



SOLICITATION AMENDMENT #1		
SOLICITATION #: <p style="text-align: center;">YH24-0001 ALTCS E/PD RFP</p>	SOLICITATION DUE DATE: <p style="text-align: center;">OCTOBER 2, 2023 3:00 PM ARIZONA TIME</p>	PROCUREMENT OFFICER: <p style="text-align: center;">MEGGAN LAPORTE RFPYH24-0001@AZAHCCCS.GOV</p>

A signed copy of this Amendment shall be submitted with the Offeror’s Proposal.

This Amendment will be posted to the Bidders Library: <https://azahcccs.gov/PlansProviders/HealthPlans/YH24-0001.html>.

This Solicitation is amended as follows:

- A. The attached Answers to Questions are incorporated as part of this Amendment.
- B. This Solicitation is also amended as follows:

SECTION	YH24-0001 AMENDMENT
SECTION G - DISCLOSURE OF INFORMATION INSTRUCTIONS AND ATTESTATION	Revised to correct hyperlink: 3. Once APEP access is obtained, the Offeror shall upload all appropriate information into APEP. Refer also to the AHCCCS website for MCO instructions regarding the APEP application and its use: https://azahcccs.gov/PlansProviders/APEP/APEPTraining.html https://azahcccs.gov/PlansProviders/APEP/Resources.html

OFFEROR HEREBY ACKNOWLEDGES RECEIPT AND UNDERSTANDING OF THIS SOLICITATION AMENDMENT.	THIS SOLICITATION AMENDMENT IS HEREBY EXECUTED ON THIS DAY IN PHOENIX, AZ.
SIGNATURE OF AUTHORIZED INDIVIDUAL:	SIGNATURE: SIGNATURE ON FILE
TYPED NAME:	TYPED NAME: MEGGAN LAPORTE, CPPO, MSW
TITLE:	TITLE: CHIEF PROCUREMENT OFFICER
DATE:	DATE:

RFP #YH24-0001 QUESTIONS AND RESPONSES TEMPLATE

#	OFFEROR'S NAME	DATE OF SUBMISSION	RFP SECTION	PARAGRAPH NO.	PAGE NO.	OFFEROR'S QUESTION	AHCCCS RESPONSE
1.	UnitedHealthcare Community Plan	August 8, 2023	Section H, Subsection 19	5	14	May graphics, tables and charts contain font sizes smaller than 11-point?	Graphics, tables, and charts may be in a smaller font.
2.	Arizona Complete Health	August 8 th , 2023	Section H: Instructions to Offerors	1	14	This paragraph lists what PDFS need to be submitted i.e., RFP Part B1, RFP Part B2, RFP Part B4-B10. RFP Part B11 is not included in this listing. Should RFP Part B11 be included in the same PDF as RFP Part B4 – B10 or should RFP Part B11 be in a separate PDF file.	RFP Part B11 should be included in the same PDF as RFP Part B4. The RFP is revised as follows: The Offeror shall submit the following electronically via the ASFS in its corresponding health plan folder by the date listed on RFP Section A, Solicitation and Offer Page: a. Capitation Agreement/Administrative Cost Bid Submission: (1) Agreement Accepting Capitation Rates [pdf] (2) Non-Benefit (Administrative and Case Management) Costs Bid Workbook [Excel] (3) Actuarial Certification [pdf], and b. One searchable PDF version of the Offeror's Executive Summary (RFP Part B1), c. One searchable PDF version of the Offeror's Contract citations (RFP Part B2), d. One searchable PDF version of the Offeror's Narrative Submission Requirements and corresponding responses (RFP Part B4-B10 B11), e. Oral Presentation participant names, titles, and resumes (RFP Part B12), and f. One searchable PDF version of the Offeror's entire Proposal.
3.	Arizona Complete Health	August 8 th , 2023	Section D: Program Requirements	4	68	Community Health Worker/Community Health Representative Services: This section refers to AMPM Policy 310-W. However, AMPM Policy 310-W is not listed on the AHCCCS website. Can AHCCCS provide this referenced policy?	AMPM Policy 310-W is under development. The RFP is revised as follows: Certified Community Health Worker/Community Health Representative Services: A certified Community Health Worker/Community Health Representative (CHW/CHR), who obtains certification through the Arizona Department of Health Services (ADHS) as specified in A.A.C. R9-16-802, may provide AHCCCS covered member education and preventive services to eligible members. Refer to AMPM Policy 310-W.

