



Department of Health and Social Services
Finance and Management Services
Grants and Contracts Support Team
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RFP 190000080
Amendment 1
Alaska Medicaid Vision Program Services

Amendment Issue Date: 07/10/2019

This amendment provides response to questions received.
A copy of this amendment is available on the State's Vendor Self Service website.

Question 1: Page 40, Frame List

Is it acceptable and responsive for a bidder to supply a separate document (in word or excel format) for the frame list (in the same table format with the required information) rather than manually filling in the table of the pdf RFP document?

State Response: Excel or Word formats are acceptable, so long as the format and formula extensions are identical to the template.

Question 2: Page 40, Frame List

Is it acceptable and responsive for the bidder to combine the front size and temple length into one column?

State Response: The State requires separate columns for 'front size' and 'temple length'.

Question 3: Page 10, Section 2.01 – Additional Professional Service Requirements

Please confirm whether the State's expansion of the service requirements includes:

- providing the "medical review" of whether a specific prescription and/or pair of eyeglasses is medically necessary; and/or
- providing "medical review" to confirm whether the proper ICD 10 procedure and/or diagnosis code is received for the specific pair of eyeglasses ordered

Or, whether the "additional professional service" requirements are limited to confirming eligibility and Managing the benefit by:

- confirming a member is eligible for a pair of eyeglasses,
- denying eyeglass orders where the member is ineligible,
- denying eyeglass orders where the member has exceeded the number of eyeglasses permitted in the benefit year (unless in the case of children where medical necessity is met); and

- Denying specific lenses, lens materials, lens treatments, and/or frames that are not covered by the program or require prior authorization (where no prior authorization has been issued).

State Response: The State does not require medical review. The contractor is to confirm eligibility and benefit limits available, as described the in the second set of bullets above.

Question 4: Page 12, Denials

Please confirm what the State means in the last sentence where the RFP refers to the requirement that the “Department may request the contractor to represent ‘their’ organization for the determination of denial.”

Does the State mean that the contracted vendor needs to represent the contracted vendor’s role in the denial? Or, does the State mean the contracted vendor needs to represent the State’s decision for denial?

State Response: The contractor will represent their denials for the determination of eligibility and limits.

Question 5: Page 18, Order Review and Processing, 3rd Bullet

Please explain a Medical Assistance Coupon.

State Response: A Medical Assistance Coupon is an ID card that contains the recipient’s name, ID number, date of birth, eligibility month and year, as well as the eligibility code.

Question 6: Page 22, Section 3.12 – Contract Changes

Please provide an example of “additional work.”

State Response: This is standard, templated language, provided in all solicitations to allow the state flexibility over time as a contract term progresses. Any unanticipated amendment to a contract would be discussed with the contractor in advance, and would be executed bi-laterally if both parties are in agreement.

Question 7: Page 25, Section 4.01 – Proposal Format and Content

This section limits proposals to 20 pages, with the exception of the frame list and cost proposal.

Please confirm that the required key staff resumes, sample order form, sample utilization report, and letters of reference are all also excluded from the 20 page limit.

State Response: It is acceptable to include the following as appendices to an offerors response: Key staff resumes, sample order form, sample utilization report, and letters of reference. These appendices are not included in the 20 page limit.

Question 8: Page 33, Section 6.11 – Alaska Bidder Preference; Page 34, Sections 6.12 and Section 6.13 – Alaska Veteran and Offeror Preference

Sections 6.11 and 6.12 identified that a 5% preference will be applied to the price proposal, while Section

6.13 will apply a 10% preference.

Please confirm how these preferences work together. For example, would an Alaska offeror, that meets the requirements as defined in the Alaska Administrative Code, receive a 15% preference – 10% in technical points and 5% in price? And if correct, an Alaskan Offeror who is a veteran will receive an additional 5% in the price proposal?

