

Question #	RFP Section #	RFP Page #	Question	DOM Response
1	1. PROCUREMENT OVERVIEW--1.3.1 Bid Submission Requirements	10	<p>The IFB states that bidders shall "...submit one (1) copy of the bid on CD..."</p> <p>May electronic copies be provided on a jump drive (USB) instead of a CD?</p>	Yes.
2	1. PROCUREMENT OVERVIEW--1.3.1 Bid Submission Requirements	10	<p>Please clarify the format for any Bidder's response and whether a Technical Proposal, responding to each of the activities outlined in the Scope of Services, is required. The IFB Section 1.3.1, Bid Submission Requirements, requires bids to be submitted "with section components of the IFB clearly tabbed". Per DOM's Clarification Memo dated January 15, 2020, Section 4.4.2 does not require a response submitted but rather an attestation from the Bidder.</p> <p>a. Please clarify which, if any, "section components of the IFB" are to be clearly tabbed in the Bidders response and require responses to be submitted.</p> <p>b. Please clarify if the Bidder's response is only to include the completed forms in Attachments A – F plus the attestation described in DOM's January 15, 2020, Clarification Memo.</p>	<p>Tabs should include:</p> <ul style="list-style-type: none"> <li>• Attachment A;</li> <li>• Attachment B with Attachment for Section 4.4.2;</li> <li>• Attachment C;</li> <li>• Attachment D;</li> <li>• Attachment E;</li> <li>• Attestations from Sections 3.1;</li> <li>• Ownership &amp; Financial Disclosures from Section 5.13;</li> <li>• Amendment Acknowledgments;</li> <li>• CD or USB bid copies; and,</li> <li>• Redacted CD or USB bid copy.</li> </ul> <p>No technical proposal is required. Completion and submission of Attachments A-E, providing the minimum qualification information requested as an attachment to Attachment B (a brief explanation of the applicable experience must be provided for Numbers 1 and 2), ownership and financial disclosures and the required acknowledgement of any amendments will satisfy the criteria for a responsive bidder.</p>
3	2. SCOPE OF SERVICES--2.1.2 Federally Mandated Activities	16	<p>The IFB states that the Contractor shall validate CCO compliance annually.</p> <p>a. Are the annual compliance with standards reviews comprehensive each year (i.e., inclusive of all federal and state requirements/standards)?</p> <p>b. Are subsets of the federal and state standards reviewed annually, with all standards being reviewed within a three-year period?</p>	Yes, compliance reviews are annual. Please refer to CMS Protocol 1 for compliance review.

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4	2. SCOPE OF SERVICES--2.1.2 Federally Mandated Activities	16	<p>The IFB states that the CCO shall have annual audited Healthcare Effectiveness Data and Information Set (HEDIS) data available for review.</p> <p>a. Please confirm that the Coordinated Care Organizations (CCOs) are required to contract with an NCQA Certified Audit Firm to validate the CCOs' annual HEDIS rates, and that the Contractor will use the CCO's' completed audit reports and findings to fulfill the requirements of Section 2.1.2.2.</p> <p>b. Does this same audit process by a CCO-contracted Audit Firm validate the non-HEDIS performance measures?</p> <p>c. Is the Contractor responsible for conducting the validation of these non-HEDIS performance measures in alignment with CMS Protocol 2, including an on-site visit?</p>	<p>a. Yes, the CCOs are required to contract with a HEDIS auditor, which will conduct medical record reviews for hybrid measures and validate CCO data.</p> <p>b. No.</p> <p>c. The CCO is responsible for the non-HEDIS performance measures.</p>
5	2. SCOPE OF SERVICES--2.1.2 Federally Mandated Activities	18	Please clarify the provider types the Contractor will include in the quarterly telephone provider access surveys (e.g., all providers, primary care providers, obstetricians/gynecologists, specialists, behavioral/mental health, dental providers).	The telephone provider access surveys include PCPs, OB/GYNs, and Behavioral/mental health providers.
6	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	20	Please clarify whether the Contractor's participation in the Quality Leadership Committee is in-person or whether participation through a Webex/conference call is permissible.	The Quality Leadership Committee attendance is in-person, and conference calls are allowed at the discretion of the DOM Director.
7	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	20	Please clarify whether the Contractor's participation in the monthly Quality Task Force meetings is in-person or whether participation through a Webex/conference call is permissible.	The Quality Leadership Committee attendance is in-person and attendees are allowed to attend by conference call at the discretion of the DOM Director.

