



**Non-Emergency Transportation Services
RFP #20091016**

Responses to Submitted Questions

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| 1 | 1.29 | 40 | Section 1.29 states that the Offeror must have two years experience in providing or brokering transportation services. Can the experience be either or does it have to be both providing and brokering? | The Offeror must have two years experience and that experience can be either providing transportation services or brokering services or a combination of both. |
| 2 | 1.29 | 40 | This section says the Offeror must have experience recruiting NET Providers. Can this experience include recruiting and hiring drivers? | Experience can include recruiting and hiring drivers if the Offeror is not currently brokering transportation to other entities. |
| 3 | 1.29 | 40 | This Section says the Offeror must have experience operating all aspects of a full brokerage NET Services program for a population of at least 30,000 lives and operating an interactive voice response system and staffing a NET Services customer service telephone system. Will experience operating transportation services for clients other than a brokerage system for NET medical transports be acceptable? Is the 30,000 lives a minimal number? | The Offeror must have experience scheduling and providing transportation to people and that transportation does not have to be for medical purposes. The Offeror should have experience in staffing and operating an interactive phone system. If the number of lives is less than 30,000, the Offeror should detail how many lives they currently cover and they should describe in their response how they would be able to cover a population of at least 30,000 lives. |

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| 4 | 8.2.3 | | Please clarify the definition of the “bid price” that will be evaluated using the procedure outlined in this section. Will this be the Total Contract Price from the lower right corner cell of the Appendix A form? | Yes. See the attached amended Appendix A with instructions posted on our website. |
| 5 | 1.35 | | Please clarify the definition of the “firm and fixed” “bid price proposals” referenced in the Operation Phase portion of this section of the RFP. Can we assume this refers to the Total Contract Prices provided by the bidder for each year of contract operations? If so, can we assume that each monthly payment will represent 1/12 of the total contract price bid for that year? (Or is the State going to calculate a PMPM based on the information provided in Appendix A)? | Monthly payments will be based on the PMPM rate stated in the contract times the number of beneficiaries determined eligible for full Medicaid benefits. The monthly number that will be utilized will be the last weekly report provided by DOM that is produced for the prior month. The report is generated from the Mississippi Medicaid Information System. For example, the August bill would utilize the number determined eligible for the last reporting week in July. Payments will be subject to maximum payments as stated in the Broker’s contract. |
| 6 | Appendix A | | Appendix A seems to be asking bidders to provide a single participant population number. Do we understand this correctly, or should bidders provide a population number for each time period of the contract? In either case, we assume the number being asked for is “the sum of expected monthly populations” for whatever time period is specified. If not, please explain what this population number should represent? | The number reported should be the estimated number based on the utilization data provided. The Offeror may provide a single participant population for the entire period or a participant population number for each year of the contract. |
| 7 | Appendix A | | Could you please explain how this population number will be used? Will it be used in any way in evaluating each bidder’s price proposal? Will it be used in any way to determine the Contractor’s monthly payment? | The participant population number provided by Offerors in Appendix A is provided for information and evaluation purposes. It will assist DOM in interpreting and comparing the Offerers’ proposals. The Contractor’s monthly payment will be determined as described below in Question #8. |

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| 8 | Appendix A | | <p>If the population number (or numbers) provided on Appendix A will be used in some way to determine the Contractor's monthly payments, could you please explain in detail how this will work? (If used to determine provider payment, then we suggest that the bidders be asked for different populations for each year. If the bidder payments are based on one average annual participant population number, we believe it would likely result in a PMPM that was too low in the earlier periods of the contract, assuming that the covered Medicaid population increases over time.)</p> | <p>See amended Appendix A with instructions posted on our website. In addition please refer to the response to Question #6 above. Monthly payments will be based on the PMPM rate stated in the contract times the number of beneficiaries determined eligible for full Medicaid benefits. The monthly number that will be utilized will be the last weekly report provided by DOM that is produced for the prior month. The report is generated from the Mississippi Medicaid Information System. For example, the August bill would utilize the number determined eligible for the last reporting week in July. Payments will be subject to maximum payments as stated in the Broker's contract.</p> |
| 9 | Appendix A | | <p>This schedule does not ask for a PMPM (Per Member per Month) rate. Is it DOM's intention to take the Annual Contract Price bid on Appendix A and divide into twelve equal installments?</p> | <p>No. See amended Appendix A with instructions posted on our website.</p> |
| 10 | Appendix A | | <p>During 2009, LogistiCare was paid based on a PMPM rate, which, due to membership growth, would have exceeded the Contract Price bid on the original RFP if DOM had not used the original Contract Price bid to limit total payments under the contract. As a result, LogistiCare forfeited over \$1.3M in expected PMPM payments in the last two months of FY 2009. Is it DOM's intention under the new contract to use this Contract Price as the absolute maximum compensation to the Contractor regardless of what the membership growth and utilization ends up being over time?</p> | <p>See amended Appendix A with instructions posted on our website. In accordance with our State Plan, DOM utilizes a risk-based capitated payment structure which allows the State to better predict NET expenditures. During the contract negotiation phase, DOM will include language to set a maximum amount that will be paid each year of the contract. Membership growth may not directly correlate with increased utilization. DOM will be willing to discuss during contract negotiations adding options in the event factors such as, but not limited to, increases in trips caused by utilization increases surpasses a negotiated percentage. However, no guarantee is being made at this time that such options will be in the final contract.</p> |

