

# Request for Information 24-001



State of Alaska  
Department of Health  
Division of Health Care Services

**Date Issued: June 11, 2024**

## DURABLE MEDICAL EQUIPMENT & SUPPLIES: INCONTINENCE PRODUCTS

### **Introduction:**

Through this RFI, the State of Alaska, Department of Health, Division of Health Care Services is seeking information from durable medical equipment (DME) providers who are qualified and interested in becoming the Alaska Medicaid program's sole source DME provider for incontinence supplies and products statewide, or for one or more geographic regions in the state.

### **Background Information:**

The Alaska Department of Health (DOH) serves as the single State agency responsible for the administration of the Medical Assistance (Medicaid) program. The Division of Health Care Services (DHCS) administers the medical, dental, and pharmacy aspects of the Alaska Medicaid program.

Incontinence supplies are covered medical supplies for individuals, aged 3 years and older, who have a diagnosis for a medical condition or special need that causes incontinence, such as, but not limited to certain neurological diseases or developmental disabilities. Alaska Administrative code regulations require dispensed incontinence products meet National Association for Continence (NAC) quality standards.

There were over 3,500 unique individuals receiving incontinence supplies in fiscal year 2023.

The primary goal of this contracted service is to ensure the medical necessity and provision of quality incontinence products dispensed to qualified recipients.

### **Response Information:**

Interested DME providers are invited to submit written narrative responses to the following:

1. Identify DME provider complete company name, address, telephone number and email address for the provider's contact person for its RFI response.
2. Provide information on the DME provider's interest for a statewide or one or more specific regional contracts. DME providers may propose different regions. Currently, the proposed regions are:
  - a. **Statewide:** Includes all Alaska communities
  - b. **South Central:** Includes Anchorage, Mat-Su-Borough, Kenai Peninsula, Homer, Seward, Kodiak, Aleutian Islands, Cordova, and other communities in this area.
  - c. **Southeast:** Includes Juneau, Yakutat, St. Paul Island, Douglas, Ketchikan, and other communities in this area.

- d. **Interior:** Includes Fairbanks, North Pole, Denali, Nenana, Prudhoe Bay, Tanana, and other communities in this area.
  - e. **Western:** Includes Bethel, Nome, Aniak, Kotzebue, Emmonak, and other communities in this area.
3. Provide a general overview of the DME provider's profile including a detailed description of its capabilities and experience related to providing incontinence products to the target population.
  4. Describe how the DME provider will determine criteria to be used to determine a recipient's medical necessity for incontinence products and the criteria for determining the quantity of products to be dispensed.
  5. Provide detailed product information and corresponding Healthcare Common Procedure Coding System (HCPCS) codes to be made available to Alaska Medicaid recipients and how the DME provider will confirm to the state that the dispensed products meet NAC quality standards.
  6. Explain the scope of services to be provided, including how the DME provider will address shipping and weather delays that could affect the delivery of the nutritional products.
  7. Describe any proposed approach(es) or innovative strategy(ies) developed by the DME provider regarding the provision of incontinence products to the target population.
  8. Provide the following to the DME provider's approach, as applicable:
    - a. Current or Proposed Alaska-based facility location(s)
    - b. Staffing plan
    - c. Estimated costs
    - d. Implementation and transition timelines

**Response Submission Deadline:**

Interested vendors must submit their response in writing via email by **2:00 p.m. (Alaska Time) Friday, July 5, 2024**, to the following:

**Alison Carpio**

Procurement Specialist

Department of Health

Finance and Management Services

Email: [doh.procurement.proposals@alaska.gov](mailto:doh.procurement.proposals@alaska.gov)

Please also copy [alison.carpio@alaska.gov](mailto:alison.carpio@alaska.gov) on the submission

**Important Notice:** (Instructions: Leave this notice on all RFI's)

This RFI does not extend any rights to prospective vendors or obligate the state to conduct a solicitation or purchase any goods or services. Nor will the State be financially responsible for any costs associated with the preparation of any response for the requested information. This RFI is issued for the sole purpose of obtaining information as described in this notice. However, the information obtained from this request may be used to prepare a purchase, contract, or solicitation in the future.