

RFP #20160318 Question and Answer Document

Question #	RFP Section #	RFP Page #	Question	DOM Response
1.	1.5.3.1	19	Please provide the most recent 12 months of call center statistics, including the number of calls per month, average talk time, average speed to answer, and abandon rate.	Services are currently handled through an interagency agreement with UMMC. The data is not available unless directly requested through UMMC.
2.	1.5.3.1	19	How many calls were clinical in nature from prescribers, prescribers' offices?	Services are currently handled through an interagency agreement with UMMC. The data is not available unless directly requested through UMMC.
3.	1.5.3.1	19	How many calls were from pharmacies?	Services are currently handled through an interagency agreement with UMMC. The data is not available unless directly requested through UMMC.
4.	1.5.3.1	19	Are there any beneficiary calls – if so, how many monthly?	Services are currently handled through an interagency agreement with UMMC. The data is not available unless directly requested through UMMC.
5.	1.5.3.1	19	How many PAs are received via fax monthly? How many by mail? How many electronically?	Services are currently handled through an interagency agreement with UMMC. The data is not available unless directly requested through UMMC.
6.	1.5.3.1	19	How many PAs are received by telephone monthly?	Services are currently handled through an interagency agreement with UMMC. The data is not available unless directly requested through UMMC.
7.	1.5.3.1	19	How many PA appeals are submitted to the Independent Medical Reviewer monthly?	Services are currently handled through an interagency agreement with UMMC. The data is not available unless directly requested through UMMC.

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8.	1.6	20	Does DOM currently have a CPC Program in place? If so, which vendor currently performs these services?	DOM does not currently have a CPC program as outlined in the RFP. DOM does not currently contract with a vendor for these services.
9.	1.5	14	Is a change in Fiscal Agent anticipated during this contract period? If so, should vendors price for interface changes with a new vendor after the go-live for this contract?	DOM does not anticipate a change during this contract period.
10.	1.2	7	Responses to Offeror questions are scheduled to be released by Friday April 15. Proposals are due one week later on Friday April 22 and Offerors need sufficient time to prepare and ship their proposals. Will DOM consider extending the due date for this proposal to allow Offerors time to finalize their proposals after the responses to questions are released?	Please see Amendment #2.
11.	1.9.5 and 1.9.7	27	The RFP skips from Section 1.9.5 to 1.9.7. Please confirm if there should be a Section 1.9.6.	This is a clerical error. There is no section 1.9.6.
12.	Appendix B	77	Does DOM have instructions to Offerors related to the link to Appendix B in addition to the following language from the RFP: Appendix B is located on the DOM Procurement Website: http://www.medicaid.ms.gov/resources/procurement/	Appendix B represents the standard file layouts of the information available from DOM's Fiscal Agent. It is provided only as context for the data fields that are available for a file transfer or interface. Technical specifics will be negotiated upon award of the contract/project initiation.
13.	3.4	36	The RFP states: "At the discretion of DOM, all Offerors receiving a minimum of three hundred fifty (35) points of the total score on the Technical Phase of the evaluation may be given the opportunity to make an oral presentation." Please clarify that DOM meant "thirty-five" and not "three hundred fifty."	This is a clerical error. DOM confirms "35" is correct.

