

Addendum # 5
FOLLOW UP QUESTIONS AND ANSWERS
&
CHANGES TO RFP
STATEWIDE MANAGEMENT ORGANIZATION
LOUISIANA BEHAVIORAL HEALTH PARTNERSHIP
OFFICE OF BEHAVIORAL HEALTH
RFP # 305PUR-DHHRFP-SMO-2014-OBH

RFP Page Number	Section	Question Number	Question Detail	Response
Page 102 Section 8.6	Section 8.6	Vendor Response #77	The RFP discusses anticipated changes to the Children/Youth Services. While the unit cost reimbursement rate for Parent/Youth Support is contemplated in the rate development, the rest of the items noted in this section do not appear to be included in the rate development. Will the rates be revised to add these components once the waiver is approved? If already included, what were the units per thousand for each eligibility cohort for these services?	If waiver or State plans amendment services are added that are not currently included in the rate, an actuarial review of rates will be performed.
Page 102 Section 8.6	Section 8.6	Vendor #77	The RFP discusses anticipated changes to the Children/Youth Services. While the unit cost reimbursement rate for Parent/Youth Support is contemplated in the rate development, the Crisis Stabilization and TFC expansion noted in this section do not appear to be included in the rate development. Will the rates be revised to add these components once the waiver is approved? If already included, what were the units per thousand for each eligibility cohort for these services?	If waiver or State plans amendment services are added that are not currently included in the rate, an actuarial review of rates will be performed.
Page 81 Section 7.0	Section 7.0	Vendor Response #5	Can DHH-OBH provide the method and amount of funding provided by the State to the SMO for the the OBH delegated responsibilities under the PSH program?	The costs for the Permanent Supportive Housing (PSH) program are in the capitation rates for the covered Medicaid expenses and accounted for through the administrative cost assumption at approximately \$400,000.

RFP Page Number	Section	Question Number	Question Detail	Response
Page 322 Page 353	23.16.5.5 26.7.1.1	Vendor Response #103	Section 23.16.5.5 on page 322 of the RFP states that “for purposes of this response, assume that the initial performance bonding/retainage requirement is approximately 10% of the total annual contract.” However, Section 26.7.1.1 states that “the SMO may be required to establish and maintain a performance bond of ten (10) million dollars (\$10,000,000)...” Can you clarify that the performance bond is 10 million dollars or 10% of the total annual contract?	<p>The SMO is required to obtain a \$10 million performance bond. DHH reserves the right to request retainage up to 10% in addition to the performance bond.</p> <p>The first paragraph of Section 23.16.5.5 of the RFP is amended to state the following: Performance bond/retainage. Describe how the Proposer will meet the performance bonding/retainage requirement outlined in the RFP. For purposes of this response, assume that the initial performance bonding/retainage requirement is approximately 10% of the total annual contract requirement is \$10 million.</p> <p>Section 26.8.1 of the RFP is amended to state the following: At the discretion of DHH, DHH may secure a retainage of up to ten percent (10%) from all capitation payments under the contract as surety for performance in addition to the performance bond or in lieu of the bond. On successful completion of contract deliverables, the retainage amount may be released on an annual basis.</p> <p>Section 26.7.1.1 of the RFP is amended to state the following: The SMO may be is required to establish and maintain a performance bond of ten (10) million dollars (\$10,000,000) for as long as the SMO has contract-related liabilities of fifty thousand dollars (\$50,000) or more outstanding, or fifteen (15) months following the termination date of this contract, whichever is later, to guarantee: (1) payment of the SMO's obligations to DHH and (2) performance by the SMO of its obligations under this contract [42 CFR §438.116].</p>
Page 354	26.8.1	Vendor Response #103	The actuarial rate development includes an admin and margin load of 9.5% and a medical cost load of 90.5%, after removal of the premium tax load. How will DHH be evaluating the cash flow needs on a regular basis to release funds? Is this evaluation after the contract year or during the year? Also please confirm this is in lieu of the performance bond.	Deliverables will be evaluated annually after the end of the contract year. Funds will not be unreasonably withheld for an inappropriate amount of time. Retainage is in addition to the performance bond (see above response).

RFP Page Number	Section	Question Number	Question Detail	Response
Page 136	10.2.3.3.9.3	Vendor Response #44	DHH-OBH responded that the SMO is responsible for out-of-network non-Medicaid eligible transportation costs. We understand that this could be read by some individuals that the SMO would pay, for example, for transportation to an AA meeting for a non-Medicaid eligible individual. Can OBH please clarify in detail what is meant by “out-of-network non-Medicaid eligible” and provide examples of these costs and provide any estimates of such costs? Also, can OBH point out in the data book where such costs have been accounted for?	<p>For non-Medicaid members, the SMO is not responsible for transportation costs in or out-of-network.</p> <p>For Medicaid eligible members, Bayou Health pays for transportation. Upon referral by a contracted SMO provider and with prior authorization by the SMO, all non-emergency medical transportation (NEMT) for members to and from a contracted SMO provider (or providers operating under approved single/ad hoc case agreements) shall be reimbursed through Bayou Health. All Medicaid eligible NEMT shall be coordinated in conjunction with State Medicaid (i.e., single state broker, state contractor, or Bayou Health, as applicable).</p> <p>If a Medicaid eligible member needs a specialized behavioral health service that is not available through the SMO’s network, the SMO will arrange for the service to be provided outside of the network if a qualified provider is available. Transportation will be provided and reimbursed through Medicaid when eligible; otherwise, the SMO shall be responsible for costs of necessary transportation in this circumstance.</p> <p>Such transportation costs that are not eligible for Medicaid reimbursement, therefore, are not accounted for in the data book as these are not covered by Medicaid.</p>
Page 1 (Page372 RFP)	Attachment 1	Vendor Response #106	Does ‘anticipated earnings to accrue to certified small entrepreneurship(s)’ include purchases made by the SMO to support both local and corporate operations?	Yes.