

Sacramento County Health Authority Commission

RFQ #1

Commodity/Service: Medi-Cal Managed Care Plan Assessment

Addendum #1

Date: 9/24/21

To All Potential Respondents: This addendum is issued to modify the previously issued RFQ documents and given for informational purposes, and is hereby made a part of the RFQ documents. Please attach this addendum to the documents in your possession.

A. Changes to the RFQ:

Revision 1 CHANGE

Page 3 SUBMISSION, EVALUATION, AND SELECTION PROCESS

In the second paragraph, change strikethrough language to text in red:

The Chair of the SCHA Commission will appoint ad-hoc committee members in ~~September 2021~~ **October 2021**.

In the third paragraph, change strikethrough language to text in red:

The selection of the expert reviewers will occur in ~~September 2021~~ **October 2021**.

Revision 2 CHANGE

Page 4 Response Scoring and Evaluation

Change strikethrough language to text in red:

The ~~maximum points possible~~ **weight** for each component of the response are as follows:

Publicly Available Data	TBD
Technical Response	TBD
Oral Presentation (TBD)	TBD
Total Points Weight	TBD

The ~~maximum amount of points~~ **weighting** and breakdown between each component will be finalized in ~~late September 2021~~ **October 2021** as part of the scoring methodology and will be released as an addendum to this RFQ.

Revision 3 CHANGE

Page 5 Response Requirements

In the second paragraph, change strikethrough language to text in red:

~~Those disqualifying event will be finalized in late September 2021~~ **October 2021** part of the scoring methodology and will be released as an addendum to this RFQ.

Revision 4 DELETE & CHANGE

Page 5 Publicly Available Data and Technical Response

Delete strikethrough text and change strikethrough language to text in red:

~~A maximum number of points will be allocated to the Publicly Available Data and each section of the Technical Response.~~ The final scoring methodology for the Publicly Available Data and Technical Response will be finalized and released by the SCHA Commission in ~~late September 2021~~ **October 2021** as an addendum to this RFQ.

Revision 5 CHANGE

Page 5 Oral Presentation

Change strikethrough language to text in red:

Consumer and Provider survey data, presented at an ~~September 2021~~ **October 2021** Commission meeting with an opportunity for MCPs to respond as part of a reactor panel, and

Revision 6 CHANGE & ADD

Page 6 Technical Response

Change strikethrough language to text in red and insert new language in red:

The answer to each numbered section (e.g., 1.0, 2.0, 3.0, etc.) should be no more than the identified page limit specified at the beginning of the section. Any ~~content~~ **narrative text, not including a restating of the question**, beyond the indicated page limit will not be reviewed. **Data, maps, or tables that are specifically requested do not count towards a section's page limit.**

Revision 7 CHANGE

Page 8 Technical Response, 3.0 Continuum of Care

Change strikethrough language to text in red:

(This section may not exceed ~~one (1)~~ **three (3)** pages.)

Revision 8 CHANGE

Page 9 Technical Response, 7.0 Reducing Health Disparities

Change strikethrough language to text in red:

(This section may not exceed ~~three (3)~~ **five (5)** pages.)

Revision 9 REPLACE

Page 12 Technical Response, 12.0 CalAIM

Replace current table with the following:

ILOS Category	A) Date expected to provide service in Sacramento County	B) Will all services within the ILOS category be provided by the date reported in column A?	C) List any services that would be provided at a later date than reported in column A, and the date expected to provide them
Housing Transition Navigation Services			
Housing Deposits			
Housing Tenancy and Sustaining Services			
Short-Term Post-Hospitalization Housing			
Recuperative Care (Medical Respite)			
Respite Services			
Day Habilitation Programs			
Nursing Facility Transition/Diversion to Assisted Living Facilities			
Community Transition Services/Nursing Facility Transition to a Home			
Personal Care and Homemaker Services			
Environmental Accessibility Adaptations			

ILOS Category	A) Date expected to provide service in Sacramento County	B) Will all services within the ILOS category be provided by the date reported in column A?	C) List any services that would be provided at a later date than reported in column A, and the date expected to provide them
Medically Tailored Meals/Medically Supportive Food			
Sobering Centers			
Asthma Remediation			

Revision 10 CHANGE

Page 13 Technical Response, Section 13.0 Value-Based Purchasing

Change strikethrough language to text in red:

(This section may not exceed ~~one (1)~~ **three (3)** pages.)

