 2.1.14 Must Have Factors lists several factors that don't seem to be mapped to the proposal structure. Please clarify where in the proposal DMAS expects to see the statements Required by item (2), (4), (6), and (7)?	Table 2.1.14, "Must Have Factors" (2), (4) and (7) are confirmed in RFP 2008-02, Table 2.4, Supplier Declaration, 5th row "Does Supplier agree with and comply with all the "must have factors" listed in the Table 2.1.14 of Section i) of this RFP?". Written responses to "Must Have Factors" (4) and (7), Takeover approach plan, are to be included in Offeror's response as identified in Table 2.2, Proposal Format. Table 2.1.14, "Must Have Factor" (6) has been deleted.
41	2.1.14 (p. 2-7)	The RFP states that "Offeror must submit a signed copy of the Appendix A.II Service Level Methodology." However, Appendix A.II does not have a signature page nor is it referenced in Table 2.2: Proposal Format on page 2-11 of the RFP. Please advise.	See response to Question # 40.
42	2.1.14 (p. 2-7)	Section 2.1.14 Evaluation Factors mentions that for the Small Business Subcontracting Plan, the commission can account for up to 20 percent of the RFP total points. Is there a particular threshold that DMAS is looking to meet?	Please see response to questions # 3 and #5 in RFP 2008-02, Addendum 1, Attachment 2, Question and Responses.

Attachment 1
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Questions and Responses

Question #	RFP Cite	Vendor Question	DMAS Response
43	2.1.18 (p. 2-9)	Reference: Requirements Matrices Question: To ensure Offeror proposals are structured similarly and thereby improve the ease of evaluation for DMAS, please clarify the preferred structure for responding to the Requirements Matrix (Exhibit E.I, F.I and G.I). Paragraph 2 on page 2-7 describes a requirement/response approach for all questions. Paragraph 3 describes how to complete the matrix. Paragraph 2 on page 2-10 seems to indicate that only open-ended questions in the matrix should have a narrative response which is limited to 5 pages. Is it DMAS' intent to have Offerors complete the matrix (with Y, F, and N, plus comments) and then, in a proposal section following the matrix, present responses to each open-ended question in the order presented in the matrix using a requirement/response format?	The required structure is stated in section 2.1.18, which explains the codes and comments columns. Longer explanations are allowable only when the requirement asks for additional information. Yes, to the extent the comment fits in the matrix it should be added there. Lengthy responses should be in a separate document following the matrix with the requirement number being responded to clearly identified and the response listed in requirement number order as presented in the matrix.
44	2.1.18 (p. 2-9)	Reference: If applicable, Supplier is to provide in the column labeled "Comments" an explanation of how it will fulfill the requirement. Question: When responding "Yes" on the Requirements Matrix, when is it applicable to provide a comment? Does DMAS prefer that comments are inserted for every Yes response?	Offerors should provide additional information only when the requirement asks for additional information.

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45	Table 2.2 (p. 2-11)	Reference: Contractor's Optional Appendices Question: What should be included here? Will this optional information be evaluated by DMAS?	Contractor's Optional Appendices is removed from Table 2.2. It is no longer part of Offeror's Proposal.
46	2.2 (p. 2-11)	Table 2.2: Proposal Format states the Offeror is to provide a copy of a completed eVA registration confirmation. We are already a registered vendor of eVA. How do we obtain a registration confirmation?	Confirmation should have been received when a vendor initially registered with eVA. If unavailable, Offerors may go to the eVA website and perform a search of their firm and submit these results in lieu of the registration confirmation. The search tool is located on the eVA homepage (www.eVA.virginia.gov) under "eVA Tools". Select "Vendors" and enter your firm's name in the search field. eVA issues should be directed to eVA Customer Care at **866-289-7367 or 804-371-2525** or **Email:** eVACustomerCare@dgs.virginia.gov
47	2.3 (p. 2-13)	Reference: The Offeror shall provide three (3) customer references, with contact names, email addresses … which DMAS may use in reference checking. Question: If an Offeror is a partnership of firms, where one firm is the prime contractor and the other(s) are subcontractors, will DMAS allow these three references to include references of the subcontractor(s) as well as of the prime contractor?	No
48	2.3 (p. 2-12) 4.2.7 (p. 4-74)	Section 2 asks for all of the locations where work will be performed. Section 4 restricts where work can be performed. Can support and backup functions take place outside of a main operations center within 15 miles of the state office?	Yes. Support and back-up functions can take place outside of the primary operations center located within 15 miles of the DMAS facilities at 600 E. Broad Street.