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4.	Arizona Complete Health	August 8 th , 2023	Section D: Program Requirements	3	83	<p>Habilitation: This paragraph states that "This includes habilitation services such as Day Treatment and Training (also known as day program) for persons with disabilities and Supported Employment." Will the following forms of habilitation be considered a covered service for the ALTCS E/PD population 10/1/2024? Habilitation – Supported Employment (T2019), Prevocational Habilitation (T2047 or T2015), Educational Habilitation (T2013), Habilitation Support/IDLA (T2017), Specialized Habilitation/Supported Community Connections</p>	<p>The RFP is revised as follows: Habilitation: A service encompassing the provision of training in independent living skills or special developmental skills, sensory-motor development, orientation, and mobility, and behavior intervention. Physical, occupational, or speech therapies may be provided as a part of or in conjunction with other habilitation services. This includes habilitation services such as Day Treatment and Training (also known as day program) for persons with disabilities and Supported Employment.</p>
5.	Arizona Complete Health	August 8 th , 2023	Section D: Program Requirements	3	83	<p>Habilitation: Habilitation is listed as a covered LTSS service. However, AHCCCS AMPM 1240-E states that "Habilitation provider agencies shall be certified by DDD". Is it AHCCCS' intention that a habilitation provider serving only the E/PD population would still need to be certified by DDD?</p>	<p>AMPM Policy 1240-E revisions are currently in development. Habilitation providers serving the EPD population will not require DDD certification.</p>

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6.	Arizona Complete Health	August 8 th , 2023	Section D: Program Requirements	21	123	Regarding NCQA Accreditation, for a health plan newly entering the ALTCS program to achieve NCQA LTSS Distinction, even at the Interim level, the plan must be actively serving the population for at least six-months. The Program Requirements state, "... Must also obtain the NCQA LTSS Distinction by October 1, 2024..." This would not be possible for new entrants to achieve. Will the state change the requirement to achievement of NCQA LTSS Distinction by October 1, 2025?	The RFP is revised as follows: National Committee for Quality Assurance Accreditation: The Contractor shall achieve NCQA First Health Plan Accreditation, inclusive of the NCQA Medicaid Module by October 1, 2023. For successful incumbent E/PD Contractors, the Contractor shall also obtain the NCQA LTSS Distinction by October 1, 2024. For successful incumbent non-E/PD Contractors and non-incumbent Offerors, the Contractor shall also obtain the NCQA LTSS Distinction by October 1, 2025. The Contractor shall also achieve NCQA Health Equity Accreditation by October 1, 2025.
7.	Arizona Complete Health	August 8 th , 2023	Section D: Program Requirements	48	196	Administrative Costs Percentage: There is a typo here, we believe the phrase should be "Total administrative expenses divided by total payments received from AHCCCS less Reinsurance less premium tax". Can you please confirm this?	The RFP is revised as follows: Total administrative expenses divided by total payments received from AHCCCS less Reinsurance premium tax. All components of the calculation should include annual audit adjustments.
8.	Arizona Complete Health	August 8 th , 2023	Exhibit H: Narrative Submission Requirements, B7	N/A	3 of 5	For the term "community-based care" please clarify the service array that may be included in any Nursing Facility expansion activities.	No additional information will be provided.
9.	Arizona Complete Health	August 8 th , 2023	Non-Benefit Costs Bid Requirements/ Submission	N/A	N/A	Submission Template has several tabs for the Admin Bid for varying membership assumptions. There is no distinction between GSAs on these tabs. Given there are underlying cost differences between the various GSAs, will AHCCCS adjust bid amounts for different GSA combinations that are awarded?	AHCCCS will distribute the administrative PMPM associated with the membership tier that matches the expected enrollment for each plan across all awarded GSAs. AHCCCS may incorporate underlying cost differences in the populations between GSAs when determining the overall distribution, if such an adjustment is appropriate.