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14.	1.4.1.8	13	The RFP states that there are FFS, MCO and potentially a J-code program. How many MCO's are there? Are they invoiced separately or all on one invoice?	Currently there are two MCO's and rebates are collected in a manner approved by DOM.
15.	1.4.1.8	13	Does the DOM anticipate that the J-code program (s) will be invoiced separately, or all in one invoice stream?	DOM anticipates an all in one invoice stream. Jcode NDCs and pharmacy claim NDCs are invoiced together.
16.	5.4.3	67	For client references, RFP Section 5.4.3, Corporate Experience refers to Reference Score Sheets. Will DOM please provide the factors that will be evaluated in the scoring or provide the Reference Sheet?	No. DOM will provide this information to the references submitted by Offerors and contacted for this RFP.
17.	1.3.1	10	What "medical products" classes are currently included in PDL management?	None.
18.	1.3.1	10	The RFP states that Mississippi will remain in the SSDC pool. What supplemental rebate negotiations are expected of the State's PDL, Supplemental Rebate, PA and CPC contractor?	None. The SSDC would continue to negotiate with manufacturers for SR rebates. The Contractor would be responsible for SR invoicing/collection/dispute resolution. In addition, the Contractor would be responsible for bringing the SR offers into consideration during class reviews at P&T meetings.
19.	1.3.1	10	What "clinical outcomes" are currently benchmarked?	Hepatitis C
20.	1.4.1.8	13	In this sentence "If the state selects to pursue supplemental rebates for physician administered drugs (J-code) or supplies" does the word "supplies" refer to a Diabetic program or some other program?	Yes, diabetic supplies and any other medical supplies for which manufacturers would offer SRs.
21.	1.4.1.8	13	Is there historical information for these programs (FFS and MCO)? Is it all electronic? What are the volumes of transactions for each program?	Yes, there is historical information. The volumes of transactions for each

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				<p>program during calendar year 2015 were: For SR claim transactions use the # RX total. If information needed is SR units invoiced those are represented under the Invoiced Quantity column.</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Invoiced Quantity</th> <th># RX</th> </tr> </thead> <tbody> <tr> <td>2015Q1</td> <td>3,083,704.051</td> <td>504,314</td> </tr> <tr> <td>2015Q2</td> <td>3,046,671.487</td> <td>215,167</td> </tr> <tr> <td>2015Q3</td> <td>3,270,567.890</td> <td>724,631</td> </tr> <tr> <td>2015Q4</td> <td>2,632,454.167</td> <td>86,890</td> </tr> <tr> <td>Totals</td> <td>12,033,397.595</td> <td>1,531,002</td> </tr> </tbody> </table> <p>Please note:</p> <ul style="list-style-type: none"> • The statistics provided under Invoiced Quantity do not include prior quarter adjustments. • The # RXs statistics does include prior quarter claim transactions. • All information provided is based on SR invoiced NDCs. • Information is based on the quarterly file received from HPE and only includes utilization for subset of NDCs contracted. 	Quarter	Invoiced Quantity	# RX	2015Q1	3,083,704.051	504,314	2015Q2	3,046,671.487	215,167	2015Q3	3,270,567.890	724,631	2015Q4	2,632,454.167	86,890	Totals	12,033,397.595	1,531,002
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22.	1.4.2.1	14	"Call Tracking of Phone Conversations with Manufacturer/labeler" - Is DOM expecting an actual recording of the conversation, or just a follow-up in writing to what was discussed?	DOM does not expect recordings. Follow-up in writing will suffice.																		

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23.	1.9.1	26	<p>1.9.1 Implementation Price - The Contractor shall be paid an implementation price of no more than the actual implementation costs up to the amount specified in the Contractor's proposal set forth in Appendix A.</p> <p>What proof or evidence of actual cost must the contractor provide to determine that implementation is at actual cost?</p>	<p>Offerors shall provide a budget summary and line level budget in their proposal. The Contractor shall submit a line level invoice for implementation that cannot be greater than the amount proposed.</p>
24.	1.9.4	27	<p>All travel performed in conjunction with performing the responsibilities of this contract shall not include any profit for the Contractor. Travel costs should be included in the implementation and operations costs as necessary. All travel costs must be prior approved by DOM.</p> <p>Travel costs must be included in implementation and operations, but Travel costs must be prior approved by DOM. What is the purpose of obtaining prior approval if these costs are included in the cost proposal? Is there any supporting documentation required for travel, or just that a trip must be pre-approved by DOM?</p>	<p>Yes, the travel must be pre-approved. The documentation required for travel would be the proposed travel record (i.e. flight information, hotel booking information, approximate meal expenses, etc.) The purpose of obtaining prior approval is that DOM is a state agency funded by federal and state funds and is therefore bound by state and federal law to responsibly utilize the federal and state funds.</p>
25.	5.2	64	<p>The transmittal letter requests the following: a statement that the Offeror agrees to the language of DOM's BAA and DUA, or has negotiated changes acceptable to DOM if changes are needed for either the BAA or DUA. Who would we contact at DOM to negotiate those changes prior to submittal of the RFP response?</p>	<p>These changes should be stated as a part of the Q&A. Please submit all questions regarding this process to the Procurement Officer.</p>
26.	4.13.5	57	<p>Of the information requested in section 4.13, what information needs to be provided as part of the proposal and for what section?</p>	<p>Please provide all requested information in section 4.13. This information should be placed in the Offeror's "Ownership and Financial Information" of the proposal.</p>

