

SP-16-0228, NET Transportation

#	Question	Answer
1.	We intend to use subcontractors in the Regions we pursue, but at this time we haven't secured any potential subs. Is it a requirement to have a list of potential sub-contractors to submit this bid response or can we provide a list of potential sub-contractors prior to an award/start of contract?	It is recommended by OSP that responding vendor's provide information as stated in the RFP. Section 1.12 <u>Subcontractors (A)</u> states "Vendor must complete, sign and submit the Proposed Subcontractors Form included in the Technical Proposal Packet to indicate vendor's intent to utilize, or to not utilize, subcontractors.
2.	Page 3 – Population 3 Newly eligible Adults who have been deemed medically frail. Question: What constitutes medically frail? What is the expected increase in numbers for this category for each region at such a low reimbursement rate? Who determines which recipients are medically frail?	Someone who needs assistance with activities of daily living (ADL) and also could need access to long term services and support or home and community based services. Unknown The medically frail questions are now being asked on the Medicaid application. Recipients can also be determined to be medically frail through the medical assessment provided by DHS's medical review team.
3.	Page 5 – C – Additional Copies and Redacted Copy Statement: In the past it has only been suggested that we supply a redacted copy. Question: Are Redacted copies now a requirement?	Redacted copies <u>should</u> be submitted. Section 1.7 Response Documents, Section C # (2) states how the redacted copy is to be identified.
4.	Page 7 – Joint Proposal Question: Is there specific verbiage required when submitting joint proposals? Are all parties included in the Joint Proposal required to meet all requirements of this RFP including supplying a current Dun and Bradstreet in good standing? Are all parties required to submit all attachments required by this RFP? Are all parties of the joint venture required to be noted on all subcontractor contracts making it a joint agreement?	Section 1.14 <u>Prime Contractor Responsibility</u> Section (A) states that "A joint proposal by two or more vendors is acceptable. However, <u>a single vendor must be identified as the prime contractor</u> " Section 1.14 Prime Contractor Responsibility Section (B) states that "The prime contractor shall be held responsible for the contract and shall be the sole point of contact".

5.	<p>Page 14 – Summary of Determination Pop 3</p> <p>Question: How do we know who is medically frail in Population 3 and will it be on their Medicaid print out? Is medically frail a new code not yet listed on the Recipient Aid Categories Sheet?</p>	<p>Anyone in the 06 aid category that shows MEDICAID as the Carrier as seen in the MMIS system used to verify eligibility is medically frail.</p> <p>They will be in fee for service with a carrier ID of 00000</p>
6.	<p>Page 25 – Scheduled Delivery Standards – 2nd Bullet – Beneficiaries will be advised of their pickup times at the time the request is made.</p> <p>Question: How can this be accomplished when you will not know which route the appointment will be placed on at the time they call meaning that there is absolutely no way that you can determine their pick up time. This is most especially true if they are on a long distance trip shared ride. Pick up times are determined the day before during scheduling at which time the drivers contact the recipients and advise them of their pickup up time for the following day.</p>	<p>Beneficiaries are given an <u>estimated</u> time of pick-up at the time of the reservation. The beneficiary must be contacted the day before, of the precise pick-up time.</p>
7.	<p>Page 31 – Gatekeeping</p> <p>Question: What would be the gatekeeping recommendation for parents who have transportation and take other children to school and appointments, but place their behavioral challenged child on our van and expect us to provide them transportation. What would be the gatekeeping recommendation for parents who have transportation and work, but use NET for their children so they are not late for work? In determining if the beneficiary is eligible, many of the facilities we transport to have their own vans (mostly children's facilities and long term care facilities) but want to pick and choose who they carry.</p>	<p>The standards are the same for accessing needs for services for ALL beneficiaries.</p> <p>Availability of transportation is the main gatekeeping factor. Convenience of using NET as opposed to available personal transportation is not a consideration in determination of eligibility for net services.</p>

8.	<p>Page 32 - #6 The beneficiary or their representative must attest by the close of business of the last Wednesday of the preceding month that the beneficiary continues to have the need for NET services. This determination must take into consideration the beneficiary's ability to provide for his/her transportation outside of the NET program, as well as the beneficiary's needed level of transportation.</p> <p>Question: Are you stating that we are now required to call each and every recipient each month and get their attestation over the phone? This will be very labor intensive and cause Providers to increase their staff to cover the sheer number of attestations required!</p>	<p>The intent was to hold the Medicaid beneficiaries accountable for making their own reservations.</p> <p>No. This means that absent such attestation the eligibility must be re-determined</p>
9.	<p>Page 32 - #7 Medicaid will not provide or pay for transportation if the beneficiary could have arranged for transportation on his or her own.</p> <p>Question: Who determines and verifies if they could have arranged transport, how will you track this, and will you audit and chargeback based on your findings?</p>	<p>All calls are recorded. The NET Monitoring Contractor performs random audit of all calls and specific calls if an incident has occurred.</p> <p>The Broker should be accessing the beneficiary's needs for services on each call.</p>
10.	<p>Page 32 - #9 The Broker must confirm that the authorized representatives who are scheduling transportation are: associated with agency, provider, other entity to which transportation is or may be requested.</p> <p>Question: What do you define as confirming this info and how do we do this?</p>	<p>The beneficiary must attest who their authorized representative is.</p> <p>Verification would be a comparison of who is scheduling the reservation with the beneficiaries documented information.</p> <p>All calls are recorded and may be audited.</p>
11.	<p>Page 32 - #10 The Broker will only schedule NET services with the beneficiary and the authorized representatives that are not associated with any: Agency, Provider, any other entity to which transportation is requested.</p>	<p>See question 10.</p>

	<p>Question: How do we verify this information? Anyone can say anything on the phone and there is no way to verify this. If we are recorded on the phone call as asking the questions, will we be held liable for any untruths that were supplied to us?</p>	
12.	<p>Page 32 - #11 Broker must confirm that the authorized representatives who are scheduling transportation by asking are you associated with : Agency, Provider, any other entity to which the transportation is requested.</p> <p>Question: Again, how can we verify this information to be true and correct and will we be held liable for untruths supplied to secure the transportation.</p> <p>Question: What about adult mental health facilities that currently are allowed to set up transportation for their recipients as their recipients are not able to do this on their own?</p>	<p>See question 10.</p> <p>The reason for allowing only the beneficiaries or their authorized representatives to schedule rides is that these two categories of individuals are familiar with beneficiary's need for transportation</p>
13.	<p>Page 38 – Vehicle Camera</p> <p>The following is the minimum requirements for video systems that must be in each transportation vehicle used on the NET contract.</p> <p>Question: The minimum requirements listed are not equal to the current video systems installed in many vans throughout the state and purchased from AngelTrax. This means that those providers that have already went to the expense of adding video surveillance systems to their equipment will have to pay to have the systems removed, and then purchase and re-install new systems. Will DMS consider accepting the current systems already installed with the understanding that all new purchases meet your new guidelines?</p> <p>Question: Because the average cost of the new required video systems will be approximately \$3000.00 per van, how long will you give providers to have them installed as it takes time to order, set up installation, schedule a time when vans are not in use to have the</p>	<p>The required video systems MUST be in good working order each day the vehicle is used on the NET contract. If the video systems are not fully operational, the vehicle may not be used to transport beneficiaries until the video system is in good working order.</p> <p>Cameras purchased within the past 18 months will be acceptable with the following conditions: 1) Forty-five days of the most recent video must be stored in a secure location and be accessible anytime for review by DHS or any DHS agent.</p> <p>(1) If a provider's current camera system does not have 45 days of storage capacity, current systems must have the capability to upload their maximum storage capacity to a secure server in increments that provide a total of 45 days of reviewing capacity, 2) If current systems do not have GPS on the camera, a separate, operational GPS device must be on the vehicle at all times, 3) all new camera systems must meet RFP specifications.</p>

	<p>installations completed, in addition to the costs that many smaller providers will not be able to afford. Will DMS consider giving 6 months to a year for smaller providers to comply?</p> <p>Question: It is our experience over the last 3 years with the video systems, that there is no way to verify they are in good working order until a video is pulled and viewed. Only then do you find out if they were recording correctly or not. How can you hold a Broker/Provider accountable for something they have no control over? On many rural routes the increased vibration caused by the rough roads are enough to cause issues with the camera systems.</p>	<p>Camera/GPS systems must be installed and operational at the start of the contract.</p> <p>Camera/GPS systems must be in working order at all times while Medicaid recipients are in the vehicle.</p>
14.	<p>Page 46 – The Broker shall verify beneficiary’s eligibility for NET transportation and is subject to a \$500 fine per each occurrence and \$100 each day of noncompliance. Question: If you have asked the correct questions and the recipients were untruthful with their answers, are you still subject to this \$500 fine?</p>	<p>It must be noted this issue will have to be determined on a case by case basis.</p> <p>No. If the broker did everything as required under the RFP, the Broker will not be subject to penalty only because client did not provide truthful information. It must be noted this issue will have to be determined on a case by case basis.</p>
15.	<p>HOW WILL YOU KNOW IF SUBCONTRACTORS LISTED IN THE PROPOSALS HAVE ACTUALLY AGREED TO SUBCONTRACT WITHOUT SIGNED AGREEMENTS?</p> <p>PAGE 6- 1.12 SUBCONTRACTORS</p>	<p>Section 1.12 <u>Subcontractors</u> (B) stated that “Additional subcontractor information may be required or requested in following sections of the Bid Solicitation or in the Information for Evaluation section provided in the Technical Proposal Packet”.</p>
16.	<p>WHAT DETERMINES A MEDICALLY FRAGILE BENEFICIARY?</p> <p>PAGE 15- 2.5 BROKER RESPONSIBILITY- B. ADHERE TO PROGRAM GUIDELINES #3</p>	<p>See # 2</p>
17.	<p>DO DRIVERS/ATTENDANTS NEED THE ARKANSAS DRIVERS LICENSE AND THE GOVERNMENT ISSUED ID?</p> <p>PAGE 21- 2.9 DRIVER & ATTENDANT CONDUCT</p>	<p>No. All drivers must have a valid driver’s license and all attendants must have a valid driver’s license OR a government issued ID.</p>