Revision 11 ADD

Page 14 Key Events

To the row “Responses Due” in the “Date(s)” column add **5 pm PT** after the date “10/15/2021.”

Revision 12 ADD

Page 14 Proposer’s Instructions, General Format

Add the following language after “Please use 12- point Arial font, single-spaced, one-inch margins for your response.” : **Tables, graphics, graphic and table captions, headers/footers, icons, etc. may be written in 10 point font as long as it is readable by the reviewers.**

Revision 13 ADD

Page 15 Preparation of Response

Add the following language in bullet B after “Responses must be submitted prior to the specified date and time and sent to Jenine Spotnitz at spotnitzj@saccounty.net.” **Submit the Response in the following manner:**

Submit the following files:

"A. Cover page" = a cover page (excluded from page limits) indicating the name of your organization with a table listing of the following information: subject matter (in first column), page and paragraph (in second column, referring to the pages of the non-redacted version), and legal

basis for redaction (in third column)

"B. Redacted" = one PDF of the redacted version of the Technical Response narrative

"C. Nonredacted" = one PDF of the non-redacted version of the Technical Response narrative

"D. Data" = one PDF of the data tables, each labelled using the corresponding question number (e.g., 1.1)

"E. Appendices" = one PDF of the Appendices

Label each file with:

1. The MCP's abbreviated name

2. The letter of the file and name, as indicated above in parentheses (i.e., A. Cover page, B. Redacted, C. Non-Redacted, D. Data, E. Appendices)

For example: "MCP Name Acronym_A.Cover page"

Please submit all documents in zipped files. Multiple zipped folders may be required depending on the size of the application materials. If multiple zipped files are used, please append them with the number of files (e.g., 1 of 2, 2 of 2).

a. Email subject line: "MCP Name Acronym: RFQ Response"

b. Title the zip file: "RFQ Response_MCP Name_X of X"

Revision 14 DELETE

Page 15 Preparation of Response

Delete the following language:

~~C. Time of delivery must be stated as the number of calendar days following receipt of the order by the proposer to receipt of the goods or services by the County.~~

~~D. Time of delivery may be a consideration in the award.~~

Revision 15 ADD

Page 15 Confidential Information/Public Record

Add language in first paragraph after "Proprietary material must be clearly marked as such.":

Submit one non-redacted version of the Response, one redacted version, and a cover page (excluded from page limits) with a table listing of the following information: subject matter (in first column), page and paragraph (in second column, referring to the pages of the non-redacted version), and legal basis for redaction (in third column).

Revision 16 ADD

Add new document to the end of the RFQ as Appendix B. (See following page for the document).

**APPENDIX B
WRITTEN AGREEMENT TO INDEMNIFY
FOR RELEASE OF PROPRIETARY
INFORMATION**

**PROPRIETARY INFORMATION AGREEMENT
BETWEEN
THE SACRAMENTO COUNTY HEALTH
AUTHORITY
AND**

(Proposer)

Proposer _____ has provided the Sacramento County Health Authority Commission (hereinafter referred to as "Health Authority") with certain information claimed by the Proposer to be proprietary and/or confidential information (hereinafter referred to as "Proprietary Data"). Submittal of Proprietary Data by Proposer to Health Authority is, in Proposer's opinion, necessary to fully respond to a Request for Qualifications issued by Health Authority. Proposer and Health Authority agree as follows:

1. The Proprietary Data is submitted to Health Authority based on the understanding that the Health Authority will not disclose such data to others outside the Health Authority, nor reproduce the contents of said Proprietary Data or provide copies thereof to others outside the Health Authority without authorization from Proposer or as otherwise required by law. Proposer claims proprietary/confidential rights in the contents of the Proprietary Data as a basis for preventing disclosure of the contents thereof to others.

2. The Health Authority may make such disclosure or reproduction of the Proprietary Data as is reasonably necessary or convenient to evaluate the response to the Request for Proposal and/or to provide, monitor and evaluate the services subject to the Request for Proposal.

3. Except as provided in Paragraph 2 above, if any person serves a subpoena or makes a Public Records Act request to review, or to be provided with, copies of the Proprietary Data or any part thereof, immediately upon notification thereof, Proposer agrees to defend and indemnify the Health Authority and its officers, agents and employees against any action resulting from the Health Authority asserting the confidentiality of such Proprietary Data.