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27.	1.4	12	Is it DOM's expectation that the successful bidder will invoice for rebates in prior period quarters (during the time period of the incumbent vendor's contract)? If so, how far back in time will the contractor be expected to provide invoicing support?	Yes. The contractor will be expected to go back as far as the manufacturer has SRs on its drug(s) for all current and/or historical disputes.
28.	1.6.1	21	The Scope of Work for the Complex Pharmacy Care program indicates the following Performance Standard. "Develop and Maintain the CPC Program. Program proposal should be submitted to DOM for approval thirty (30) calendar days prior to the implementation date of the contract." Can DOM confirm the intent is that the contractor will submit the program proposal to DOM 30 days prior to the start of the Operations Phase on 10/1/2016 and not the implementation date of 7/1/2016?	DOM confirms that the intent is that the contractor will submit the Complex Pharmacy Care program proposal to DOM 30 days prior to the anticipated implementation start date of 7/1/2016.
29.	2	29	The RFP requires that our IT responses be in compliance with the State of Mississippi's Enterprise Security Policy. In order to insure that compliance we will need a copy of said policy. When we contacted the MS IT department, they requested that we contact the procurement analyst for access to the policy. May we have access to the website where that policy is located?	Please contact the Procurement Officer for a copy.

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30.	1.6.1.3.a	21	<p>Please indicate for each of the drug/disease states identified in the RFP (hemophilia, hepatitis-C; oncology, mental health, drug abuse and addiction, inflammatory conditions such as multiple sclerosis, rheumatoid arthritis, Crohn's disease, psoriasis; and cystic fibrosis) what percentage of the FFS population has the condition. If this information is not available, can we obtain a best estimate?</p>	<p>Estimates for the chronic conditions listed are numbers and percentages for beneficiaries enrolled the 4th quarter in 2015. Conditions were identified as any claims with the target diagnoses in the medical claims during 2014-2015.</p> <table border="1" data-bbox="1415 509 1986 1084"> <tr> <td colspan="2" data-bbox="1415 509 1780 548">Total enrollment*</td> <td data-bbox="1780 509 1986 548">117,167</td> </tr> <tr> <td data-bbox="1415 548 1457 1084" rowspan="10">Chronic Conditions**</td> <td data-bbox="1457 548 1780 587">Hemophilia</td> <td data-bbox="1780 548 1986 587">113 (0.09%)</td> </tr> <tr> <td data-bbox="1457 587 1780 626">Hepatitis C</td> <td data-bbox="1780 587 1986 626">502 (0.43%)</td> </tr> <tr> <td data-bbox="1457 626 1780 704">Cystic Fibrosis</td> <td data-bbox="1780 626 1986 704">2,022 (1.73%)</td> </tr> <tr> <td data-bbox="1457 704 1780 743">Multiple Sclerosis</td> <td data-bbox="1780 704 1986 743">219 (0.19%)</td> </tr> <tr> <td data-bbox="1457 743 1780 782">Rheumatoid Arthritis</td> <td data-bbox="1780 743 1986 782">676 (0.58%)</td> </tr> <tr> <td data-bbox="1457 782 1780 821">Psoriasis</td> <td data-bbox="1780 782 1986 821">437 (0.37%)</td> </tr> <tr> <td data-bbox="1457 821 1780 899">Crohns / ulcerative colitis</td> <td data-bbox="1780 821 1986 899">238 (0.20%)</td> </tr> <tr> <td data-bbox="1457 899 1780 938">Alcohol abuse/addiction</td> <td data-bbox="1780 899 1986 938">813 (0.69%)</td> </tr> <tr> <td data-bbox="1457 938 1780 1016">Drug