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| 11 | 1.2.2 | | If we have additional questions on the State's clarifications and/or additional information, will we be allowed to ask for additional clarifications? If so, what time frame will be allowed? | Formal questions will not be entertained after 5:00 PM CST, Friday, October 30, 2009. Any additional communication must be with the Procurement Officer, Melanie Wakeland. |
| 12 | 1.2.3 | | The solicitation timeframe is excessively tight and is likely to suppress competition. There was just over a month allowed from the initial release of the RFP to the proposal submittal date. Furthermore, since the State won't be answering questions until November 6 th , there are only 2 weeks allowed for responding organizations to digest the additional information and then prepare responsive proposals. This is not enough time, which provides an unfair competitive advantage to the incumbent. Please postpone the proposal submission date to allow at least 30 days between the state's answering written questions and the proposal due date. | The deadline cannot be extended. |
| 13 | 1.5 | | Please provide information summarizing the number, type, and costs associated with Emergency Medical Air Ambulance, Commercial Air Transports, Out-of-State, and Fixed-Wing Transports during each of the past 3 years. | See updated NET Data posted on our website. |
| 14 | 1.6 | | Please identify the current network of NET providers in each County along with their individual contact information, fleet makeup, services offered, and rate structures. Please also provide the current geographic coverage Report. | This information will not be provided by DOM. |

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| 15 | 1.6.5 | | Please identify the current usage of public fixed-route transit services for NET recipients, particularly including the number of trips covered and volume of bus passes provided by public transit system. | The current usage of public transit is minimal and no data is available. |
| 16 | 1.6.7 | | Is evidence of automobile ownership within the household considered evidence that the participant has access to available transportation? | No. The Contractor should determine if the participant has access to that vehicle. For example, if the vehicle is owned by a family member who uses the vehicle for employment or school purposes, it may not be available for use by the participant. |
| 17 | 1.14.4 | | Since the broker is required to capture and produce the ACD telephone reports listed in this section on a daily, weekly, and monthly basis, please provide monthly and annual statistics associated with these measures during each of the past 3 years. If these are not available, please provide copies of the incumbent broker's Monthly Reports required in Sections 1.28 for the past 24 months. | Since certain reports contain Protected Health Information (PHI) they will not be released. The Broker has freedom, with DOM approval, to design reports as long as they contain the data elements listed. |
| 18 | 1.30 | | Please provide a copy of the incumbent broker's project staffing plan as required in this section. | This will not be released. The Offeror should propose solutions that meet or exceed the overall objectives outlined in the RFP. |
| 19 | 2.5 | | Is the information in the NET Data spreadsheet all of the utilization information you're planning to provide? What other statistical information is available that we might be missing? | Additional data has been posted on the DOM procurement website. This is the only utilization information that will be released. |

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| 20 | Appendix A | | The Budget Summary form says: "Sections 1.0 and 7.0 address submission of the Budget Summary. Failure to follow the submittal instructions will immediately disqualify the Offeror." We do not see these instructions. Please clarify or provide. | See amended Appendix A with instructions posted on our website. |
| 21 | Appendix G | | The RFP document seems to skip from Appendix A to Appendix G. Are there some other Appendices that are supposed to be in between that are missing? | There are no other appendices other than A and G. |
| 22 | General | | Please provide a copy of the incumbent broker's current contract and all amendments to date. | This information is only available through a Request for Information through DOM's Public Information Officer. |
| 23 | General | | What is the incumbent broker's current capitated rate? | This information is only available through a Request for Information through DOM's Public Information Officer. |
| 24 | | | Please provide a list of current NET Providers by County; including the number and types of vehicles they have available for service. | This information will not be provided. |
| 25 | 1.28.2 | 37 | Please provide the number of NET trips provided by County on a monthly basis from 11/1/06 through 9/30/09. Please break these trips down by the mileage categories prescribed in Section 1.28.2 and by Level of Service (Ambulatory, Wheelchair, Stretcher and Air). | See updated NET Data posted on our website, due to HIPAA regulations; we cannot provide county level detail. |