4. Proposer shall defend, indemnify and hold harmless Health Authority, Sacramento County, its Board of Supervisors, officers, directors, agents, employees, and volunteers from and against any and all demands, claims, actions, liabilities, losses, damages, and costs, including reasonable attorneys' fees, arising out of or resulting from the performance of this Agreement, regardless of whether caused by a party indemnified hereunder. If Proposer fails to execute this Agreement, the Health Authority, Sacramento County, its officers, agents, and employees shall be free to grant a Public Records Act request relating to such Proprietary Data.

5. Notwithstanding this Agreement, the Health Authority reserves the right to determine, in its sole discretion, whether or not it will assert the claim of confidentiality on behalf of the Proposer.

EXECUTED on this _____ day of _____ 202__, in _____.

By: _____
Proposer's authorized representative

Title: _____

B. Answers to Submitted Questions:

The following questions and answers are provided as a matter of information to clarify issues submitted about the RFQ. To the extent that changes to the RFQ are required based on the questions received, the RFQ has been modified in this Addendum as noted above in *Section A. Changes to the RFQ.*

Document Section	Page #	Question	Response
Introduction	3	<p>Please clarify if an MCP needs to hold an active Knox-Keene license at the time this RFQ response is submitted in order to be recommended by the Sacramento County Health Authority Commission to the Board of Supervisors as a condition of receiving a letter of support. Alternatively, can the MCP be in the process of applying for a Knox-Keene license?</p> <p>“Per Chapter 2.136 of the Sacramento County Code, the Sacramento County Health Authority Commission shall designate to the California Department of Health Care Services (DHCS) a number of Knox-Keene licensed health plans (or managed care plans, or MCPs) for the Board of Supervisors’ approval for purposes of the Medi-Cal managed care plan procurement...”</p>	<p>Yes, an MCP must hold an active Knox-Keene license at the time the RFQ response is submitted.</p>
Responsiveness	3	<p>Will Sacramento County Health Authority Commission allow MCPs to cross reference responses between the numbered sections (e.g., cross reference section 1.0 Quality in the response to section 2.0 Access to Care)?</p>	<p>Yes, we expect MCPs to cross reference responses between numbered sections if the referenced response is applicable.</p>
Submission, Evaluation, and Selection Process	3	<p>Can Sacramento County elaborate on the selection process and criteria/qualifications of the expert reviewers?</p>	<p>More guidance on the expert reviewer selection process will be forthcoming in October 2021.</p>
Technical Response	6	<p>Are Proposers required to re-state the RFQ question as part of each response? If required, please confirm that re-stating the question does NOT count toward the page limit.</p>	<p>MCPs should restate the RFQ within their response, and it will not count as part of the page limit.</p>
Technical Response, Question 1.1	6	<p>Given the amount of information requested in Question 1.1, would Sacramento County consider expanding the narrative page limit to three pages to allow the Proposer to provide a compliant and comprehensive response?</p>	<p>Section 1.0 allows MCPs to submit one page of narrative text, as well as additional pages to accommodate the list of measures using the provided template.</p>