abuse/addiction</td> <td data-bbox="1780 938 1986 1016">8,632 (7.37%)</td> </tr> <tr> <td data-bbox="1457 1016 1780 1084">Malignant Neoplasm</td> <td data-bbox="1780 1016 1986 1084">2,136 (1.82%)</td> </tr> </table>	Total enrollment*		117,167	Chronic Conditions**	Hemophilia	113 (0.09%)	Hepatitis C	502 (0.43%)	Cystic Fibrosis	2,022 (1.73%)	Multiple Sclerosis	219 (0.19%)	Rheumatoid Arthritis	676 (0.58%)	Psoriasis	437 (0.37%)	Crohns / ulcerative colitis	238 (0.20%)	Alcohol abuse/addiction	813 (0.69%)	Drug abuse/addiction	8,632 (7.37%)	Malignant Neoplasm	2,136 (1.82%)
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31.	1.4.1.11	13	<p>The RFP states "All Manufacturer/labeler disputes must be researched, corrected, reconciled, resubmitted if required, and the dispute resolution completed for both DOM and Supplemental Drug Rebates. DOM must be notified on all dispute resolution outcomes by the tenth (10th) calendar day of the month following the service month."</p> <p>Please confirm that the supplemental rebate dispute resolution will be restricted to only disputes around the</p>	<p>DOM confirms that the supplemental rebate dispute resolution will be restricted to only disputes around the supplemental rate calculation.</p> <p>DOM confirms that all dispute resolution related to the CMS drug rebate program will be handled by the fiscal agent, who is responsible for administering that rebate program.</p>																								

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			<p>supplemental rate calculation. Also, please confirm that all dispute resolution related to the CMS drug rebate program will be handled by the fiscal agent, who is responsible for administering that rebate program. Please also confirm that the fiscal agent will communicate any adjustments that should be reflected to the supplemental utilization based on those resolution efforts. Will the contractor receive claims data in summary or detail form?</p>	<p>DOM confirms that it is the responsibility of the fiscal agent to communicate any adjustments that should be reflected to the supplemental utilization based on those resolution efforts.</p> <p>Will the contractor receive claims data in summary or detail form? The fiscal agent will provide the CMS Quarterly Utilization file which includes current quarter utilization and any prior quarter unit changes. This file is in standard CMS format, and the contractor should be able to translate the number of units that should be invoiced to their system.</p>
32.	1.4.2	14	<p>The RFP states “Provide an automated system that maintains and tracks supplemental rebate payment records, invoicing data, collection information, historical reconciliation and prior period adjustments, dispute resolution and all other information concerning rebates from the pharmaceutical manufacturer/labeler on a National Drug Code (NDC) and an individual encounter/claim level. The automated system shall log, allocate and reconcile payments made to the state by manufacturers/labelers on an NDC and individual encounter/claim basis and by health plan contractor.</p> <p>Please confirm that NDC/year/quarter level invoice, payment, and dispute data are acceptable by DOM as</p>	<p>DOM confirms that NDC/year/quarter level invoice, payment, and dispute data are acceptable by DOM as this is the CMS-supported level of detail and manufacturers do not provide ROSIs and PQAs at the claim level.</p> <p>However, any disputed or adjusted units are expected to be made at the claim level detail.</p>