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8	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	20	<p>Under Activity 2. Validate Consumer and Provider Survey on Quality of Care,</p> <ul style="list-style-type: none"> <li>a. Please clarify if the EQRO will be required to validate both consumer and provider surveys.</li> <li>b. Please clarify the number of consumer surveys that will need to be validated.</li> <li>c. Please clarify the number of provider surveys that will need to be validated.</li> </ul>	<ul style="list-style-type: none"> <li>a. Yes, the EQRO is required to validate both consumer and provider surveys, including a report of findings.</li> <li>b. Sample.</li> <li>c. Sample.</li> </ul>
9	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	20	<p>Under Activity 2. Validate Consumer and Provider Surveys on Quality of Care, please specify the number and type of deliverable(s) that will be required under this activity (e.g., a report of findings).</p>	<ul style="list-style-type: none"> <li>a. Yes, the EQRO is required to validate both consumer and provider surveys, including a report of findings.</li> <li>b. Sample.</li> <li>c. Sample.</li> </ul>
10	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	20	<p>Please confirm all activities in Section 2.1.3 Additional Activities Required by DOM should be priced, and the costs included in Operational Costs on Attachment B.</p>	<p>Confirmed.</p>
11	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	21	<p>Under 3. Behavioral Health Member Satisfaction Survey, the scope of services states, "In addition to the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey, the Contractor shall be required to conduct a Behavioral Health Member Satisfaction Survey."</p> <p>Please clarify if a CAHPS survey also is to be administered, as only validation of the CAHPS survey is described in the scope of services.</p>	<p>The Contractor must conduct the Behavioral Health Member Satisfaction Survey.</p> <p>The Contractor must validate the CAHPS surveys completed by the CCOS.</p>

12	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	21	<p>If DOM requires the Contractor to administer CAHPS surveys, please clarify the following items:</p> <ul style="list-style-type: none"> <li>a. What populations will the CAHPS surveys be administered to?</li> <li>b. Will the surveys be administered to the three CCOs' adult and child populations?</li> <li>c. Will the surveys be administered to the two MississippiCHIP health plans or a statewide MississippiCHIP program sample?</li> <li>d. Which of the following CAHPS survey instruments should be used: CAHPS Adult Medicaid Health Plan Survey, CAHPS Child Medicaid Health Plan Survey without the children with chronic conditions (CCC) measurement set, and/or CAHPS Child Medicaid Health Plan Survey with the CCC measurement set?</li> <li>e. Will data be submitted to the National Committee for Quality Assurance (NCQA) or the CAHPS Health Plan Survey Database?</li> <li>f. What languages will be required for the CAHPS surveys?</li> <li>g. Please confirm the data collection mode that the Contractor should employ for the CAHPS surveys (e.g., mail only, mixed mode methodology).</li> </ul>	<ul style="list-style-type: none"> <li>a. There is no restricted population for the CAHPS survey.</li> <li>b. There is no restricted population for the CAHPS survey.</li> <li>c. The surveys apply to both MississippiCAN and CHIP and are conducted on a sample of the population.</li> <li>d. Adult, Child, and Child with Chronic Conditions.</li> <li>e. CAHPS surveys are to be submitted to DOM. CCOs are responsible to NCQA certification.</li> <li>f. CMS-required languages based on population.</li> <li>g. Currently CCOS mail surveys to members, and provide a toll-free phone line for questions.</li> </ul>
13	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	21	Under 3. Behavioral Health Member Satisfaction Survey, is there a minimum sample that DOM requires for each CCO?	No.
14	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	21	Under 3. Behavioral Health Member Satisfaction Survey, will the stratification of data by age group, race, and region occur at the statewide or CCO level or both?	Both.

15	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	21	Under 3. Behavioral Health Member Satisfaction Survey, please confirm that the surveys only need to be made available in English, Spanish, and Vietnamese.  If other languages are required, please clarify what other languages should the survey be made available.	This is based on CMS-required languages based on population. Further details will be discussed with the awarded vendor.
16	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	21	Under 3. Behavioral Health Member Satisfaction Survey, does DOM have a preferred survey administration methodology (e.g., mail, phone, mixed [mail and phone])?	Currently CCOs mail surveys to members, and provide a toll-free phone line for questions.
17	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	21	Under 3. Behavioral Health Member Satisfaction Survey, what is the estimated number of questions DOM would like included in the survey instrument?	DOM does not have an estimated number of questions to be included on the survey. This is at the discretion of the Contractor.
18	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	21	Under 3. Behavioral Health Member Satisfaction Survey, please clarify the population age group(s) this survey would be administered to, i.e., adults, children, or both?	Both adults and children.
19	2. SCOPE OF SERVICES--2.1.3 Additional Activities Required by DOM	22	Since conducting Readiness Reviews is "as requested by DOM," how many reviews should the Bidder include in the Operational Costs for each contract year?	Each year does not include a Readiness Review, and typically there is only one during that year. DOM is currently contracted with three (3) CCOs and two (2) CHIP CCOs.