18.	<p>THE CAPITATED RATE IS SUBJECT TO CHANGE JANUARY 1, 2018-SO THE RATE THAT IS BID IN THE PROPOSAL COULD CHANGE AT THIS TIME?</p> <p>PAGE 28- D. RATE ADJUSTMENTS</p>	<p>The Annual Adjustment Factor (AAF) date will be changed to July this will coincide with the contract year in the RFP. The first calculated AAF will be implemented July 1, 2018. The AAF will equal 1.00 for all regions from July 1, 2017 – June 30, 2018. The AAF influences PMPM rate paid, but does not change the rate that is bid – See page Broker's Monthly Payment Rate Calculations.</p>
19.	<p>ARE MILES TRAVELED GOING TO BE CONSIDERED IN THE DECISION MAKING PROCESS FOR ANNUAL ADJUSTMENT RATES? (ALL TRIPS ARE NOT THE SAME)</p> <p>PAGE 28- D. RATE ADJUSTMENTS #S 1-2</p>	<p>Yes</p>
20.	<p>HOW CAN WE VERIFY BENEFICIARY'S APPOINTMENTS IF WE CAN NOT DISCUSS RELATED ISSUES WITH AGENCIES OR PROVIDERS?</p> <p>PAGE 32 - F. AUTHORIZED REPRESENTATIVE #3</p>	<p>The Broker is only verifying the time, date and location of the scheduled appointment.</p>
21.	<p>DOES THE FOOTAGE HAVE TO BE KEPT ON THE ACTUAL HARD DRIVE FROM THE DVR SYSTEM FOR A MINIMUM OF 45-DAY PLAYBACK VIEWING? (OR CAN WE BACK FOOTAGE UP AND STORE FOR THE 45 DAY REQUIREMENT)</p> <p>PAGE 38- Q. VEHICLE CAMERA</p>	<p>45 days of footage can be backed up and stored in a secure location..</p> <p>All data must be retrievable for auditing purposes.</p>
22.	<p>DOES THE STATE HAVE A SYSTEM BEING USED IN OTHER TRANSIT VEHICLES THEMSELVES, MEETING THESE SPECS? IF SO, CAN YOU POSSIBLY TELL US. (THERE IS A DIFFERENCE BETWEEN STATIONED FACILITY CAMERAS AND MOBILE CAMERAS.)</p> <p>PAGE 38- Q. VEHICLE CAMERA</p>	<p>Unknown</p>
23.	<p>ON PAGE 40- C. DRIVER QUALIFICATIONS (CRIMINAL RELATED OFFENSES) # 3 TALKS ABOUT ANY DRIVER CONVICTED OF A FELONY DURING THE LAST <u>FIVE YEARS</u> SHALL NOT DRIVE BUT #4 SAYS A PERSON WHO HAS BEEN CONVICTED OF A CRIME LISTED SHALL NOT DRIVE. NEED SOME CLARIFICATION PLEASE.</p> <p>PAGE 40-C. DRIVER QUALIFICATIONS (CRIMINAL RELATED OFFENSES)</p>	<p>Drivers/attendants that have been convicted of felony <u>not listed</u> on the ACA 21-15-101 have a (5)-year statute. If the felony or misdemeanor they are convicted of <u>is</u> on the ACA 21-15-101 list, they cannot drive regardless of how long ago the crime was committed.</p>

24.	IF YOU GET A VIOLATION DUE TO AN ACCIDENT ON THE SAME DATE, IS THIS CONSIDERED 2 VIOLATIONS FOR REMOVAL OF SERVICE? PAGE 41- 2.33	Yes.
25.	IS THERE AN APPEAL PROCESS FOR FINES? PAGE 43- A. PERFORMANCE MEASURES-TIMELY TRANSPORTATION EXAMPLE: DRIVER IS LATE DUE TO ACCIDENT THAT BACKS UP TRAFFIC.	DHS Administrative Reconsiderations and Appeals Policy is sited under section 161.200 of the Medicaid Manual
26.	What is the response time requirement for will calls?	Refer to Page 25, 2.20 Scheduled and Delivery Standards, B. The Broker will monitor return trips to ensure beneficiaries are delivered home in a timely manner. All complaints for excessive wait time are investigated
27.	Who are the current brokers by region?	Listing of current brokers can be found at: https://afmc.org/wp-content/uploads/2016/07/NETBroker-Map_Eng_Span.pdf
28.	What is the current pricing by region?	Current PMPM rates are not comparable to future PMPM rates as current PMPMs do not separate the populations identified in this RFP. Additionally, regions have been redefined.
29.	Please clarify if the answering of the call within 5 rings is done by a live person, or would IVR be acceptable. Also, what are the ASA, Talk Time, % of calls abandon goals?	Interactive Voice Response (IVR) is acceptable. Additional data will not be provided.
30.	What is the call volume history for reservations, and will call?	Additional data will not be provided.
31.	Please verify telephony reservation hours of operation.	Minimum hours of 8:00 a.m. until 5:00 p.m., Central Time, Monday through Friday, except on days recognized as State Holidays.
32.	Will specialty numbers be required for facilities? Nurse practitioners etc...	No.
33.	For quality assurance purposes, the Broker must have a system in which phone calls are recorded and maintained for up to one (1) year from the date of the call. Please verify the capture refers to voice only.	Yes.

34.	What are the top 2 non English speaking languages needed?	Spanish and Marshallese.
35.	Will the state provide a downloadable data file containing the enrollments or will we be accessing an enrollment file via a web portal?	No Broker must check eligibility on the Arkansas Medicaid Website
36.	Regarding "separate operation", do agents handling other transportation services have to be in a separate facility or designated space? If so, is separate security entrance required for project?	DMS cannot answer general questions about the office layout, but DMS expects the handling of the Medicaid Beneficiary information is accomplished in a secure manner to ensure confidentiality of this information.
37.	Please confirm: All transportation must occur between Mon-Fri from 8am-5pm. Exception: Dialysis, Chemo, Radiation can also be scheduled Saturday from 8am-5pm. On the Encounter file we have to indicate trips that occurred after hours. <u>What trips are permitted after hours?</u>	Only the central business office hours are Mon-Fri from 8am-5pm. NET services are predicated on the needs of the beneficiary. Scheduling is based on the beneficiary's actual appointment time which may occur prior to 8:00am or after 5:00pm.
38.	Confirm level of service only includes: Ambulatory, Wheelchair or Mass Transit.	Yes.
39.	Pop 1 and Pop 3 state that there are no trip limits but Pop 2 doesn't seem to state this. Can we confirm if Pop 2 also has no limits?	Pop 2 has an 8 trip limit see page 14 Population 2, Net Services and page 32 Beneficiary Extension of Transportation Services
40.	Is there a list of approved appointment types?	No.
41.	How soon can we get recent/future trip information to check for volume differential from what was reported?	When claims are submitted electronically, a response is sent regarding the acceptance of the claim. A Remittance Advice (RA) is produced in the weekend cycle and available for providers on Monday. The RA will indicate which claims were adjudicated. Only submitted claims can be reviewed. Information regarding adjudication of potential future claims cannot be provided.
42.	Can you be more specific on what type and dollar amount of liability insurance is required? e.g., general, auto, etc. And are the same levels required of any subcontractors?	DMS will amend this in the RFP, to state 1 Million dollars aggregated requirement for General Liability for both Broker and Subcontractor's.

43.	<i>In addition to individual pricing of regions, can the bidder submit pricing based on contiguous regions to generate cost efficiencies? 1.2</i>	See # 201
44.	States, "...that the anticipated term of the contract shall be one (1) year." <i>Is the assumption that the contract term will roll over annually with satisfactory performance for a maximum of 7 years? 1.2.B</i>	The contract term will be for one year, and any renewal will be solely at the discretion of the agency. No renewals should be assumed.
45.	<p>Pop 3 is defined as "Newly Eligible Adults who have been deemed medically frail." The low PMPM range for Pop. 2/3 indicates a more healthy population.</p> <p><i>Please further define medically frail.</i></p> <p><i>Are there unique eligibility codes for these members?</i></p> <p><i>Will these populations' members be eligible for the following covered services?</i></p> <ul style="list-style-type: none"> • Adult Day Care • Dialysis • Mental Health • Pain / Medication Management • Behavioral Health • Substance Abuse <p>What % will be enrolled in recurring programs (i.e. adult day care, dialysis, etc.)? 1.6</p>	<p>See #2</p> <p>See #5</p> <p>Adult Day Care- Yes Dialysis- Yes Mental Health-Yes Pain / Medication Management-Yes Behavioral Health- Yes Substance Abuse Only those in the Alternative Benefit Plan (ABP)</p> <p>Unknown</p>
46.	Have all contract extensions been reached with the current contractor? If no, please explain why renewals were not issued. 1.9	Yes
47.	Please confirm that only one technical submittal is required no matter how many regions the bidder submits pricing for. 1.17	Section 1.17 <u>Caution to Vendors</u> (I) states that "Vendors may submit multiple proposals". As there are multiple regions identified in the "Pricing" attachment (Official Pricing Sheets Regions A-G), a vendor may submit pricing for different regions while submitting only one (1) response through the Technical Packet requirement.
48.	Is the VISA Procurement Card expected to be the primary method of payment, or will the primary payment be by check/EFT? 1.26	Section 1.26 <u>VISA ACCEPTANCE</u> (C) states that "VISA is not the exclusive method of payment." Currently payments are deposited in the broker's accounts based on monthly calculations.