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			this is the CMS-supported level of detail and manufacturers do not provide ROSIs and PQAs at the claim level.	
33.	1.4.2.1.i	14	<p>The RFP states “Required data sent to CMS in standard CMS approved format.”</p> <p>Please clarify what data must be sent to CMS other than the quarterly 64.9r report information that is provided to the State for submission to CMS.</p>	The contractor shall provide the CMS 64.9r and any ad hoc requests/reports as requested by DOM and/or CMS.
34.	1.5	15	Please confirm the call center should be prepared to receive ~ 1,200 manual PA requests per month.	The call center/PA unit should be prepared to handle approximately 1200 PA request per month.
35.	1.5.2	15	If a new vendor is selected in this RFP, will the current contractor be required to continue to send out Denial letters—or would the new vendor then become responsible for that?	The current vendor uses the DOM fiscal agent’s PA system and therefore the PA denial letters are generated and mailed by the fiscal agent. However, DOM expects that the contractor have the capability to send out PA Denial letters.
36.	Appendix A – Budget Summary	76	Under section 4.3 of the RFP it states “The contract period begins July 1, 2016 and will terminate June 30, 2019.” Is the termination date of the contract 5/31/2019 or 6/30/2019?	The termination date of this contract is 6/30/2019.
37	1.4.1	12	Does DOM anticipate transaction data for rebating to be transmitted to the supplemental rebate processor by summary NDC or by claim?	<p>DOM will transmit via Fiscal Agent the quarterly CMS utilization file which will contain utilization for FFS and MCO rebate programs. This data is listed in CMS format and contains summary utilization by NDC.</p> <p>The contractor shall also be supplied claims data necessary for validation.</p>

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38.	5.2	64	Please clarify the requirement that “The transmittal letter should identify all material and enclosures being submitted in response to the RFP.” To what types of materials and enclosures does the State refer?	This refers to a summary of the Offeror’s entire Technical Proposal.
39.	4.3.2.1	43	Would DOM consider amending the minimum notice and cure period for a termination for default from ten days to thirty (30) calendar days?	DOM will not consider amending the notice and cure period.
40.	4.3.2.2 4.3.2.4	44 44	<p>Would DOM consider increasing the notice period for a termination for convenience from 10 days to thirty (30) calendar days and to make this a mutual right to terminate?</p> <p>Additionally, upon a termination for convenience or non-availability of funds by DOM, which is for DOM’s convenience and not due to any default or breach by Contractor, will DOM agree to reimburse Contractor for its sunk costs, including the reasonable value of any nonrecurring costs incurred but not amortized in the price of the Contract, the Contract price(s) for completed deliverables delivered to and accepted by DOM, a price commensurate with the actual cost of performance for partially completed deliverables ,the recovery of allowable costs incurred or obligated but unbilled as of the date of termination, unamortized costs, costs incurred in the performance of the work terminated, including, but not limited to start-up costs and preparatory expense allocable thereto, the cost of settling and paying termination settlements under terminated subcontracts and leases, accounting, legal, clerical, and other expenses reasonably necessary for the preparation and negotiation of termination</p>	<ol style="list-style-type: none"> 1. DOM will not consider increasing the notice period for termination for convenience. 2. DOM will not agree to these changes. The language of the RFP stands.