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10.	Arizona Complete Health	August 8 th , 2023	Non-Benefit Costs Bid Requirements/ Submission	N/A	N/A	The Non-Benefit Costs Bid Submission Template has one tab for the Case Management Bid with different inputs for each GSA. It does not specify which Contract Year this is for. Should this bid be for CYE 25 only, or the average for the length of the contract?	This should be for CYE 25 only. The Offeror can provide additional information in its actuarial certification if it expects significant changes over time. For CYE 25, the only anticipated change from the bid is for adjusting member enrollment and mix percentages after awards have been set and final distribution of membership is known, unless there are changes made to AMPM Policy 1630 regarding the maximum caseloads allowed by setting. For contract years beyond CYE 25, the case management component will be modeled based on the underlying assumptions and updated for actual member mix, wage inflation, and any policy changes regarding maximum caseloads allowed for each setting.
11.	Arizona Complete Health	August 8 th , 2023	Section A: Solicitation Page and Offer – Acceptance	N/A	1	<i>Pre-Proposal Conference: A Pre-Proposal Conference has NOT been scheduled.</i> Does this mean there will not be a conference, or just that it has NOT been scheduled yet? Does AHCCCS intend to hold a bidder's conference?	AHCCCS does not intend to hold a pre-proposal bidder's conference for this solicitation.
12.	Arizona Complete Health	August 8 th , 2023	Non-Benefit Costs Bid Requirements/Submission	N/A	N/A	What should each Offeror assume for the Dual/non-Dual mix for each GSA? There is a significant cost difference between these two populations and if each Offeror has a different assumption, it will significantly skew the scoring results.	AHCCCS suggests using the historical information provided and stating your data, assumptions, and methodologies of the development of your bid in the actuarial certification.
13.	Arizona Complete Health	August 8 th , 2023	Exhibit H: Instructions to Offerors	20	16	Regarding B12 Oral Presentation Information: When does AHCCCS anticipate notifying offerors of oral presentations?	AHCCCS anticipates notifying Offerors by Thursday, October 5, 2023.
14.	BCBSAZ Health Choice	8/8/2023	B2			Could AHCCCS please confirm that the contracts listed in B2 include both is active and inactive contracts?	Yes, the contracts listed for B2 can be active or inactive contracts.

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15.	BCBSAZ Health Choice	8/8/2023	Section G & B2			Based on Section G of the RFP which requires Offerors to submit contract numbers can Offerors utilize experience, or a program associated with that contract number or previous contracts for the same program? (E.g., Health Choice has held an acute contract since the early 1990s. Would we be permitted to discuss experience from both the acute and ACC contracts throughout the narrative responses if we list the contract number for the current ACC in B2?)	The RFP Submission Requirement B2 is revised as follows: The Offeror shall identify no more than three contracts, including in addition to Arizona Medicaid contracts, which represent its experience in managing similar healthcare delivery systems to the ALTCS E/PD Program.
16.	BCBSAZ Health Choice	8/8/2023	B2			Could AHCCCS please confirm that the one-page limit is cumulative across all three contracts? (Or is AHCCCS requesting a discrete one-page description for each of the three contracts?)	The one-page limit is cumulative across all three listed contracts. AHCCCS is not requesting a discrete one-page description for each of the three contracts.
17.	BCBSAZ Health Choice	8/8/2023	B2			Could AHCCCS please confirm that an offeror may discuss best practices and programs (as opposed to contract "experience") from other affiliated organizations and programs even if those contracts were not listed in B2. (E.g., If Health Choice has adopted a best practice from our BCBSAZ Medicare plan.)	Regarding the example provided ("E.g., If Health Choice has adopted a best practice from our BCBSAZ Medicare plan"), best practices and programs that have been adopted and implemented will be considered as experience and must be from the contracts cited in B2.
18.	BCBSAZ Health Choice	8/8/2023	B4			Could AHCCCS please confirm that "ALTCS case managers" are the offeror's case managers? (As opposed to provider case managers or AHCCCS' own internal team.)	In RFP Narrative B4, AHCCCS is not referring to AHCCCS' own internal team.
19.	BCBSAZ Health Choice	8/8/2023	B7			Would AHCCCS be willing to provide member PCP information and Behavioral Health Home on Member Placement Detail file?	This information will not be provided at this time. The information may be provided to Successful Offerors during readiness and transition post-award.