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Question #	RFP Cite	Vendor Question	DMAS Response
49	2.3 (p. 2-13)	As portions of a certified, audited financial statement may not be in the required 12-point font, will they be exempt from this requirement (RFP Reference number 2.1.10)?	Yes.
50	3.4.1 (p. 3-4)	Can the Commonwealth provide a detailed job schedule for the daily, weekly, and monthly cycles on all batch and on-line jobs running on the mainframe environment, including internal and external data?	Refer to Appendix D, Technical Architecture, Section 4 MMIS Production Schedule.
51	4, 5, and 6	Reference: Fiscal Agent Services, Provider Enrollment Services, and Drug Rebate Services Question: It appears that Sections 4, 5, and 6 contain information for Offerors about current operations and procedures and do not require a specific narrative response as the information is presented in question format within the corresponding Requirements Matrix (Exhibit E.I, F.I and G.I). Is that correct?	Yes
52	4.1.1.1 (p. 4-5)	Will the Commonwealth please provide the detailed breakdown of claim suspensions and denials with reason codes, volume and how it is reported?	See response to Question # 26.
53	4.1.1.4 (p. 4-8)	Can the National Council for Prescription Drug Programs (NCPDP) universal paper form be used in place of the proprietary form currently in use?	No, the proprietary form will continue to be used.
54	4.1.1.4 (p. 4-8)	Will the DMAS elaborate on the relationship and responsibilities of an increase prior authorization contractor based on new Drug Utilization Review (DUR) alerts.	Though DMAS may request additional prospective DUR alerts in VAMMIS, if the claim disposition is set to deny, the Prior Authorization/PDL contractor will be responsible for reviewing criteria and determining the appropriate action regarding prior authorization.
55	4.1.1.4 (p. 4-8)	Will the DMAS supply the maximum number of quarterly intervention letter/profile mailings and telephone interventions?	We can not provide a maximum number because the volume varies, but generally there are fewer than 100 intervention/provider profiling letters sent monthly.

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Question #	RFP Cite	Vendor Question	DMAS Response
56	4.1.1.6 (p. 4-10)	Section 4.1.1.6 states that "Contractor must provide certain services that are not the responsibility of any particular business unit discussed above. These services include […]" Can DMAS elaborate on this?	See Appendix E.I requirements 69 – 71.
57	4.1.2.6.1 (p. 4-22)	Who is the contractor that handles PA reviews, and when does that contract expire?	The question has no bearing on this RFP.
58	4.1.2.7.2 (p. 4-25)	Who is the current PDL contractor? Will they current PDL contractor provide weekly PDL drug file information? When does that contract expire?	The question has no bearing on this RFP.
59	4.1.4 (p. 4-39)	In the Documentation Management section of the RFP, the first paragraph last sentence states, "Contractor requirements are described in Appendix A.I." However, Appendix A.I is the Small Business Subcontracting Plan. Where are these requirements found?	The reference to Appendix A.I is incorrect. The reference should be to Appendix E.I
60	4.1.6.4 (p. 4-49)	Will DMAS please provide information on the licensing of the Remedy Action Request System (ISR Tracking System)? What licenses are required to be purchased by non-incumbent vendors?	The Remedy Action Request System products are now owned by BMC Software Inc. (www.bmc.com), titled as the BMC Action Request System. Refer to table 3.4.1 #9 for Remedy version in use and the DMAS user count. All DMAS Remedy users can create, retrieve, and update ISRs. The Offeror will need to determine how many licenses it requires to support its proposed processes.
61	4.1.7 (p. 4-49)	There is a distinction made between enhancements which are mandatory and ones which are optional. What are the implications between those two, in particular the optional aspect of the tech support system in 4.1.7.3, especially as it relates to the evaluation process? How will that be handled with regard to evaluation? What are the implications of something being optional as opposed to mandatory?	Optional items do not factor into the evaluation.

