

IFB Name: Recovery Audit Contractor (RAC) Services

IFB #/RFx #: IFB #20220218 / RFx #3160004700

Date: 3/14/2022



MISSISSIPPI DIVISION OF
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Amendment #1 – Responses to Questions

Question #	RFP Section #	RFP Page #	Question	DOM Response
1.	1.3 Bid Acceptance Period	9	Will the DOM provide the bid form in Word in the order you are requesting the response? Or, can we put the DOM's forms verbatim into our Word template?	DOM has provided the Bid Form and Attachment B.2 – Independent Price Determination in Word format. Reference Amendment #2. Any response requested within the IFB should conform with the directions and language within each specification of the IFB.
2.	2.1 Project Overview	18	For calendar years 2019, 2020 and 2021, respectively, how many audits/reviews were performed by category/claim type?	<p>DOM does not capture data based on the number of audits performed by category/claim type. DOM is able to provide the following information:</p> <p>CY 2019- There were two (2) active audit concepts performed: 1. Add On, and 2. New Patient.</p> <p>CY 2020- There were four (4) active audit concepts: 1. Add-On, 2. 3-Day Payment Rule, 3. Intensity Modulated Radiation Therapy, and 4. New Patient.</p> <p>CY 2021- There were five (5) active audit concepts: 1. Add On,</p>

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				2. 3-Day Payment Rule, 3. Intensity Modulated Radiation Therapy, 4. New Patient, and 5. Multiple Surgery Procedure.
3.	2.1 Project Overview	18	For calendar years 2019, 2020 and 2021, respectively, what were the total findings/dollars recovered by category/claim type?	DOM does not capture total findings/dollars recovered by category/claim type. See response to question #54.
4.	2.6 Notice to Providers	24	On what percentage of audits were rebuttal/reconsideration requests received in each of the past three fiscal/calendar years?	CY 2019- No data is available. CY 2020- 10% CY 2021- 2.5%
5.	2.6 Notice to Providers	24	What percentage of audits were appealed in each of the past three fiscal/calendar years?	None.
6.	2.6 Notice to Providers	24	What percentage of appealed audits were overturned in each of the past three fiscal/calendar years?	None.
7.	2.6 Notice to Providers	24	In what percentage of appealed audits was the current contractor required to appear in each of the past three fiscal/calendar years?	None.
8.	2.8.2 Repayment through Installment Agreements	30	What was the average installment agreement length that DOM approved in each of the past three fiscal/calendar years?	No installment agreements were approved in the past three fiscal/calendar years.

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9.	2.8.2 Repayment through Installment Agreements	30	How many claim overpayments were subject to installment agreements in each of the past three fiscal/calendar years?	None.
10.	2.8.3 Compromise and/or Settlement of Overpayment	30	How many claim overpayments did DOM compromise/settle on in each of the past three fiscal/calendar years?	CY 2019- No data is available. CY 2020- 10 CY-2021- 3
11.	2.8.3 Compromise and/or Settlement of Overpayment	30	What was the average compromise/settlement percentage on claim overpayments in each of the past three fiscal/calendar years?	CY 2019- No data is available to determine this percentage. CY 2020-1.31% Cy 2021- 19%
12.	2.11 Public Relations, Outreach, and Customer Service	32	How many customer service calls has the current contractor received in each of the past three fiscal/calendar years?	DOM does not require this information from the current vendor.
13.	2.11 Public Relations, Outreach, and Customer Service	32	Does the current contractor operate fully in-person, fully remote, or in a hybrid work environment?	The current contractor is fully remote unless otherwise requested by DOM to be onsite.
14.	Attachment A - Bid Cover Sheet	89	Will you accept DocuSign electronic signatures on all required forms?	Yes, as long as the electronic signature is date stamped and authenticated.

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15.	Attachment E - Claim Types	100	DOM presents claim metrics for Encounter claims. Are review of these claims in scope? If so, how would the contractor be compensated, as there are no payments to be recovered?	Yes, encounter claims are in the scope. The Division of Medicaid has a process in place to recoup encounter claims; therefore, the Contractor will be compensated in the same manner as fee-for-service claims.
16.	2.4.3 Adjustment Process	20	Has Extrapolation been approved by DOM and employed by the legacy Contractor in the past? If so, can DOM provide metrics as to how many times, the number of providers, the count of claims and the dollars ultimately recovered?	No. Extrapolation has not been employed by legacy contractors.
17.	2.1.7 Key Personnel (Correct Section is 2.17)	42	Requirements for Key Personnel include very specific educational criteria. Would DOM consider amending the requirements to include an option for demonstrated experience/expertise through an appropriate number of years of specific experience?	No.
18.	2.1.7 Key Personnel (Correct Section is 2.17)	42	Does DOM accept the Interstate Licensure Compact, as passed by the Mississippi Legislature in 2016's House Bill 41: http://billstatus.ls.state.ms.us/2016/pdf/history/HB/HB0041.xml	Key Personnel should be licensed in the state of Mississippi in accordance with state law. The Division cannot give an opinion on the licensing process, and you will have to contact the Mississippi State Board of Medical Licensure about licensing requirements.
19.	2.1.7 Key Personnel (Correct Section is 2.17)	43	The Audit Manager is required to be a Certified Public Accountant. Would DOM consider amending the requirements to include an option for demonstrated experience/expertise through an appropriate number of years of specific experience?	No.