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20.	BCBSAZ Health Choice	8/8/2023	Member Placement Detail file			Would AHCCCS be willing to provide race, language preference, and ethnicity data?	This information will not be provided.
21.	BCBSAZ Health Choice	8/8/2023	Member Placement Detail file			Would AHCCCS be willing to provide a PRFO utilization data file?	Assuming PRFO in this question refers to Peer or Family Run Organizations, this information will not be provided at this time. The information may be provided to Successful Offerors during readiness and transition post-award.
22.	BCBSAZ Health Choice	8/8/2023	B10			Please confirm that an MCO currently serving in the ACC program is considered a "(b) Incumbent non-E/PD Contractor."	An "incumbent non-E/PD Contractor" includes ACC Contractors and ACC-RBHA Contractors.
23.	BCBSAZ Health Choice	8/8/2023	B10			Has AHCCCS published the Operational Review Contract Report for the most recently completed OR results that will be used in the bid scoring? If not, would AHCCCS be willing to provide this information?	AHCCCS will not be providing scoring or weighting details.
24.	BCBSAZ Health Choice	8/8/2023	B11			Will there be a difference in weight for Arizona DSNP Star Ratings versus non-Arizona DSNP Star Ratings or AZ MA Plans? If so, would AHCCCS be willing to provide the different weights?	AHCCCS will not be providing scoring or weighting details.

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25.	BCBSAZ Health Choice	8/8/2023	Solicitation. (Page 8, Section H: Instruction to Offerors		8	We recognize that AHCCCS is requiring that offerors who are owned by the same parent organization must submit a single proposal in response to the Solicitation. (Page 8, Section H: Instruction to Offerors.) Does this mean that the single offeror will be limited to using the experience and performance of the actual legal entity submitting the bid (e.g., Operating Review score under Narrative Submission B10 and contract experience under Narrative Submission B2) or will the offeror be given credit for the higher experience and/or performance of the two organizations?	AHCCCS will not be providing scoring or weighting details.																				
26.	BCBSAZ Health Choice	8/8/2023	ASFS Data Files			<p>We noted that the Member Months in the Detail File do not appear to match the Member Count in the Member Placement Detail File. Would AHCCCS be willing to please identify the difference between the two data sets. Which one would AHCCCS prefer bidders to use for PMPM calculations?</p> <table border="1" data-bbox="1330 1068 1760 1107"> <thead> <tr> <th></th> <th>CYE 20</th> <th>CYE 21</th> <th>CYE 22</th> <th>CYE 23</th> </tr> </thead> <tbody> <tr> <td>Member Months</td> <td>349,239</td> <td>321,368</td> <td>315,085</td> <td>78,977</td> </tr> <tr> <td>Placement Total</td> <td>349,113</td> <td>320,560</td> <td>312,745</td> <td>78,393</td> </tr> <tr> <td>Difference</td> <td>126</td> <td>808</td> <td>2,340</td> <td>584</td> </tr> </tbody> </table>		CYE 20	CYE 21	CYE 22	CYE 23	Member Months	349,239	321,368	315,085	78,977	Placement Total	349,113	320,560	312,745	78,393	Difference	126	808	2,340	584	AHCCCS suggests bidders use member months for PMPM calculations. The difference between the member months file and the member placement file is the member months will count partial enrollment, while the member placement file provides information on member counts as of a specific point in time.
	CYE 20	CYE 21	CYE 22	CYE 23																							
Member Months	349,239	321,368	315,085	78,977																							
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27.	BCBSAZ Health Choice	8/8/2023	ASFS Data Files			<p>There are a total of 32,201 members labeled as "Not Placed" in the Member Placement Detail File. How would AHCCCS prefer that we treat these during the rate development process? Should they be classified as HCBS or institutional? Eighty percent HCBS and twenty percent institutional?</p> <table border="1" data-bbox="1338 602 1749 678"> <thead> <tr> <th>CYE 20</th> <th>CYE 21</th> <th>CYE 22</th> <th>CYE 23</th> </tr> </thead> <tbody> <tr> <td>Not Placed</td> <td>10,485</td> <td>9,586</td> <td>9,644</td> <td>2,486</td> </tr> </tbody> </table>	CYE 20	CYE 21	CYE 22	CYE 23	Not Placed	10,485	9,586	9,644	2,486	<p>The "Not Placed" members in the Placement Detail File are excluded when calculating the HCBS mix percentage, as described in the rate development documentation. The "Not Placed" members would be included in Member Months which are used to calculate the PMPMs and can be allocated based on the calculated HCBS mix percentage as a proxy for placement.</p>
CYE 20	CYE 21	CYE 22	CYE 23													
Not Placed	10,485	9,586	9,644	2,486												
28.	BCBSAZ Health Choice	8/8/2023	ASFS Data Files			<p>Health Choice has reviewed prior year rate setting documents and have identified the Nursing Facility total dollars provided in the ASFS data look to be substantially lower than the base data in previous rate setting cycles. Would AHCCCS be willing to identify what components are not included in the data book that would account for this difference?</p>	<p>The question is unclear regarding what exactly is being compared from previous rate setting documents to the ASFS data. All components are included in the data book.</p>									
29.	BCBSAZ Health Choice	8/8/2023	ASFS Data Files			<p>Would AHCCCS be willing to provide member data on the use of self-directed care versus non-self-directed care, including county, race, ethnicity, and language data?</p>	<p>Offerors may refer to the AHCCCS CYE2022 HCBS Annual Report on the AHCCCS website for additional information: https://www.azahcccs.gov/Resources/Reports/federal.html</p>									
30.	Mercy Care	08/08/2023	Section H, 19. Contents of Offeror's Proposal	6	13	<p>Please advise if there is a file size limit for uploads to AHCCCS Secure File Share (ASFS)?</p>	<p>There is no official document size limit for the ASFS, but excessively large documents may time out when loading. Additionally, the file name has a limit of 32 characters.</p>									
31.	Mercy Care	08/08/2023	Section H, 19. Contents of Offeror's Proposal	5	14	<p>Please advise if Bidders can exclude signed forms, attachments, cover, tables of content, etc. from the sequential numbering requirement?</p>	<p>Yes, Offerors may exclude these items from the sequential page numbering requirements but please refer to the instructions to determine if these items count toward maximum page limits. Also, see answer to Question #39.</p>									