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Questions and Responses

Question #	RFP Cite	Vendor Question	DMAS Response
62	4.1.7 (p. 4-49)	If the optional enhancements do not factor into the evaluation, then why would there be interest in receiving information on an optional item?	Because DMAS would potentially want to avail ourselves of the option.
63	4.1.7.3 (p. 4-51)	How many total users will there be of the Executive Support System (ESS)? How many users would be classified as users that will view and refresh reports only? How many users would be classified as users that will create new ad hoc reports but are not considered power users? How many users are considered power users that need advanced report writing capabilities?	Since DMAS does not currently have an ESS, the numbers given below are for estimation purposes only. Users that will view and refresh reports: total 25; concurrent 5. Users that will create new reports but are not power users: total 50; concurrent 5. Power users: 25; concurrent 10.
64	4.1.7.4 (p. 4-52) Appendix E.I # 156 (p. E.I-34)	The matrix refers to costs being included on Section V on Schedule B-1. RFP Reference number 4.1.7.4 the first paragraph refers to costs being included on Section II on Schedule B-1 and B-2. Which is correct?	The costs for Offeror Proposed Enhancements should be included in Section II on Schedule B-1. The reference to Schedule B-2 in section 4.1.7.4 should be deleted and the reference to Section V in Appendix E.I # 156 should be replaced by Section II.

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Question #	RFP Cite	Vendor Question	DMAS Response
65	4.1.8.1 (p. 4-53)	Reference: DMAS will provide comments on the initial delivery no later than the 10th day after the day of the deliverable receipt date. Comments will be returned either in a comment tracking spreadsheet or in the MS-Word document with "Track Changes" turned on. The Contractor will provide a revised version back to DMAS no later than the 5th day after the day of the deliverable response receipt date. Thereafter, comments will be responded to by DMAS or the Contractor by the 5th day after the day of the resubmission date, until DMAS accepts the deliverable. Question: Does "day" refer to business day?	"Day" refers to business day.
66	4.2.1 (p. 4-59)	Please confirm that only key staff resumes would be evaluated and any additional non-key staff resumes will not be evaluated? We request that the RFP not allow for any additional resumes to be included, as this would give an unfair advantage to the incumbent vendor team.	Only key staff resumes will be evaluated.
67	4.2.2 (p. 4-60)	The Key Staff Organization Chart depicts the Business Quality Assurance Manager reporting to the Executive Account Manager, but Table 4.2.3.5 has the position reporting to the Business Operations Manager. Which is correct?	See response to question 13 in Addendum 1.
68	4.2.5.1.1 (p. 4-69)	Does the 50,000 hours of system enhancement activity include full change management lifecycle activities, such as project management, documentation updates, testing, etc.?	Yes, the 50,000 hours of system enhancement activity include all change management lifecycle activities, such as project management, documentation updates, testing, etc.

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Question #	RFP Cite	Vendor Question	DMAS Response
69	4.2.7 (p. 4-74)	Section 2.3 (page 2-12) requests the following 'Offeror shall describe the geographic locations of its firm at the national, regional, and local levels, as applicable. Offeror shall identify all locations that will be used to support a resultant contract and the operations handled from these locations (particularly note any Virginia-based locations that will be used). Offeror should clearly identify any overseas locations, which may be used to support the resultant contract or any related transitions'. Section 4.2.7 states 'The Fiscal Agent Services contract requires that the contractor perform all services, except those that are subcontracted with DMAS approval, within (15) miles of the DMAS offices'. Will DMAS please confirm that the Offeror is allowed to propose work locations in support, back-up, non core business hours, or center of excellence roles in addition to the primary operations center located within 15 miles of the DMAS facilities at 600 E. Broad Street.	See response to Question # 48.
70	4.2.7 (p. 4-74)	The RFP states that "the fiscal Agent Services contract requires that the Contractor perform all services, except those that are subcontracted with DMAS approval, within fifteen (15) miles of the DMAS offices…". Does this mean that with DMAS approval, the contractor may perform some services at a location outside the 15-miles radius?	See response to Question # 48.

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Question #	RFP Cite	Vendor Question	DMAS Response
71	6 (p. 6-1)	Does the Commonwealth define day-to-day operations of supplemental rebate to include the negotiation and contracting of supplemental rebates?	No. The supplemental rebate contracts are not negotiated by the FA. DMAS will provide the required information to the vendor to administer the rebate operations.
72	Appendices E.I, F.I and G.I	In Appendix E.I, F.I, and G.I, can DMAS clarify how it wants vendors to use the table in formatting their responses? Does DMAS want even lengthy responses given within the table format?	See response to Question # 43.
73	Appendices E.I, F.I and G.I	Some of the requirements state, "Please indicate yes". Is "yes" a sufficient answer for some of the requirements?	See response to Question # 44.
74	Appendix E.I # 15 (E.I-6)	Is this MMIS bank accounts reconciliation handled systematically or manually by current fiscal agent?	It is DMAS' expectation that the Offeror will describe their reconciliation approach to this requirement.
75	Appendix E.1 #16 (p. E.I-6)	Does this require vendors to create and mail the paper payment checks to providers and payees? If so, does the check need to be inserted into the same envelope as the paper RA when mailed?	Yes. This requires vendors to create and mail the paper payment checks to providers and payees. The check and RA are inserted into the same envelope when mailed if the pay-to address and the RA address are the same. The pay-to address is where the checks are sent, the RA address is where the RAs are sent. They are usually the same but could be different.