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20.	All		Will DOM accept suggested redlines to the contracting language? If so, must these be included in Offeror response or are they to be negotiated in the event of a pending award?	No.
21.	2.14.2	32	Can discretionary threshold amounts be applied to a bundle of claims with related provider activities? The Apatics AI solution will provide very specific dollar amounts which will include small dollar amounts that may be part of a larger pattern from providers or groups of providers hoping to “fly under the radar”. Small amounts may be part of a very important pattern that leads to larger amounts in aggregate.	Yes.
22.	Section 4 / Attachment B	90	Your bid document references pre-adjudication and post-adjudication. Our technology platform will detect and prevent most FWA in real-time (and a larger amount than the current rules-based claims editing technology can see). Should we segment our response into a recovery proposal and a prevention proposal? Or should we propose only recovery detection and collection at this time?	This is a competitive invitation for bids (IFB) and requirements of the procurement process are outlined in the IFB. Any response requested within the IFB should conform with the directions and language within each specification of the IFB. Pre-adjudication will not be a part of this IFB, refer to Amendment #2.
23.	Section 4 / Attachment B	90	Attachment B asked for the proposal to include "Projected Recoveries". The Apatics technology platform has proven to detect 2X to 10X more FWA (including various categories of overpayment) than conventional rules-based claims editing systems in the market. Can you tell us what claims editing system is Mississippi Medicaid using today to detect FWA? Based on the Apatics experience, this will help us to determine what multiple of additional FWA (overpayment detection and recovery) we may detect with a retrospective analysis of 2019, 2020, and 2021 claims	The State currently uses a surveillance utilization review system.

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			data. We are willing to perform a quick retrospective claims analysis to quantify the increased detection and recovery opportunity if desired.	
24.	Section 4 / Attachment B	90	What kind of claims are included in the recovery - HCFA , UB04 , Dental etc.?	CMS-1500, UB04.
25.	Section 4 / Attachment B	90	Will Mississippi Medicaid consider separating the detection technology portion of this RFP from the collection portion? Apatics will provide an integrated proposal, however, our technology will provide the maximum detection capability (more detection = more recovery) and we are willing to provide the technology solution 'only' and partner with a collection-focused firm if needed.	This is a competitive invitation for bids (IFB) and requirements of the procurement process are outlined in the IFB. Any response requested within the IFB should conform with the directions and language within each specification of the IFB.
26.	Section 4 / Attachment B	90	What is more important to Mississippi Medicaid - the amount of recoverable overpayments that can be detected or the cost per dollar collected? For example: If the Apatics technology can identify 3X more potential recovery but our collection amount (% per dollar collection is higher), will we be judged on the percentage per dollar collected or on the total amount that can be returned to Mississippi Medicaid?	DOM is concerned with recovering payments as described in the IFB.
27.	Section 4 / Attachment B	90	Should our recovery bid include technology (detection of potential overpayment recovery) and collection broken out into two separate bids or one consolidated bid based on a percentage of collection?	This is a competitive invitation for bids (IFB) and requirements of the procurement process are outlined in the IFB. Any response requested within the IFB should conform with the directions and language within each specification of the IFB.

