

Amendment 1 to RFP 2024-TPL-01

04/09/2024

NOTE THE FOLLOWING AND ATTACHED ADDITIONS, DELETIONS AND/OR CHANGES TO THE REQUIREMENTS FOR THE REQUEST FOR PROPOSAL NUMBER: RFP 2024-TPL-01. THIS AMENDMENT MUST BE INCLUDED IN THE VENDOR'S RESPONSE AND MEET THE REQUIREMENTS AS DEFINED IN THE RFP.

THE VENDOR MUST SIGN AND RETURN THIS AMENDMENT WITH THEIR PROPOSAL.

1. II. General Vendor Requirements, Section A. Identification of Health Insurance Coverage, Subsection 1, page 10, changed as follows:

Currently Reads as:

Routine and scheduled data matching with top commercial insurance carriers, including pharmacy benefit managers (PBMs).

Revised as:

Routine and scheduled data matching with ~~top~~ commercial insurance carriers, including pharmacy benefit managers (PBMs).

2. III. Scope of Work, N. Requirements of Proposal, Contents of Technical Proposal, pages 17-18, changed as follows:

Currently Reads as:

At a minimum, Vendor's Technical Proposal must contain the items listed below. Those items must be arranged in the order below.

1. A description of the Vendor's understanding of the statement of work.
2. A comprehensive description of the methodology that Vendor will utilize to meet the scope of work. This description must include the following:
 - a. Provide the process and methodology for identifying and reporting the existence of third-party coverage;
 - b. Provide the process and methodology for billing, tracking and reporting recoveries of Medicaid funds paid on behalf of eligible Medicaid recipients when other third-party resources are available;
 - c. Provide the process and methodology for identifying provider payments received from Medicaid where third-party payments were also paid on the same claim;
 - d. Provide a comprehensive description of other proposed systems and/or cost saving and recovery projects including both automated and administrative functions;
 - e. A detailed methodology for both transition and continued operation to be used if the State assigns to Vendor the responsibility of the casualty recovery program and any other third-party resource maximization programs;
 - f. The Vendor's deadlines for contract deliverables.

- **Do not enter any cost information in the Technical Proposal.**

Revised as:

At a minimum, Vendor's Technical Proposal must contain the items listed below. Those items must be arranged in the order below.

1. A description of the Vendor's understanding of the statement of work.
2. A comprehensive description of the methodology that Vendor will utilize to meet the scope of work. This description must include the following:
 - a. Provide the process and methodology for identifying and reporting the existence of third-party coverage;
 - b. Provide the process and methodology for billing, tracking and reporting recoveries of Medicaid funds paid on behalf of eligible Medicaid recipients when other third-party resources are available;
 - c. Provide the process and methodology for identifying provider payments received from Medicaid where third-party payments were also paid on the same claim;
 - d. Provide a comprehensive description of other proposed systems and/or cost saving and recovery projects including both automated and administrative functions;
 - e. A detailed methodology for both transition and continued operation to be used if the State assigns to Vendor the responsibility of the casualty recovery program and any other third-party resource maximization programs;
 - f. The Vendor's deadlines for contract deliverables.

- **Do not enter any cost proposal information in the Technical Proposal Cost.**

Vendor's Technical Proposal cost must be submitted in the format shown in RFP Appendix C and the RFP Cover Sheet. Appendix C must be signed by an individual authorized to bind the Vendor. Any technical proposal cost submitted in any other format may be rejected on that ground alone.

3. VIII. Evaluation and Selection Process, F. Determination of Successful Proposal, page 33, changed as follows:

Currently Reads as:

The Vendor whose proposal is determined to be in the best interest of the State will be recommended as the successful Contractor. The Project Director will forward this Vendor's proposal through the supervisory chain to the Commissioner, with documentation to justify the Committee's recommendation.

When the final approval is received, the State will notify all Vendors.

Revised as:

The Vendor whose proposal is determined to be in the best interest of the State will be recommended as the successful Contractor. The Project Director will forward this Vendor’s proposal through the supervisory chain to the Commissioner, with documentation to justify the Committee’s recommendation.