49.	This section calls for an organizational chart. Please define the type of organizational chart required. Should the bidder include an ownership/corporate structure org chart, or a corporate management org chart, or proposed staffing org chart for the regions submitted? 2.3 I	The organizational chart should include ownership/corporate structure as well and corporate management and staffing structure. The organizational chart should include ownership/corporate structure as well and corporate management and staffing structure.
50.	States, "The performance security must be made upon acceptance of the performance security by the Office of State Procurement." <i>Please confirm the performance security is to be submitted upon contract award.</i> 2.4	<p>Section 2.3 (K). Performance Security</p> <p>A. To assure full performance of all obligations imposed on a vendor by contracting with the State of Arkansas, the vendor shall be required to provide a performance security.</p> <p>B. The amount shall be determined by the contract amount which depends on the region(s) for which the successful vendor is selected.</p> <p><u>C. The amount shall be approximately one third (1/3) of the contract amount or \$250,000.00 whichever is a lesser amount within ten (10) working days from date of receipt of the State's written notification of Anticipation to Award a contract.</u></p> <p>D. The form of security required shall be a performance bond, cashier's check or a standard letter of credit such as is usually and customarily written and issued by surety companies licensed and authorized to do business in Arkansas.</p> <p>E. An irrevocable letter of credit from an Arkansas bank is also acceptable.</p> <p>F. The performance security must be made upon acceptance of the performance security by the Office of State Procurement.</p>
51.	Can after hours calls be handled by call centers located away from the central business office, and more specifically outside the state of Arkansas? 2.6	Yes. Call center must be staffed, at a minimum, from 8:00 a.m. until 5:00 p.m., Central Time, Monday through Friday, except on days recognized as State Holidays.
52.	Please confirm whether the listed criminal checks in Section B apply to all employees of the broker or just employees that may come into contact with beneficiaries? 2.7 B	All employees who have contact or could potentially have contact MUST have criminal checks. These are the minimum requirements for each Broker.
53.	<p>States, "...that we are required to perform a criminal history check, provided by the Arkansas State Police..."</p> <p>We currently conduct a pre-employment seven year criminal search for all jurisdictions lived in during the past seven years, which would include Arkansas for employees hired locally.</p>	No your current process will not meet the requirement of this section. Yes, you will be required to obtain an AR State Police Report if the resident has lived in the State of AR for at least 5 years. If they have not you will be required to obtain a report from the previous states that they have been residents for the questionable period of time they have not been residents of Arkansas.

	Will our current process meet the requirements in this section? Or are we required to obtain an Arkansas state police report in addition to our standard pre-employment seven year criminal history screening? 2.7 B	
54.	Please define what is meant by “central registry check.” 2.7 B	Child and Adult Maltreatment background checks are required for all employees prior them providing specific services, these checks are conducted by our Central Registry unit housed here at DHS.
55.	Please confirm whether the listed criminal offenses in Section C apply to all employees of the broker or just those employees that may come into contact with beneficiaries? 2.7 C	See Response in Question 52.
56.	Section B and C of Section 2.7 states, “.these checks are required for the brokers employees.” <i>Please confirm this list also applies to transportation providers and drivers.</i> 2.7 C	Yes.
57.	States, “... the broker is responsible for printing and mailing letters.” Please confirm that this mailing can be limited to NEMT utilizers only rather than the entire beneficiary population. 2.8	Notification must be sent to all those who qualify for the services, limiting the distribution to one per household.
58.	States, “... the broker is responsible for printing and mailing letters.” Please confirm that this mailing can be limited to NEMT utilizers only rather than the entire beneficiary population. 2.8	See Response in Question 57.
59.	Please confirm whether the bidder is permitted to mail letters to Head of Households only or to all actual users of NET services. Is the bidder allowed to send additional notification (not the initial) via electronic methods (IVR, website, or text messages)? 2.8	See Response in Question 57. Yes. Additional secure electronic notifications may be utilized.
60.	The RFP states, “.. that the encounter reports must be submitted within 30 days from the end of the month of service.” Recognizing the claims lag that exists and the fact that often there are trips submitted after the 30 day period could you please answer the following 3 questions: a) <i>Are the monthly claims submitted by your current contractors actual paid claims during the month of</i>	a) No

	<p><i>service regardless of what days of service they represent (meaning they may go back a couple of months?</i></p> <p><i>b) If the monthly claims encounter represents the previous month of service, then are these trips that are authorized for payment but which may not have been paid yet?</i></p> <p><i>c) If the monthly claims encounter represents only trips for the previous month of service that have actually been paid, do the contractors get to update the previous months as more claims are finalized and out the door, to accommodate any minimal claims lag?</i></p> <p>2.8</p>	<p>b) Yes</p> <p>All trips that were provided must be reported as outlined in the RFP. Encounter data reporting is not dependent on subcontractor payment.</p>
61.	<p>State, "...and must contain information required by the Insurance Department of the State of Arkansas."</p> <p><i>Please provide the information required by the Insurance Department of the State of Arkansas. 2.13 D</i></p>	<p>See #42.</p> <p>Minimum Limits don't apply to this RFP</p>
62.	<p>What is the amount of insurance coverage required for each vehicle? 2.13 E</p>	<p>The requirement for Vehicles is \$1million in aggregate</p>
63.	<p>Is the \$5 million coverage carried by any subcontractor limited to commercial general liability, or is the \$5 million also the amount of auto liability each subcontractor must carry? 2.13 F</p>	<p>\$1 million for broker and \$1 million for subcontractor</p>
64.	<p>We understand that insurance requirements under the current program are currently \$1 million for GL and Auto liability insurance. Please confirm that you are increasing the insurance requirements for both GL and Auto liability to \$5 million for the transportation providers under this new contract.</p> <p>If that is correct, please provide justification for such a substantial increase?</p> <p>Based on our experience, most insurance carriers for this class of insurance will not write a \$5 million limit policy which would necessitate the purchase of an excess policy to reach the limit, doubling of cost of insurance for the transportation providers.</p>	<p>\$1 million is the requirement</p>

	<p>Such an increase in Auto Liability insurance will severely impact the subcontractors (transportation providers) ability to purchase and maintain adequate coverage and will inevitably increase the cost of the program. Based on our calculations, this increase is expected to negatively impact approximately 50% of all Arkansas transportation providers which could result in these providers being forced to stop rendering service.</p> <p>As such we ask DHS/DMS to reconsider the significant increase. 2.13 F</p>	
65.	<p>States, "...that we must report on encounter data..."Whether or not the appointment was after hours."</p> <p>Please clarify whether this requirement applies to after the medical providers' hours, or the transportation providers' hours, or the brokers' normal business hours? 2.16 I</p>	Brokers' normal business hours.
66.	<p>Please provide a list of Contractors/Subcontractors (transportation providers) by region with the number of vehicles and vehicle types operating for those regions. 2.21</p>	<p>See # 87</p> <p>Additional data will not be provided.</p>
67.	<p><i>Please provide the last 3 years Annual Adjustment Factors (AAF) that has been utilized for rate setting?</i> 2.22</p>	The Annual Adjustment Factor is new.
68.	<p>Please provide the average percentage that the AEVCS fees have represented.</p> <p>Is this a percent of each trip submitted or a percent of the entire batch? 2.22</p>	<p>In Sept 2016 AEVCS fees were 0.49% of the Statewide gross payment amount.</p> <p>See question 69 for AEVCS fee detail.</p>
69.	<p>Please provide an explanation as to how AEVCS fees have been historically calculated. 2.22</p>	<p>These fees are priced by DHS' fiscal intermediary. While this information is current, fees are subject to change at any time without notice.</p> <p>Eligibility transaction fee – 10</p> <p>Professional encounter transaction fee 17¢</p>
70.	<p>What are the current AEVCS fees and how often, and under what circumstances, can the fees change? 2.22 F</p>	See # 69 and #71
71.	<p>Please provide any AEVCS fee changes for the last 24 months. 2.22 F</p>	AEVCS fees have not changed in the last 24 months.
72.	<p>The RFP states, "...The Broker rate for the region will be multiplied by the fuel adjustment factor (FAF) for the</p>	The Fuel Adjustment Factor table is located on the second to last page of the Data Book.

	<p>month as reflected on the table provided by DHS/DMS in the Data Book, attachment A.” Attachment A did not include a table with FAF data. Please provide the FAF data.</p> <p>Please provide historical FAF factors applied to PMPM rates for the last 2 years, by month, by region. 2.22</p>	<p>The FAF is the same for all regions. See RFP page 29 Monthly Fuel Price Adjustment Factors</p> <p>See attached NET Fuel Factor. Please note historic and proposed FAF tables are different.</p>
73.	<p>States “The amount of the AEVCS fees may change during the course of the contract periods(s) without notice. DHS/DMS reserves the right to deduct Medicaid fee adjustments from the Brokers monthly invoice prior to payment.</p> <p>Please further define the Department’s definition and application of Medicaid Fee Adjustments. Have these been enacted previously? If so, how often and for what reasons? 2.22</p>	<p>See # 69</p> <p>A review of records back to 2012 did not reveal fee adjustments</p>
74.	<p><i>Please confirm that the broker is not responsible for providing NET transportation services to the NET Waiver programs / populations listed under B (4).</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Nursing facility residents <input type="checkbox"/> Residents of intermediate care facilities for the mentally retarded (ICF-ID) <input type="checkbox"/> Qualified Medicare Beneficiaries (QMB) (Medicaid pays only the Medicare premium, deductible and co-pay) <input type="checkbox"/> Special Low Income Qualified Medicare Beneficiaries (SLMB) <input type="checkbox"/> Qualifying Individual-1 (QI-1) <input type="checkbox"/> ARKids First-B Beneficiaries <input type="checkbox"/> Covered for periods of retroactive eligibility 2.23 	<p>Correct</p>
75.	<p>If at a later date DHS/DMS includes these Waiver programs / populations identified in Section 2.23 B (4) will the broker have an opportunity to renegotiate pricing? 2.23</p>	<p><u>2.23 B (4)</u> The Arkansas Medicaid NET waiver program does not include transportation services for beneficiaries who are:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Nursing facility residents <input type="checkbox"/> Residents of intermediate care facilities for the mentally retarded (ICF-ID) <input type="checkbox"/> Qualified Medicare Beneficiaries (QMB) (Medicaid pays only the Medicare premium, deductible and co-pay) <input type="checkbox"/> Special Low Income Qualified Medicare Beneficiaries (SLMB) <input type="checkbox"/> Qualifying Individual-1 (QI-1) <input type="checkbox"/> ARKids First-B Beneficiaries