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			settlement proposals and the termination claim; and a fair and reasonable profit on the foregoing costs?	
41.	4.7.1 4.7.2	48	Would DOM please confirm that RFP Sections 4.7.1 and 4.7.2 do not apply to the Contractor's proprietary internal use or developed prior to or outside of the ensuing contract, software and related documentation, reports, results, products, programs, routines, drawings, studies, specifications, photographs, graphics, artwork, computations, data, inventions, discoveries, improvements, concepts, creative works, designs, techniques and know-how, works of authorship, trade secrets, patents, trademarks, and copyrights .	DOM is unclear on this question, please clarify. However, DOM can confirm that the entities listed in 4.7.2 shall have unlimited rights to use, disclose, or duplicate, for any purpose whatsoever, all information and data developed, derived, documented, or furnished by the Contractor under any Contract resulting from the RFP. DOM would not, however own the information that was pre-existing, proprietary tools owned, developed, or otherwise obtained by Contractor independent of the potential Contract.
42.	4.7.4	49	Would DOM please consider amending this section to allow for no less than three days' prior written prior notice to any onsite inspections and to mandate that any non-governmental entity conducting an inspection or audit execute and be bound by a non-disclosure agreement.	No.
43.	4.10	52	Would DOM consider negotiating the indemnification provisions to limit indemnification to third party claims directly related to or arising out of the negligent acts or omissions or willful misconduct of the Contractor?	DOM is not willing to negotiate the indemnification provisions found in Section 4.10 of the RFP.
44.	5.5.2	68	Would DOM consider allowing offerors to submit office phone numbers for references that are unwilling to disclose the cell phone numbers?	DOM will accept this.
45.	1.2.3	8	Will the Division of Medicaid (DOM) extend the submission due date of the proposal to allow Xerox time to more fully develop a successful bid proposal for	Please refer to the response to question 10.

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			the State to evaluate?	
46.	1.2.2	7	Will the DOM be responding to questions as they are submitted and received by DOM or will DOM respond intermittently?	DOM will post the answers to the questions on the date stated in the schedule in the RFP.
47.	1.5	14	Can the DOM clarify if the service components covered by this RFP #20160318 include the entire FFS prior authorization program, e.g. manual and electronic prior authorizations?	Per Section 1.5, "The Contractor shall recommend and draft PA criteria based on clinical review. DOM's fiscal agent will remain responsible for processing pharmacy claims."
48.	RFP document and Appendix A 4.3	41	Contract years are stated as July 1 - June 30 on page 41. This is inconsistent with the contract years listed in Appendix A: Budget Summary. Can DOM please confirm that the base contract term is 7/1/16 - 6/30/19. Renewal year 1 is from 7/1/19 - 6/30/2020 and Renewal year 2 is from 7/1/2020 - 6/30/2021.	Please refer to question 36. The termination date of this contract is 6/30/2019. With 2 optional renewals.
49.	RFP document Section 1.4.1, Items 1-5	12	Is it DOM's intent that the PDL, SR, PA & CPC vendor be the same vendor as the pool negotiator?	No. The Sovereign States Drug Consortium (SSDC) pool negotiator is secured by the SSDC.
50.	RFP document Section 1.5.2	15	What is the preferred/most frequently used format for prior authorization submission currently? Electronic, fax, mail or phone?	Please refer to question #5.
51.	RFP document Section 1.5.2	16	Do pharmacists have to determine all prior authorization requests? If not, what kind of requests may non-pharmacists determine?	No. Non-Pharmacists may approve early re-fill requests, pass medications requests for long term care residents and some non-preferred PA requests. Pharmacists oversee all other types of requests.

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52.	RFP document Section 1.5.2.1	16	Can a designated pharmacist be available by pager/cell phone during off hours to provide 24/7 coverage?	Yes.
53.	RFP document Section 1.5.2.1, Item h	17	Is DOM expecting the vendor to provide a draft staffing plan with the response or can this be provided upon contract award?	Yes. DOM expects a fully staffed plan upon proposal submission.
54.	RFP document Section 1.5.3.1, Item 1	19	Can DOM please clarify that the call center must be located within Mississippi?	No. It is not a requirement for the call center to be physically located in Mississippi.
55.	RFP document Section 1.5.3.1, Item 2	19	Are there SLAs around the interpretive services for the call center? Can DOM please clarify its expectations?	Interpretive services for the call center must be ADA compliant. DOM can review and provide oversight for any portion of the RFP/Contract and assess a remedy for noncompliance, in accordance with the RFP.
56.	RFP document Section 1.6.1	21	Would the CPC program only be expected to provide this benefit to FFS members?	Yes.
57.	RFP document Section 5.1, Item 4	64	The RFP indicates the Offeror's response should include eight sections in the Technical Proposal. The Technical Proposal must include Section 4., Ownership and Financial Disclosure Information (Section 4.13 of the RFP). Each of the other seven section includes explicit instructions of information to include in 5.2 – 5.8. Aside from providing information in response to the six areas in 4.13.1, should the Offeror provide responses to sections 4.13.2, 4.13.3, 4.13.4, 4.13.5, 4.13.6, 4.13.7, 4.13.8, of 4.13.9 of the RFP?	Please refer to question 26.