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| 26 | 1.14.4 | 27 | Please provide the monthly call statistics required in Section 1.14.4 for the current Contractor for the period March 2009 through September 2009. | Limited call center statistics have been provided. The other information captured will not be released because it is not relevant in developing a solution. |
| 27 | | | Please provide the contract rates paid to the current Contractor since 11/1/06, noting the effective date and amount of any Change Orders/Amendments. | This information must be obtained through a request for information through our Public Information Officer. |
| 28 | | | What is the current reimbursement methodology? | The Broker is paid a capitated per-member-per-month for all Medicaid recipients that are in a full Medicaid covered category. |
| 29 | | | Does the current reimbursement amount include stretcher, emergency, and air cost? | The current reimbursement includes commercial air. Emergency ambulance is not included but urgent trips are. Currently there are no stretcher services being provided through the NET program. |
| 30 | | | Please provide the number of Medicaid beneficiaries for each month from 11/1/06 through 9/30/09 | The total numbers of beneficiaries eligible for NET services from January 2007 through September 2009 are posted on the Procurement web site. |
| 31 | 1.14.1 | 26 | What are the 800 numbers that will be released by the current Contractor if they do not win the bid? | There is no requirement for the current Broker to release their 800 numbers. |

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| 32 | 1.29 | 40 | Will DOM modify section 1.29 to require disclosure of contracts exceeding an annual value of \$1,000,000 rather than all government contracts and all non-government contracts during the last 3 years? | DOM will not amend the RFP. |
| 33 | | | Can electronic data keeping be utilized for complaints? | Yes. |
| 34 | | | Can vehicle maintenance records be kept through electronic format? | Yes. |
| 35 | 1.28.1 | | Can the deadline for this report be extended to 25 days after month end to ensure receipt of all necessary data from NET Providers? | No. |
| 36 | | | Can DOM provide a current NET Provider Manual? | No. |
| 37 | | | Is there a mandated form to utilize for Accidents and Incidents or is the Contractor responsible for developing a form? Can this data be obtained electronically? | There is not a mandated form. Data can be obtained electronically. |

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| 38 | | | Can advertising be in place on a vehicle as long as it does not interfere with the Company's name, logo and phone number? | This will be determined on a case by case basis. |
| 39 | | | Are there additional vehicle requirements not listed in this RFP (vehicle age, mileage etc.)? | All vehicle requirements are outlined in Section 1.7 of the RFP. |
| 40 | | | Is the Contractor responsible for all driver training, or can training be provided by NET providers? Are there any specific courses or training procedures mandated by DOM? | Drivers can receive training from either the Broker or the NET provider. There are no specific courses or training procedures mandated by DOM. |
| 41 | 1.28 | 36 | Are Ambulatory and Wheelchair the only categories included in the Levels of Service? | Currently these are the only two. However, the Offeror may propose others related to non-emergency transportation in their response. See Appendix G for the definition of Level of Service. |
| 42 | 4.3.2 | | Section 4.3.2 describes the termination options available to DOM. Does the Contractor also have termination options? | Options for termination by the Contractor will be contained in the contract. |
| 43 | 4.14.2 6.4.2 | | Are the financial statements required by Section 6.4.2 protected from disclosure as proprietary information? | In accordance with state law, documents furnished to the state containing trade secrets or confidential information will not be subject to disclosure until notice has been given to the Offeror. However, such documents will be disclosed, in a reasonable amount of time after request, unless the Offeror has obtained a court order protecting the information. |

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| 44 | | | Can participant surveys be conducted through recorded, automated phone calls, or must they be done with a "live" operator? | The Offeror should determine how to best meet this requirement. |
| 45 | 6.5.2 6.5.3 | | If key personnel are not known when the proposal is submitted, can we state that references and resumes will be provided at a later date in accordance with Section 1.30? | Yes. |
| 46 | Appendix A | | Please provide the participant population to be used as the basis of the cost calculations. | The Offeror should determine anticipated requirements. |
| 47 | Appendix A | | Is the Operation Cost a fixed fee for the specified period or a fixed fee PMPM? If a fixed fee PMPM, what is the number of members we should use for each period to compute the total Operations Cost? | See amended Appendix A with instructions posted on our website. The Operation Cost is the amount you budget for all operating costs to operate the brokerage. For example, cost could include but are not limited to: staff, rent, utilities, equipment, administrative expenses, and payments to NET providers. The number of members is the choice of the bidder. Also see amended Appendix A with instructions posted on our website. |
| 48 | | | Is the Contractor responsible for all Medicaid trips originating from nursing homes or just the dialysis trips from nursing homes? | The Broker is responsible for all Medicaid trips to Medicaid covered services originating from nursing homes. |
| 49 | | | What are the minimum liability insurance requirements for the Contractor and NET Providers? | See Sections 1.7 and 4.13.2 of the RFP. It is suggested that if the Broker is contracting with a company that has drivers that the company have at least \$1,000,000 in coverage. It is suggested that the Broker have at least \$5,000,000 in coverage. |