		<input type="checkbox"/> Covered for periods of retroactive eligibility Information not part of the original RFP would require an Amendment to the contract.
76.	<p>This section states "...the beneficiary may provide the names, relationship and contact number for up to two (2) authorized representatives to the Broker when scheduling their NET services. The Broker will only take information or discuss the beneficiary's need for NET services with the beneficiary or with the beneficiary's authorized representative as listed on file with the Broker and DHS/DMS."</p> <p>Must the beneficiary call the reservation line for their first transport before their designated representatives are permitted to schedule on their behalf? 2.23</p>	<p>The beneficiary may be on the call with their authorized representative for their first request for NET services.</p> <p>No.</p>
77.	<p>#4 states that for public transit the Broker is to ask "Is public transit available?"</p> <p>What is the distance requirement for a beneficiary to qualify for public transit? If a public transit stop is available within 3 blocks or ¼ mile from the beneficiary's residence or appointment address can the broker assign public transit? 2.23</p>	<p>The Broker can assign the trip only if the beneficiary is medically able to utilize public transit.</p> <p>See # 222</p>
78.	<p><i>#4 states that for public transit the Broker is to ask "Is public transit available?"</i></p> <p><i>During implementation the successful bidder will identify all public transit systems and have the ability to load public transit stops into their scheduling system.</i></p> <p><i>By automating this process is it necessary to ask this question? 2.23</i></p>	<p>Yes.</p>
79.	<p>The requirements under numbers 9 and 10 appear to contradict one another. Please clarify the difference between 9 and 10.</p> <p>Who can and cannot request NEMT services on behalf of a beneficiary? When describing, please include any and all restrictions associated with designated</p>	<p>Difference between 9 and 10. There is no intended inconsistency, however the word not was erroneously omitted from the RFP. The question 9 should have read(transportation are not). The rationale is that the listed individuals (agency,provider,other entity) are not familiar with the beneficiary's need for transportation. When describing, please include any and all restrictions associated with designated representatives and the destination/treatment type being</p>

	representatives and the destination / treatment type being sought. 2.23	sought. There are no restrictions based on destination of treatment type. The restrictions on the beneficiary's authorized representative are related to the representative's first hand knowledge of the beneficiary's need for transportation.
80.	<p>States, "A beneficiary who is a member of Pop 2 must contact the DHS/DMS NET Monitoring Contractor to seek an extension of transportation services (EOTS)."</p> <p>Per the definition provided on page 14, "NET services available to persons in Population 2 are limited to eight (8) one way legs/units within each calendar year".</p> <p>Please confirm whether or not a beneficiary in Population 2 is required to contact the DHS/DMS NET Monitoring Contractor for every NEMT reservation <u>OR</u> only those reservations in excess of the 8 permitted one way legs / units per calendar year. 2.23G</p>	Extension of transportation services for members of Pop 2 is required for transportation beyond the eight trip limit.
81.	<p>States, "...Standing orders cannot exceed one (1) month in duration."</p> <p><i>Will DHS/DMS consider extending the timeframe to 90 days as standard in other markets?</i></p> <p>Standing orders are most often dialysis, chemotherapy and other life sustaining treatments. In addition these appointments are made by the medical facilities performing the treatments. Bidders can propose a verification and certification process to ensure the trips/appointments are accurate and the beneficiaries attended their appointments. 2.23 F (5)</p>	No. One month on all standing orders. The circumstances related to the beneficiary's ability to get transportation can change within a month's time. Periods of time longer than one month will not permit to properly account for the Beneficiary's need for transportation services.
82.	<p>States, "...Each Broker will have a secure email address and designated employees for the (EOTS) process."</p> <p>Please confirm that the employees designated to manage the EOTS process may perform other functions in addition to this role. 2.24</p>	Yes, but Extension of Transportation Services must be their primary responsibility.
83.	<p>J, #2, states that newly eligible adults in the interim period do not have a trip limit.</p> <p>Please explain what you mean by the "interim period"?</p>	The period of time between a newly eligible adult's eligibility determination and plan selection is the interim period.

	If a Pop 2 Member is added to the enrollment during the year, are we to pro-rate the “8” trip limits for the rest of the calendar year? Example, if the member comes on board on July 1, would the new member receive a “4” trip limit for the rest of the calendar year? 2.23 (J)	No
84.	If a broker provides their own transportation services, when submitting the monthly encounter trip data, what \$ cost per trip would they have to reflect since they would not be paying (audit trail) a third party subcontracted vendor? 2.25 B (1) Attachment B-Encounter Data	Brokers providing their own transportation services should enter the cost associated with providing the trip. Brokers are free to use any industry accepted method of determining this cost. Brokers may be asked to explain the methodology used and show documentation supporting their result.
85.	<p>If overall costs are used in setting the rate for subsequent years, please clarify what costs can and should be included in fees for the broker provided transportation services.</p> <p>Self-provided trips fees, should they include items such as: fuel, driver fee, maintenance fees, cost of vehicle, administration, insurance, etc...when developing the rate for self-provided trips?</p> <p>Please provide what current brokers are providing when submitting cost for self-provided transportation cost. 2.25 B (1) Attachment B – Encounter Data</p>	<p>Overall costs are one factor considered by the actuary. Cost should be included in annual audited financial statements that show Arkansas NET as a line of business separate from other activities and comply with Generally Acceptable Accounting Principles.</p> <p>See # 84.</p> <p>No</p>
86.	<i>Please confirm that all vehicles used to provide NEMT services are required to have video systems that meet the requirements of Section 2.26 G. 2.26</i>	All vehicles used to provide NEMT services are required to have video/GPS systems.
87.	It is our understanding that currently some brokers are providing their own services and DHS/DMS is inspecting these vehicles. Will DHS/DMS please provide by region how many vehicles are currently being operated (self-provided) by each Broker? 2.27	No
88.	<p><i>Are the listed performance standards new?</i></p> <p><i>If not, please provide the monthly liquidated damage assessment by region per standard over the last year. 2.36</i></p>	Yes
89.	Timely Transportation – RFP states failure to provide timely transportation is subject to \$500.00 damages per each occurrence.	See RFP page 25, 2.20 Scheduled and Delivery Standards

	Please define timeliness and whether it is measured on each individual trip or with an expected % of total trips completed on time. 2.36	
90.	<p>Please clarify the two requirements.</p> <p>Section 2.22.F.3 states that payments may be withheld if eligibility files differ from paid and actual and Section 2.36 states that if submitted encounter data includes ineligible members (Residence or Eligibility) the broker will be assessed damages.</p> <p>As an example, beneficiary requests transportation on the 15th, they show as eligible in the system, but when encounter data is submitted and after the corrections from Section 2.22.F.3 the beneficiary shows as not eligible. The broker would be penalized by having their PMPM reduced and the \$500 in damages assessed? Is this correct? 2.22 F (3) and 2.36</p>	No.
91.	<p>Will DHS/DMS provide PMPM ranges each year for consideration in price escalation? If not, how will the next year's rate be set?</p> <p>If bidders propose a price in the mid-point of the current range, but actuaries set the new rate at the low end of the range, it would not be a fair rate. 4.6</p>	<p>No.</p> <p>Please see page 28 Rate Adjustments and page 29 Broker's Monthly Payment Rate Calculations</p>
92.	Bid proposal PMPM rates by region are for an annual period, but only 6 months (November 2015 – April 2016) worth of data was provided. Due to seasonality of NET volumes, please provide 2 years' worth of data by Population, Month, and county. Attachment A Data Book	The data books provide data from November 2014 through April 2016.
93.	Please provide a breakdown of the last 2 years data with trip legs and mileage by Population, Level of Service, County, and Mode of Transport. Attachment A Data Book	See # 92
94.	<p>How were the actuarial PMPM ranges for each region developed?</p> <p>What assumptions were made (i.e. membership/membership growth, utilization, trips per unique rider, etc.) in the development of these ranges? Proposal Price Sheet</p>	PMPM ranges were developed based on the historical eligibility in each period, the number of trips provided, length of trips (mileage) and the cost per trip. Experience was trended forward based on historical patterns. The Annual Adjustment Factor will adjust PMPM rates for actual versus expected experience
95.	Is mileage data provided based on point to point calculations or routed miles? Attachment A Data Book	Mileage equals total miles of the trip

96.	Will OSP provide the Excel file for the Official Price Bid Sheet(s)? 1.13 A	No.
97.	Will OSP and DHS/DMS develop an anticipated calendar dates for interviews and the award announcement? 1.13 B	Determination will be based on the timeline set for reviews, evaluations, holidays, and final ranking of vendors per responses.
98.	Is VISA Procurement Card the intended method of payment for this contract? 1.26	Section 1.26 <u>VISA ACCEPTANCE</u> (C) states that "VISA is not the exclusive method of payment. Currently payments are deposited in the broker's accounts based on monthly calculations. The preferred method is EFT(electronic funds transfer)
99.	Can data between Pop 2 and 3 be segregated in order for us to see how many eligibles have trip limits? 2.4 B	No
100.	Will the Data Books be made available in Excel? Will you please provide additional data (or rough percentage) of ambulatory and wheelchair trips by region? Will DHS/DMS provide additional data (or rough percentage) of trips requiring an attendant? Were these trips included in the data that provided? 2.2 C	Yes Between Nov 2014 and Oct 15 brokers reported: Statewide wheelchair trips comprised fewer than 8% of trips in Pop 1 and less than 3% trips in Pop 2 and Pop 3. Statewide attendant trips comprised fewer than 17% of trips in Pop 1 and less than 10% trips in Pop 2 and Pop 3. Trips involving wheelchairs and attendants are included in the data book counts. Accuracy of this data relies on the current brokers reporting.
101.	Will you please confirm if the data presented currently includes public transit, mileage reimbursement of completed trips? 2.2 C	Confirmed
102.	Will you please extend the data book to include the number of cancels? 2.2 C	No.
103.	May we have the public transportation usage from the most recent period, per region? 2.2 C	No
105.	May we have the mileage reimbursement trip counts from the most recent period, pre region? 2.2 C	No.
106.	Can we get an estimate of the number of subscription trips by member and frequency? 2.2 C	No.