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Question #	RFP Cite	Vendor Question	DMAS Response
76	Appendix E.I #26 (p. E.I-8)	Will the Commonwealth confirm that only claims related to a Preferred Drug or one that does not require prior authorization will be handled by the contractor during non-business hours?	Under this contract, the FA is responsible for answering questions related to pharmacy except for the Preferred Drug List (PDL) and prior authorization. This includes for example, but is not limited to POS transmission errors, claim reversals, any claim edit questions, claim related prospective DUR alerts, new requirements as required by law such as tamper resistant prescriptions, and all other related questions. All prior authorization reviews are the responsibility of the Prior Authorization/PDL contractor, which is a separate contract from the FA contract.
77	Appendix E.I #36 (p. E.I-9)	What is the DMAS' current customer tracking system? Is it transferable?	The current customer tracking system is a proprietary system and is non-transferable.
78	Appendix E.I #30 & 40 (p. E.I-9)	How many DUR board meetings and P&T meetings is the representative expected to attend per year?	The FA leads four DUR Board meeting per year and is required to attend all P&T committee meetings as defined by 2008 Appropriation Act, Chapter 879 of the Virginia Acts of Assembly.
79	Appendix E.I #44 - 46 (p. E.I-10)	Because it is not an OBRA 90 requirement, does the Retro program have to have a review panel from the community?	DMAS requires that the review panel be from the community.
80	Appendix E.I #62 (p. E.I-11)	Does the current POS solution provide the capability to identify and trap potentially duplicate claims submissions?	No.
81	Appendix E.I #76 (p. E.I-16)	Will the current FA turn over current business rules and other configuration files being used in McKessen ClaimCheck?	Yes.
82	Appendix E.1 #77 (p. E.I-17)	Does the 24-hour help desk currently exist? Is it actively manned 24 hours, or is it on pager standby after hours?	It is DMAS' expectation the Offeror will describe their 24-hour help desk approach to this requirement.

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83	Appendix E.I (p. E.I-21)	The matrix header shows "4.1.2.18 DMAS Technology Applications." The SOW header for 4.1.2.18 shows "SAS Applications." It appears a typo occurred on the matrix and 4.1.2.18 should have been 4.1.2.19. How should the open-ended questions be referenced?	The matrix header was incorrect it should be 4.1.2.19 DMAS Technology Applications.
84	Appendix E.I #149 (p. E.I-33)	Reference: Req #149. If the Offeror is not providing a proposal for an Executive Support System, requirements 153-157 do not apply. Question: The reference to requirements 153-157 appears to be incorrect. Should this refer to requirements 150-154 instead?	Yes, the requirement should state "If the Offeror is not providing a proposal for an Executive Support System, requirements 150-154 do not apply."
85	Appendix E.I #155 (p. E.I-34)	Reference: Req #155: If the offeror is not proposing any additional enhancements, requirement 159 does not apply. Question: The reference to requirements 159 appears to be incorrect. Should this refer to requirements 156 instead?	Yes, the requirement should state "If the offeror is not proposing any additional enhancements, requirement 156 does not apply."
86	Appendix E.II #1 (p. E.II-8)	Reference: Req #1: (Performance Target) Process paper payment requests from receipt through adjudication ≤ than 72 hours Question: Does this performance target exclude pended claims?	Yes.
87	Appendix F.I #2 (p. F.I-1)	In order to accurately scope the PES imaging requirement, will DMAS please provide the annual document count of all provider enrollment related documents received?	Refer to Section 7 Appendix F.III Provider Enrollment Services Statistics. DMAS estimates 104,000 pages are received by the current PES contractor on an annual basis.

