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Question	Section	Pg#	Question	Answer
1			Can other family members accompany the parent and sibling on rides?	Only a medically-required attendant accompanying a member or a parent/caregiver accompanying a member who is a minor is covered for the ride to an appointment, per 42 CFR 440.170 The selected vendor and their sub-contracted providers are not required to carry additional family members or siblings.
2	5.2.1.2.7	32	Will the transport companies be required to provide at least one car seat or booster seat?	No. The member must provide the seat.
3	5.2.1.2.7	32	If a taxi is used, will car seats or booster seats be required?	Yes. The member must provide the seat.
4	Amendment #1, Addendum #9		Will rides to pharmacies and WIC offices be covered?	The Department is currently considering policy regarding pharmacy only trips; however, proposers are cautioned to base their Cost Proposals strictly on coverage as reflected in Wisconsin Medicaid policy as of January 1, 2013. See RFP 1748 DHCAA-JS Amendment #1 and Addendum #9 Trips to WIC offices are covered only if Medicaid covered services (e.g., blood lead testing) are rendered during the visit for which the trip was scheduled.
5	1.1, 1.2.1	4, 5	Does the RFP require the manager to cover the entire state or can a regional bid be submitted?	The Department intends to use the results of this Request for Proposal (RFP) to award a contract to a single Contractor for the statewide management of NEMT services.
6	6.2, Appendix A	67, 88-89	If the manager must cover the entire state, can PMPM rates vary by county?	No.
7	1.1, 1.2.1, 6.2	4, 6, 67	The last paragraph of this section indicates that populations or covered services not included within the RFP may be added (or removed) during the term of the contract and that the DHS reserves the right to negotiate new PMPM rates based on such changes. Will the Department confirm that it will agree to an applicable increased PMPM rate for the contractor if populations or services not included within the RFP are added during the term of the contract?	Changes to included and excluded populations and/or covered or non-covered services (and their effect on PMP rates) are addressed in sections 1.1, 1.2 and 6.2 (Amendment #1).
8	1.7	13	Is the Letter of Intent to bid due on February 6th or February 11th? Both dates are noted in the RFP.	The Letter of Intent to Propose is due February 11, 2013 and the date is corrected in Amendment #2.
9	5.1.2.2.7	22	Wisconsin law prohibits an employer from refusing to hire a person based on a criminal conviction unless the offense substantially relates to the circumstance of the particular job or licensed activity. Federal law and EEOC guidance has similar provisions. Section 5.1.2.2.7 of the RFP prohibits the use of drivers with any felony convictions in the past and any felony convictions during the contract period. This would appear to require transportation providers (and indirectly, the contractor) to violate Wisconsin's law in this respect. It is	Please refer to section 5.1.2.2.7 as modified by Amendment #2.

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			unclear that any felony conviction no matter how old "substantially relates" to the job of driving Medicaid members. Would the state reconcile its criminal background check requirement with the legal limitations of Wisconsin law?	
10	5.1.2.2.7, 5.1.4.19	22, 26	1) Is there a look back period for the criminal background check for felony convictions? For example, if a conviction is more than 7 years old (or 10 or 12 years old, etc.) may the driver or attendant be accepted to perform services? 2) Will currently approved drivers and attendants qualified to perform services under current standards be grandfathered and allowed to continue to perform services if they have a disqualifying criminal history under a newly defined standard?	In response to item 1, please refer to section 5.1.2.2.7 and 5.1.4.19 as modified by Amendment 2. The Department will work with the selected contractor regarding how these requirements will be operationalized. ---------- In response to item #2, no grandfathering will be allowed.
11	5.2.2.2	34	As many already know this program has experienced significant trip volume (almost a doubling) increases over the last three years. The current RFP/program does not provide on line access for reservations. Since the historical trip volume data and cost provided did not take this additional benefit enhancement, has anyone at the Agency or outside actuaries done a review and attempted to estimate how many more trips and additional cost (both transportation and administrative) will be added to the program by providing a 24 x 7 access to book reservations?	The current transportation program began utilizing an online reservation system in October 2012 for both facilities and members. The Addenda data reflect member usage including online reservations.
12	5.3 and 5.3.1	35	Please clarify whether the contractor will have to mail notices to every Medicaid eligible about the new NEMT service or if the Agency will be providing that communication. With over 900k members this could easily cost over $300,000 and might be more economical if the Agency used its' normal means of communication to share program information or allow a program notice update only to those members that have accessed the system over the last twelve months.	Yes, the Contractor is responsible for the costs associated with printing and mailing via first class mail the ForwardHealth Member Update to each household with a Wisconsin Medicaid or BadgerCare Plus member, if needed. The Department estimates approximately 600,000 households may need to be notified.