107.	Will you please provide the most recent call volume data, per region (and preferably by hour)? This data requests include the number of call answered; the number of call abandoned, average speed to answer, average handle time for each of the 12 regions for the past 12 months. 2.16	No.
108.	Will you please confirm the Gatekeeping process: how long is the record valid? When does it need to be re-verified? 2.23 E	Accessing needs for services should occur during each reservation taken.
109.	How are foster children identified? Does DHS/DMS identify them, or must the broker perform due diligence in seeking evidence from foster parent(s)? 2.26 A (3)	They are identified by their aid category.
110.	Please confirm the definition and the specs for child safety buzzers. Will DHS/DMS consider this requirement only for paratransit and larger vehicles and deemed not necessary for taxi/sedan and van (9-passenger or less) NET service? 2.26 O	Per DHS, Child Care Licensing: Act 1979 of 2005 states: All vehicles designed to transport more than seven (7) passengers and one driver shall have a child safety alarm device installed by a qualified technician or mechanic. Taxicabs are not utilized in the NET Program.
111.	Please confirm the DHS/DMS definition of Multi-Passenger Vehicle. 2.26 O	Vehicles designed to carry (8-15) passengers and one driver.
112.	There is a significant cost difference between continuous recordings and incident-recording camera systems. Please clarify the requirement and the preference of DHS/DMS. 2.26 Q	Continuous recording must take place at all times while a Medicaid recipient is in the vehicle.
113.	With the great variety of camera system options and expenses (in particular with data usage, admin rights and storing) will OSP consider a PMPM rate that excludes camera system, and a separate cost proposal for the camera system solution? Will OSP consider proposals where the camera system is a pass-through cost with no-mark up? 2.26 Q	No
114.	Will you please share with us any precedence or established protocols within the state for recording and storing in a HIPAA environment? Does state expect the broker to be the only authorized admin for viewing and	Transmission, safeguarding, handling and disclosure of HIPPA protected information is fully described in the DHS Business Associate Agreement, DHS form 4001, available at

	submitting video? If providers already have a camera system (such as Drive-Cam incident recorders and the provider acts as the admin), will that be acceptable? 2.26 Q	<p>http://dhsshare/OFA/CSS/SG/Contract%20Forms/DHS-4001%20(BAA).pdf</p> <p>Each broker will have to sign this agreement and be responsible for safe handling of PHI.</p> <p>Cameras and recording devices are used by DHS to enhance physical security and to improve safety of DHS clients.</p>
115.	Will DHS/DMS please define the oversight expected for the camera system requirement? 2.26 Q	Arkansas' Medicaid Contract Monitor will be responsible for overseeing camera/GPS compliance.
116.	Is this a current requirement? May we be provided of a list of providers that currently have camera systems of the listed specs already installed? 2.26 Q	<p>No.</p> <p>It is currently not a requirement.</p>
117.	How many vehicles (per region) are currently registered and credentialed? How many vehicles does DHS/DMS expect cameras to be installed in? 2.26 Q	<p>See Responses to Question 87.</p> <p>All vehicles must have cameras/GSP systems installed at the beginning of the contract period.</p>
118.	Will you please define any privacy laws that this camera system must comply with (state, county, city laws)? Will DHS/DMS be notifying beneficiaries that their trips are recorded? Will DHS/DMS be providing signs for the vehicles to let passengers know they are being recorded? 2.26 Q	<p>DHS policy 1075 addresses the audio or visual recording of agency clients or patients in the course of conducting work for the agency.</p> <p>The policy protects client and patient information as mandated by the federal Health Insurance Portability and Accountability Act (HIPAA), the Arkansas Personal Information Act (PIPA) Arkansas Code § 4-110-101, and other applicable federal and state laws, rules and regulations.</p> <p>The policy allows for the use of recording devices in accordance with the limitations included in Arkansas Code § 5-60-120.</p> <p>The policy as applied to brokers requires adherence to above mentioned security and privacy rules, and imposes on them responsibility for using secure devices, both with regard to recording, as well, as handling and storing of the recorded information.</p> <p>The Brokers will have responsibility for notifications. The signs or other means of communication will be provided by the brokers.</p>

119.	Will DHS/DMS consider this requirement for ribbed rubber flooring to be only for paratransit and larger vehicles or areas in vehicles that are identified as ADA-wheelchair securement areas, but not deemed necessary for taxi/sedan and van (9-passenger or less) NET service? 2.26 P	<p>It is not necessary for sedans or mini vans not equipped with a wheelchair ramp or lift to have rubber flooring.</p> <p>Taxicabs are not utilized in the NET Program.</p>
120.	Will DHS/DMS consider that Drivers must have documentation of child passenger safety, defensive driving and lift operation and wheelchair securement training (as necessary, based on the type of vehicle(s) the driver operates)? To clarify, will providers that only have sedan fleets with no wheelchair capacity still be required wheelchair securement training? 2.31 B	<p>All drivers must have child passenger safety and defensive driving training. If necessary, drivers must have lift and wheelchair securement training.</p> <p>It is considered a best practice to have drivers trained in lift and wheelchair securement as a backup driver in case of an emergency.</p>
121.	How many Attendants (by region) are currently employed by brokers? How many Attendants (by region) are currently employed by providers/sub-contractors? Are there established care-giver programs that are sub-contracted solely for attendants? May we be provided with a list of current qualified attendants? 2.34	<p>Sufficient reliable data is not available to provide a list of current qualified attendants.</p> <p>There no established care giver programs for NET services.</p>
122.	May we be provided with an estimate of the number of and percentage of trips requiring an attendant? Were these trips included in the data that they provided? 2.34	See #100
123.	May we be provided with the current brokers' assessed liquidated damages (reason/amounts) for over 12-month period, per region? 2.36 H	Liquidated damages are not included in previously procured net contracts.
124.	Will you please supply the current on time performance statistics for each of the current regions? 2.36 H	The NET Performance Profiles on posted on www.afmc.org
125.	Are there protocols established by the OSP if the bidder objects to any part of the RFP or if bidders should protest the contract award decision? 1.19	<p>Ark. Code Ann. § 19-11-244 (a) (1) (2) and (3)</p> <p>(a)(1) Any actual or prospective bidder, offeror, or contractor who is aggrieved in connection with the solicitation of a contract may protest by presenting a written notice at least seventy-two (72) hours before the filing deadline for the solicitation response to the State Procurement Director or the head of a procurement agency.</p>

		<p>(2) Any actual bidder, offeror, or contractor who is aggrieved in connection with the award of a contract may protest to the:</p> <p>(A) Director; or</p> <p>(B) Head of a procurement agency.</p> <p>(3) The protest shall be submitted in writing within fourteen (14) calendar days after the aggrieved person knows or should have known of the facts giving rise to the grievance.</p>
126.	Will OSP provide the current pmpm rates for the current 12 regions? General	No. See # 28
127.	Please confirm that all subcontractor vehicles are required to undergo a monthly inspection. 2.27	Yes.
128.	RFP Section 1.7, pp 4-5: Please confirm that bidders are expected to submit one Technical Proposal Packet, regardless of the number of regions on which they are proposing.	<p>Section 1.17 <u>Caution to Vendors</u> (I) states that "Vendors may submit multiple proposals".</p> <p>As there are multiple regions identified in the "Pricing" attachment (Official Pricing Sheets Regions A-G), a vendor may submit pricing for different regions while submitting only one (1) response through the Technical Packet requirement.</p>
129.	RFP Section 1.8, page 5: Please confirm that bidders' technical proposal packets should one completed Proposed Subcontractors Form for each region proposed.	<u>No. Subcontractors are to be identified per instruction as noted in the Technical Proposal Packet (Proposed Subcontractors Form).</u>
130.	RFP Section 1.8, page 5: Please confirm that bidders are required only to submit the completed signature page from each addendum, not the entire addendum, in their technical proposal packets.	Addendum instructions, when developed, will identify the method of response and when that response is required.
131.	RFP Section 1.8, page 5: Is E.O.98-04-Contract and Grant Disclosure form the same form provided with RFP Documents, that is labeled, Grant and Disclosure Form?	Yes
132.	RFP Section 1.9, page 6: Will OSP extend proposal due date to November 2, 2016 or at least three weeks from the date OSP issues its response to vendor questions and clarifications? This will allow adequate time should answers and clarifications reveal the need for additional planning or rewriting.	<p>Ark. Code Ann. § 19-11-230 <u>Competitive Sealed Proposals (C)</u></p> <p>(c) Public notice of the request for proposals shall be given in the same manner as provided in § 19-11-229(d), which refers to public notice of competitive sealed bidding.</p> <p>Ark. Code Ann. § 19-11-229 (d) (d)(1) <u>Notice inviting bids shall be given not fewer than five (5) calendar days nor more than thirty (30) calendar days</u> preceding the date for the opening of bids by publishing the notice at least one (1) time in at least one (1) newspaper having general circulation in the state or posting</p>

		by electronic media, but in all instances, adequate notice shall be given.
133.	RFP Section 1.21, page 9: If OSP already has the vendor's Equal Opportunity Policy information on file, should the vendor resubmit through eopolicy@osp@dfa.arkansas.gov , or should it only include the policy within the Technical Proposal Packet?	It is recommended by OSP to include this information with the vendor's response as updated information.
134.	RFP Section 1.22, page 9: Please provide instruction on submitting the vendor's certification that it does not employ or contract with illegal immigrants.	https://www.ark.org/dfa/immigrant/index.php/user/welcome Retain a copy of the submission information once the information has been submitted to the above link.
135.	RFP Section 1.24, page 9: Please provide instruction on submitting the vendor's Voluntary Product Accessibility Template (VPAT)? Is this a form that should be completed and included with the Technical Proposal Packet? If so, please provide form.	The VPAT information is not mandatory. Should a submission be requested, information may be found at the following federal website: https://app.buyaccessible.gov/baw/Main.jsp
136.	RFP Section 2.16: How and in what format will client eligibility information be delivered to the broker?	Eligibility is determined by logging onto the Arkansas Medicaid Website at the time of the reservation.
137.	RFP Section 2.16: How frequently will the broker receive updates to client Eligibility information?	Eligibility files are not available in the state of Arkansas. (Arkansas Medicaid beneficiaries may become ineligible at any time during a month.)
138.	RFP Section 2.16: Can the broker provide 837 encounter submissions through an SFTP site?	Yes
139.	RFP Section 2.16: Will the current 837P companion guide be utilized for this contract	Yes.
140.	RFP Section 2.2, page 11: Should vendors include a "transmittal letter" with the Technical Proposal Packet, providing attestations such as the following required statement, "Broker must submit a statement that the Broker expressly agrees and acknowledges that if they cancel, default, or otherwise abandon their contract prior to expiration the Broker will not be eligible to participate in NET procurement in that region for twenty-four (24) months?"	See attachment "G" Attachment is listed as part of the "Broker Qualifications".
141.	RFP Section 2.3(G), page 13: Should DMS forms 675, 689 and 4001 be submitted with the Technical Proposal packet, or are these to be submitted once an intent to award has been published?	Section 2.3 (G). Forms Required <u>Prior to Anticipation to Award of Contract</u> <u>Brokers must complete and submit to OSP prior to Anticipation to Award of a contract, the following:</u>