20	2. SCOPE OF SERVICES--2.3 Project Staffing	26	<p>Section 2.3 lists responsibilities of the Statistician/Validation Analyst to include "...prepare Annual Technical Reports and Annual Comprehensive Technical Reports." Section 2.4.2 appears to list a requirement for only one technical report.</p> <p>a. Please provide a description of DOM's requirements for these reports and any differences between the two.</p> <p>b. Please provide an example of each type of report if examples are available.</p>	<p>The EQRO Annual Technical Report is available on the DOM website <a href="http://www.medicaid.ms.gov">www.medicaid.ms.gov</a>.</p>
21	2. SCOPE OF SERVICES--2.5 Performance Standards	27	<p>Section 2.5 Performance Standards states "See Attachment F for specific performance standards". Attachment F contains a summary table with HEDIS performance measure information. Please clarify the type of IFP response DOM is looking for in 2.5.</p>	<p>The Contractor is to evaluate the accuracy of the performance measures (PMs) reported.</p>
22	2. SCOPE OF SERVICES--2.7 Contractor Payment	29	<p>IFB Sections 2.7.1, 2.7.2, 2.7.3, and Attachment B indicate that firm fixed pricing is the method of payment for the Implementation and Operations phases; however, Section 4.2.1.2 states that "a unit rate shall be given for each service, and that rate shall be the same throughout the contract."</p> <p>Please clarify the pricing requirements.</p>	<p>The implementation costs, the contract term operational costs, the operational costs for renewal year one (1), and operational costs for renewal year two (2) are each unit rates. The unit rate does not have to remain the same for each phase of the contract. Additionally, the unit rate for the initial three (3) year period does not have to be the same rate as renewal year one (1) and renewal year two (2).</p>
23	2. SCOPE OF SERVICES--2.7 Contractor Payment	29	<p>a. What is the current contract amount for the contract term 6/1/2015-5/31/2018 and both renewal year 1 (6/1/2018-5/31/2019) and renewal year 2 (6/1/2019-5/31/2020)?</p> <p>b. What is the EQRO scope of services included in the current renewal year 2 contract (6/1/2019-5/31/2020)?</p>	<p>Contract Term: \$1,004,061.00  Renewal Year 1: \$404,249.00  Renewal Year 2: \$410,004.00</p> <p>The scope of services for this contract is available at <a href="https://medicaid.ms.gov/resources/procurement/completed-procurements/">https://medicaid.ms.gov/resources/procurement/completed-procurements/</a>.</p>

24	2. SCOPE OF SERVICES--2.7 Contractor Payment	29	What is the anticipated total dollar amount for this contract?	The dollar amount for this contract will be set based on an award made to the lowest and best bidder meeting this IFB's specifications.
25	4. PROCUREMENT PROCESS--4.4.3 Responsive Bidder	37	<p>The IFB states "In order to be responsive, the Bidder shall submit a bid which confirms in all material respects to this IFB...". Section 4.4.1, Responsible Bidder, states "The Bidder shall submit a bid which conforms in all material respects to this IFB...".</p> <p>a. Please clarify whether 4.4.3 should also say conforms, not confirms.</p> <p>b. If 4.4.3 is correct as stated ("confirms"), please describe DOM's expectation for a Bidder's response to "confirm in all material aspects". What, if any, submission requirement(s) will satisfy the evaluation criteria for a "responsive and responsible" bidder?</p>	Confirmed. Section 4.4.3 should state "conforms". Completion and submission of Attachments A-E, providing the minimum qualification information requested as an attachment to Attachment B (a brief explanation of the applicable experience must be provided for Numbers 1 and 2), ownership and financial disclosures and the required acknowledgement of any amendments will satisfy the criteria for a responsive bidder.
26	Attachment B - Bid Form for External Quality Review Organization (EQRO)--	72	<p>Under the section titled CERTIFICATION OF INDEPENDENT PRICE DETERMINATION, is the intent of this section that the Bidder certifies that the prices submitted in response to the solicitation have been arrived at independently?</p> <p>(It currently requests Bidders to sign the certification that "...prices submitted...<b>have not</b> been arrived at independently...")</p>	Confirmed.
27	3.1 Organizations Eligible to Submit Bids	31	<p>This section requires the Bidder to "not be excluded by requirements of 42 CFR 354" and to "provide documentation for each requirement specified below:..." There are three requirements listed at the top of page 32.</p> <p>Does this section only require an attestation as described in the DOM memo dated January 15, 2020, for Section 4.4.1?</p>	Yes, an attestation will satisfy these requirements.

28	1.9	13	What is the anticipated budget for this project?	The budget for this contract will be set based on an award made to the lowest and best bidder meeting this IFB's specifications.
29	2.1.2.4	17	4. Validation of Network Adequacy and Availability, a. Evaluation of Provider Directory Accuracy. This Requirement states "CCOs are required to submit provider directory information in a manner specified by DOM..."  What format manner does DOM require?	Please refer to the MississippiCAN contract on the DOM website <a href="http://www.medicaid.ms.gov">www.medicaid.ms.gov</a> .
30	2.1.3.3	21	3. Behavioral Health Member Satisfaction Survey, a. states, "Identify study populations and indicators;"  Can DOM provide an estimate of the behavioral health population for each CCO?	That information is currently not available. These are members who receive behavioral health services and may be included in all categories of eligibility.
31.	2.1.3.3	21	3. Behavioral Health Member Satisfaction Survey.  Are the CCOs expected to provide the Contractor with the population data for the surveys?	Yes.
32.	2.1.3.8	22	8. Conducting Quality Improvement Projects in addition to those conducted by the CCOs.  Can DOM provide an estimate of how many projects the Contractor will conduct?	The number of Quality Improvement Projects is dependent on agency initiatives, population changes, health disparities, etc.
33.	2.1.3.10	22	10. Conducting Readiness Reviews.  Will Readiness Reviews be conducted for the 3 MississippiCAN and the 2 MississippiCHIP CCOs?	Yes, Readiness Reviews are conducted when there is a contract change, population change, services change, etc. This does not occur every year.