13	5.4.5	40	This provision requires the contractor to acknowledge a complaint within 24 hours of receipt. Will DHS consider changing that standard to require the contractor to acknowledge a complaint within 1 business day?	Yes, please refer to section 5.4.5 as modified by Amendment #2.
14	5.5.2.2.3	45	Please clarify that "hold time" refers to time waiting, or waiting in queue, to be answered by a live agent.	Hold time refers to the amount of time between initiation of the phone call until answered by a live agent.
15	5.5.2.2.4	45	It is known that the current contractor has been operating this contract at a significant monthly loss. The current	a) The additional administrative cost is unknown b) No

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			contract allows for a 7% abandonment rate with RFP 1748 DHCAA-JS requesting a daily abandonment rate of 5%, which is mostly unheard of in call centers. The norm in measuring and staffing up to an abandonment rate is typically based on a monthly average, sometimes weekly (i.e. NCQA). The additional cost incurred in having to staff up to a daily average far exceeds the current cost structure and possibly any benefit achieved and will only burden the State with additional cost. Will the Agency consider or answer the following: a) What is the additional estimated administrative cost to the current cost in order to meet this new 5% weekly abandonment rate? b) Will the agency consider maintaining a 7% daily based rate or c) Will the agency consider using a 5% weekly average instead of a daily average?	c) No Call abandonment rate shall be no more than five percent (5%) on an average daily basis. If the average daily hold time performance requirement is met, specified above in section 5.5.2.2.3, the call abandonment rate requirement shall not be enforced for that same date.
16	5.5.2.2.7	45	The average percentage of trips without substantiated complaints shall meet or exceed 99.7%. The national best practice is to have no more than 1% of all gross trips with complaints. This means that this current program which is averaging about 220,000 gross reservations per month would be afforded 2,200 complaints not 660 under the proposed standard. Please consider adjusting this standard to 1% of Gross Reservations.	The standard will remain as stated in the RFP.
17	5.6.1.2	49	Will the Department consider allowing the required Senior Manager of Information Systems to be located outside of Wisconsin? If a contractor's information systems are managed by a dedicated team, in real time, from locations outside of Wisconsin, a full time, local Senior Manager of Information Systems would not be cost effective and would not be a full time role.	Yes. Please refer to section 5.6.1.2 as modified by Amendment #2.
18	5.5	43	This section includes a requirement for the call center / business office to be located within fifteen (15) miles of the DHS Central Office at One West Wilson Street, Madison, Wisconsin. The most recent unemployment rate for Madison (as released by the US Bureau of Labor Statistics) is 4% and our experience is that it is difficult to recruit and retain quality work force at our Madison Call Center for reasonable hourly wages. Will DHS consider extending the distance from the DHS office to 25 miles to increase the pool of potential	No.

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			employees?	
19	1.1, 1.2, 6.2, Addendum #9	67	Without a mechanism to review and adjust rates to reflect unanticipated increases in utilization, the pricing offered by the contractors may have to reflect worst case growth in utilization which may have the effect of the state overpaying for services in the early years of the contract. 1) Based on the experience in Wisconsin where the current contractor has seen significant increases in utilization what protections are being provided to a contractor that commits to a three year price and experiences cost increases based on increased utilization that exceed even the most conservative pricing? 2) Has the Agency considered treating this contract like any other MCO contract whereby the rates are actuarially reviewed on an annual basis and adjusted (up or down) accordingly?	1) Changes to included and excluded populations, utilization, and/or covered or non-covered services are addressed in sections 1.1, 1.2 of the RFP. Also see Section 6.2 as modified by Amendment #1 and Addendum #9. 2) The Department does not intend to actuarially review the rates on an annual basis. However, see section 6.2 regarding possible rate modifications.
20	6.2	67	The RFP for NEMT services requires the inclusion of pharmacy trips, a 24 x 7 call center operation, Web Portals for members and facilities to book trips, a Forward Health Member Update mailed to all members, and a member oriented Ombudsman. All of these requirements will either directly or indirectly increase demand for transportation service and drive up utilization. 1) Can the state identify any measures that will be taken to reduce demand for trips and might lower utilization or at least contain the rate? 2) Can the state identify any program enhancements that are being discussed or planned that will increase utilization in this program?	1) It is the role of the contractor to undertake measures to contain costs by ensuring the provision of the most appropriate and least costly transportation services per section 1.2.3 Needs of the RFP. 2) Please refer to section 1.2 of the RFP. Changes to included and excluded populations and/or covered or non-covered services are addressed in sections 1.1, 1.2 of the RFP and Section 6.2 as modified by Amendment 1. Please refer to the answer to question #4 regarding pharmacy trips.