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28.	Section 1.5.3.5	15	Apatics will provide various Audit and Enforcement staff with a real-time dashboard of FWA activity at the claims and provider level. What departments will need secure access to this information?	Office of Program Integrity.
29.	Section 1.5.3.4	15	Provider specific FWA and overpayment information is automated and available in real-time on Apatics secure portal with supporting data for each provider. What departments will need secure access to this information?	Office of Program Integrity.
30.	Section 1.5.3	15	Apatics' process is to run all providers (using an NPI number) through our provider integrity platform to identify providers that warrant deeper review of claims and potential collusion activities. 1. Will we receive NPI numbers? 2. What does Mississippi Medicaid want us to do with potential provider integrity data that will surface during this process?	1. Yes, the provider NPI number will be provided. 2. Report to DOM's Office of Program Integrity.
31.	Section 2	20-21	Apatics' FWA detection and prevention capability will be quantified and evident to Mississippi Medicaid within a few days of analyzing the 2019, 2020 and 2021 claims data. What will be the process of applying our technology to Detection & Prevention of FWA / overpayment in real-time to reduce the pay-and-chase recovery process?	Currently, DOM does not have a process in place for non-pay and chase regarding RAC.
32.	1.0	8	The IFB states, "The Contractor will perform Medicaid improper payment recovery services to identify and facilitate recovery of improper payments made by DOM and Managed Care Organizations for healthcare services provided to Medicaid beneficiaries." Please confirm that the scope for this contract will allow	The scope for this contract does allow for the Contractor to pursue both FFS and Encounter claim payments.

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			for the Contractor to pursue both FFS and Encounter claim overpayments.	
33.	1.1	8	<p>The IFB states, "All provisions and requirements of the Contractor outlined in the IFB are mandatory. The Bidder is disallowed from taking exceptions to these mandatory requirements. Any exceptions and/or deviations may be cause for rejection."</p> <p>Will the State accept a brief, detailed description of proposed changes to the contract terms and conditions as well as other service requirements that the bidder would like the State to consider during any contract negotiation period without having our proposal rejected? If so, should those be included as an attachment to the proposal?</p>	No.
34.	1.3	9	<p>The IFB indicates that the bid form must be submitted in a sealed envelope or package to a physical address.</p> <p>Will DOM accept electronic submission of the bid form to procurement@medicaid.ms.gov?</p>	No. Follow submission directions as stated in 1.3.1 of the IFB.
35.	1.3.1	9-11	<p>Would the State consider providing proposal preparation instructions, e.g., page limits, font style and font size, borders, headers, and footers?</p>	No. Follow submission directions as stated in 1.3.1 of the IFB.
36.	1.4.2 (Item 3)	13	<p>Item 3 requests a list that identifies all governmental entities with which the Bidder has ever done business or is currently doing business.</p> <p>Would the State consider limiting this list in some manner</p>	Yes, refer to Amendment #2.

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			such as "in the last 10 years" or "those specific to Recovery Audit Contracts?"	
37.	2.3	19	Can the coordination system for exclusion confirmation be satisfied via file exchange to DOM to confirm if a claim should be excluded?	Refer to Section 2.3 of the IFB.
38.	2.3 (Item 2.c)	19	Will a fiscal agent adjustment be identified in the data by using logic with the ICN? If not, please describe.	Yes.
39.	2.3 (Item 2.c)	19	Are the fiscal agent mass adjustments excluded regardless of reason?	Yes.
40.	2.3 (Item 2.c)	19	What percentage of claims are adjusted via a mass adjustment?	We are unable to provide this information as mass adjustments are performed based on errors determined by the fiscal agent and/or program areas.
41.	2.5.3 (Item 2.a)	22	Prior Authorization is not typically a guarantee of payment. There is no way to know at the time of authorization, based on information provided by the hospital, what services will actually be delivered to the patient. Will claims that are prior authorized be included in the review for overpayment identification?	Yes.
42.	2.5.3 (Item 2.b)	22-23	DRG validations review documentation in the medical record to determine if it supports all diagnoses and procedures bill.	Yes.

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			Is DRG validation, to ensure the appropriate DRG was utilized, included in the scope of the contract?	
43.	2.6 (Item 1)	23	<p>This requirement indicates that the provider must be mailed a certified letter informing them of both the preliminary and final audit results.</p> <p>If a provider portal is utilized, where providers register for use, will notifications through the portal for notification letters and claims listings is a certified letter necessary?</p>	Yes.
44.	2.6 (Item 1)	23	<p>The Contractor must send all correspondence to a specified point of contact to include a designated person and/or designated unit or office of the billing provider. Prior to any mailings and bi-annually, the Contractor must validate that the contact information is accurate and up-to-date.</p> <p>Is the designated person and/or unit noted on the provider file within the MMIS and passed to the Contractor for use?</p> <p>Does the validation require making personal contact with each provider via phone or can the validation be performed by matching the mailing address in the RAC system back to the address on file with DOM's system of record (MMIS)?</p> <p>Utilizing addresses that are not recorded on the provider file within the MMIS represents a potential privacy/security issue.</p>	<p>No, the designated person is not included on the provider file. Initially the validation may require personal contact or portal notification when the provider registers for portal access. As designees and units are added by the provider, the Contractor should maintain this information in its system. The Contractor should use the address provided on the provider file, but must identify a specific designee or unit to prevent returned mail (e.g. large hospitals).</p>