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| 50 | 1.28 | | Please provide copies of all of the reports for the current Contractor required in Sections 1.28.1 through 1.28.19 for the period March 2009 through September 2009. | Since certain reports contain Protected Health Information (PHI) they will not be released. The Broker has freedom, with DOM approval, to design reports as long as they contain the data elements listed. |
| 51 | 1.5 | 11 | Private Auto – Medicaid participants that have a vehicle or access to a vehicle are not covered for reimbursement under the current program. Since it may be costly to begin providing reimbursement for such participants, could you please confirm that it is DOM's intent that the Contractor start reimbursing Medicaid members for the use of household vehicles? | Medicaid participants that have a working vehicle or access to a working vehicle will not be covered for reimbursement under the program, unless a medical condition prevents them from driving. However, if a neighbor, friend, or family member that does not live in the household would transport for gas money and it is more economical than using an enrolled provider, the Broker has that option. |
| 52 | 1.5 | 11 | Emergency transports – Please confirm that the Contractor is not responsible for emergency medical transports, but only for the transport of emergency room discharges who can be transported home in an ambulatory or wheelchair vehicle or by commercial air? | That is correct; however, the discharge could also be from the hospital and not just the emergency room. |
| 53 | 1.5 | 11 | Out of State Meals/Lodging – Currently this level of service has been increasing and is not included in the contractor's PMPM payment. It is now handled as a cost-pass through for payment by DOM. Is DOM now expecting these costs to be covered by the contractor's PMPM payment? | Yes |

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| 54 | 1.5 | 11 | <p>Fixed Wing Transports – Since there is no data being provided on this new level of service (such as flight mileage, average flight reimbursement, etc.), we understand DOM to be requesting that the Contractor propose administrative policies and procedures for improving the handling, pricing, and coordination of ground/air ambulance transportation, with the transportation costs being passed through to DOM (much like current policy for Out-of-State Meals/Lodging)? Is this understanding correct?</p> | <p>We currently have an agreement with one provider to provide all fixed wing transports. We are seeking assistance from a Broker who can assist DOM to locate other potential providers and negotiate reasonable rates. We are also seeking other alternatives to air ambulance services that could be less costly and more appropriate to the beneficiary's actual needs. For example, a medical escort and commercial flight combination might be less costly than a straight fixed wing transport. The bidder may propose both passing the cost through to DOM or including it in the PMPM.</p> |
| 55 | 1.5 | 11 | <p>If DOM expects the Contractor to be responsible for fixed wing transport costs, could you please provide the utilization by month of service (including the expected number of claims still left open after Sept 2009), along with average flight reimbursement, Medicaid fee schedule used to pay carriers, average flight mileage, administrative staff/cost currently handling this program?</p> | <p>See updated NET Data posted on our website.</p> |
| 56 | 1.5 | 11 | <p>Non-emergency Transports – This is a new mode of service not currently covered under the NET program. It is defined as motorized vehicles equipped for transporting passengers whose conditions may also require the use of medical equipment, monitoring, aid, care or treatment, including the administration of drugs or oxygen, during the transport. This appears to require ambulance service, since the current regulatory environment does not allow for the introduction of stretcher vehicles throughout all geographic regions.</p> <p>Since the Contractor may not be able to create competition for this class of service in some</p> | <p>We are not adding a new mode of transportation. Also, we are not requiring the broker to operate ALS or BLS vehicles. ALS and BLS transports will be provided through the Ambulance program as they are now and are not part of this RFP. See the response to Question # 71 for additional information.</p> |

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| | | | <p>communities due to the regulatory environment (certain counties have provided exclusive service rights for any stretcher or ambulance transports in the county), and since DOM has been paying these providers based on the Medicaid fee schedule, it seems as though this mode of transport would be more affordably handled as a cost pass through with the Contractor providing prior authorization, gate-keeping for proper level of service (ALS vs. BLS), mileage verification, and medical necessity review, while still holding these providers to a Medicaid fee schedule. Would DOM consider requesting the Contractor to administratively manage the Non-emergency Transports while passing through actual costs to DOM (much like the current Out-of-State Meals/Lodging policy)</p> | |
| 57 | 1.5 | 11 | <p>If DOM decides to make the Contractor responsible for non-emergency ambulance transports, could you then please provide the following data?</p> <ul style="list-style-type: none"> • Encounter data for the last two years (including CPT Codes) by month of service. • Last two years of data on any participants eligible for ambulance class service • The Medicaid fee schedule being used to pay providers • A list of transportation providers by county currently providing this service. | <p>The Broker is not responsible for non-emergency ambulance transports.</p> |