~~When the final approval is received, the State will notify all Vendors.~~

The Commissioner will review the Committee’s recommendation as well as the Vendor’s past performance under previously awarded contracts, if applicable. The Vendor whose proposal is determined by the Commissioner to be in the best interests of the State will be recommended as the successful contractor. When the final approval is received, the State will notify the selected Vendor. If the State rejects all proposals, it will notify all Vendors.

4. Appendix C, Cost Proposal, page 59-60, changed as follows:

Currently Reads as:

Appendix C: Cost Proposal

Note:

The Contractors must fill in Column B: Percentage/Rate.

There are two types of fees for the Cost Proposal:

1. Set Fees notated by dollar symbols (\$), and
2. Contingency Fees notated by percentage symbols (%).

RFP Name: Third Party Liability (TPL) Recoveries and Cost Avoidance

	Description	Multiplier*	Percentage/Rate (to be completed by Contractor)	Extension (to be completed by the State)
	Third Party Liability	A	B	C
	Commercial policy adds(price per policy):	N/A	N/A	N/A
1	Major Medical - Active TPL Add (via monthly data matching)	24,000		
2	Major Medical - Active TPL Add (via daily data matching)	6,000		
3	Major Medical - Inactive TPL Add	12,000		
4	Major Medical – TPL Update	6,000		
5	Pharmacy – Active TPL Add (via monthly data matching)	24,000		

	Description	Multiplier*	Percentage/Rate (to be completed by Contractor)	Extension (to be completed by the State)
6	Pharmacy – Active TPL Add (via <u>daily</u> data matching)	6,000		
7	Pharmacy – Inactive TPL Add	4,500		
8	Pharmacy – TPL Update	4,500		
9	Dental - Active TPL Add	4,000		
10	Dental - Inactive TPL Add	500		
12	Medicare Supplement - Active TPL Add	1,000		
13	Medicare Supplement - Inactive TPL Add	200		
14	Medicare Supplement – TPL Update	100		
	Total Policy Adds/Updates			
15	Third Party Insurance Recoveries - Fee as a percentage of recoveries, includes: Insurance billings and recoupments.	\$22,000,000		
16	Subrogation Recoveries - Fee as a percentage of recoveries, includes: casualty and product liability settlements and litigation	\$5,000,000		
17	Credit Balance Audits - Fee as a percentage of recoveries	\$1,500,000		
19	HIPP (Health Insurance Premium Payments) Administration - Monthly management fee of Active cases	8,400		
20	Long Term Care Financial Audits – Audit fee per facility	24		
21	TPL Follow UP Unit - Fee as a percentage of recoveries	\$1,000,000		
22	Annual Accounting of 42 USC 1396P (d)(4)(a) Special Need Trusts (SNT) – fee per SNT	200		
	Grand Total (Recoveries and Policy Adds/Updates)			

* Multipliers are an annual representation for RFP evaluation purposes only and shall not be interpreted as an estimate of actual volume.

Contractor Signature

Title

Date Signed

Revised as:

Appendix C: Pricing

Technical Proposal

	Months	Monthly Firm and Fixed Rate	Annual Cost (Months X Monthly Firm and Fixed Rate)
Year 1	12		
Year 2	12		
Year 3	12		
Year 4	12		
Year 5	12		
TOTAL 5 Year Firm and Fixed Price			

The Contractor must utilize this Pricing Form to provide their Total 5 Year Firm and Fixed Price by year.

Cost Proposal

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The Contractors must fill in Column B: Percentage/Rate.

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	Description	Multiplier*	Percentage/Rate (to be completed by Contractor)	Extension (to be completed by the State)
20	Long Term Care Financial Audits – Audit fee per facility	24		
21	TPL Follow UP Unit - Fee as a percentage of recoveries	\$1,000,000		
22	Annual Accounting of 42 USC 1396P (d)(4)(a) Special Need Trusts (SNT) – fee per SNT	200		
	Grand Total (Recoveries and Policy Adds/Updates)			
* Multipliers are an annual representation for RFP evaluation purposes only and shall not be interpreted as an estimate of actual volume.				

Contractor Signature

Title

Date Signed

I hereby acknowledge the receipt of Amendment 1 to 2024-TPL-01

Authorized Vendor Signature

Date

Vendor Organization