34.	4.2.1.2	33	<p>Requirement Number 2 states, “A unit rate shall be given for each service, and the unit rate shall be the same throughout the contract”.</p> <p>Attachment B, Bid Form, does not include a field for unit rate. Where, in the bid, would DOM like the Contractor to provide the unit rate for each service?</p>	<p>The implementation costs, the contract term operational costs, the operational costs for renewal year one (1), and operational costs for renewal year two (2) are each unit rates. The unit rate does not have to remain the same for each phase of the contract.</p>
35.	2.1.2.4.a	17	<p>4. a. Validation of Network Adequacy and Availability. A. Evaluation of Provider Directory Accuracy.</p> <p>This requirement states “ensure accuracy of provider information”. Does this requirement apply to all provider types or will this task focus on a specific provider type (e.g. primary care providers)?</p>	<p>Please refer to federal regulation 42 CFR 438.68 Network Adequacy standards.</p>
36.	2.1.2.4.b	18	<p>4. b. Validation of Network Adequacy and Availability. B. Provider Access Studies.</p> <p>The requirement states “the Contractor shall conduct quarterly telephone surveys <b>among a sample of providers</b> to determine appointment...”</p> <p>Will telephone surveys focus on primary care providers only (e.g. Family Practice, Internal Medicine, etc.) or apply to all provider types?</p>	<p>Please refer to federal regulation 42 CFR 438.68 Network Adequacy standards.</p>
37.	2.1.2.2. b	16	<p>2. b Annual Audited HEDIS Data for review. B. The requirement states “For other performance measures, DOM shall provide specifications for data collection”.</p> <p>Is there an estimate of the number of other performances measures, in addition to HEDIS measures, that will require validation for MississippiCAN and MississippiCHIP?</p>	<p>All CMS Adult and Child Core Set Measures will require validation for MississippiCAN and MississippiCHIP in addition to the Annual Audited HEDIS data.</p>

38.	5.13.1/5.13.2	60	<p>The “Information to Be Disclosed” includes six requirements related to “ownership” or “controlling interests” that should be disclosed under three separate conditions including “1. Upon the Contractor submitting a bid in accordance with the State’s procurement process”.</p> <p>Please confirm that this information is <u>not</u> required in our bid response. If this information is required in our bid; please provide further instructions for where this information should be placed.</p>	<p>The information is required at the time the bid is submitted and should be clearly and separately tabbed as indicated in the response to Question #1.</p>
39.	2.1.2.1	16	<p>Validation of performance improvement projects states, “The Bidder shall follow CMS’s most current Validating Performance Improvement Projects protocol which can be found at <a href="https://www.medicare.gov/medicaid/quality-of-care/medicaid-managed-care/external-quality-review/index.html">https://www.medicare.gov/medicaid/quality-of-care/medicaid-managed-care/external-quality-review/index.html</a>. The CMS protocol describes the following three activities that the Bidder shall undertake in validating Focused Studies/PIPs for MississippiCAN:</p> <ul style="list-style-type: none"> <li>a. Assess the CCO’s methodology for conducting the Focused Study/PIP</li> <li>b. Verify actual Focused Study/PIP study findings; and,</li> <li>c. Evaluate overall validity and reliability of study results.”</li> </ul> <p>Is validation of focus studies/Performance Improvement Projects to be conducted for MississippiCHIP?</p>	<p>Yes, validation of focus studies/PIPs is to be conducted for MississippiCHIP.</p>
40.	2.1.1	15	<p>Federally Defined Protocols. This section addresses using the CMS-issued protocols for guidance when conducting mandatory and optional tasks for external quality reviews. The 4<sup>th</sup> bullet references compliance review for MississippiCAN but does not include MississippiCHIP.</p> <p>Can you confirm the bidder is expected to conduct compliance reviews for MississippiCHIP and MississippiCAN?</p>	<p>Yes, the bidder is expected to conduct compliance reviews for MississippiCAN and CHIP.</p>

41.	2.1.3.1	20	Are the Quality Leadership team and Quality Task Force Team meetings face-to-face meetings?	The Quality Leadership team and Quality Task Force meetings are face to face meetings. Attendees are allowed to attend by conference call at the discretion of the DOM Director.
42.	1.9	13	Type of Contract. The type of contract states that the bid rate shall remain firm and fixed, despite change in services or volume or reviews. This conflicts with the language in 5.9.4 (pgs. 54-55) which allows for change orders due to changes in the work. Please clarify.	Please disregard the following, <b>“The bid rate shall remain firm and fixed, despite any change in the amount of services and volume of reviews performed.”</b>
43.	2.1.3.6 & 7	22	Can DOM elaborate on its expectations for validation of IS capabilities and additional reports requirements?	DOM seeks clarification from the Vendor.
44.	4.2.1.5	33	CAN DOM explain how the most responsive bidder scoring or rating is determined i.e., contractor experience, qualifications, financial stability, etc.?	The contract will be awarded to the responsive bidder with the lowest bid who meets the minimum qualifications as set forth in the IFB.
45.	5.16.8	67	Small and Minority Businesses. Will use of Small and Minority Business improve rating of bidders?	No.
46.	Attachment B	71	For Total Cost (Firm Fixed Price)**, there is no notation for the **. Please clarify.	Please disregard the **.
47.	2.7.2	30	Operation Pricing. This section states the bidder shall provide a single firm fixed-price for the services requested in the operational phase.  Is the operational phase the initial three year period or all periods, including option years? Please confirm if the expectation is that the price for each operational year be the same.	Bidders should submit a price for the initial three (3) year period, a price for renewal year one (1) and a price for renewal year two (2). The prices do not have to be the same.