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| 58 | | | <p>While Medicaid membership has increased about 7% over this past nine months, the number of unduplicated riders has increased by 26% over the same period. (Please see table below.) We are projecting a 10 to 14% increase in membership while expecting a 28 to 42% increase in unduplicated riders. Can DOM provide projections by year on both Members and Unduplicated riders for SFY 2010, 2011, and 2012?</p> <table border="1" data-bbox="600 561 1276 841"> <thead> <tr> <th data-bbox="600 561 716 662">Mississippi Medicaid</th> <th data-bbox="716 561 800 662">Qtr-1 2009</th> <th data-bbox="800 561 968 662">August 2009</th> <th data-bbox="968 561 1073 662">Difference</th> <th data-bbox="1073 561 1146 662">6-mth % Incr.</th> <th data-bbox="1146 561 1220 662">Annual Increase</th> <th data-bbox="1220 561 1276 662">LGTC Increase Projection</th> </tr> </thead> <tbody> <tr> <td data-bbox="600 662 716 764">Unduplicated Riders</td> <td data-bbox="716 662 800 764">9,636</td> <td data-bbox="800 662 968 764">10,875</td> <td data-bbox="968 662 1073 764">1,239</td> <td data-bbox="1073 662 1146 764">12.9%</td> <td data-bbox="1146 662 1220 764">25.7%</td> <td data-bbox="1220 662 1276 764">28.2 to 42.3%</td> </tr> <tr> <td data-bbox="600 764 716 841">Membership</td> <td data-bbox="716 764 800 841">497,947</td> <td data-bbox="800 764 968 841">516,009</td> <td data-bbox="968 764 1073 841">18,062</td> <td data-bbox="1073 764 1146 841">3.6%</td> <td data-bbox="1146 764 1220 841">7.3%</td> <td data-bbox="1220 764 1276 841">10 to 14%</td> </tr> </tbody> </table> | Mississippi Medicaid | Qtr-1 2009 | August 2009 | Difference | 6-mth % Incr. | Annual Increase | LGTC Increase Projection | Unduplicated Riders | 9,636 | 10,875 | 1,239 | 12.9% | 25.7% | 28.2 to 42.3% | Membership | 497,947 | 516,009 | 18,062 | 3.6% | 7.3% | 10 to 14% | DOM is unable to project future enrollment. |
| Mississippi Medicaid | Qtr-1 2009 | August 2009 | Difference | 6-mth % Incr. | Annual Increase | LGTC Increase Projection | | | | | | | | | | | | | | | | | | | |
| Unduplicated Riders | 9,636 | 10,875 | 1,239 | 12.9% | 25.7% | 28.2 to 42.3% | | | | | | | | | | | | | | | | | | | |
| Membership | 497,947 | 516,009 | 18,062 | 3.6% | 7.3% | 10 to 14% | | | | | | | | | | | | | | | | | | | |
| 59 | | | <p>Since Katrina and throughout 2008 and 2009, we have noticed that members are going considerably longer distances to their appointments. For example during 2009, as shown below 2009, average mileage has grown over 18%. Mileage in the month of September 2009 appears to be 33% higher than it was in early 2008. Can DOM provide bidders with any helpful information about trends in the Medicaid Provider network and any future plans to recruit more Medicaid physicians throughout the state?</p> <table border="1" data-bbox="600 1198 1276 1495"> <thead> <tr> <th data-bbox="600 1198 705 1430">MILEAGE GROWTH</th> <th data-bbox="705 1198 779 1430">Qtr 1 - 2008</th> <th data-bbox="779 1198 863 1430">Qtr 3 - 2009</th> <th data-bbox="863 1198 947 1430">Mileage Increase</th> <th data-bbox="947 1198 1031 1430">Mileage % Increase</th> <th data-bbox="1031 1198 1104 1430">2009 Sep-09</th> <th data-bbox="1104 1198 1199 1430">Mileage Increase (Sept 09 vs 2008)</th> <th data-bbox="1199 1198 1276 1430">Sept Increase over 2008</th> </tr> </thead> <tbody> <tr> <td data-bbox="600 1430 705 1495">Avg Mileage</td> <td data-bbox="705 1430 779 1495">23.66</td> <td data-bbox="779 1430 863 1495">27.96</td> <td data-bbox="863 1430 947 1495">4.29</td> <td data-bbox="947 1430 1031 1495">18.1%</td> <td data-bbox="1031 1430 1104 1495">31.49</td> <td data-bbox="1104 1430 1199 1495">7.83</td> <td data-bbox="1199 1430 1276 1495">33.1%</td> </tr> </tbody> </table> | MILEAGE GROWTH | Qtr 1 - 2008 | Qtr 3 - 2009 | Mileage Increase | Mileage % Increase | 2009 Sep-09 | Mileage Increase (Sept 09 vs 2008) | Sept Increase over 2008 | Avg Mileage | 23.66 | 27.96 | 4.29 | 18.1% | 31.49 | 7.83 | 33.1% | DOM is unable any information regarding trends in the Medicaid Provider network. Medicaid does not recruit physicians. | | | | | |
| MILEAGE GROWTH | Qtr 1 - 2008 | Qtr 3 - 2009 | Mileage Increase | Mileage % Increase | 2009 Sep-09 | Mileage Increase (Sept 09 vs 2008) | Sept Increase over 2008 | | | | | | | | | | | | | | | | | | |
| Avg Mileage | 23.66 | 27.96 | 4.29 | 18.1% | 31.49 | 7.83 | 33.1% | | | | | | | | | | | | | | | | | | |