		<input type="checkbox"/> DMS form 675 – “Ownership and Conviction Disclosure” (Attachment C). <input type="checkbox"/> DMS form 689 – “Disclosure of Significant Business Transactions” (Attachment D). <input type="checkbox"/> DMS form 4001 – “Business Associate Agreement” (Attachment F).
142.	<p>RFP Section 2.3(J), page 13: Should the cross reference to the pages in the proposal that address the RFP requirements be included in the table of contents rather than the executive summary? A “cross-walk” could for this section could be duplicative. Would OSP consider the following structure to be compliant</p> <ul style="list-style-type: none"> • Table of Contents formatted as follows: “1.0 (RFP X.X) Proposal Signature Page” • Executive Summary that references proposal sections as needed within the narrative (instead of separate “cross-walk”)? 	<p>1.8 ORGANIZATION OF RESPONSE DOCUMENTS</p> <p>A. It is strongly recommended that vendors adhere to the following format and suggestions when preparing their Technical Proposal response.</p> <p>B. The original <i>Technical Proposal Packet</i> and all copies should be arranged in the following order.</p> <ul style="list-style-type: none"> <input type="checkbox"/> <i>Proposal Signature Page.</i> <input type="checkbox"/> <i>All Agreement and Compliance Pages.</i> <input type="checkbox"/> <i>Proposed Subcontractors Form.</i> <input type="checkbox"/> Signed Addenda, if applicable. <input type="checkbox"/> E.O. 98-04 – <i>Contract Grant and Disclosure Form.</i> <input type="checkbox"/> <i>Equal Opportunity Policy.</i> <input type="checkbox"/> <i>Voluntary Product Accessibility Template (VPAT).</i> <input type="checkbox"/> Other documents and/or information as may be expressly required in this <i>Bid Solicitation</i>. Label documents and/or information so as to reference the <i>Bid Solicitation’s</i> item number. <input type="checkbox"/> Technical Proposal response to the <i>Information for Evaluation</i> section of the <i>Technical Proposal Packet indexed and tabbed with the below sections clearly marked.</i> <ul style="list-style-type: none"> ○ Table of contents ○ Organization Overview (Chart) ○ Executive Summary ○ Qualification and Experience ○ Performance capabilities ○ Quality assurance plan

		<ul style="list-style-type: none"> ○ Financial Disclosure □ The respondents should make the proposal easy for the evaluators to read and reference.
143.	Section 2.4.B.2, page 15 – How does a Broker know when a member moves from another NET region?	Information is obtained during the gatekeeping process.
144.	<p>Section 2.5.A, page 15 – This section states an audited statement specific to the Arkansas operation is due no later than April 1st of each contract year.</p> <p>a. In order to be as cost effective as possible, will DHS amend the RFP to require the submission of audited statements within 120 calendar days of the Broker's fiscal year? It will be extremely costly if a Broker has to conduct two audits each year, one on a fiscal year basis and another per DHS standards.</p> <p>b. If DHS will not amend the RFP to require audited statements within 120 days of the Broker's fiscal year, will they amend the RFP to require the audit report by April 1st of each "calendar year"? If not, please explain what April 1st of each "contract year" means? For example, does that mean an audit of each period 7/1 through 6/30 is due 10 months later on April 1st?</p>	DHS will amend the RFP to require audited financial statements annually and no later than 30 calendar days after the statements are certified. Statements received after April 1 st may not be considered until the following year's AAF is calculated.
145.	Section 2.13, page 23: Subsection C states that the broker shall maintain insurance in the amount required on each vehicle. What amount is required? Note: \$1 million is an industry best practice.	<p>See #63</p> <p>\$1million aggregate liability limit</p>
146.	Section 2.13, page 23, Subsection D states that the coverage must include contractual liability. Is the contractual liability required on the General Liability or on the Automotive Liability? Secondly, as the State of Arkansas is named as an additional insured, this coverage would appear to be unnecessary. Would DHS consider removing the requirement?	\$1million General Liability and \$1million Auto Liability Named insured is necessary for notification of policy changes or cancellation.
147.	Section 2.13, page 23: Subsection F. Please confirm that the \$5 million limit applies to general liability, not Automotive Liability. \$5 million for auto liability is not common and would have a significant effect on program	See #146

	January 1 st . Will DHS amend the RFP and make the AAF effective each July 1 st so the audited data is current and only 2-3 months old during the computation of the AAF?	
151.	Section 2.24.A, page 33 – Will DHS amend the RFP to “ <u>require</u> ” a parent, foster parent or guardian accompany a minor or incapacitated adult, rather than requiring the broker to provide attendants? This an industry best practice and would lower the cost of the program and enhance safety. Most similar programs do not allow the broker/subcontractor to employ or provide attendants.	No. An attendant is utilized to provide assistance loading, unloading and while on the NET vehicle not to accompany the beneficiary at their medical appointment.
152.	Section 2.24.A, page 33- If answer to previous question is no, would DHS consider requiring a parent, foster parent, guardian or “authorized adult” selected by the parent, foster parent or guardian (but not employed by the broker or its subcontractors) to accompany a minor or incapacitated adult?	No.
153.	Section 2.25.F – Please confirm that attendants shall not be employees of medical or healthcare providers.	Qualifications of an attendant are outlined in section 2.34
154.	RFP Section 2.27, page 39: Will DMS confirm our understanding that vehicles are to be inspected at least monthly by subcontractor operating the vehicle, but that the Broker is only required to inspect vehicles on an annual basis?	Vehicle inspections include but are not limited to: a daily walk around by the driver, monthly inspections by the broker, and a yearly inspection performed by a certified mechanic at the brokers cost. The NET Monitoring Contractor will also inspect each vehicle annually with random inspections throughout the year.
155.	RFP Section 2.21, page 26: Is the model Subcontractor agreement to be submitted as part of the Technical Proposal Package, or is this to be provided after contract award?	Section 2.21 (D). Service Agreement, Pre-Approval <u>Prior to the provision of service</u> , the Broker must submit for DHS/DMS review a model service agreement that the Broker will use to obtain transportation service.
156.	RFP Section 2.23(E)(5), page 31: Please confirm that item 5 means Medical providers cannot be reimbursed for transporting beneficiaries.	This section does not address medical providers being reimbursed for transporting services; we are unable to provide a response
157.	RFP Section 2.23(E)(10), page 31: Will the DMS confirm that, If a medical provider/facility offers	Yes

	transportation to its patients, the broker is to deny services?	
158.	RFP Section 2.23(F), page 32: Please confirm that items 10 and 11 are stating that case workers and other employees at medical facilities CAN NOT schedule transportation on a beneficiary's behalf.	They cannot schedule transportation unless they are the beneficiary's authorized representative.
159.	RFP Section 2.23(E), pages 31-32: requires the Broker to deny the request if the Beneficiary has access to transportation through a friend, relative, neighbor, etc. Is mileage reimbursement to be used only when a Beneficiary has a vehicle in the household but no funds with which to operate it, or may Mileage Reimbursement also be used so that the Beneficiary can solicit friends, family, neighbors etc., who may not otherwise be available or have funds to transport the Beneficiary?	Yes. Yes.
160.	N/A	N/A
161.	RFP Section 2.26(F), page 37: Are digital manifests acceptable (tablet-based), or must paper copies be used?	Both are acceptable
162.	RFP Section 2.26(F), page 37: Are beneficiary and escort signatures required?	A signature is required.
163.	RFP Section 2.26(L), page 38: In cases of vehicles damaged in an accident, is the broker required to provide proof of repair to the NET Contracting Monitor and wait on the NET Contracting Monitor to approve returning the vehicle to service? Or, must we simply provide the proof of repair or re-inspection to the NET Contracting Monitor before we re-instate the vehicle?	The Broker is required to show proof of repairs to the NET Monitoring Contractor and re-inspect the vehicle to determine if it passes or not.
164.	RFP Section 2.26 (O), page 38: Please clarify which multi-passenger vehicles must have child safety buzzers. As written, this requirement would extend to most of, if not all vehicles used to transport passengers. Would DMS consider requiring this for vehicles with three or more rows of seats or similar, rather than requiring for all "multi-passenger" vehicles?	Per DHS, Child Care Licensing: Act 1979 of 2005 states: All vehicles designed to transport more than seven (7) passengers and one driver shall have a child safety alarm device installed by a qualified technician or mechanic.

165.	RFP Section 2.26(Q), page 38 Please clarify if the 45 day requirement is for 45 contiguous days of recording including when the vehicle is parked and not occupied or, is it meant to capture 45 days when the ignition is 'on' and/or the vehicle is in-motion?	See # 112
166.	RFP Section 2.26(Q), page 38: The requirement specifies an "interior view", but can you clarify is this for only one lens or does the State wish to have multiple interior lenses? Where would the lens be mounted inside the vehicle?	The camera must be positioned so all passenger activity is recorded.
167.	<p>RFP Section 2.26(Q), page 38: Does the State have a requirement for either solid-state storage of the video or a hard-drive storage?</p> <p>Please note: the estimated cost and commercial reliability of any video solution will vary significantly depending on the type of storage used. Solid-state is more costly, but can be procured built as 'industrial grade' for commercial in-vehicle use, able to withstand extremely high temperatures, road vibrations, and the shock of most collision impacts. Hard-drives are generally less expensive but are more vulnerable to commercial in-vehicle use and potentially not as reliable.</p>	No
168.	RFP Section 2.26(Q), page 38: Does the State wish to maintain the video capture on the device within the vehicle to be retrieved only as-needed or have the ability to offload it on a regular basis for periodic review and analysis?	See #13
169.	RFP Section 2.26(Q), page 38: Does the state wish to capture audio or only video?	Video only is required.
170.	RFP Section 2.26(Q), page 38: the forty-five-day requirement is a unique requirement that far exceeds industry trends of "event triggered" storage of a few seconds prior to and after the event, or in rare cases, continuous loop storage of 96 hours or less. The costs	No

	and logistics associated with meeting the 45-day storage requirement will be extreme for the program and prohibitive for many subcontractors. Would DMS reconsider the storage requirements included in this section? We would ask that the storage requirement be 96 hours or less, or that DMS accept event-triggered systems.	
171.	RFP Section 2.35, page 41: This section references customer satisfaction surveys. Will the broker be responsible for having surveys conducted, or will this be the responsibility of the Monitoring Contractor? What is the frequency?	No. These are performed and compiled by the NET Monitoring Contractor every two years.
172.	Attachment G (Statement of Acknowledgement): Is this form to be completed and returned with the technical proposal packet? If so, should it be included after the VPAT as described in Section 1.8?	See attachment "G" Attachment is listed as part of the "Broker Qualifications".
173.	Bid Price Sheets – Please confirm what period of time the Bid Prices entered on the Official Price Sheets will cover?	Section 1.2 (B). The anticipated term of the contract shall be one (1) year from July 1, 2017 through June 30, 2018.
174.	Attachment A#1 and Attachment A#2 (Data Book) – Will OSP break down the trip volume data by modes of transportation (eg. Mileage Reimbursement, Wheelchair Vehicle, Public Transit passes, Ambulatory Vehicle, etc.)?	No. See #100
175.	Price Sheets – The price sheets state that the final total cost points per region will be determined by adding the Pop 2 points to the Pop 2 and Pop 3 Points. Should this state that the final total cost points per region will be determined by adding the Pop 1 points to the Pop 2 and Pop 3 points?	Yes
176.	Proposed Subcontractors Form: Please clarify whether transportation providers are to be considered subcontractors and included on this form.	1.14 PRIME CONTRACTOR RESPONSIBILITY A. A joint proposal submitted by two or more vendors is acceptable. However, a single vendor must be identified as the prime contractor.