48.	n/a	n/a	Bidder received 3 files from MS' Procurement System. The files are Vendor IFB Form, IFB #20200103, and Attachment F. Are bidders required to complete the Vendor IFB form and return with the submission? Should all subsequent files, memos, notifications received from MS DOM be included in submission of bid.	Completion and submission of Attachments A-E, providing the minimum qualification information requested as an attachment to Attachment B (a brief explanation of the applicable experience must be provided for Numbers 1 and 2), financial and ownership disclosures and the required acknowledgement of any amendments will satisfy the criteria for a responsive bidder.
49.	2.1.4	24	Important Dates. In the 5 <sup>th</sup> row of the Table it states "Audited HEDIS data and other performance data due CCOs". This implies that CCOs will have HEDIS data audited before the external quality review.  Can you provide further detail on the specific tasks required of the EQRO regarding HEDIS auditing since it appears that CCOs will already have HEDIS auditing conducted?	Please refer to EQRO Protocol for performance measures, which include a comparison of performance of the different CCOs, and comparison to state established benchmarks and performance measures.
50.	2.1.2	16-17	Is there a specific list of performance measures to be reviewed for HEDIS data, or are all Medicaid HEDIS measures included under EQR review?	All CMS Adult and Child Core Set Measures will require validation for MississippiCAN and MississippiCHIP in addition to the Annual Audited HEDIS data.
51.	2.1.2	16-17	Are there non-HEDIS measures included? If yes, do you have a list of these measures?	All CMS Adult and Child Core Set Measures will require validation for MississippiCAN and MississippiCHIP in addition to the Annual Audited HEDIS data.
52.	2.1.2	16-17	Will medical record review validation (MMRV) be conducted as part of HEDIS audit?	Yes, this is conducted by the HEDIS auditor.
53.	2.1.2	16-17	Will HEDIS measures and other performance measures be reviewed after health plans produce HEDIS?	Please refer to EQRO Protocol for performance measures.

54.	1.2	7	For Molina Healthcare of Mississippi and United Healthcare of Mississippi, is the Contractor expected to validate HEDIS measures from separate submissions for Medicaid (MississippiCAN) and MississippiCHIP or from a single submission that includes both Medicaid and CHIP members for each one of the three CCO?	MississippiCAN and MississippiCHIP are separate programs with separate populations; therefore, reviews are separate.
55.	2.1.2.2	16	CMS protocol for Validating Performance Measures requires an onsite visit to MCOs to review information systems. Please clarify where the onsite visit location will be in the State of Mississippi for all three CCOs that are listed in the IFB.	Onsite reviews will be conducted in Mississippi with access to information systems.
56.	2.1.2.2	16	Will the Contractor be allowed to use CCO's completed NCQA Roadmap and related attachments in lieu of ISCAT (Information System Capabilities Assessment Tool) that is generally used for EQR Performance Measure Validation. (note: HEDIS Roadmap includes all required information that is needed for assessing CCO's Information Systems Capabilities).	NCQA supports the addition of non-duplication language for mandatory EQR-related activities to reduce burden on managed care plans and states.  No, the ISCAT provides information about the timing of any other recent, independent, documented assessment such as a HEDIS Compliance Audit™. If the MCP recently had a comprehensive, independent assessment of its information systems, the EQRO may review those results.
57.	2.1.2.b	16	Attachment F is a list of changes to NCQA technical specifications from 2019 to 2020. Can MS DOM provide the correct list of performance measures to be included in EQR validation?	The 2020 Adult and Child Core Set Health Care Quality Measures for Medicaid and CHIP are attached.
58.	2.1.2.b	16	Indicates that "for other performance measures, DOM shall provide specifications for data collection". Can you please provide a list of these other measures (non-HEDIS measures)?	All CMS Adult and Child Core Set Measures will require validation for MississippiCAN and MississippiCHIP in addition to the Annual Audited HEDIS data.
59.	Section 1.3.2, Public Opening	11	Will DOM provide a conference call line for the bid opening conference?	Yes.