State Response: The application of preferences are fully described in RFP sections 6.10 – 6.13. Section 6.10 also provides a link to *'Guides that contain excerpts from the relevant statutes and codes, explain when the preferences apply and provide examples of how to calculate the preferences are available at the Department of Administration, Division of General Service's web site: <http://doa.alaska.gov/dgs/pdf/pref1.pdf>.'*

Question 9: Pages 13 and 45, Prior Authorization and Miscellaneous Lenses

Page 13 lists tinted lenses (V2744 and V2745) as allowed with prior authorization, but V2744 is not listed among the codes in the Cost Proposal template.

As provided by CMS, V2744 is tint, photochromatic, per lens, and V2745 is addition to lens; tint, any color, solid, gradient or equal, excludes photochromatic, any lens material, per lens.

Is V2744 allowable? Please update accordingly.

State Response: code V2744 shall be added to page 45, item #13.

13	V2745 or V2744	Addition to lens; tint, any color, solid, gradient or equal, excludes photochromatic	\$	1	\$
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Question 10: Page 57, Appendix B, Article 2 - Insurance

This section currently requires Professional Liability insurance. Please confirm whether professional liability insurance applies to the services of this contract.

State Response: Professional Liability Insurance coverage will not be required for the services of this contract.

Question 11: Page 11, Section 2.04, Deliverable 1

Will the vendor have the ability verify real time eligibility as well as if a benefit has been used previously?

State Response: The contractor will have access to MMIS that will show eligibility in as real time as possible. Benefits limits will have to be tracked by the contractor. MMIS does not keep track of benefits until the order is billed to Alaska Medicaid.

Question 12: Page 16, Section 2.04, Deliverable 5

What recourse does the awarded vendor have if providers do not submit accurate information about the required prescription to the awarded vendor?

State Response: This question can mean 2 things.

1. If the order is incomplete then the contractor will need to work with the provider in getting the needed information.
2. If the prescription is incorrect, the recourse is described on page 15, Deliverable 2, Lens Errors

Question 13: Page 11, Section 2.04, Deliverable 1

If a recipient has Medicare and Medicaid, will the system indicate which is primary?

State Response: Medicaid is always the payer of last resort. The Medicaid Management Information System (MMIS) will consider TPL when a claim is billed.

Question 14: Page 13, Section 2.04, Deliverables 2 & 3

Please clarify the frame selection needed; 33 frame styles or 60 frame styles? See below.

- Per Deliverable 2 Frames section; the contractor must offer the following standard frame selection: 2 toddler styles; 7 metal styles for kids; 5 plastic styles for kids; 5 plastic styles for teens/adults; 10 metal styles for teens/adults. As well as specialty frames: 2 toddler styles and 2 teen/adult styles.
This is a total of 33 styles.
- Per Deliverable 3: Frame Sample kits; kits are comprised of the following: 2 toddler styles; Kids female: 5 plastic/ 7 metal; Kids male: 5 plastic/ 7 metal; 2 kids specialty; Teen/adult female: 5 plastic/10 metal; Teen/adult male: 5 plastic/10 metal; 2 Teen/adult specialty.
This is a total of 60 styles.

State Response: The frames selection required is correctly identified in Deliverable 3. There should be a total of 60 styles available.

Question 15: Page 26, Section 4.05

Please clarify the contents of the sample kit required for the proposal submission. Sec 4.05 states the offeror must provide one complete sample kit for inspection and evaluation. Please confirm this is one frame sample per frame style.

State Response: The kit must include all styles, sizes, and each gender offered by the contractor. This is a total of 60 styles, as identified in Deliverable 3.

Question 16: Page 10, Section 2.01

What is the anticipated volume of orders from August 31 to the end of year? In other words, how many of the expected 41,786 yearly orders will be remaining on August 31st, 2019?

State Response: 41,786 orders is an annual average for a 12 month period, for the purposes of gauging capacity. Vendors can use that average to gauge an approximate balance as of 8/31/19.

Question 17: Page 10, Section 2.01

How many jobs have been completed year-to-date in 2019?

State Response: 41,786 orders is an annual average for a 12 month period, for the purposes of gauging capacity. Vendors can use that average to gauge an approximate year-to-date usage in 2019.