



**OFFICIAL RESPONSES TO VENDOR QUESTIONS**  
**RFP-2023-DLTSS-07-FEASI**

<b>No.</b>	<b>Section #</b>	<b>Question</b>	<b>Answer</b>
1.	<b>1.2.</b>	What is the Department's target date for completion of the feasibility study?	Please see Addendum #3.
2.	<b>1.2.</b>	What is the anticipated budget range for this project?	Please see RFP Subsection 3.3., Cost Proposal Evaluation Criteria regarding cost. Vendors are required to propose costs to fulfill all requirements of this RFP.
3.	<b>1.3.</b>	Please confirm that the proposal due date is August 25, 2023, as provided in the RFP, and not August 23, as stated on the website.	Please see Addendum #2. The proposal due date has been extended to September 1, 2023 at 12:00 PM. The website is updated to reflect the correct date.
4.	<b>1.4.2.</b>	Can the Department share what resources the covered population currently have access to? For example, do older adults have access to Older American Act Title III programs?	Depending on the Medicaid program and services, an individual may be accessing many different state or federal resources, including Older Americans Act Title III programs.
5.	<b>2.1.1.</b>	Is the Department requesting a feasibility assessment solely from the perspective of the Department or also with respect to feasibility from the perspective of participating organizations (PACE and D-SNP organizations)?	The Department is requesting the feasibility assessment to consider both perspectives.
6.	<b>2.1.3.1.</b>	Can the Department clarify what their expectations are for a financial assessment for PACE and D-SNPs?	The financial assessment will evaluate the financial aspects of PACE and D-SNPs, and provide information and analysis regarding anticipated costs, revenues, and market demand.
7.	<b>2.1.3.6.</b>	a) It is typically incumbent on PACE organizations to select physical locations that conform with any state or PACE regulations. Would it be acceptable to interpret 2.1.3.6., as identifying areas with potential PACE eligible population clusters and recommended criteria	a) Yes.

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		<p>for PACE centers?</p> <p>b) Does this mean that actual building locations must be vetted, or does it mean that the general location of a proposed PACE Day Center should be specified?</p>	<p>b) The general location of a proposed PACE Day Center should be specified.</p>
8.	<b>2.1.5.</b>	<p>Please confirm that the Vendor will be required to conduct a feasibility assessment, as well as, an operational plan for D-SNP.</p>	<p>For the D-SNP program, the Vendor must develop a detailed project plan that outlines how the Department would operationalize a program that meets the federal requirements of and/or serve the covered populations listed in Subsection 1.4.3.</p>
9.	<b>2.1.6.5.2.</b>	<p>Could the Department clarify how they define a D-SNP program? Do they differentiate the program from a Dually Eligible Special Needs Plan?</p>	<p>A <u>Dual Eligible Special Needs Plan</u> (D-SNP) is one type of SNP. It is a managed care plan for people who qualify for both Medicare and state Medicaid assistance or Medicaid. A D-SNP combines multiple coverages and <u>coordinates Medicare and Medicaid benefits</u> to make them easily accessible to people who have both. States decide which D-SNPs health plans can offer and may review the specific benefits provided.</p>
10.	<b>2.1.7.</b>	<p>Can respondents assume the section regarding MMP feasibility assessment is no longer applicable given CMS' intention to sunset the MMP no later than 2025?</p>	<p>Please see Addendum #2.</p>
11.	<b>2.1.7.</b>	<p>Can the Department clarify how it differentiates a Medicare-Medicaid Plan (MMP) from a D-SNP?</p>	<p>Please see Addendum #2.</p>
12.	<b>2.1.7.7.</b>	<p>Can The Department clarify how it differentiates the MMP-eligible population from a dually eligible population?</p>	<p>Please see Addendum #2.</p>
13.	<b>2.2.2. through 2.2.2.3.</b>	<p>a) Does the Department anticipate that the Vendor will interview all individuals dually eligible for Medicare and Medicaid services or only a strategic percentage of this group?</p> <p>b) If a strategic percentage is preferable, what percentage would the Department want to be</p>	<p>a) A strategic percentage, to be determined, will be surveyed or interviewed in collaboration with the Department.</p> <p>b) A representative sample of the total dual eligible population in NH.</p>

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		interviewed?	
14.	<b>2.2.2.</b>	Can the Department provide a list of existing venues for stakeholder engagement (in which the Department convenes either the Department leadership, county leadership, or individuals who are dually eligible for Medicare and Medicaid services) so that Vendors can appropriately account for these venues when developing and pricing the RFP response?	Existing venues include the Medical Care Advisory Committee, the Alliance for Healthy Aging, State/County Finance Commissions, County Nursing Facility Association, New Hampshire Health Care Association, and provider partners serving dually eligible individuals, convened by the Bureau of Elderly and Adult Services.
15.	<b>2.2.2.</b>	<p>a) Is the Department expecting in-person or virtual engagement between the successful Vendor and the Department leadership, county leadership, and individuals who are dually eligible for Medicare and Medicaid services?</p> <p>b) Will meetings with the Department follow the same guidelines?</p>	<p>a) The Department expects to utilize both virtual and in-person engagement.</p> <p>b) Yes.</p>
16.	<b>2.2.3.</b>	<p>a) What data (such as building locations, state licensed providers, and Medicaid enrollment, demographics and utilization, among others) can the vendor expect to receive from the Department?</p> <p>b) Does the Department expect the data to include PII, PHI, or both?</p>	<p>a) Data that is required for the Vendor to complete this study will be made available by the Department.</p> <p>b) The Department does not anticipate data to include PHI or PII.</p>
17.	<b>2.3., Question #3</b>	Can the Department clarify what stakeholders the Vendor will have access to in Question #3?	Please see Subsection 2.2.2. of RFP.
18.	<b>6.3. through 6.3.3.</b>	Appendices B and C request vendors fill out the text boxes within the respective documents. However, is it acceptable to combine our response to Appendices B and C in a separate document instead?	No. These documents must be submitted separately.
19.	<b>Appendix A</b>	Will the Department agree to negotiate the contract terms	Please see RFP Subsection 4.2.3, Exceptions.

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		and conditions upon award?	
20.	<b>Appendix A</b>	Will the Department agree to establish a cap on liability in the general terms?	No.
21.	<b>Appendix D</b>	Will the Department agree to accept a budget worksheet that does not reveal proprietary information regarding detail on fringe and total indirect costs?	No. Vendors must submit all information required in the budget worksheet. Please see RFP Section 7.8., Public Disclosure for more information.
22.	<b>General</b>	To allow additional time for proposal preparation and potential partnering, would the Department consider a due date extension?	Please see Addendum #2.
23.	<b>General</b>	Can the Department please advise if there is an anticipated period of performance start date?	The performance start date will be the effective date of the contract, which is the date on which the Governor and Executive Council approves the contract.
24.	<b>General</b>	Can the Department please confirm the anticipated contract type (cost reimbursable or fixed price)?	The resulting contract will have an established price limitation and payment will be made on a cost reimbursement basis.