



ADDENDA #2
To
Open Enrollment

For

HHS0008368

**Independent Review Organization Services
Medicaid and CHIP Services
Managed Care Compliance and Operations**

Notice is hereby given to prospective applicants to the above referenced open enrollment that changes have been made to requirements or information in the open enrollment, as noted in the addenda below.

Addendum #2 9/23/2020			
<u>Item</u>	<u>Open Enrollment Reference</u>	<u>Previous</u>	<u>Revised Language</u>
1.	Various Sections	See Reference Table 1. IRO Questions and State Responses	See Reference Table 1. IRO Questions and State Responses.

Table 1. IRO Questions and State Responses

Item #	Question for the State	MCS Response
1	RFP Section 1.3 states that the Open Enrollment Period closes on 8-31-22. RFP section 1.5.1 states that "the initial term of the contract will begin upon the contract being signed by both Parties and will terminate on August 31, 2022, unless terminated earlier by either HHSC or the contracted IRO." Is there an expectation/preference by the Texas HHSC that interested vendors will enroll no later than August 31, 2020, for example, in order to have the benefit of a complete two-year contract period?	Texas HHSC has no expectation on an end date to accept applications. At this time Texas HHSC will continue to accept and review applications through August 31, 2022.

2	<p>[We] recognize that HHSC cannot guarantee a specific volume of external medical review (EMR) requests. We understand that the external medical reviews that are the subject of this RFP constitutes a new process, in conjunction with the Fair Hearing process, and occurs after the internal appeal decision outcome is rendered. Having said that, can the Texas HHSC potentially share any data it may have relative to the number of internal appeal decisions and Fair Hearing results that occurred during previous calendar years (2019, 2018, etc.) relative to similarly situated Texas Medicaid members and applicants that would be representative of appellants under the new EMR program?</p>	<p>HHSC provides the following volumes that represent the fair hearings involving actions which may have a right to an EMR.</p> <p>Appeals Received for CY2018: 3,641</p> <ul style="list-style-type: none"> o Medicaid: 418 o Community Care: 3,223 <p>Appeals Received for CY2019: 3,135</p> <ul style="list-style-type: none"> o Medicaid: 363 o Community Care: 2,772 <p>Appeals Received for CY2020 (YTD): 1,483</p> <ul style="list-style-type: none"> o Medicaid: 192 o Community Care: 1,291
3	<p>Regarding the requirement that the IRO must attend State Fair Hearings at the request of the MCO or Medicaid member, is attendance by the IRO permissible via video and/or teleconference as opposed to in-person attendance? If in-person attendance is required, how many Texas state office locations host State Fair Hearings proceedings? Please identify the state locations if that is the case.</p>	<p>Attendance by IROs at State Fair Hearings may be done via video or teleconference.</p>

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4	I wanted to confirm the date that is listed as the closing date for the Health and Human Services Commission (HHSC) Open Enrollment Opportunity, Procurement Number: HHS0008368. It shows August 31, 2022. Is the 2022 reference correct?	Thank you for your inquiry regarding the Open Enrollment Opportunity, Procurement Number: HHS0008368. HHSC is confirming the closing date for applications is August 31, 2022. HHSC is seeking to contract with a qualified IRO or IROs to provide external medical review (EMR) services before the end of calendar year 2020.
5	Why does an IRO have to be URAC certified as listed in 1.4.1 of your open enrollment document? TDI does not require this. TDI certifies the IRO to process independent reviews and we use only licensed approved doctors.	Per senate bill 2138, 85th legislative session, HHSC-contracted managed care organizations must acquire NCQA or URAC accreditation. Therefore, HHSC applied this legislative intent to this open enrollment, requiring IRO applicants to be URAC certified.
6	This bid went out on July 5. However, it was only sent to IROs on August 20th. Can you extend the date since it was emailed to us 6 weeks late?	This is an open enrollment. Please refer to the response provided in #1.
7	How many cases do you anticipate an IRO will receive each month?	Texas HHSC does not have sufficient data to anticipate the number of cases an IRO will receive each month. One factor that will determine the number of cases will be the number of IROs contracted by Texas HHSC.
8	DO YOU HAVE A TEMPLATE/ FORM LETTER FOR EACH DECISION – MCO and DMO as well as to the MEDICAID MEMBER? TDI has templates for our IRO cases.	No.