60.	Section 2.1.2.1, Validation of performance improvement projects...	16	<p>a. How many performance improvement projects is each MississippiCAN CCO required to report to the EQRO?</p> <p>b. What are the project topics?</p> <p>c. How many performance improvement projects is each MississippiCHIP CCO required to report to the EQRO?</p> <p>d. What are the project topics?</p>	<p>Please refer to MS DOM website for completed procurements at <a href="https://medicaid.ms.gov/resources/procurement/completed-procurements/">https://medicaid.ms.gov/resources/procurement/completed-procurements/</a></p> <p>Specific Mississippi Coordinated Access Network (MississippiCAN) awarded contracts for specific information related to PIPs.</p>
61.	Section 2.1.2.2, The CCOs shall have annual audited HEDIS data...	16 and Attachment F	Are the MississippiCAN and MississippiCHIP CCOs required to contract with an NCQA certified vendor to perform a HEDIS audit? In which case the HEDIS audit is separate from the performance measure validation audit performed by the EQRO. Please confirm.	Yes, HEDIS Audit must be performed by NCQA certified vendor.
62.	Section 2.1.2.2, The CCOs shall have annual audited HEDIS data...,	16 and Attachment F	Will DOM identify how many and which performance measures are selected for the performance measure validation task? Attachment F only includes HEDIS performance measures.	All CMS Adult and Child Core Set Measures will require validation for MississippiCAN and MississippiCHIP in addition to the Annual Audited HEDIS data.
63.	Section 2.1.2.2, The CCOs shall have annual audited HEDIS data...,	16	Are any “homegrown” performance measures required for reporting and validating? If so, what are they? Attachment F only includes HEDIS performance measures.	All CMS Adult and Child Core Set Measures will require validation for MississippiCAN and MississippiCHIP in addition to the Annual Audited HEDIS data.
64.	Section 2.1.2.2, The CCOs shall have annual audited HEDIS data	16	Any non-HEDIS measures and what are they? Are any non-HEDIS performance measures required for reporting and validating? If so, what are they? Attachment F only includes HEDIS performance measures.	All CMS Adult and Child Core Set Measures will require validation for MississippiCAN and MississippiCHIP in addition to the Annual Audited HEDIS data.
65.	Section 2.1.2.3, A review conducted within the previous three-year period...,	16	Is DOM requesting a <i>comprehensive</i> review every year or is DOM open to other methodologies that still ensure a comprehensive review is completed every three years?	DOM is requesting a comprehensive review every year, unless otherwise specified.

66.	Section 2.1.2.3, A review conducted within the previous three-year period....,	16	Does DOM require an on-site review be completed every year? Or can the review be completed via desk-top and webinar?	Yes, an on-site review is to be completed every year.
67.	Section 2.1.2, 4. Validation of Network Adequacy and Availability, a. Evaluation of Provider Directory Accuracy	18	Are CCOs expected to include additional data elements in their provider directories other than what is required by the federal regulations?	Please refer to the MississippiCAN contract on the DOM website <a href="http://www.medicaid.ms.gov">www.medicaid.ms.gov</a> .
.68.	Section 2.1.2, 4. Validation of Network Adequacy and Availability, a. Evaluation of Provider Directory Accuracy	18	Is reporting to DOM on the evaluation of the provider directory to be quarterly or one final annual report? Please clarify quarterly reporting requirements.	The audit shall be conducted quarterly. For each audit conducted, the Contractor shall submit a final report as described by DOM.
69.	Section 2.1.2, 4. Validation of Network Adequacy and Availability, b. Provider Access Surveys	18	Has DOM identified provider types to be included in the telephone surveys?	This survey is not restricted to provider types.
70.	Section 2.1.2, 4. Validation of Network Adequacy and Availability, b. Provider Access Surveys	18	Have the access standards, including provider ratios, travel times, and appointment scheduling timeframes changed since the 07/23/2018 Mississippi Managed Care Quality Strategy?	Please refer to the MississippiCAN contract on the DOM website <a href="http://www.medicaid.ms.gov">www.medicaid.ms.gov</a> .

71.	Section 2.1.2.6, Quality Rating System (QRS)	19-20	<ul style="list-style-type: none"> <li>a. In which contract year should the EQRO begin conducting the QRS task?</li> <li>b. If the EQRO has established a QRS methodology used and adopted by other states, would DOM want to begin implementation of the QRS in year one of the contract?</li> </ul>	The contract year to begin the QRS task has not been established at this time.
72.	Section 2.1.3, 1. Participate in the State's Quality Leadership Committee and Quality Task Force	20	<ul style="list-style-type: none"> <li>a. What is the frequency of the Quality Leadership Committee and Quality Task Force meetings?</li> <li>b. Are these separate meetings?</li> <li>c. Is on-site presence required, or can the EQRO participate via conference call/webinar?</li> </ul>	The Quality Leadership team (quarterly) and Quality Task Force meetings (monthly) are separate face to face meetings. Attendees are allowed to attend by conference call at the discretion of the DOM Director.
73.	Section 2.1.3, 2. Validate Consumer and Provider Surveys on Quality of Care	20	<ul style="list-style-type: none"> <li>a. Confirm that each MississippiCAN and MississippiCHIP CCO uses a CAHPS survey vendor to conduct their own CAHPS surveys. The EQRO is then just required to validate the surveys. If not, is DOM requiring the EQRO to conduct the CAHPS surveys?</li> <li>b. Are both consumer AND provider surveys conducted for each CCO?</li> </ul>	DOM is not requiring Contractor to conduct CAHPS surveys as these are conducted by the CCOs.
74.	Section 2.1.3, 2. Validate Consumer and Provider Surveys on Quality of Care and Section 2.1.3, 3. Behavioral Health Member Satisfaction Survey	20-21	Is the EQRO required to conduct CAHPS for both adult and child members or just one? Please clarify.	Both.
75.	Section 2.1.3, 3. Behavioral Health Member Satisfaction Survey	21	Confirm that each MississippiCAN and MississippiCHIP CCO should be surveyed (five total).	Yes.



