

Vermont Health and Long-Term Care Integration Project  
Planning Grant RFP  
Bidders' Conference

December 21, 2006

Attendees:

- Michael Bailit and Marge Houy, Bailit Health Purchasing, LLC, consultants to DAIL
- Marge Chipieto, Vermont Managed Care
- Janice Clements, PACE Vermont
- Betsy Davis, PACE Vermont
- Dody Fisher, PACE Vermont
- Joan Haslett, Project Manager, Vermont Department of Disabilities, Aging and Independent Living
- David Silver, Green Mountain Adult Day Program
- Linda Stowell, Springfield Adult Day Program
- Sue Watson, PACE Vermont
- Scott Wittman, Pacific Health Policy Group, consultant to DAIL

Joan Haslett provided a broad summary of the required bid format that is found on pages 7 and 8 of the RFP. She noted that the work plan and the budget did not count towards the 10-page maximum.

Questions and Answers

All answers represent DAIL's current positions on the parameters for MyCare Vermont. These positions are subject to change as the program development process continues.

Question 1: If someone were to propose a dual eligible SNP to serve MyCare Vermont members, would that require a State Plan amendment?

- Answer: No. Moreover, currently there are no State regulatory requirements for SNPs. SNPs may need to go through BISHCA to obtain a Certificate of Need. There has been discussion within state government as to whether to require SNPs that are serving Vermont residents to contract with the State to serve dually eligible Vermonters.

Question 2: Do the expense numbers provided in the RFP include costs outside the Medicaid claim system?

- Answer: No. Examples of costs and other adjustments that are outside the claim system and not included in the expense numbers provided in the RFP include wage supplement payments, third-party liability and drug rebates.

Question 3: When DAIL did PACE actuarial studies, did it include costs outside the claim system in the calculation?

- Answer: Yes, they were all factored into the rate.

Question 4: Is a SNP required to be licensed as an HMO?

- Answer: SNPs are required to be licensed by the State, but the State has not decided whether SNPs must be licensed as an HMO. BISHCA is discussing these details.

Question 5: If the MyCare Vermont organization is going to be a SNP, what is the CMS application date that must be met?

- Answer: Applications to CMS are due in March of each year. The soonest application date would be March 2008, assuming program reauthorization by Congress.

Question 7: Is this RFP specifically for planning funds?

- Answer: Yes. DAIL recognizes that Vermont entities that might be interested in being a MyCare Vermont organization do not have deep pockets or extra staff available to develop a business plan. The planning funds would provide funds to perhaps hire a consultant.

Question 8: Will DAIL be making up to five planning grant awards?

- Answer: Yes, that is correct.

Question 9: Will there then be a second RFP process?

- Answer: That is the plan. The State is required to use an RFP process. We would hope that those receiving a planning grant would respond to the second RFP.

Question 10: When will the second RFP be issued?

- Answer: We anticipate issuing the second RFP in the summer of 2007. Those who receive a planning grant will be meeting with DAIL as part of their deliverables and will thus be informing DAIL's efforts to write the second RFP.

Question 11: Will you work with those who receive planning grants on an ongoing basis?

- Answer: Yes. We want to have regular meetings and have a dialogue so we have a clear understanding as to how the grantees think the program might operate.

Question 12: The RFP mentions High and Highest Needs duals. Is that the population we are going to serve?

- Answer: Yes. The other duals, hopefully, will be included in the future.

Question 13: Is MyCare Vermont a stand-alone program outside of Choices for Care?

- Answer: No, it is under the Choices for Care, so all eligibility requirements will be the same.

Question 14: The data supplied indicate that there are 2700 dual eligibles in nursing homes. Are you targeting this group for MyCare Vermont?

- Answer: For purposes of the planning grant, nursing home residents should not be considered one of the targeted populations. You could include in your proposal a plan to work with nursing homes on wrap-around services. Note there are 40 nursing homes in Vermont, three of which only accept private pay. 94% of people in nursing homes are dual eligible.

Question 15: Is the Community Rehabilitation and Treatment (CRT) population included?

- Answer: No. They are served through the Health Department. Also, persons with developmental disabilities are not included either, as they are served under the Global Commitment initiative. If the individual is eligible for both, he or she may decide in which program to participate.

Question 16: Will MyCare Vermont be concentrated geographically?

- Answer: No. The Commissioner wants to have MyCare Vermont services available statewide. Initially only some geographic areas may be covered, but in the long run, we want statewide coverage.

Question 17: Nursing facility and community-based populations listed on page 4 of the data attachment, – are those populations in addition?

- Answer: Yes. Table 2 on page 4 is a summary of all the dual eligible populations in the State. The populations targeted for the RFP are defined in the Purpose section of the RFP, and are a subset of the total dual eligible population.

Question 18: On page 5 of the RFP is a discussion of funding. Please explain exactly what the program is to do.

- Answer: This program is going to be fully capitated by both Medicaid and Medicare. This is about flexibility; no fee-for-service arrangements are involved. This enables the MyCare Vermont organization to provide services and supports that cannot be paid for through fee-for-service systems, such as swimming pool membership, strength training, and nutrition counseling. The program also wants organizations that save money to re-invest it, and not take it all for profit.

Question 19: What about start-up costs?

- Answer: Commissioner Flood has discussed assisting with the start-up costs for MyCare Vermont, as he did for the PACE program. This RFP provides funds to develop a business plan for potential MyCare Vermont organizations. The business planning process should include start-up activities and where the bidder anticipates getting the start-up funding.

Question 20: On page 6 of the data attachment, it indicates that the total number of recipients 18-64 years old who are eligible duals is only 202. Is that number correct?

- Answer: Yes.

Question 21: What is the geographic breakdown of costs?

- Answer: We do not have this information at this time. To estimate geographic costs, you would take the individual costs from statewide totals and multiply by the number of recipients in each region.

Question 22. Going forward, if we have questions, whom do we contact?

- Answer. E-mail Joan Haslett at [Joan.Haslett@dail.state.vt.us](mailto:Joan.Haslett@dail.state.vt.us) with the question and she will post the answer on the DAIL website. Scott Wittman will assist with establishing rates, so he will assist with answering questions regarding the data.

Question 23: Are the due dates in the RFP chiseled in stone?

- Answer: At this point in time, yes. NOTE: the due date for the RFP response has subsequently been extended to 3:30 pm on February 23, 2007.