

Questions and Answers

RFP # 305PUR-LDHRFP-2016-HIP-HIV-OPH

Question 1: Page 7 of the RFP references a requirement to “train all essential HIP staff on the operation and utilization of the Ramsell and CAREWare databases,” noting further that staff will “document individual transactions for each client . . .” Can you please clarify the expected scope of training required, as well as the desired split of recordkeeping and data management responsibilities (i.e., those HIP prefers to keep in-house and those delegated to the successful proposer).

Answer 1: Staff from the STD/HIV Program will actually provide all of the initial training related to the operation and utilization of the data collection systems required by the Health Insurance Program (HIP). Currently, these data collection systems are Louisiana CAREWare and the electronic interface designed by Ramsell, Inc. As new staff are hired, or there are essential staff vacancies that are filled, SHP would prefer that the successful proposer train those individuals on the operation and utilization of the Louisiana CAREWare and Ramsell, Inc. data collection systems; however, SHP staff are available to provide training if the successful proposer would prefer that our office assume this responsibility. All required client level data related to each transaction on behalf of an eligible client must be documented by the successful proposer. Please refer to Attachment VII (2015 Required RSR Fields) and VIII (2016 Required Part B Fields) to review the specific data requirements. All financial information related to each transaction must also be recorded by the successful proposer, and be submitted on a monthly basis for review by SHP staff in order for reimbursement to be made to the successful proposer. Aggregate reports and programmatic data required for the purposes of program monitoring, evaluation or quality assurance will primarily be generated by SHP staff. However, the data from these reports will be shared with the successful proposer in order to address emerging client needs, rectify current gaps in services, and/or assure program improvement.

Question 2: On p. 21, item 12.a directs proposers to “specify costs for performance of [professional] tasks”; item 12.c requests a separate quote for expenses. Attachment V, though, allows submission of administrative costs only; i.e., there is no provision for disclosing service fees. What is the best way for proposers to present all of the information required in item 12?

Answer 2: Service fees are to be wrapped under administrative cost and can be disclosed/described within that category in the form provided.

Question 3: What is the anticipated annual budget contract amount?

Answer 3: The annual budget for the Health Insurance Program (HIP) is estimated to be approximately \$25 million, but the actual contract amount will be based on 1) the availability of federal resources in each year of the contract, 2) possible changes in the PPACA under the new federal administration that could impact client enrollment, and 3) changes that may be experienced by Louisiana Medicaid that could also impact client enrollment.