

Answers to RFP #1065 Questions

1. Is the funding for this RFP provided by federal pass-through (FAR or CFDA) dollars or State funds only?

Response: This is not a pass-through sub-recipient grant, this will be a consultant contract and be paid as a vendor relationship.

2. Is funding is part of federal pass-through \$\$? We need the CFDA number associated with this funding for federal reporting.

Response: Not applicable.

3. Who currently maintains the Health Home Performance Measurement data system?

Response: The Health Home Performance Measurement data system is maintained by the current vendor.

4. Who currently maintains the outcomes measurement reporting system?

Response: The Health Home Performance Measurement data system is maintained by the current vendor. A copy of the outcomes data is shared with DSS as each reporting period is finalized. The current submission template for outcome measures can be found at <http://dss.sd.gov/healthhome/outcomemeasures.aspx>.

5. Is the Health Home Performance Measurement data system and outcomes measurement reporting system one system?

Response: The analysis for each portion is completed using different systems and different techniques by the current vendor. DSS provides claims and recipient data. The vendor is free to propose the IT platform and reporting templates. The current submission template for outcome measures can be found at <http://dss.sd.gov/healthhome/outcomemeasures.aspx>.

6. What is the budgeted amount for this procurement?

Response: The current contract for this service is \$190,866 per year

7. Has DDS developed specific enhancements to the performance measurement data system?

Response: DSS has enhanced and refined the outcome measures through a subgroup of stakeholders. The vendor is free to propose the IT platform and reporting templates. The current submission template for outcome measures can be found at <http://dss.sd.gov/healthhome/outcomemeasures.aspx>

8. What is the current cost of the Health Homes program?

Response: PMPM costs for this program average \$3.5 million per year.

9. Have expected savings been realized?

Response: Yes

10. Has the goal of budget neutrality been achieved?

Response: Yes

11. What is the expected number of Medicaid recipients in the program in 2018?

Response: In FY 2017, there were 7,706 distinct individuals who participated in the program. We expect this to remain consistent or increase slightly.

12. In Section 4.4, the RFP states that the offeror must provide at least three previous or current projects performed by the offeror's organization. Would experience obtained by consultants prior to employment with an offeror or the experience of subcontractors qualify as relevant projects under this Section?

Response: DSS would need to evaluate the references as part of the process. References are one of the criteria used to select a vendor so vendors with stronger references will be scored higher in that area.

13. Please provide further description of the established Health Home Performance Measurement data system (e.g., frequency of updates, IT platform, reporting templates).

Response: DSS provides updates to the claims file on a monthly basis. Additionally recipient data is provided on an annual basis. The vendor is free to propose the IT platform and reporting templates. The current submission template can be found at <http://dss.sd.gov/healthhome/outcomemeasures.aspx>.

14. Please describe how DSS currently collects patient survey data from the Health Homes?

Response: Patient survey data is collected by the health home and reported either on an individual basis or on an average to DSS.

The Primary Care Provider Health Homes use a 5 question survey and report if the answer was optimal. This information can be found at <http://dss.sd.gov/healthhome/standardizedsurvey.aspx>.

The CMHC health homes provide DSS answer to questions on a tool that is currently being used as part of their day to day process. Those tools are

identified as the Adult/Youth/Family Service Outcome Tool. These are passed through to us on an individual level by the health home.

15. What risk adjustment methodology is currently used to identify chronic conditions?

Response: SD has a contract with a vendor to use Chronic Illness and Disability System to identify the Tier of each recipient.

16. Are the designated providers identified on an eligibility or enrollment file?

Response: Yes

17. Are the Health Home type and provider groupings available on a provider file?

Response: No, but this will be provided.

18. Is there an existing methodology or preferred approach for identifying these services Inpatient Hospital (IP), Emergency Room (ER), Outpatient Hospital (OP), Home and Community-Based Services (HCBS); Pharmacy (Rx), Office Visit (OV), Laboratory (Lab), Other?

Response: Yes – This will be shared with the vendor who is awarded this contract.

19. Can we leverage South Dakota Medicaid claims data that we currently collect under a separate concurrent engagement with DSS?

Response: This option could be considered. The current data set used by our vendor excludes some of the information provided to under the separate but concurrent engagement with DSS. Those exemptions would need to be discussed and documented to ensure that the correct information is being used for the analysis.

20. Please describe how the Health Homes currently submit outcome measure results to the existing vendor?

Response: Health Homes submit the data securely to the current vendor using an excel spreadsheet or file download in the correct format.

21. How frequently do Health Homes have to resubmit outcome measure results?

Response: Every 6 months. The Periods are 01.01-06.30 and 07.01-12.31. Once this period is complete, health homes have two months to submit the data to the vendor.

22. Are there any validation reports currently being run on the Health Home submissions?

Yes: the vendor runs validation reports to help them identify and work with provider on data that doesn't make sense.

23. Is DSS currently submitting reports to CMS? If so, what reports are submitted and is the vendor responsible for generating these reports?

Response: Yes, DSS responded to CMS for calendar year 14 and 15. The vendor is responsible for generating the information for all measures with the exception of nursing facility utilization which is generated by DSS.

24. Is the previous vendor eligible to respond to this RFP?

Response: Yes

25. What is a dashboard clinic?

Response: While the contract uses the term dashboard clinic, it is an error in the language. In short, it is generating the individual results in a dashboard and providing the results to individual clinics Health Home clinics. The dashboards provide a comparison to the state aggregate and the clinics previous periods of performance.