Document Section	Page #	Question	Response
Technical Response, Section 1.0	6	Section 1.0 The RFQ states: "The following questions are focused on health plan performance, but all of these categories are areas where to be effective, the delegated entity and providers would need to jointly participate." Please confirm that providers also include community based organizations.	Yes, the MCP is ultimately responsible for the performance of its providers, partners, and delegated entities. This question is inclusive of community-based organizations that it contracts with as well.
Technical Response, Question 1.1	6	Regarding Question 1.1, please confirm that "quality improvement activities conducted or planned" include those that are not limited to those in collaboration with providers, but also include activities that the MCP conducts independently.	Yes, quality improvement activities conducted or planned include those that are not limited in collaboration with providers, but that the MCP conducts independently.
Technical Response, Question 2.2	7	California Health and Safety Code section 1373.96 provides a specific definition of "continuity of care" that is not consistent with the questions posed in RFQ Section 2.2. Please confirm SCHA is referring to "transition of care" rather than "continuity of care" in this question.	Question 2.2 should refer to "transitions and coordination of care" rather than "continuity of care."
Technical Response, Question 2.2	7	Can the SCHA Commission please clarify the definition of 'Continuity of Care' in the RFQ? We currently follow Continuity of Care guidance (per APL 18-008) which is not directly correlated with Emergency Room visits or discharge follow-up care plans.	Please see the response to the earlier question.
Technical Response, Question 2.2	7	Regarding question 2.2, because the All Plan Letter (APL 18-008) does not apply to ED or inpatient, please confirm the response should address Coordination of Care criteria for ED and inpatient discharge/follow-up care plans.	Please see the response to the earlier question.
Technical Response, Question 2.7	8	Question 2.7 requires a map of primary care/urgent care options with identification of services available at each site, if services vary. Please confirm that this map can be provided as an attachment and will not count toward the 8 page limit for this section.	Yes, the map that is asked for in Question 2.7 may be provided as an attachment and will not count toward the section's page limit.
Technical Response, Question 2.7		The RFQ requires that Proposers "please provide a map of primary care/urgent care options in Sacramento County and identify the services available at each site, if services vary by site." Can the SCHA Commission please confirm if the preference is to include them all on one map, and if so, whether the map is excluded from the Section 2.0 page limitation?	Yes, the map that is asked for in Question 2.7 may be provided as an attachment and will not count toward the section's page limit. It is preferred that all services be included on one map.

Document Section	Page #	Question	Response
Technical Response, Question 4.3	9	Question 4.3 states: "How is your MCP ensuring access to services supporting parents and children including, but not limited to, pediatric behavioral health, and providing a mental health hotline for parents with children requiring intervention?" Please confirm this question is intended to address access to behavioral health services, and not all children's services?	Question 4.3 is not limited to behavioral health services; it is included as one point to specifically include in an MCP's response.
Technical Response, Question 4.3	9	Regarding question 4.3, when asked to "explain how you will ensure access to maternal services" is this in relation to behavioral health as referenced in the first part of the question, or are these general maternal services?	As indicated in the above response, Question 4.3 is not focused specifically on behavioral health, but children's services, including maternal health services, more broadly. Therefore, maternal services is not specific to maternal behavioral health services.
Technical Response, Question 7.1	10	<p>For question 7.1, should the MCPs only provide a list of current metrics and interventions/approaches for populations experiencing homelessness in Sacramento County or for the entire Medicaid population in Sacramento County? If the later, should the health disparity plan for people experiencing homelessness be broken out into a separate question?</p> <p>Question 7.1: "... Please provide a list of current metrics and any interventions/approaches to address disparate care and outcome findings, and describe your plan for addressing health disparities for people experiencing homelessness in Sacramento County..."</p>	The referenced subquestion under Question 7.1 is not solely focused on populations experiencing homelessness, but MCPs should respond based on their understanding of the health disparities that exist in the population being served in Sacramento County. An MCP's response should reflect that understanding and be represented in the manner that is most reflective of their interventions/approaches.
Technical Response, Question 6.2	10	Section 6.2 States: "Describe the process used to ensure timely hand-offs and successful receipt of services when members transition from one level of care to another in Sacramento County." Please clarify what is meant by level of care. For example, is this question just specific to mental health services (i.e. specialty mental health services) or broader?	The levels of care referred to in this question are broader than specialty mental health care. This question refers to the transition of members between different levels of care within the same or different locations. Representative locations include (but are not limited to) hospitals, sub-acute and post-acute nursing facilities, the patient's home, primary and specialty care offices, and long-term care facilities.
Technical Response, Section 7.0	10	Given the amount of information requested in Section 7.0 Reducing Health Disparities, would Sacramento County please consider expanding the page limit from 3 pages to 6 pages?	We will allow MCPs to submit up to 5 pages for Section 7.0. Please use tables and other methods to concisely communicate your response.