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| 60 | 6.5.3 | | May any of the three persons identified in response to item 5 be persons currently or formerly employed by the bidder? | Yes |
| 61 | 8.2.2 | | <p>Would you please consider normalizing the technical score in the same way as the cost score is normalized? When this contract was last bid out in 2006, both the technical score and cost score were normalized. (top scorer got full # of points). However, in this RFP the technical score is not normalized. This creates a situation where the cost score will count more than 30%, which seems to contradict the intention of the scoring methodology. For example, if the top scoring bidder only gets 600 points, then cost will determine at least 40% of their score. If the top technical scorer is not the low bidder, then cost will be more than 40% of their final score. All other bidders will also have more than 40% of their final score determined by cost. If the Technical Scores are normalized like last time, with the top scorer receiving 700 points, then cost will determine closer to 30% for all bidders.</p> | <p>Yes, 700 points will be awarded to the technical proposal with the highest raw score awarded by the evaluation committee. Points for other bids will be awarded using the formula:</p> $\frac{y}{n} * 700 = z$ <p>Where</p> <p>y = raw score of offerors technical proposal n = highest raw score z = assigned points</p> |
| 62 | 1.6 | | If we already have a provider under contract, may we provide the signature page of the contract in lieu of a Letter of Commitment? | Yes |
| 63 | 1.16 | | If the incumbent contractor retains the contract, will it be required to perform the Participant mailing described in this section, since no program transition will be occurring? | No |

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| 64 | 1.29 | | <p>This section of the RFP requires bidders to "provide references" for all governmental and non-governmental clients during specified time periods. Can you please specify how much information you want to see for each reference? (client name? reference name? phone #? email? etc)</p> | <p>The information should include information to describe the experience of the Offeror to include information such as, but not limited to::</p> <ol style="list-style-type: none"> 1. Client Name 2. Client address 3. Client Contact Name, job title, phone number, and e-mail address. 4. The scope of the services. 5. The number of lives and trips provided. 6. The contract period 7. The area covered 8. The number of employees 9. The type of contract and the dollar value of the contract. |
| 65 | 1.6.6 | | <p>Item 6 in this section seems to leave it up to the Contractor to determine when "inadequate provider supply" exists in an area. In 2006, DOM clarified this language by saying "This section will be amended to reflect that DOM will determine the counties in which there exists an inadequate number or availability of NET Providers." May we assume that DOM intends this language to be similarly amended now?</p> | <p>It will be the responsibility of the Contractor to ensure adequate coverage. If DOM determines that there is inadequate coverage through DOM's monitoring of the Contractor, the Contractor will be required to take immediate action to address the situation.</p> |
| 66 | | | <p>The data on air flights seems roughly 50% low to us. Is this because it does not include the air flights purchased for escorts?</p> | <p>Yes.</p> |
| 67 | | | <p>The call data seems low to us. Is that because it only includes reservations calls?</p> | <p>Yes</p> |

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| 68 | | | Can DOM please provide the number of Medicaid eligibles that the agency has projected for calendar year 2010, 2011 and 2012? | DOM does not make such projections. |
| 69 | 1.35 | | The new contract is scheduled to start on April 1, but according to this section payment to the Contractor will not begin until July 1. Could you please confirm if this discrepancy is intended by the RFP, and if it is, please explain the reason for it? | April 1, 2010 is the start date for the Implementation Phase of the new contract and is to prepare for services to be provided beginning July 1, 2010. During the Implementation Phase for the new contract the incumbent Contractor would only be eligible for receipt of payment for actual implementation expenses incurred to acquire the infrastructure to provide services as specified in this RFP and approved by DOM. The incumbent would continue to be paid for services provided under the current contract which does not end until June 30, 2010. |
| 70 | 1.4.2 | 10 | In reference to the additional education to Participants who habitually request transportation less than 2 business days in advance, does the State currently have a discipline policy for these Participants? | No |
| 71 | 1.5 | 11 | Please clarify that the bidder is not responsible for Emergency Transports. | No, emergency transports are provided through a separate ambulance program. However, if a beneficiary is transported via the ambulance program and upon release from the hospital they are able to be transported through the NET program, the Broker shall schedule the trip as an urgent trip. |

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| 72 | 1.5 | 11 | <p>Please provide the following data.</p> <p>a. Total number of trips by month, by mode for 2007, 2008</p> <p>b. Total number of miles by month, by mode for 2007, 2008</p> <p>c. Total number of Standing order request by month for 2007, 2008</p> <p>d. Total number of out-of-state trips for 2007, 2008</p> <p>e. Total number of Meals and Lodging by month for 2007, 2008</p> <p>f. Total cost for meals for 2007 and 2008</p> <p>g. Total cost for lodging for 2007 and 2008</p> | See updated NET Data posted on our website. |
| 73 | 1.6 | 13 | Please provide a current listing of all transportation providers. | This information will not be provided. |
| 74 | 1.6.6 | 17 | Please provide monthly reports currently required by the contractor for 2007 and 2008. | Since certain reports contain Protected Health Information (PHI) they will not be released. The Broker has freedom, with DOM approval, to design reports as long as they contain the data elements listed. |
| 75 | 1.6.6 #6 | 17 | Has the current contractor been required to establish their own vehicles in any areas of service? | No |
| 76 | 1.6.6 #7 | 17 | Please provide the total number of Post – transportation authorization request for 2007 and 2008. | This information is not available. |