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9	To clarify - the IRO will not have to request any records?	No, the IRO will be provided with the same medical necessity information upon a State Fair Hearings request by the Medicaid member.
10	How large are the record files on a typical case? We generally use email or electronic fax for receipt of records.	Record files for evidence packets range from approximately 325kb to 35,000kb, where an average size is approximately 7,000kb. In the event that record files exceed 20,000kb (20MB), an IRO and/or MCO/DMO may send record files in segments between two separate emails.
11	How often does this happen?	HHSC does not have sufficient data to anticipate how often an IRO would be requested by an MCO, DMO or Medicaid member, to attend the State Fair Hearing.
12	Since an IRO is a go-between for the reviewing physician, why would an IRO have to attend this hearing? We could only present the same "decision" information that was sent to the appropriate parties. IROs are not doctors.	Decisions made by the IRO helps to inform the decisions made by State Fair Hearing officers. Affording all information and resources available at the hearings may require IRO attendance, if requested.
13	If the reviewing physician wants to, can he / she attend via a conference call? Though I am not sure how you would compensate them.	See response to Item #3.
14	To clarify - Is this the same fee for all case types - medical and dental?	Yes.

15	What do you consider acceptable supporting documents? Why wouldn't we just send an invoice to the appropriate party?	HHSC considers an invoice, with requisite information for processing, as an acceptable document to request payment for services performed.
16	IROs typically send the invoice upon receipt of case assignment. Is that ok?	HHSC will not accept invoices until reviews have been conducted and a final determination is submitted to HHSC. HHSC will process and pay invoices within 30 days of receipt of an invoice.
17	How fast is turn around on payment? Can we charge late fees? IROs have to pay our doctors as soon as they finish their review.	<p>HHSC will process and pay invoices within 30 days of receipt of a correct invoice. Agencies are responsible for ensuring that each payment is treated correctly in USAS according to the prompt payment law. A state agency's payment is due on the 30th day after the latest of:</p> <ul style="list-style-type: none"> • The date the agency receives the goods under the contract. • The date the performance of the contracted service is completed. • The date the agency receives an invoice for the goods or services. <p>Whenever a payment's timeliness is governed by the prompt payment law, an agency may not pay late fees, penalties, finance charges or any other compensation.</p> <p>For more information, please see Comptroller's payment policy at https://fm.xcpa.texas.gov/fm/pubs/purchase/prompt_pay/</p>

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18	We are small businesses, and do not accept vouchers or credit cards. We only accept CHECKS. (no need to reply to this statement)	State Agencies pays by Check or Direct deposit through Comptroller payment system.
19	Since we didn't receive the request to bid for almost 2 months from its origin date of July 5th, why can't we just email you a zip file with scanned documents for our proposal?	HHSC will accept a proposal by email.
20	MET Healthcare Solutions would like to submit an application in response to the IRO services open enrollment #HHS0008368, however we are in need of clarification on the submission documentation. On page 11 section 5.7 it states "submission of the Application packet must include the following five (5) file folders" but then only lists four "Forms". Further, in the list of Forms, "Form C: Exceptions Form" was not included in the available documents to download on the Open Enrollment Site as Form C on the site is actually the SPI form. Please advise on how to proceed.	<p>To address needed corrections on the open enrollment solicitation, HHSC replaces Section 5.7 Organization of (Electronic or Paper) Submission of Application of the open enrollment solicitation with the following language: "Applicant must organize its scanned and signed Application packets in the following order and format. Each (flash drive, compact disc, E-mail or paper) submission of the Application packet must include the following file folders with the respective listed documents included, and the documents must be in the following order, and labeled accordingly:</p> <ul style="list-style-type: none"> • Form A: Open Enrollment Application • Form B: Vendor Information Form • Form C: Security and Privacy Inquiry (SPI)