76.	Section 2.1.3,3 Behavioral Health Member Satisfaction Survey	21	Confirm that the CAHPS Experience of Care and Health Outcomes (ECHO) Survey should be used to conduct the Behavioral Health Member Survey. If not, which survey should be used?	Yes, the CAHPS ECHO Survey. The CAHPS® Experience of Care and Health Outcomes (ECHO) Survey asks health plan enrollees about their experiences with behavioral health care and services.
77.	Section 2.1.3, 7. Producing additional reports	22	a. Can DOM provide examples of additional reports currently produced by the EQRO? b. Are there specific examples of reports DOM may require in the future?	The EQRO Annual Technical Report is available on the DOM website <a href="http://www.medicaid.ms.gov">www.medicaid.ms.gov</a> .
78.	Section 2.1.3,8. Conducting Quality Improvement projects	22	a. Can DOM provide examples of quality improvement projects being conducted by the current EQRO? b. Are there specific examples of quality improvement projects DOM may require in the future?	The EQRO Annual Technical Report is available on the DOM website <a href="http://www.medicaid.ms.gov">www.medicaid.ms.gov</a> .
79.	Section 2.4.2, 3. To prepare each CCO for an annual review...,	27	To prepare each CCO for an annual review, the Contractor shall schedule a conference call/discussion with management staff of each CCO in conjunction with DOM to describe the process (both document review and on-site interviews/discussions) and detail the topics to be reviewed. Is the EQRO required to schedule one call per CCO or is there one call in which management staff from all CCOs will join (five calls vs one call)?	Calls are conducted separately for each CCO.
80.	Section 2.5. Performance Standards	27	Attachment F is a list of HEDIS performance measures. Is there another document or attachment that should be included?	The 2020 Adult and Child Core Set Health Care Quality Measures for Medicaid and CHIP are attached.
81.	Section 2.7.4. Travel	30	Is a face-to-face meeting between the EQRO and DOM required for contract implementation or can all meetings be conducted via conference call/webinar?	Face-to-face meetings are not required for all EQRO and DOM meetings.

82.	Section 4.1. Approach	32	Will any weight be given to the quality of the EQRO's approach and experience in conducting the EQRO activities? Or, if the EQRO meets minimum qualifications, outlined in 4.4.2, will DOM simply select the lowest cost bidder (with no weight/scoring based on quality and experience)? Published Annual Technical Reports provide evidence that not all EQROs comply with all EQRO review/reporting requirements.	The contract will be awarded to the responsive bidder with the lowest bid who meets the minimum qualifications as set forth in the IFB.
83.	Section 4.1. Approach	32	With the IFB, is DOM looking for detailed descriptions and methodologies for the required scope of work, activities, and deliverables or is the DOM simply asking for the EQRO to acknowledge and agree to the requirements? This will mean the difference in a detailed proposal describing approach, methodologies, and deliverables vs. brief narrative agreeing to requirements.	Completion and submission of Attachments A-E, providing the minimum qualification information requested as an attachment to Attachment B (a brief explanation of the applicable experience must be provided for Numbers 1 and 2), ownership and financial disclosures and the required acknowledgement of any amendments will satisfy the criteria for a responsive bidder.
84.	Section 4.4.2, 5. The bidder shall be licensed...	37	Is the bidder required to be licensed before being selected as the successful EQRO, or within 30 calendar days after notice of award (apparent successful bidder)?	Within 30 calendar days of notice of award.
85.	Section 4.4.6. Bid Submission format	38	What is required of Attachment F? Attachment F is a list of HEDIS Performance Measures. Is the bidder simply to agree to validating the performance measures in Attachment F?	Yes.
86.	Attachment B, Bid Form	71	For the Contract Term (Initial three year period), confirm DOM is seeking the total price for the three-year period and not a per year price in the Contract Term column.	Confirmed.