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58.	RFP document Section 4.13.1, Item 6	56	Number 6 under 4.13.1 asks for, "....date of birth, and Social Security Number of any managing employee of the disclosing entity." Our company policy precludes us from releasing our employees personal information, such as dates of birth or Social Security Numbers. Please confirm it's acceptable to omit this information. Alternative question: "Will DOM please clarify the intended meaning of "managing employee?"	<ol style="list-style-type: none"> 1. Yes, it is acceptable to omit this information for all of the employees. 2. DOM does not need that level of detail. However, DOM does need this information for managing partners, owners of the business entity, etc.
59.	RFP document Section 1.7, Key Personnel	23-25	Will DOM consider allowing one person to fill more than one key staff position?	No.
60.	RFP document Section 1.3	9	Can DOM please provide current pharmacy prior authorization volume?	Services are currently handled through an interagency agreement with UMMC. The data is not available unless directly requested through UMMC.
61.	RFP document Section 1.3	9	Can DOM please provide pharmacy claims volume?	For State FY15 (7/1/2014-6/30/2015) the total number of paid pharmacy fee for service was 2,917,093.
62.	RFP document Section 1.3	9	Can DOM please provide historic call volume?	Services are currently handled through an interagency agreement with UMMC. The data is not available unless directly requested through UMMC.
63.	RFP document Section 1.3	9	Is the vendor expected to process medical prior authorizations? If so, how will the vendor receive medical claims?	No.
64.	RFP document Section 1.5	14	Please verify that the prior authorizations are for FFS population only.	Yes, this is correct.

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65.	N/A		Please provide the number of covered lives in fee-for-service (FFS) and in Mississippi Coordinated Access Network (MSCAN).	Total Enrollment: https://medicaid.ms.gov/wp-content/uploads/2016/02/2016-Enrollment-Reports.pdf MSCAN: https://medicaid.ms.gov/wp-content/uploads/2016/02/2016-MississippiCAN-Enrollment.pdf
66.	N/A		Does the State have expected Recovery Time Objectives (RTO) and Recovery Point Objectives (RPO) for this contract?	DOM's Business Continuity/Disaster Recovery Controls are found in Attachment C, Security Controls, to the Data Use Agreement, Paragraph IV, A and B.
67.	Data Use Agreement		Does the State have any specific requirements regarding NIST and FISMA regulations? Will the vendor's solution be expected to comply with NIST/FISMA regulations at the start of operations?	There are references to specific NIST requirements within the Data Use Agreement, Paragraph III. OBLIGATIONS AND ACTIVITIES OF USER, b. ii and Paragraph II, Definitions, a.; see also Attachment C, Security Controls, Paragraph II, Technical Security Controls, I. Data Destruction/Sanitization – NIST SP800-88. Please refer to the most recent DUA and Attachments.
68.	Data Use Agreement		Are there any restrictions or limitations regarding where the primary data center and disaster recovery data center must be located?	DOM's BAA states that no PHI data will be accessed, stored, shared, maintained, transmitted or used or disclosed in any form via any medium beyond the boundaries and jurisdiction of the United States without express written authorization from DOM. Therefore, a vendor may not have a primary or business recovery data center outside of the United States that contains EPHI.

PDL, PA, SR, CPC

Question #	RFP Section #	RFP Page #	Question	DOM Response
69.	Business Associate Agreement Section III.s	5	Can DOM please provide the ITS Enterprise Security Policy?	Please contact the Procurement Officer for this information.