		B. The prime contractor shall be held responsible for the contract and shall be the sole point of contact.
177.	Page 5, 1.8 Organization of Response Documents: Please confirm that the Organizational Overview (Chart) is to be placed before the Executive Summary.	Section 1.8 <u>Organization of Response Documents</u> (B). Yes, the Organizational Overview (Chart) is listed prior to the Executive Summary.
178.	Page 8, Section 1.2: Is there any set percentage participation goal for minority business participation in the proposal?	No.
179.	Page 13, G. Forms Required Prior to Anticipation to Award of Contract: Please confirm these three forms are not required to be submitted with proposal response.	Section 2.3 (G). Forms Required <u>Prior to Anticipation to Award of Contract</u> <u>Brokers must complete and submit to OSP prior to Anticipation to Award of a contract, the following:</u> <input type="checkbox"/> DMS form 675 – “Ownership and Conviction Disclosure” (Attachment C). <input type="checkbox"/> DMS form 689 – “Disclosure of Significant Business Transactions” (Attachment D). <input type="checkbox"/> DMS form 4001 – “Business Associate Agreement” (Attachment F).
180.	Page 21, Section 2.8.H: Will DMS provide a list of facilities to which mailings have to be sent?	A file will be provided by the outgoing Broker.
181.	Page 23, Section 2.15: Please provide current call center volume, including a breakout of call type by month for the past two years by region and population, including: <ul style="list-style-type: none"> ○ Number of calls received ○ Number of Cancellation calls ○ Number of calls answered ○ Average hold time ○ Average call length ○ Abandonment rate 	No
182.	Page 23, Section 2.15: Please provide current call center staffing numbers used for this contract.	No.

183.	Page 28, Section D.3.: Can you please elaborate on the statement "Brokers who fail to report all trips accurately, timely, and according to DHS/DMS quality guidelines will not receive the appropriate AAF which could result in revenue loss for the Broker in the subsequent contract period(s)."? Can you please provide the percent of penalty if the requirements are not met?	The AAF calculation cannot consider trips that were not reported or received prior to the deadlines specified in the RFP. The amount of this impact to brokers depends on the number of trips that were not available at the time of AAF calculation due to late / incomplete reporting.
184.	Page 30, Section 2.23: Please provide number of instances and average cost per month for lodging and meals by region and population.	Lodging and meals are not included in the Arkansas Medicaid NET program, only transportation services.
185.	Page 30, Section 2.23.B: How will the broker be provided with data on eligible members. Will this be sent via an eligibility file, or will the vendor need to query a website for each trip request? a. If the vendor must query a website, is this just for individuals who don't appear on the eligibility file, or all members b. Also, if the vendor must query a website, are there any fees associated with these queries?	The outgoing Broker will provide a file containing the beneficiaries who had utilized NET services in their Region the previous year. Yes. Eligibility can be run on the Arkansas Medicaid Website. No eligibility file. See # 69
186.	Page 31, Section 2.23.E.5.: Are any Volunteer Trips in the current program? If so, please provide the trip data by month for past two years for Population One, Two, and Three.	Sufficient reliable data is not available to provide these figures.
187.	Page 35, Section 2.25.D: Can the Department please clarify the timeframe requirement for responding to and resolving complaints. The RFP indicates responding within one working day with "resolution." Proper investigation into the circumstances surrounding a complaint often cannot be completed within one day. Please consider modifying the requirement to "respond" within one day and allow additional time for final resolution.	A response and working resolution must be received within 24 hours.

188.	Page 39, Section 2.27.A: As long as the broker conducts the initial vehicle inspection, and annual inspections thereafter, may the transportation provider conduct their own monthly vehicle inspections as long as the results are available to the broker? Requiring the broker to inspect each vehicle in the fleet monthly would add significant cost to the program.	No. It is the Broker's responsibility to inspect all vehicles monthly.
189.	Page 42, Section 2.35.H.: In instances of urgent transportation, is the ability to utilize a taxi partner an option?	If the fleet does not have enough vehicles to sustain transportation services for the region, additional vehicles must be obtained. Taxicab are not utilized in the NET Program.
190.	Page 42, Section 2.35. H.: Please provide the number of unique volunteers used in last two years. Please provide average number of volunteer trips per year by region and population.	No
191.	Page 53, Section 4.6: How will PMPM rates be determined for each renewal period?	Please see RFP page 28 Rate Adjustments and RFP page 29 Broker's Monthly Payment Rate Calculations.
192.	Page 57, Attachment A: Can you please provide Attachment A: Databook in excel format?	See #100
193.	Page 57, Attachment A: Please provide total number of paid legs, total miles, and unique users by month and mode of transportation for the last two years by region and population.	Please see data books. Additional data beyond that which is in the data books will not be provided.
194.	Page 57, Attachment A: Please provide average miles driven per mode of transportation for last two years by region and population.	No. Additional data beyond that which is in the data books will not be provided.
195.	Page 57, Attachment A: Please provide current rate per mile paid to volunteers.	No. Additional data beyond that which is in the data books will not be provided.
196.	Page 57, Attachment A: Please quantify the number of denials and type of denials per month in CY2015 and	No. Additional data beyond that which is in the data books will not be provided.

	Q1 2016, experienced by current broker by region and population.	
197.	Page 57, Attachment A: Please provide data by month for past two years, if available, on distribution of trips by travel reason? e.g. Dialysis, Drug treatment, Adult Day Care, Primary Care, etc. by region and population.	No. Additional data beyond that which is in the data books will not be provided.
198.	Page 57, Attachment A: What is the current cost under the present contract for each category or mode of transportation, i.e. ambulatory vehicle (taxi, sedan, passenger van), wheelchair vehicle, Mileage Reimbursement, public transit?	No. Additional data beyond that which is in the data books will not be provided.
199.	Page 57, Attachment A: Please provide the historical trip data by month for the past two years for beneficiary no show and transportation provider no show by region and population.	No. Additional data beyond that which is in the data books will not be provided.
200.	Page 139, Price Sheet: Would DHS consider reviewing startup cost as a separate line item so that bidders and incumbent price proposals can be compared equally?	No
201.	Page 139, Price Sheet: Would DHS allow a bidder to offer a discount if more than one region is awarded to the company? Certain costs such as facility, call center telephony, management salaries, etc. could be spread over multiple regions, which would result in cost savings for DHS, but the current pricing forms do not offer bidders the opportunity to present these savings.	<p>1.13 PRICING</p> <p>A. Vendor(s) must include all pricing on the Official Price Bid Sheet(s) only. Any cost not identified by the successful vendor but subsequently incurred in order to achieve successful operation shall be borne by the vendor. The <i>Official Bid Price Sheet</i> is provided as a separate excel file posted with this <i>Bid Solicitation</i>.</p> <p>B. To allow time to evaluate proposals, prices must be valid for (180) days following the bid opening.</p> <p>C. The <i>Official Bid Price Sheet</i>, including the hard copy and electronic copy, must be separately sealed from the <i>Technical Proposal Packet</i> and should be clearly marked as "Pricing". DO NOT submit any ancillary information not related to actual pricing in the sealed pricing package.</p> <p>D. Vendor must not include any pricing in the hard copies or electronic copies of their <i>Technical Proposal Packet</i>. Should</p>

		<p>hard copies or electronic copies of their <i>Response Packet</i> contain any pricing, the response shall be disqualified.</p> <p>E. Failure to complete and submit the <i>Official Bid Price Sheet</i> shall result in disqualification.</p> <p>F. All proposal pricing must be in United States dollars and cents.</p> <p>G. The Official Bid Price Sheet may be reproduced as needed.</p> <p><u>Pricing per each region should be identified as the lowest cost submission by the broker.</u></p>
202.	Page 38, Section 2.26.Q: Are cameras required on local taxi partner vehicles?	<p>Taxicab are not utilized in the NET Program.</p> <p>All vehicle and driver compliance documents apply to all Brokers and subcontractors.</p>
203 .	<u>Page 3, 1.6 D</u> Populations 2 and 3 are both defined as “newly eligible adults”. Are these populations currently enrolled in the Private Option program? Will they ever transition over to the traditional Medicaid eligibility group?	<p>Yes</p> <p>No. It is not expected persons enrolled in the private option will transition to traditional Medicaid.</p> <p>Please see page 3. Definitions.</p>
204 .	<u>Page 13, 2.3. K.C.</u> The RFP requires submission of the Performance Security “within ten (10) working days from the date of receipt of the State’s written notification of Anticipation to Award a contract”. How would this timeline be impacted by a protest of the award? Would the deadline be extended if the award is protested?	<p><u>Ark. Code Ann. § 19-11-244</u> 19-11-244. Resolution of protested solicitations and awards. 62</p> <p>(a)(1) Any actual or prospective bidder, offeror, or contractor who is aggrieved in connection with the solicitation of a contract may protest by presenting a written notice at least seventy-two (72) hours before the filing deadline for the solicitation response to the State Procurement Director or the head of a procurement agency.</p> <p>(2) Any actual bidder, offeror, or contractor who is aggrieved in connection with the award of a contract may protest to the:</p> <p>(A) Director; or</p> <p>(B) Head of a procurement agency.</p> <p>(3) The protest shall be submitted in writing within fourteen (14) calendar days after the aggrieved person knows or should have known of the facts giving rise to the grievance.</p>