21	7.1	69	In regards to transparency, would the Department consider expanding the disclosure requirements found in Section 7.1 to incorporate any and all state NEMT contracts terminated or elected not to renew by the bidder/contractor over that same time period?	No.
22	9.1	75	Wisconsin law provides that contract provisions calling for liquidated damages are generally enforceable, provided the amount of damages reflects a fair and reasonable effort at estimating the actual amount of damages which likely would result from the applicable event. However, Wisconsin courts will not enforce liquidated damages provisions which have no substantive relationship to the actual amount of damages	The Department declines to modify this language. The proposed contract at Appendix C states that the Contractor will not be liable for liquidated damages for failures that are not primarily the responsibility of the Contractor or result from causes beyond the reasonable control of Contractor

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			likely to be incurred and are solely intended to punish the breaching contractor. In light of Wisconsin's law regarding enforceable liquidated damages, please explain the details of DHS' reasonable effort for estimating the dollar amount per occurrence (without maximum limits) as the likely actual damage to DHS for each such occurrence for the following: Failure to Provide Transportation; Provider Late; Provider uses vehicle not meeting standards, and Failure to meet call center hold time requirements. In addition, a party to a contract may recover contractual liquidated damages or actual damages, but not both. Based on our experience and national standards, the benchmarks established for timeliness, service, and dialysis / cancer treatments are unattainable for any contractor. In dealing with transportation issues such as weather, vehicle breakdowns, accidents, member lateness, etc., it is impossible to meet standards set at 100%. Even 911 services do not perform at 100%. In fact, with all the variables that impact transportation every day, the only way 100% performance can be achieved is if at least one and maybe more back-up vehicles were standing by for every trip. This is certainly cost prohibitive as it would more than double the cost of an NEMT program. We don't believe that neither Wisconsin nor any other state is prepared to pay the price for a zero tolerance program. When working with other states who have attempted to set similar performance standards, an agreement has always been reached that provides a range to allow for the transportation problems that inevitably will occur. An additional concern to the Agency is to have developed a program with standards and penalties that are designed around zero tolerance which no contractor can achieve and then have to explain to the media and political stakeholders why the selected contractor is being assessed fines every month and failing to achieve the standards of performance set forth in the RFP. With all the variables that impact a transportation program it would be advisable to set "reasonable best practice" industry based standards, which allows for certain failures and then hold the contractor accountable if these are not achieved. Based on Section 9.1, we ask that the Agency consider a minimum allowable level	

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			of a) Failure to Provide Transportation, b) Provider Late, c) Provider vehicles not meeting standards and d) timely trips to Dialysis and Cancer Treatment. The section as written allows for 0 failures which is unrealistic even in Emergency 911 Ambulance services contract. This section will burden any contractor and the taxpayers of Wisconsin by not allowing any lapse in services whatsoever. This would be like everyone carrying car insurance at zero deductible, which no one does because it is cost prohibitive. Based on these liquidated damages with zero fault tolerance, it would cost any contractor conservatively $1,000,000 a month or about $12 Million dollars in just sanctions. We are not aware of any other NEMT contract, or industry for that matter (airlines, 911 services), that operate at a zero tolerance level. We ask that the Agency consider the following: a) Failure to Provide Transportation – Any monthly trips whereby the contractor reports anything greater than .05 % of gross reservations (99.5% free of issues) will be assessed $1,000. b) Provider Lates – Any monthly trips where the number of provider late trips are greater than 1% of gross reservations (99% free of issues) there will be an assessment of $100 per trip c) Provider Vehicles not meeting standard – Any month in which a contracted vehicle does not meeting standard is found to have been used an assessment of $250 per vehicle would be assessed. d) Failure to provide timely trip to Dialysis and Cancer Treatment is already included in Provider lates, therefore it is suggested that trips under this category that are greater than .003% (99.7% free of issues) of gross reservations would be assessed $500.00 per trip.	