Document Section	Page #	Question	Response
Technical Response, Question 8.2	10	Regarding question 8.2, please define providers versus provider organizations.	In this question, providers and provider organizations mean medical providers and IPAs.
Technical Response, Question 10.3	11	Question 10.3 states: "Please describe how your MCP addressed, or is still addressing, vaccine hesitancy in your covered population." Please confirm the question is referencing COVID-19 vaccine hesitancy and not hesitancy in general.	Question 10.3 is intended to address COVID-19 vaccine hesitancy.
Technical Response, Section 12.0 CalAim	12	DHCS has defined 14 pre-approved ILOS Categories while the RFQ 12.1 lists only 13. Has DHCS intentionally omitted the ILOS Category "Community Transition Services/Nursing Facility Transition to a Home" from the list of ILOS in 12.1?	No, Community Transition Services/Nursing Facility Transition to a Home was unintentionally omitted. We have updated the table template. Please include this service category in your response.
Technical Response, Section 12.0 CalAim	12	Please clarify if an attestation to provide an ILOS category would require the MCP to offer all ILOS within the ILOS category, or whether it would be permissible for the MCP to offer a subset of services? For example, there are 15 services listed under Housing Transition Navigation Services ILOS category. If an MCP will provide fewer than the 15 by an expected date, would it be acceptable for the MCP to attest to the provision of ILOS by an expected date for the Housing Transition Navigation Services ILOS category?	If the MCP does not intend to provide every service within an ILOS category, please indicate which services will be provided, and the timeline for providing the remainder of the services. We have updated the table template accordingly.
Technical Response, Question 12.1	12	In reference to the table in question 12.1, please confirm that there are 14 ILOS, and that "Community Transition Services/Nursing Facility Transition to a Home" should be included in the table.	No, Community Transition Services/Nursing Facility Transition to a Home was unintentionally omitted. We have updated the table template. Please include this service category in your response.
Technical Response, Question 11.2	12	Question 11.2 states: "Please provide example data from prior assessments of SDOH, including count of members experiencing or at risk of homelessness." Please confirm that "example data" is not subject to the 3 years of historical data requirement.	Question 11.2 is not asking for three years of historical data. When providing example data from prior assessments, though, please reference the year for the data that is provided.
Technical Response, Point of Contact	13	Please confirm that the Point of Contact information should be provided on a separate page directly after the response for question 13.1.	The Point of Contact information should be provided on a separate page. It may be placed directly before the Technical Response or be placed directly after your answer to question 13.1.

Document Section	Page #	Question	Response
Technical Response, Question 12.4	13	Question 12.4 states: "How would your plan propose to coordinate across plans and with the existing homeless system of care in order to address these issues, better coordinate services, and ultimately meet the ECM objectives?" Please confirm that "coordination across plans" is asking plans to coordinate and align on how they access HMIS and CES data.	Question 12.4 is intended to be broader than just accessing data. The question acknowledges that Medi-Cal enrollees make many transitions between plans, and seeks information on how MCPs will communicate and coordinate with each other, and integrate services within the homeless system of care.
Key Events	14	Please confirm what time the RFQ response is due to SCHA on Friday, October 15.	5:00 PM PT
Proposer's Instructions	14	For the section referenced below, please clarify the format for submission of confidential material in the RFQ response. For example, would it be acceptable for an MCP to submit one non-redacted version of its response and one redacted version, as the method for separately presenting confidential information?	Yes, please submit one non-redacted version of the Response, one redacted version, and a cover page (excluded from page limits) with a table listing of the following information: subject matter (in first column), page and paragraph (in second column, referring to the pages of the non-redacted version), and legal basis for redaction (in third column).
Proposer's Instructions	15	Please confirm that Proposers should include a document that identifies the pages that include confidential information along with the legal basis and place it at the front of the submission for easy reference.	Please see the response to the earlier question.
Proposer's Instructions	15	Please confirm that the following approach to Confidential Information is compliant. The Proposers shall remove pages that contain confidentially marked information from the original response PDF and include only those pages in a separate file as part of the response package, marking the file "CONFIDENTIAL MATERIAL".	Please see the response to the earlier question.
Proposer's Instructions	15	The RFQ states "Proprietary material must be clearly marked as such." Please confirm that the word "CONFIDENTIAL" in black, bold Arial 12pt. font is acceptable in the footer of the response on pages that contain confidential information.	Please see the response to the earlier question.
Proposer's Instructions	15	Regarding the submission of responses: Can Proposers submit one PDF for all of the proposal narrative responses and a separate zipped folder to include all attachments as individual PDFs?	Please see the response to the later question on file submission guidelines. We have also updated the RFQ accordingly (see Section A on changes to the RFQ).

