

**Addendum #3: Additional Revisions**

**ADDITIONAL REVISIONS TO RFP DOCUMENTS**  
**Request for Proposals # 3000011953**  
**Louisiana Medicaid Managed Care Organizations**

LOUISIANA DEPARTMENT OF HEALTH  
BUREAU OF HEALTH SERVICES FINANCING  
APRIL 17, 2019



Revision No.	Document Reference	Page	Revised Provisions
4	Appendix B Model Contract	112	<p><b>2.9.8.1.6</b> For the following qualified providers, the Contractor shall offer a provider agreement and also have LDH’s approval prior to terminating the agreements:</p> <ul style="list-style-type: none"> <li>• Louisiana Office of Public Health (OPH);</li> <li>• All OPH-certified School Based Health Clinics (SBHCs);</li> <li>• All small rural hospitals meeting the definition in the Rural Hospital Preservation Act;</li> <li>• Federally Qualified Health Centers (FQHCs);</li> <li>• Rural Health Clinics (RHCs) (free-standing and hospital based);</li> <li>• Clinics and outpatient providers funded under the HRSA administered Ryan White HIV/AIDS Program;</li> <li>• OPH Family Planning clinics and providers, including those funded by Title X of the Public Health Services Act;</li> <li>• <u>Opioid Treatment Programs;</u></li> <li>• All providers approved by the LDH PSH program to provide tenancy and pre-tenancy supports for the Louisiana Permanent Supportive Housing program; and</li> <li>• Local Governing Entities.</li> </ul>
5	Appendix B Model Contract	150	<p><b>2.11.12</b> Payment for Hospital Services The Contractor is not responsible for reimbursement of graduate medical education (GME) payments or disproportionate share hospital (DSH) payments to providers. The Contractor shall use the increased hospital funds received above the base rate (subject to risk adjustment) to the Full Medicaid Pricing, as detailed in Attachment F, Actuarial Rate Certification Letter, for reimbursement of inpatient and outpatient hospital services <u>in compliance with 42 C.F.R. §438.6.</u></p> <p><b>2.11.13</b> Payment for Ambulance Services The Contractor shall use the increased ambulance services funds received above the base rate (subject to risk adjustment) to the Full Medicaid Pricing, as detailed in Attachment F, Actuarial Rate Certification Letter, for reimbursement of ambulance services <u>in compliance with 42 C.F.R. §438.6.</u></p> <p><b>2.11.14</b> Payment for Physician Services The Contractor shall use the increased physician services funds received above the base rate (subject to risk adjustment) to the Full Medicaid Pricing, as detailed in Attachment F, Actuarial Rate Certification Letter, for reimbursement of physician services <u>in compliance with 42 C.F.R. §438.6.</u></p>

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6	Appendix B Model Contract	219	<p><b>2.16.21.7</b> An MCO choosing to participate in Approved Incentive Arrangements implemented under this Section shall ensure that any contracts the MCO may have with any third party to fulfill the obligations under this Section contain provisions clearly providing for the MCO’s right of recovery in situations whereby LDH recoups MCIP payments from the MCO. <u>LDH reserves the right to recoup in any situation where CMS disallows federal financial participation related to any payments in the MCIP program.</u> An MCO’s activities to recover such payments, through recoupment, withhold or otherwise, are not subject to the prior notification requirement under the Fraud, Waste and Abuse Prevention section, or any other notice and reporting obligation set forth in this Contract unless otherwise required by the terms of recoupment specified by LDH under this Section.</p>
7	Appendix B Model Contract	305	<p><u><b>4.10.2</b> Amounts that exceed or cannot otherwise be collected through the capitated payment deduction shall be due and payable to LDH no later than thirty (30) calendar days following notification to the Contractor by LDH, unless otherwise authorized in writing by LDH. LDH reserves the right to collect interest on unpaid balances beginning thirty (30) calendar days from the date of initial notification. Any unpaid balances after the refund is due shall be subject to interest at the current Federal Reserve Board lending rate or ten percent (10%) annually, whichever is higher.</u></p> <p><b>4.10.23</b> The Contractor shall reimburse all payments as a result of any federal disallowances or sanctions imposed on LDH as a result of the Contractor’s failure to abide by the terms of the Contract. The Contractor shall be subject to any additional conditions or restrictions placed on LDH by HHS as a result of the disallowance. Instructions for returning of funds shall be provided by written notice.</p>
8	Addendum 2	28	<p>[Response to question #112] The denominator is the estimated value of the MCO contract. LDH will project the average contract cost and apply that amount uniformly across all proposers. Medical spend to certified network providers <del>cannot</del> <u>may</u> be included in the numerator. There is no minimum percentage of the subcontracted work.</p>