23	Covered Services		The current program covers certain school based transportation services for students throughout the year. This specific type of student transport has increased over the last three years and become a significant component of the transportation budget (both when in school during the year and outside the school year in the summer). The concern with this type of transportation service is that not all schools have availed themselves of the NEMT services and the program is vague at best as to whether schools can access NEMT for their students. With an annual price tag of over $4	Rides to services provided through the School Based Services are not covered under the NEMT program; however, rides to other covered services not under the School Based Services benefit may have a pick-up or drop-off location that is at a school and are part of the NEMT program.

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			Million dollars and the possibility of significant increase from schools currently not using the NEMT services, has the Agency considered either limiting (or carving out student based transportation) so as to minimize the risk to a future contractor or providing clear guidelines and cost estimate for what can be expected?	
24	Reporting		The RFP currently request that all monthly reports be provided, broken down by each type of MCO. These reports at best are high level and may not provide any insight into the MCO member population and their behavior. In addition, the generation of all these reports by MCO will only increase cost. Will the Agency consider sitting down with the winning contractor to create "MCO specific reporting, that might capture better data and be beneficial to the MCO groups besides the monthly reporting? As an example, the MCOs may be more interested in the following: a) Gross reservation for the coming week b) Cancellation by the medical provider (facility) c) Noncompliance by their members (i.e. cancellation by rider) so that their caseworkers can follow up with their members d) Average distance traveled by their members (for primary care/specialty, etc.)and how this compares to other MCOs We believe this would improve the overall program.	The Department will work with the selected contractor to ensure that reports meet the NEMT program needs as identified in section 5.5.5.3 Extraction and Reporting described in the RFP.
25	Addendum 1		Will the Agency provide the basis for providing this member information for the SE Wisconsin population, as it doesn't represent the entire population for this new RFP?	The data provided in Addendum #1 reflects an estimated statewide, eligible member population and is provided as reference only. SE Wisconsin population is factored into this report but not separately identifiable.
26	1.2.5	8	Does the State require contractors to pay loaded and unloaded miles to ambulance and SMV providers?	No.
27	5.4.4.2	39	Will the State's data file identify who pays copays and who does not?	The Department will work with the chosen contractor to develop a method of sharing copay information acceptable to the State.
28	2.3		Will delivery by courier or representative be required to obtain acceptance from the Procurement Manager? Will delivery signature confirmation be acceptable?	Receipt of Proposals will be officially recorded when received at the location specified in the RFP. If requested, proposers will be provided a written receipt acknowledging the received date and time.
29	5.11.8		Will State data include members' plan?	Yes, the member eligibility file will identify the BC+/SSI HMO for those members who belong to a BC+/SSI HMO.
30	7.9.1		Will the State please clarify the reporting requirements? The questions states 5 reports are required and 7 are listed.	Proposers should respond by submitting seven (7) sample reports. The department has issued Amendment #2 to clarify this requirement.
31	5.6.1.2, Amendment #2		In order to leverage the best available staff, may any of these roles be supported from a central location (e.g. Reporting	All key staff must be located full time on site in Wisconsin for the duration of this contract, with the exception of Senior Manager of Information Systems (5.6.1.2.6.) as clarified in Amendment #2.

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			Manager) after the implementation period?	
32	General		Has the existing NEMT contract been extended and if so, has the reimbursement rate changed?	By contract, the current NEMT contractor is required to continue providing services until a transportation manager has been picked and is able to schedule rides for members, even if this takes longer than the 90 day notice given to terminate the contract. There have been no changes to the PMPM rates under the current NEMT contracts.
33	Addendum 3		According to Addendum 3, Meals and Lodging Costs declined considerably in May-12 and continued a declining trend. Were actions taken to reduce these costs or is this a product of seasonality? Can the next contractor expect to see costs similar to what was seen from May-12 – Oct-12 going forward?	The Department issued policy Update 2012-30 in July 2012. See https://www.forwardhealth.wi.gov/kw/pdf/2012-30.pdf to clarify meals and lodging eligibility criteria. The Department has provided current cost data for proposers to consider when formulating proposed rates.
34	Amendment #2 (section 6.2.15), Addendum 10		Please provide a list, including contact information, of the current roster of Ride Providers serving the NEMT program. If a complete listing is not feasible, please provide contact information for Ride Providers who provide the majority of NEMT trips.	Please refer to section 6.2.14 (Addendum 10) as modified by Amendment #2.
35			Does the current Contractor operate the NEMT program from a call center in Madison? If so, will attendees at the Vendor Conference be given a tour of the current Contractor's facilities? If not, where is the current call center located?	The current call center is located in Madison WI. A tour of the current facilities will not be arranged by the Department at any point in this RFP process.