		<p>(b)(1) Prior to the commencement of an action in court or any other action provided by law concerning the controversy, the director, the head of a procurement agency, or a designee of either officer may settle and resolve a protest concerning the solicitation or award of a contract.</p> <p>(2) This authority shall be exercised in accordance with laws governing the Arkansas State Claims Commission and the regulations promulgated by the director.</p> <p>(c)(1) If the protest is not resolved by mutual agreement, and after reasonable notice to the protestor involved and reasonable opportunity for the protestor to respond to the protest issues according to the regulations promulgated by the director, the head of a procurement agency, the director, or a designee of either officer shall promptly issue a decision in writing.</p> <p>(2) The decision shall state the reasons for the action taken.</p> <p>(d) A copy of the decision under subsection (c) of this section shall be mailed or otherwise furnished within five (5) days after it is written to the protestor and any other party intervening.</p> <p>(e) A decision under subsection (c) of this section shall be final and conclusive.</p> <p><u>(f) In the event of a timely protest under subsection (a) of this section, the state shall not proceed further with the solicitation or with the award of the contract until the director or the head of a procurement agency makes a written determination that the award of the contract without delay is necessary to protect substantial interests of the state.</u></p> <p>(g) When the protest is sustained and the successfully protesting bidder or offeror was denied the contract award, the protesting bidder or offeror may be entitled to the reasonable costs incurred in connection with the solicitation, including bid preparation costs, through the commission.</p>
205	<p><u>Page 15, 2.5 A.</u></p> <p>The RFP requires submission of audited financial statements no later than April 1st. Will you consider changing the deadline to May 1st to allow more time to complete the year-end audit process? At times our audited financial statements are not available until later in April.</p>	See # 144
206	<p><u>Page 16, 2.6 A.</u></p>	Yes, outside sources are acceptable.

	<p>Is the Broker required to provide the safety training for all vehicle operators or will outside training from authorized sources be acceptable?</p> <p>Can you clarify DHS/DMS's interpretation of "vehicle maintenance standards"? What guidelines does DHS/DMS require regarding vehicle maintenance standards?</p> <p>Do you require the broker to maintain a file for all subcontractor vehicle maintenance records?</p>	<p>Vehicle maintenance standards includes but is not limited to regular tire rotation, oil changes, fluid and belt checks, etc... and maintenance of wheelchair lifts, if equipped.</p> <p>Yes. The subcontractor should maintain a file of all maintenance records for the Broker or DMS/NET Monitoring Contractor to view or randomly audit.</p>
207	<p><u>Page 16, Section 2.6 C. 8 and 9</u></p> <p>The RFP states "Electronic method is the preferred method". Can the broker maintain all documents in an electronic format and if so, can that electronic file be stored outside on the central business office in the broker's data center?</p>	<p>Yes. All records must be retrievable for auditing purposes.</p>
208	<p><u>Page 17, Section 2.6 E.3</u></p> <p>This requirement states that the broker must answers 90% of all calls within 5 rings. For purposes of defining the service level, can "rings" be translated into seconds? For example, 90% of the call must be answered in 30 seconds.</p>	<p>Yes.</p>
209	<p><u>Page 18, Section 2.6 G.7</u></p> <p>This requirement refers to storing backup data off-site per the brokers disaster recovery plan. Is a cloud based backup solution permitted assuming all backup files are encrypted to meet state technology standards?</p>	<p>Yes, a cloud based system will be permitted as long as it's secure.</p>
210	<p><u>Page 20, 2.8 B.</u></p> <p>How often does DHS/DMS require verification of personnel against the State and Federal Medicare and Medicaid exclusion lists?</p>	<p>All office personal is provided to the NET Monitoring Contractor. The NET Monitoring Contractor runs the check against the Exclusion Database.</p>
211	<p><u>Page 21, 2.8 F.1.</u></p> <p>Can all required documentation be maintained in an electronic format or do you require the broker to maintain hard copy files?</p>	<p>Audited information must be obtainable from electronic format.</p>
212	<p><u>Page. 21, 2.9 A.</u></p> <p>The RFP states that all drivers must carry government issued identification and then states drivers must carry a valid driver's license. Does a driver's license meet the requirement for government issued identification or is an additional piece of identification required?</p>	<p>All drivers must have a valid driver's license and all attendants must have a valid driver's license OR a government issued ID.</p>

213	<p><u>Page. 23, 2.13 F.</u> Indicates “liability insurance coverage in the amount of \$5,000,000.00 by any sub-contractor”. Does this requirement apply to subcontracted transportation providers? If so, this is significantly higher than the current requirement and is higher than all other states. This requirement will result in increased premiums to transportation providers that will lead to higher transportation costs and ultimately result in higher NET program cost to the State. Will you consider reducing the requirement to \$1 million?</p>	\$1million for the Broker and \$1million for the sub-contractor
214	<p><u>Page 25, 2.19 B.</u> Police reports are often not available within three (3) days following an accident. Would you consider changing this requirement to “The broker will file a written accident report with DHS/DMS NET Monitoring Contractor with three (3) working days of the accident, and the Police Report as soon as it is available.”?</p>	<p>Incidents and accidents should be reported to the NET Monitoring Contractor as soon as they occur, especially those involving minors.</p> <p>The driver’s statements must be received within three (3) working days.</p> <p>The Police Report should be submitted to the NET Monitoring Contractor as soon as it is available.</p>
215	<p><u>Page 25, 2.20 B</u> Section B includes a requirement that states that the broker will contact and confirm the scheduled pick-up time with the beneficiary within 24 hours of the pick-up. Are automated appointment reminders performed through an outbound IVR or SMS text message service permitted?</p>	Yes.
216	<p><u>Page 27, 2.21 F.4</u> Does the 30-day submission requirement prior to beginning transportation services apply only to the initial implementation of the broker contract? If it is required throughout the contract, this provision will delay the implementation of new transportation providers and could have a negative impact on the broker’s ability to maintain an adequate network. Would you consider reducing the waiting period to 1 or 2 weeks?</p>	No.
217	<p><u>Page 27, 2.22.B.2</u> The RFP requires brokers to make “full payment to sub-contractor for authorized trips within a reasonable time, not to exceed thirty (30) Calendar days, following the Broker’s receipt of an invoice from the subcontractor”. Please clarify that this requirement only applies to the</p>	<p>Section 2.2 (B). Payment, Sub-contractors</p> <p>1. <u>The Broker will provide payment to sub-contractors in accordance with the terms of the service agreement between the Broker and the sub-contractor.</u></p>

	receipt of a complete and accurate invoice or “clean claim”?	<p>2. Brokers must make full payment to sub-contractor for <u>authorized trips within a reasonable time, not to exceed thirty (30) Calendar days, following the Broker’s receipt of an invoice form the sub-contractor.</u></p> <p>3. The Broker will render payment to sub-contractors for authorized trips made in accordance with this RFP and the terms of the contract.</p> <p>4. DHS/DMS will not be responsible or intervene on behalf of any sub-contractor should the Broker fail to provide timely payment or for any other matter of dispute between the Broker and the sub-contractor.</p>
218	<p><u>Page 28, 2.22.D</u></p> <p>Can you provide a detailed description of the calculations that will be used to determine the Annual Adjustment Factor?</p>	See page 28 of RFP Annual Adjustment Factor and Monthly Trip reporting.
219	<p><u>Page 30, 2.23 A.1</u></p> <p>Is transportation outside the State of Arkansas a covered benefit? If so, are there any distance limitations?</p>	Refer to RFP, page 35, H. Geographic Considerations, 2.
220	<p><u>Page. 31, E. Gatekeeping Process</u></p> <p>While we agree with the department’s increased emphasis in determining the availability of an operational vehicle in the household, this requirement will increase the time agents are required to be on the call with beneficiaries. Once the broker determines that a beneficiary has no other means of transport and maintains this information on file for future requests, is the Broker still required to ask these questions on every call from that beneficiary?</p>	Yes.
221	<p><u>Page 33, 2.25</u></p> <p>Are ambulatory and wheelchair services the only covered levels of transportation under this RFP?</p>	Yes.
222	<p><u>Page 33, 2.25 A.2</u></p> <p>What is DHS/DMS’s distance requirement for accessibility to the nearest bus stop? ¼ mile? 1/3 mile? ½ mile?</p>	1/4 mile with the consideration of the beneficiary’s current level of mobility and functional independence.
223	<p><u>Page 32, F. 5</u></p> <p>The RFP states that standing orders cannot exceed one (1) month in duration. Will you consider longer terms for long-term treatments such as dialysis? Monthly renewals</p>	No

	of dialysis standing orders will create additional workload for the broker and the dialysis centers.	
224	<p><u>Page 38, Q.</u> The requirement states there must be GPS on the camera. If the vehicle already has a GPS tracking device will you still require the camera to have GPS?</p> <p>Can we assume that this requirement only applies to in-network NET vehicles and does not apply to gas reimbursement, public transit vehicles, or the occasional use of an out-of-network provider such as a taxi cab?</p>	See # 38
225	<p><u>Page 39, 2.27 K.</u> This RFP requirement states that subsequent inspections are to identify the need for repairs and to record preventative maintenance? This seems to indicate a mechanical inspection. Does DHS require this inspection to be conducted by a mechanic?</p> <p>If you require the monthly and annual inspections to be the same, does this mean DHS/DMS will require 13 vehicle inspections every year (12 monthly and 1 annual)?</p>	<p>Vehicle inspections include but are not limited to: a daily walk around by the driver, monthly inspections by the broker, and a yearly inspection performed by a certified mechanic at the brokers cost.</p> <p>The NET Monitoring Contractor will also inspect each vehicle annually with random inspections throughout the year.</p>
226	<p><u>General Questions:</u></p> <p>Can you provide the number of trips in each region for each mobility (ambulatory and wheelchair)?</p> <p>Will DHS consider providing a monthly beneficiary import file so that eligibility can be downloaded in the trip reservation system for immediate verification without having to manually access the AEVCS system and incur the added cost? The cost of beneficiary eligibility through AEVCS often exceeds \$6,000 per month.</p>	<p>See # 100</p> <p>No. See # 68</p>