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32.	Mercy Care	08/08/2023	Section I, Exhibit H, B9	1.c.	4	Considering that a member will be enrolled with Tribal ALTCS if he/she lives on or lived on a reservation prior to admission into an off-reservation facility, please provide clarification regarding "Members residing in tribal communities." Please confirm if these tribal communities are on a reservation and/or off-reservation?	<p>The RFP Submission Requirement B9 is revised as follows: Recent studies have shown that social, economic, and environmental conditions, in addition to health behaviors, can determine approximately 80% of health outcomes in the U.S. Given the Offerors' role in serving people with complex clinical, behavioral health, and social needs, it is critical to address social risk factors. For each of the following populations, describe how the Offeror will provide timely access to services and supports as well as monitor outcomes. The Offeror shall also identify its strategy(ies) for addressing potential barriers to care, as well as best practices to be implemented.</p> <ul style="list-style-type: none"> a. Members residing in rural communities, b. Members residing in Tribal communities Tribal members, c. Members in need of community resources, and d. Members in need of Peer and/or Family Support services.
33.	Mercy Care	08/08/2023	Section I, Exhibit H, B2	2	1	Is it expected if a Bidder wants to reference current ALTCS E/PD work, an ALTCS E/PD contract must be cited?	<p>In response to the Narrative Submission Requirements that ask for the Offeror's experience as well as any other responses where experience is presented, the Offeror shall refer exclusively to the experience from the identified contracts submitted for B2. Additionally, the RFP Submission Requirement B2 is revised as follows: The Offeror shall identify no more than three contracts, including in addition to Arizona Medicaid contracts, which represent its experience in managing similar healthcare delivery systems to the ALTCS E/PD Program.</p>
34.	Mercy Care	08/08/2023	Section I, Exhibit H, B2	2	1	Please confirm that AHCCCS Complete Care contractors whose contract was expanded to include integrated services for Title XIX/XXI eligible individuals with Serious Mental Illness (SMI) are permitted to respond to the full scope of this contract as a single cited contract.	<p>The RFP Submission Requirement B2 is revised as follows: The Offeror shall identify no more than three contracts, including in addition to Arizona Medicaid contracts, which represent its experience in managing similar healthcare delivery systems to the ALTCS E/PD Program.</p>