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| 77 | | | Please provide the total number of incoming calls by month for 2007 and 2008. | See updated NET Data posted on our website. |
| 78 | | | Please provide the total number of calls by hour by month for 2009. | This information will not be provided. |
| 79 | | | Please provide the current staffing by position and status (Full-time and part time) | The Offeror should propose their solution that should meet or exceed the overall objectives outlined in the RFP. |
| 80 | | | Please provide the current transportation provider rates. | This information must be obtained through a request for information through our Public Information Officer |
| 81 | | | Does the state currently use bus and mileage reimbursement as a mode of transport? | The current Broker has utilized public transit services when available. Bus services such as Greyhound have not been used. The current Broker does use mileage figures for reimbursement. |
| 82 | 1.2.3 | 8 | This section states that the proposal must be in a 3-ring binder. Is this for both the Technical Proposal and Business Proposal? | The Technical Proposal must be in a 3-ring binder. The Business Proposal may be bound as you choose. |

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| 83 | 1.3 | 10 | Please clarify what is meant by “DOM will consider Responses to this RFP that propose modifications to the following specifications.” | The Offeror may propose alternative solutions that are more efficient and/or effective. The Offeror’s proposal should meet or exceed the expectations of the RFP. |
| 84 | 1.4.2 | 10 | This section refers to a Participant who requests transportation less than two business days in advance of the appointment date. Is the Contractor required to schedule the trip to the Participant or will the Contractor deny the trip and educate the Participant on the advance reservation requirements? | As stated in the section of the RFP: “Because scheduling issues will occasionally occur, the Contractor must develop processes for handling urgent trips, last minute requests from Participants, scheduling changes, and NET Providers who do not arrive for scheduled pick-ups.” In those instances, the Contractor is required to schedule the trip. |
| 85 | 1.5 | 11 | Under the Commercial Air Transport section, the second paragraph states that “if the medical services have been pre-certified... the contractor is responsible for making the appropriate arrangements”, please state who is “pre-certifying” these trips and the process and time frame for submittal to the Contractor. | Pre-certification is performed by DOM's Utilization Management and Quality Improvement Organization (UM/QIO) contractor, Health Systems of Mississippi (HSM). The Broker may be contacted by DOM, the beneficiary or a representative of the beneficiary, such as but not limited to, a family member or a representative of a referring hospital. The timeframe will vary on a case-by-case basis. The Broker will have access through DOM for prior authorization information. |
| 86 | 1.6 | 13 | Please provide a list of all current NET Providers, with contact information, including Company Name, Company Contact Person, Address, Phone, Fax and Email. | This information will not be provided. |

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| 87 | 1.6 | 13 | Please provide a list of all NET Providers who currently provide bariatric transportation, by geographic areas of coverage. Please provide Company Name, Company Contact Person, Address, Phone, Fax and Email. | No bariatric transports have been provided through the NET program to date. However, the Contractor must be prepared to provide such service if necessary. |
| 88 | 1.6.6 | 16 | Please clarify this section for all vendors. Is the closest provider a requirement? | The Broker is required to transport a Participant to the nearest appropriate medical provider as outlined in 1.6.6. |
| 89 | 1.6.6 | 16 | Please define "reasonable proximity" as it relates to the closest provider requirement. | This is defined in Section 1.6.6. |
| 90 | 1.6.9.2 | 19 | Regarding the post-transportation validation checks, what is the expected action a Contractor shall take as it relates to a Participant who travels under a false appointment and it is verified by the Provider that no appointment occurred? | This information should be reported to DOM. |
| 91 | 1.8 | 22 | Will vehicles purchased with Federal or state funds through the Department of Transportation be exempted from DOM's vehicle inspection requirement? | If MDOT can demonstrate to the Contractor that MDOT is inspecting vehicles and their inspections meet the requirements of Section 1.8, DOM will consider allowing the Contractor to rely on MDOT's inspections if the Contractor maintains documentation to substantiate compliance. |
| 92 | 1.8 | 22 | Will DOM consider allowing a percentage of vehicles be inspected rather than all vehicles? | No. |

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| 93 | 1.9 | 23 | Does the requirement for the criminal background checks apply to common carriers? For example, when we use airlines, transit systems, licensed taxicab carriers, and potentially intercity bus services, or other similar services which are regulated by other State or local authorities, many of these authorities may have different types of requirements for licensing and background checks, and any requirements on top of that licensing may eliminate our ability to use these common carriers where they are appropriate for the transportation services. Can these alternatives be handled on a case by case basis? | No, those requirements do not apply to common carriers. |
| 94 | 1.12 | 25 | What is the expected cancellation policy for Participants? | There is no specific cancellation policy. |
| 95 | 1.14.1 | 26 | In an effort to reduce costs for DOM, will DOM consider the proposer have an administrative facility located inside Mississippi and a call-taking facility located outside Mississippi? | No. |
| 96 | 1.27.1 | 35 | Please provide a copy of the current Turnover Plan that was submitted by the current Contractor. | This information must be obtained through a request for information through our Public Information Officer. |
| 97 | 1.28 | 36-40 | Please provide all reports listed in this section for the current Contractor for the time period of July 1, 2008-June 30-2009. | Existing reports will not be provided. The Offeror should determine how to best meet this requirement. |

