



Department of Health and Social Services
Finance and Management Services
Grants and Contracts Support Team
3601 C Street, Suite 578
Anchorage, Alaska 99502

RFP #2015-0600-3125**Health Care Provider Tax Feasibility Study and Recommendation****Amendment #2**

Amendment Issue Date: May 18, 2015

Please alter the following language to match the amendment.

IMPORTANT NOTE TO OFFERORS: Only the following items referenced in this amendment are to be changed. All other sections of the RFP remain the same. This amendment serves to answer questions submitted by interested parties. A copy of the amendment is available on the State's Online Public Notice website.

- **Vendor Questions have been answered as follows:**

1. **Question:** What is required for references? The section on proposal requirements (Section 6.6) says, "Offerors must provide reference names and phone numbers for similar projects the offeror's firm has completed." The section on evaluation criteria and contractor selection (Section 7.4) asks, "Has the firm provided letters of reference from previous clients?". Do we need to provide names and phone numbers (Section 6.6) or letters of reference (Section 7.4) or both? If letters of reference are required, we may not be informed of this requirement until it is very close to the proposal due date. If letters are required, will the State extend the proposal due date or allow letters of reference to be submitted at a later date?

Answer: See Section 6.01. Section Seven indicates that proposals will be evaluated against the questions. The State will not extend the proposal due date.

2. **Question:** Have certain provider groups approached the Department about the implementation of a provider assessment? If so, which provider classes?

Answer: No.

3. **Question:** Is the vendor required to assess the feasibility of implementing provider assessments across all 19 permissible provider classes as defined in federal regulations or there will be certain provider classes that will be prioritized for this study given the allocated funding for this project?

Answer: See Amendment #1

4. **Question:** Is the selected vendor required to assist with obtaining CMS approval of provider assessments?

Answer: The Offeror is not ultimately responsible for physically obtaining approval from CMS on behalf of the State.

5. **Question:** Will the Department provide aggregated claims data and other pertinent information necessary to complete fiscal impact models in an agreed up format with the selected vendor? Or will the vendor be required to aggregate raw claims data to perform the required analysis and/or reach out to providers for data to complete fiscal impact models?

Answer: See Amendment #1

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