State of Maryland
Department of Health (MDH)
Medical Care Programs Office of Finance
RFP MDH-OPASS-22-18952
Medicaid Agreed Upon Procedures Reviews and Accounting and Consulting Services Related to Capitated Rate Setting for Managed Care Organizations and Medicaid Regulations Compliance Auditing for MCOs and Disproportionate Share Hospitals

Questions and Answers for Request for Proposal Solicitation # MDH-OPASS-22-18952

MCO Request for Proposal (RFP) No. 22-18952
Maryland Department of Health 3/31/20

1. On the revised *DSH Financial Proposal Form*, we have found the following issues:

   a. Tab 1 A MCO - Cell D20 is coded to zero and does not calculate (D10 * D14). All other MCO tabs have this calculation.

   b. All DSH tabs - Cell S22 is calculated as (S19 * 9). Should the calculation be modified to (S19 * 31) to reflect the number of required DSH audits specified in Cell B21?

   c. Tab 8 - The Total Amount column (Column B) is not wide enough to display the total of all seven periods. It displays an error of all hashmarks (#).

   Could the State provide guidance as to how to correct these errors and/or issue an additional revision?
   Response: a. Price form has been corrected and update has been added to eMaryland Marketplace Advantage and MDH Website

2. Currently, the MCO, MLR, and DSH financial templates calculate a single plan cost then multiplies by number of plans/hospitals to get the total project cost. The State confirmed in the first round of Q&A that the NTE billing requirement will be applied to each plan/hospital. Given a NTE for each plan, we would have to submit the hours and cost for the most complex plan in order to remain compliant with the NTE. This would result in overstated hours and cost once multiplied by the number of plans/hospitals. To ensure the State receives the most accurate pricing, would the State consider allowing contractors to submit costs for each individual plan/hospital?
   Response: The pricing should be as outlined in the RFP and the State should only be billed for work completed.

3. Our firm serves as a business associate to several covered entities across the nation. As such, our current SOC 2 audit includes the criteria of Security, Confidentiality and Availability, which help ensure our covered entity associates that we are meeting all of our obligations contained within our Business Associate Agreements (BAA).

   Security is the only required criteria in a basic SOC 2 audit as it considers data security and authorized access to the data. The inclusion of Confidentiality ensures information designated as confidential is protected to meet the entity's objectives, as is true for Availability.

   We are seeking clarification of the need to include the Privacy criteria. Privacy generally evaluates an organization's compliance with various criteria related to direct interactions with insured individuals and their own privacy notices related to the personal information under their domain. As you know, business associates typically do not receive any personal information directly from individuals for this project. Our receipt of information will come from the government, health care plans and providers (covered entities). The privacy and processing integrity of this data is already likely being evaluated through existing testing criteria associated with the operations of the covered entities.

   In addition, we are also seeking clarification of the need for the inclusion of the criteria for Processing Integrity since it is generally added to the scope of a SOC 2 audit when an organization is performing transactions or completing processing on behalf of a client (third party). The scope of this RFP does not include performing transactions or completing processing.

   Will the Department accept a SOC 2 report from the successful bidder if the Privacy and Processing Integrity criteria are not addressed in the report?

   Response: To ensure data integrity/security, the SOC 2 report should adhere to the requirements listed in the RFP.