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Questions and Responses

Question #	RFP Cite	Vendor Question	DMAS Response
88	Appendix F.I #13 (p. F.I-3)	This requirement states: "Maintain and provide a list of MEDALLION enrollment activities to DMAS." Will DMAS please confirm that the activity reports currently are produced by the VA MMIS to support this requirement?	No, the report is not an MMIS generated report it is an ad-hoc report.
89	Appendix F.I #15 (p. F.I-4)	This requirement states: "Use DMAS approved electronic or imaging databases for address validations and comparisons"? Please list the DMAS approved solutions in use today.	The approved electronic or imaging databases include the Offeror's proposed solutions, the MMIS provider database, and the ECM.
90	Appendix F.I #s 26-37 (p. F.I-7)	In this Appendix, the numbering jumps from Section 5.1.2, Application Support to Section 5.2.1.1, Web-based Enrollment. Are there missing requirements?	No, the Web-based Enrollment section reference number is incorrect. It should be section 5.1.2.1.
91	Appendix F.I (p. F.I-7) 5.2.1.1 (p. 5-19)	Appendix F.I Reference number 5.2.1.1 does not match SOW reference number. Which number needs to be used in responding to open-ended questions?	See response to Question # 90.
92	Appendix F.I #77 (p. F.I-15)	The items referenced in this requirement appear to be written to support the transfer of a legacy solution. In the case where COTS or licensed products are used as components of the Provider Enrollment solution, are there turnover requirements that pertain to the product components?	The turnover components required will not include COTS packages or license products used as components of the Provider Enrollment solution; However, any configuration of products or development paid for as part of the contract will be required to be turned over.

Attachment 1
RFP 2008-02, Addendum 2
Questions and Responses

Question #	RFP Cite	Vendor Question	DMAS Response
93	6 (p. 6-1)	The RFP states that "The Contractor will provide day-to-day operations in support of CMS and supplemental rebate invoicing, reconciliation, and dispute resolution." Please confirm that the state negotiates and maintains supplemental rebate contracts and will provide the required information to the vendor to administer the rebate operations.	The supplemental rebate contracts are not negotiated by the FA. DMAS will provide the required information to the vendor to administer the rebate operations.
94	6.1.2.1 (p. 6-2)	Will the Commonwealth be providing the Unit Rebate Amount at the NDC level for all supplemental rebates to be used in dispute resolution for quarters that were before contract award?	Yes. DMAS will provide the system data for Unit Rebate Amounts at the NDC level for all supplemental rebates for quarters before the contract award.
95	6.1.2.1 (p. 6-2)	The RFP states that "The application should convert Healthcare Common Procedure Coding System (HCPCS) codes and units using a Virginia specific multi-source crosswalk". Does the state maintain the multi-source crosswalk or does the state intend the PBM vendor to maintain that crosswalk?	The DRS Offeror is to maintain the crosswalk.
96	Appendix G.I #18 (p. G.I-2)	Please define what is expected regarding CMS certification? Our understanding is that CMS does not certify drug rebate systems. Is DMAS asking for a drug rebate system that is being used in conjunction with a CMS-certified MMIS? Please clarify.	The bullet requiring the system to be CMS certified is removed.
97	Appendix G.I #22 (p. G.I-3)	Is the single-source HCPCS cross-walk just to be maintained up to July 2008, or does the Commonwealth have a reason to maintain beyond this date? CMS has not approved anyone going beyond July 2008. Clarification: Please clarify the reason for maintaining a single source HCPCS cross-walk? Can Offerors provide a complete list of all HCPCS codes, including single and multi source HCPCS cross-walk?	No, The single-source cross-walk is to be maintained by the FA until DMAS provides further notice. DMAS tracks rebate dollars based on single source and multi-source drugs.

Attachment 1
RFP 2008-02, Addendum 2
Questions and Responses

Question #	RFP Cite	Vendor Question	DMAS Response
98	Appendix G.I #23 (p. G.I-3)	Does the HCPCS Code need to be maintained at the NDC level, or the product level such as GCN or GCN sequence number?	HCPCS code must be maintained at the NDC level.
99	Appendix G.I #30 (p. G.I-4)	Can we anticipate receiving the primary insurance paid amount at the detail level on an institutional claim?	No.
100	Appendix G.I #31 – 32 (p. G.I-4)	Would this conversion only be for future claims or does the state require the vendor to perform these conversions on historical claims? If historical claims are included, how many historical claims would be included?	Conversion is expected on future claims only.
101	Appendix G.I #41 (p. G.I-4)	Does the state of Virginia include manufacturers in their supplemental program who do not participate in the federal rebate program?	No.
102	Appendix G.I #44 (p. G.I-5)	What media is the Commonwealth expecting to be the choices for the manufacturers? Is the media selection for invoices paper, diskettes, and CD-ROM?	As stated in the requirement, the media are requested by the manufacturer. Media currently supported are paper, diskettes and CD-ROM.