87.	2. SCOPE OF SERVICES--2.1.2 Federally Mandated Activities	17	<p>While the CCOs submit provider data to DOM, will the CCOs submit provider data for the Network Adequacy Validation directly to the Bidder, or will data be provided to the Bidder by DOM or another vendor?</p> <p>Please describe the frequency and format/layout of provider data submitted to the Bidder.</p>	EQRO annual review requests and subsequent requests are to be submitted by the Contractor to the CCOs.
88.	2. SCOPE OF SERVICES--2.1.2 Federally Mandated Activities	17	Which specific provider specialties or provider groups does DOM anticipate including in the evaluation of provider directory accuracy?	All provider specialties and groups are included in the CCO provider directory.
89.	2. SCOPE OF SERVICES--2.1.2 Federally Mandated Activities	17	<p>Has DOM or the CCOs previously conducted evaluations of provider directory accuracy or provider access surveys?</p> <p>If so, can DOM make these reports available to the Bidder?</p>	There are no reports available.
90.	2. SCOPE OF SERVICES--2.1.2 Federally Mandated Activities	18	Which specific provider specialties or provider groups does DOM anticipate including in the quarterly provider access surveys?	There are no restrictions to provider specialties and types.

91.	Attachment B - Bid Form for External Quality Review Organization (EQRO)--2.1.3 Additional Activities Required by DOM	20 and 71	Attachment B details the instructions to provide the total contract cost for the initial three-year term, plus two one-year renewals. It appears that points will be awarded, and preference given to the lowest bidder. There are some activities, such as readiness reviews, that will be dependent on the number of future CCOs procured and whether those CCOs will need to participate in a readiness review. Since the number of CCOs and costs for readiness reviews cannot be accurately predicted, would DOM consider evaluating the cost of a readiness review per CCO separate from the total cost of all other EQR activities that can be accurately predicted?	No.
92.	General		Are the MississippiCAN and MississippiCHIP plans NCQA-accredited?	Yes, they are NCQA accredited.
93.	2.1.2 (1)	16	How many PIPs per plan? How many performance measures per plan?	All CMS Adult and Child Core Set Measures will require validation for MississippiCAN and MississippiCHIP in addition to the Annual Audited HEDIS data. Please refer to MS DOM website for completed procurements at <a href="https://medicaid.ms.gov/resources/procurement/completed-procurements/">https://medicaid.ms.gov/resources/procurement/completed-procurements/</a> Specific Mississippi Coordinated Access Network (MississippiCAN) awarded contracts for information regarding PIPs.
94.	2.1.2 (3)	17	The protocol for determining compliance with Medicaid Managed Care Proposed Regulations at 42 CFR Parts 400, 430, et al., requires that validation be performed on a triennial basis. Please confirm that full compliance validation will be required annually.	Full compliance validation will be required annually.
95.	2.1.2 (4.c.4)	18	Does the word “annually” apply to the first or second sentence?  <i>Providing technical assistance to each CCO in each line of business and DOM related to the measure. Annually. The</i>	“Annually” applies to both sentences.

			<i>Contractor shall create one (1) statewide report with results listed by each CCO.</i>	
96.	2.1.3	20	Participate in the State's Quality Leadership Committee and Quality Task Force: Is participation in this meeting telephonic or in-person?	The Quality Leadership team and Quality Task Force meetings are face to face meetings. Attendees are allowed to attend by conference call at the discretion of the DOM Director.
97.	Attachment F	NA	What are the requirements for Attachment F beyond returning it?	Submission of a bid is confirmation that you agree to meet the performance standards outlined in attachment F.
98.	4.4.2 Minimum Qualifications	36	1. "The Bidder shall have a minimum of 5 years' experience performing External Quality Review activities under 42 CFR Subpart E."  Can the requirement for 5 years' EQR experience be a combination of a prime contractor and a subcontractor for this effort? Or does the prime bidder need to show all of this experience?	The bidding entity itself must meet the minimum qualifications for Number 1.
99.	Attachment B Bid form	72	"CERTIFICATION OF INDEPENDENT PRICE DETERMINATION" "Bidder certifies that the prices submitted in response to the solicitation <b>have not</b> been arrived at independently. . ."  Should this sentence be revised to say "have been arrived at independently"?	Confirmed.
100.	Attachment C References	73	"The bidder shall provide references from at least three governmental business clients for the immediate past three years. . ."  Can submitted references be from a subcontractor rather than the prime bidder?	The bidding entity itself must meet the minimum qualifications for Number 1.
101.	2.1.3.3	21	"In addition to the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey, the Contractor shall be required to conduct a Behavioral Health Member Satisfaction Survey."	This is a new CAHPS survey report. The Contractor shall be required to conduct a Behavioral Health Member Satisfaction Survey. The Contractor shall be required to select and/or develop a survey instrument, administer the survey, validate and analyze the survey

			Is the Contractor required to conduct the CAHPS survey or validate it?	data, and prepare reports of survey findings for each CCO.
102.	2.1.3.4	21	<p>“The Contractor shall perform validation of all Corrective Action Plans (CAPS) developed for each CCO.”</p> <p>Will awarded Contractor be provided with previous Contractor’s reports and CAPS?</p>	<p>The previous EQRO annual reports are located on the DOM website <a href="https://medicaid.ms.gov/mississippican-resources/">https://medicaid.ms.gov/mississippican-resources/</a>.</p>
103.	2.1.3.3	21	<p>“The Contractor shall be required...for each CCO.”</p> <p>Will there be a separate survey sent for each CCO population or will the sample be stratified by plan?</p>	<p>The Behavioral Health Member Satisfaction Survey is a separate survey for each CCO population.</p>