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45.	2.8.1	30	Will DOM be sending check copies to Contractor to reconcile to claim? If yes, what is the manner of submission to Contractor? If no, please describe how Contractor will obtain check number, date received and date the check was mailed to DOM.	No, DOM will not send check copies to the Contractor. DOM will report all recoveries to the Contractor using a designated template provided by DOM.
46.	2.9	30-31	Providers will sometimes initiate their own refunds or adjustments as a result of receiving a Contractor letter. If the provider-initiated adjustment or refund is initiated/received after a Contractor letter mail date, will DOM not considered this a self-reported adjustment, therefore eligible for a Contractor contingency fee?	Refer to Section 2.4.3 Adjustment process. The Contractor shall be paid a contingency fee for identified improper payments that are recovered.
47.	2.9.1 (Item 5)	31	Please provide additional detail pertaining to contingency fee exclusion. Does duplicate refer to duplicate claims payment to a provider or a claim was dublicately identified in the Contractor's process?	A claim that was dublicately identified in the Contractor's process.
48.	2.10	32	Does this language mean that Contractor identified overpayments must exceed a \$5,000 threshold per provider to begin the overpayment notification process? Is there a claim level overpayment threshold to initiate an overpayment notification or debit adjustment?	No, Refer to section 2.6.1 Notice to Providers. Section 2.10 refers to the \$5000.00 threshold relevant to pursuit of overpayments resulting from state fair hearings. Appeals for amounts less than this threshold are reviewed at the unit level and DOM reserves the right not to pursue should the overpayment amount be minimal in amount.
49.	2.10	32	It states that the Contractor shall provide assistance and attend in person any hearings. How many hearings have been held for each year in the past 3 calendar years that required in person attendance? Do you expect the volume to decrease, increase, or remain the same?	2019-None 2020-None 2021-None We expect the volume to remain the same.

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50.	2.17	42-43	<p>Some of the Key Personnel have very specific education requirements (with specific degree focuses).</p> <p>Would the State consider relaxing the specificity of these degrees (public health, information systems management, etc.) to indicate that the focus is preferred instead of required for non-clinical positions?</p>	No.
51.	4.2 (Item 1)	58	<p>Two months is a very short period of time to implement a quality, comprehensive RAC program.</p> <p>Would the State consider extending this timeframe to 6 months?</p> <p>How will time be accounted for and credited when the implementation is stalled due to reasons beyond the control of the Contractor?</p>	<p>1) Yes, we will extend the implementation time to six (6) months.</p> <p>2) Under this contract, the basis of payment is recoveries and there will be no additional payments if implementation is stalled or delayed.</p>
52.	1.1	8	<p>The IFB states, "All provisions and requirements of the Contractor outlined in the IFB are mandatory. The Bidder is disallowed from taking exceptions to these mandatory requirements. Any exceptions and/or deviations may be cause for rejection."</p> <p>Will the State accept a brief, detailed description of proposed changes to the contract terms and conditions as well as other service requirements that the bidder would like the State to consider during any contract negotiation period without having our proposal rejected? If so, should those be included as an attachment to the proposal?</p>	This is a duplicate question. See response to question #33.

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53.	Attachment B-Bid Form	90	<p>The Bid Form provides ability to provide pricing for "Post-Adjudication" and "Pre-Adjudication" as Recovery Activities.</p> <p>Can you clarify these two lines? Is the "Post-Adjudication" post adjudication and post payment? Is the "Pre-Adjudication" post adjudication but prepayment? Or is DOM looking for the Contractor to perform claim editing prior to adjudication for "Pre-Adjudication"?</p>	Pre-adjudication will not be part of this IFB. Reference Amendment #2.
54.	General	N/A	What were the recoveries/savings for each of the three (3) last State Fiscal Years (SFY)?	<p><u>SFY 2019</u> Recoveries Received - \$659,213.23</p> <p><u>SFY 2020</u> Recoveries Received - \$285,580.46</p> <p><u>SFY 2021</u> Recoveries Received - \$123,672.85</p>
55.	General	N/A	What were the total fees paid to the current Contractor for each of the last three (3) last State Fiscal Years?	<p>SFY 2019- \$107,058.94</p> <p>SFY 2020- \$46,064.27</p> <p>SFY 2021- \$19,945.09</p>
56.	General	N/A	Were there any State-imposed restrictions or pauses in work due to the COVID-19 pandemic that restricted the Contractor's ability to pursue recoveries/savings?	No.

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This Amendment must be signed and submitted as a part of any bid to be considered for this procurement.

Receipt of Amendment Acknowledged:

(Signature)

(Printed)

(Title)