

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

DAVE RICHARD • Deputy Secretary, NC Medicaid

Solicitation Addendum

Solicitation Number: 30-190336

Solicitation Description: Healthy Opportunities Pilots Request for Information (RFI)

Solicitation Opening Date and March 20, 2019 at 2:00 PM ET

Time:

Addendum Number: 3

Addendum Date: March 15, 2019

Purpose of Addendum: Department Response to Questions

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THE FOLLOWING ARE AGENCY RESPONSES TO RESPONDENT QUESTIONS.

| Question # | Citation | Vendor Question | The State's Response |
|---------------|----------|--|--|
| 1 | General | The direct variable cost workshett will not let me place anything high than 1,000 in the cell. Is that an error? | The Department set data validation limits on the spreadsheet to avoid data entry errors. A new version of the cost report worksheet has been uploaded to the Department's Healthy Opportunities webpage with a higher limit on the direct variable cost tab. |
| 2 | General | How does the NCCARE360work? | NCCARE360 is the first statewide, coordinated care network to connect individuals with identified needs with community resources and allow for a feedback loop on the outcome of that connection. NCCARE360 connects partners through a shared technology that enables health care and human service providers to send and receive secure electronic referrals, seamlessly communicate in real-time, securely share client information, and track outcomes. The NCCARE360 partnership will provide: a robust statewide resource directory that will include a call center with dedicated navigators, a data team verifying resources, and text and chat |

| | | | capabilities; a data repository to integrate resource directories across the state to share resource data; an intake and referral platform for providers, social workers, care coordinators and others to connect patients directly to community resources and allow for a feedback loop on the outcome of that connection; and a community engagement team working with community-based organizations, social service agencies, health systems, independent providers and more to create a statewide coordinated care network. |
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| 3 | General | Are MCOs supposed to partner with NCCARE360 or are they supposed to bring their own referral to CBO capability? | NCCARE360 began regional implementation and community organization on-boarding in 2019. When NCCARE360 is certified by the State and implemented statewide, the prepaid-health plans (PHPs) will be required to use NCCARE360 to, at a minimum, identify local community-based resources, connect members to these resources, and track closed-loop referrals. |
| 4 | General | I would like to ask for more clarification about the description of Housing service H18 and IPV service I6 – Legal Assistance. In both is specifically states that the pilot service does not include legal representation or payment for legal representation. Can you clarify the exact scope of "legal representation" in this case? Does this exclude lawyers or legal aid organizations providing advisement services? Or supporting negotiation and advocacy work related to housing or securing a Domestic Violence Protection Order? | Attachment G, Table 3: Enhanced Case Management Pilot and Other Services of the Centers for Medicare and Medicaid Services Special Terms and Conditions states, with regard to Legal Assistance that "Assistance with directing the beneficiary to available legal services within the legal system for interpersonal violence related issues, such as securing a Domestic Violence Protection Order" is allowed; however, the pilot "does not include legal representation or payment for legal representation." |
| 5 | General | We have an asthma program and staff have multiple visits with the child 1:1 in the home and in the schools. How do I determine the unit of service cost and quantity sold/ served? | Each respondent has discretion to choose the unit of service that most appropriately fits with its approach to calculating costs and providing data on the quantity of such services. For example, an organization that serves families through a combination of home and school visits could elect to choose the unit of service a single visit, a single month of providing support in both the home and school, or any other unit that facilitates its analysis of costs. |

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| 6 | General | We have an opportunity to develop | The Department is interested in |
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| | | some non-traditional Extension | reviewing payment approaches and |
| | | Outreach Programs to effectively | reimbursement strategies that support |
| | | deliver several of the services under | the cost-effective and efficient delivery |
| | | consideration. Does the prospect for a | of services. If an organization believes |
| | | pre-payment exist (per your <i>Preferred</i> | pre-payment is a preferred payment |
| | | Payment Approach) that will allow us | approach, that organization should |
| | | to create efficiencies in funding the | describe, in as much detail as it |
| | | personnel and delivery methodologies | chooses, how to implement this |
| | | needed for implementation? | payment approach and why this |
| | | | payment approach is better than others. |

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