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35.	Mercy Care	08/08/2023	Section I, Exhibit H, B2 and B11	1	1 and 5	Non-incumbent bidders will be allowed to select contracts from markets with disparate characteristics from Arizona. How will AHCCCS evaluate "similar healthcare delivery systems to the ALTCS E/PD Program" and ensure equity in the evaluation process of experience and DSNP STAR Rating?	AHCCCS will not be providing scoring or weighting details.
36.	Mercy Care	08/08/2023	Section I, Exhibit C, B6	1	3	Considering there are multiple types of data included but not limited to performance metrics and data collected in partnership with members, in lieu of utilization reports are other one-page samples allowable to demonstrate the Offeror's monitoring and analysis process?	Yes, Offerors may submit other one-page samples, in addition to or in lieu of utilization reports, to demonstrate their monitoring and analysis processes. The RFP Submission Requirement B6 is revised as follows: The Offeror shall limit its response to the submission requirement to three pages of narrative and should include up to three, one-page sample utilization reports or other sample data to demonstrate the Offeror's monitoring and analysis processes.
37.	Banner-University Care Advantage dba Banner-University Family Care	August 8, 2023	Part D, D4	RFP Section D, Moral or Religious Objections	59	The Offeror's Checklist, Part D, Section D4, requires bidders to identify Moral or Religious Objections. If bidders have no religious or moral objections, is a document required? If "yes," should bidders create their own?	If bidders do not have religious or moral objections to submit for AHCCCS notification, the Offeror is not required to submit a document. The RFP is revised as follows: Moral or Religious Objections: The Contractor Offeror shall notify AHCCCS if, on the basis of moral or religious grounds, it elects to not provide or reimburse for a covered service. The Contractor Offeror may submit a Proposal addressing members' access to the services. AHCCCS does not intend to offer the services on a Fee-For-Service basis to the Contractor Offeror's members. The Proposal shall be submitted to AHCCCS in writing as part of this submission. This submission will not be scored. If the Offeror does not have a Moral or Religious Objection, the Offeror is not required to submit a document for this submission requirement.

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38.	Banner-University Care Advantage dba Banner-University Family Care	August 8, 2023	Section H: Instructions to Offerors	Section 19. Contents of Offeror's Proposal	14	The instructions indicate that all proposals shall be in Calibri 11-point font or larger with borders no less than ½". Will AHCCCS allow a smaller, readable font size for graphics, callouts, and tables?	Graphics, tables, and charts may be in a smaller font.
39.	Banner-University Care Advantage dba Banner-University Family Care	August 8, 2023	Section H: Instructions to Offerors	Section 19. Contents of Offeror's Proposal	14	The instructions indicate that all pages of the Offeror's Proposal shall be numbered sequentially, and that numbering of pages shall continue in sequence through each separate section. If we use Section Cover Sheets, are those excluded from the page limit and numbering?	Yes, Offerors may exclude these items from the sequential page numbering requirements. Section Cover sheets do not count toward page limits. Also, see answer to Question #31.

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40.	Banner-University Care Advantage dba Banner-University Family Care	August 8, 2023	Exhibit H: Narrative Submission Requirement	B7	3	With the depth and accuracy required to thoroughly answer question B7, and page limits, would AHCCCS consider adding one page to the page limit?	The page limit for submission requirement B7 will remain unchanged.

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41.	Banner-University Care Advantage dba Banner-University Family Care	August 8, 2023	Exhibit H: Narrative Submission Requirement	B6	3	Given the number of questions and subparts to each question in B6, would AHCCCS consider increasing the page limit for the response to 4 pages of narrative?	The page limit for submission requirement B6 will remain unchanged.
42.	Banner-University Care Advantage dba Banner-University Family Care	August 8, 2023	Exhibit H: Narrative Submission Requirement	B4	2	Question B4 identifies seven objectives. Are Offeror's asked to identify <u>both</u> best practices and Case Management (CM) initiatives related to the seven objectives? Or should these be treated as two separate questions to respond to? Give the number of objectives and subparts to the question, would AHCCCS consider adding an additional one or two pages?	Offerors shall respond as needed to provide a comprehensive response to the question and meet the requirements of the RFP. The page limit for submission requirement B4 will remain unchanged.
43.	EMAIL	N/A	N/A	N/A	N/A	Can you share any details about plans for CAHPS surveys in the future? Is there a timeframe when the 2023 ACC CAHPS will be completed?	AHCCCS is currently in the process of conducting statewide CAHPS surveys for the adult population, child population, and the KidsCare program for 2023. The statewide CAHPS surveys do not include the ALTCS-EPD population; it is AHCCCS' expectation that results will be reported at the statewide level as well as at the ACC and DCS CHP population/line of business level. AHCCCS anticipates the 2023 statewide CAHPS surveys to be completed in March/April 2024.



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44.	EMAIL	N/A	N/A	N/A	N/A	Can you confirm that AHCCCS did not conduct an Adult CAHPs survey for 2022?	AHCCCS is confirming that a CAHPS survey was not conducted for the adult population in 2022; however, AHCCCS conducted a 2022 CAHPS survey for the KidsCare program.