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| 98 | 4.3 | 49 | Please confirm that contract signing and the Implementation Period is expected to begin on April 1, 2010, with transportation services beginning on July 1, 2010. | The Contract term will begin April 1, 2010; the Implementation Phase is April 1, 2010 to June 30, 2010; and the Operations Phase is July 1, 2010 to June 30, 2013 unless the option to renew for an additional year is exercised. |
| 99 | 6.4.1 | 71 | Please clarify that for 2., the DOM is requesting where the company headquarters is located and for 3., the DOM is requesting where the administrative office/call center will be located. | #2 is where the company headquarters is located. #3 is where the administrative office/call center will be located. |
| 100 | 6.4.2 | 71 | If the contracting entity has been in business less than 5 years, then only financial statements from inception are available. Please confirm that if the contracting entity provides financial statements from inception the provisions of section 6.4.2 will be met. | DOM will accept financial statements from inception for a vendor that has been in business less than five (5) years. |
| 101 | 6.4.3 | 72 | Please define the term "staff months expended". | The number of months times the number of employees used to manage the contract. |
| 102 | 8.2 | 76 | Please provide the standard evaluation form that will be utilized by the evaluation committee. | No additional information will be given concerning the evaluation process. |
| 103 | | | Please provide the number of one-way trips provided in Fiscal Year 2008 that were ambulatory, non-ambulatory, stretcher trips, and any other categories available. | See updated NET Data posted on our website. |

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| 104 | | | Please provide the number of miles (or average trip length) for all one-way trips in Fiscal Year 2008 that were ambulatory, non-ambulatory and stretcher trips. | See updated NET Data posted on our website. |
| 105 | | | Please provide Fiscal Year 2008 statistical and historical cost information on all commercial air transports. | See updated NET Data posted on our website. |
| 106 | | | Please provide Fiscal Year 2008 statistical and historical cost information on all Out-of-State Meals and Lodging. | See updated NET Data posted on our website for other statistical data. |
| 107 | | | Please provide the major trip generators or major population centers for the Fiscal Year 2008. | See updated NET Data posted on our website. |
| 108 | | | Please provide the number of Medicaid eligibles for the Fiscal Year 2008, by month and county. | See updated NET Data posted on our website, due to HIPAA regulations; we cannot provide county level detail. |
| 109 | | | Please provide the number of Medicaid eligibles for Fiscal Year 2009, by month and county. | See updated NET Data posted on our website, due to HIPAA regulations, we cannot provide county level information |

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| 110 | | | Please provide the expected number of Medicaid eligibles for July 2010. | DOM does not have projected future eligibility data. |
| 111 | | | Please provide the current operation cost per month (in other words, the current per member, per month that is being paid to the current vendor). | This information must be obtained through a request for information through our Public Information Officer. |
| 112 | | | Please provide the rates paid to all current NET Providers. | DOM does not maintain this information. It is the responsibility of the Contractor to negotiate the rates they pay to their enrolled NET Providers. |
| 113 | | | May we get either an electronic file or hard copy report of all trips taken for each service area for a representative month or, if difficult, at least a week? (Note: if necessary we can sign a HIPAA agreement, or alternatively the last two digits of hundred blocks can be redacted, but actual trips are the best way to minimize trip cost estimates and the productivity from ride sharing, etc.) | DOM will not release this type of information. |
| 114 | | | Can you provide available call center historical volume information? Please include hourly in-bound telephone statistics for at least a month of service and then other typical call center information such as lost calls, etc? If not available, can current reservationist schedules be provided? | See updated NET Data posted on our website. Hourly data and other elements will not be provided. |
| 115 | | | How many vehicles and of what type and capacities are currently needed for the trip demand levels by county and by NET Provider? | DOM does not have this information. It is up to the Contractor to ensure adequate capacity. |

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| 116 | | | <p>What is the current method of storing client and trip information and will this historical information be available to the contractor for the last few months on contract award?</p> | <p>DOM will assess need for historical data to be shared and if needed ensure availability in an acceptable format.</p> |
| 117 | | | <p>Will DOM consider issuing an amendment requiring all proposers to answer the following questions:</p> <ul style="list-style-type: none"> • Have you ever withdrawn from a NEMT contract during the service delivery phase? • Have you ever entered into a legal settlement regarding a NEMT contract? If so, please explain the circumstances. • Have you ever ended or terminated a NEMT contract prior to its original termination date for any reason? If so, please explain. • Have you ever defaulted on a NEMT contract at any time? If yes, please explain. | <p>DOM will not amend the RFP.</p> |