Document Section	Page #	Question	Response
Preparation of Response	15	Will the State please confirm that a signature on APPENDIX A: MINIMUM THRESHOLD REQUIREMENTS ATTESTATION FORM is a sufficient response to the following? "A. All responses must be signed by an authorized officer or employee of the responder." If not, can the County please confirm where they would like an authorized officer or employee of the responder to provide a signature?	The Health Authority Commission confirms that a signature by an authorized officer or employee of the responder is a sufficient response for APPENDIX A: MINIMUM THRESHOLD REQUIREMENTS ATTESTATION FORM.
Preparation of Response	15	In reference to the Preparation of Response section, part C states: "Time of delivery must be stated as the number of calendar days following receipt of the order by the proposer to receipt of the goods or services by the County." Please clarify the "time of delivery" requirement, as goods or services are not applicable to this RFQ.	The "time of delivery" requirement is not applicable to this RFQ.
Preparation of Response	15	In reference to the Preparation of Response section, part D states: "Time of delivery may be a consideration in the award." Please confirm that order of receipt of a compliant RFQ response will not be a factor in scoring.	Order of receipt of a compliant RFQ response will not be a factor in scoring.
Proposer's Instructions	15	Would Sacramento County consider delaying the public release of RFQ responses until after DHCS RFP Medi-Cal responses are submitted to ensure that proposers are not harmed by the release of such competitive information?	Yes, RFQ responses will not be publicly available or released until after DHCS has made its awards for this procurement.
Technical Response	6 and 14	Please confirm that tables, graphics, and graphic and table captions can be written in 10 pt font.	Tables, graphics, graphic and table captions, headers/footers, etc. may be written in 10 point font as long as it is readable by the reviewers.
Confidential Information/Public Record	15	The RFQ provides that "Proprietary material must be clearly marked as such," and that a Proposer "must identify any such information, together with the legal basis of [Proposer's] claim in [Proposer's] response, and present such information separately as part of [Proposer's] response package." For the ease of review, would the SCHA Commission consider allowing Proposers to submit a redacted copy of the Response, in lieu of removing proprietary information from the Original Response? In addition, how would the Commission prefer Proposers to identify any Proprietary information? Would a cover page (excluded from page limits) with a table listing of proprietary	Please see the response to the earlier question.

Document Section	Page #	Question	Response
		information category, page number and justification be acceptable?	
Technical Response	6	The RFQ Section "TECHNICAL RESPONSE" states: "Please use 12-point Arial font, single-spaced, one-inch margins for your response." Will the SCHA Commission allow the use of a smaller font for headers/footers, graphics, icons, and tables?	Yes, smaller font may be used for headers/footers, graphics, tables, icons, etc. as long as it is readable by the reviewers.
Preparation of Response	15	Since this is an electronic only submission, can the SCHA Commission please confirm that digital signatures are acceptable where a signature is required by an authorized individual?	Yes, digital signatures are acceptable.

Document Section	Page #	Question	Response
Preparation of Response	15	Does the SCHA Commission have specifications for how MCPs should label their final submission files?	<p>Please submit the following files:</p> <p>"A. Cover page" = a cover page (excluded from page limits) indicating the name of your organization with a table listing of the following information: subject matter (in first column), page and paragraph (in second column, referring to the pages of the non-redacted version), and legal basis for redaction (in third column)</p> <p>"B. Redacted" = one PDF of the redacted version of the Technical Response narrative</p> <p>"C. Non_Redacted" = one PDF of the non-redacted version of the Technical Response narrative</p> <p>"D. Data" = one PDF of the data tables, each labelled using the corresponding question number (e.g., 1.1)</p> <p>"E. Appendices" = one PDF of the Appendices</p> <p>Please label each file with:</p> <ol style="list-style-type: none"> 1. The MCP's abbreviated name 2. The letter of the file and name, as indicated above in paranthesis (i.e., A. Cover page, B. Redacted, C. Non-Redacted, D. Data, E. Appendices) <p>For example: "MCP Name Acronym_A.Cover page"</p> <p>Please submit all documents in zipped files. Multiple zipped folders may be required depending on the size of the application materials. If multiple zipped files are used, please append them with the number of files (e.g., 1 of 2, 2 of 2).</p> <ol style="list-style-type: none"> a. Email subject line: "MCP Name Acronym: RFQ Response" b. Title the zip file: "RFQ Response_MCP Name_X of X"