36			Paratransit Services reviewed the RFP in 2010 (RFP #1690 DHCAA-SM) but decided not to submit a bid at that time. We note that the base contract term was 3 years, with startup commencing in Jan 2011. What are the circumstances leading to the early termination of the current contract?	The circumstances cited are not relevant to the current RFP. For additional information, view the press release at http://www.dhs.wisconsin.gov/news/PressReleases/2012/112112.htm
37			In several of the appendix of RFP 1748, there is data about rides from counties outside of Wisconsin and the Midwest (Los Angeles, Cook). Can you explain how and why those are in the RFP and if they are applicable for someone bidding on the RFP?	The counties outside of Wisconsin are associated with a member's current mailing address on file with ForwardHealth. The mailing address can correspond to a payee or guardian's address and not with the member's physical address. Only members currently residing in Wisconsin and enrolled in Wisconsin Medicaid, Family Planning Only Services, The BadgerCare Plus Standard Plan, the BadgerCare Plus Benchmark Plan, TB-Only Benefit or BadgerCare Plus Express Enrollment for Pregnant Women are eligible to receive NEMT services.
38	5.1.2.3.2	22	Subsequent to a letter from the Wisconsin State Patrol regarding vehicle inspections, many SMV providers in the state do not comply with TRANS 301. Will this be amended?	No. SMV providers will continue to be required to sign an affidavit attesting they meet all the certification requirements under DHS 105.39, Wis. Admin. Code, and will meet all requirements as they are now in effect or as may later be amended.

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39	5.1.2.2.7	22	As providers submit their employees and drivers to the selected contractor, can the felony be before or after the day on which the request was made to the contractor to give approval to utilize that employee?	Amendment #2 provides the following clarification: Drivers must pass a criminal background check, with no felony convictions the circumstances of which substantially relate to the circumstances of the particular job and may not have any such felony convictions during the contract period.
40	5.1.2.2.4	22	Should a driving record conviction for a potential driver submitted to the contractor be before or after the day the request was made to the contractor to accept that driver?	As stated in section 5.1.2.2.4 of the RFP, drivers who currently have a suspended, expired, or revoked driver's license, commercial or other, are prohibited from driving for any purpose under this contract. Driving records for potential drivers must be submitted to the contractor and approved according to this standard prior to the driver being engaged to transport under the contract. Please note, as stated in section 5.1.2.2, the Contractor is responsible for ensuring that driver and attendant standards are maintained at all times.
41	3.2	19	Under evaluation criteria, in the overview it was discussed that oral presentations might be considered. If they are, how will those be factored into the criteria for the evaluation?	Oral presentations will assist the evaluators in understanding and scoring the written proposals. Oral presentations are not separately scored.
42			Regarding the contractor's contract to be submitted to the Department for approval for use with sub-contracted providers, can the state provide an official explanation of what is a no-show in that contract before the Department approves it?	The content within a contract between the selected contractor and their sub-contractors is unknown at this time, and will be submitted to the Department for review and approval as part of the implementation process. The Department will ensure that the definition of provider no-show is clear and included in the approved sub-contract language.
43	5.3	35	Regarding the threshold for providing member communication in any language that exceeds 5 percent. Other than Spanish, English and Hmong are there any other languages that would exceed the 5 percent threshold?	NEMT member communications are currently only translated into English, Spanish and Hmong. Currently, no other languages exceed the 5% threshold.
44			Will the contractor have the ability to modify member information, such as telephone number or address, within ForwardHealth?	No.
45	5.2	30	Will the contractor be allowed to require identification to verify the member that is going to be transported prior to providing the transportation?	Please refer to paragraphs #4 and #5 in section 5.2 of the RFP, which addresses this question.
46			For any questions previously submitted and not answered during the vendor conference; will those be included when the questions and answers are posted?	The Q&A includes questions received before, during and after the Vendor Conference if received prior to the posted deadline for question submission.
47	7.9.1	73	Will proposers be required to submit five (5) sample reports, or seven (7)?	Proposers are to submit the seven (7) sample reports listed under section 7.9.1. See Amendment #2 for clarification.
48			Will FedEx or UPS people be admitted right to the office for delivery?	If UPS or FedEx are used, the Department recommends that proposers allow sufficient time for the carrier to deliver proposals directly to the designated room number.
49			Regarding insurance. Some providers have self-insurance certificates from WisDOT as being certified as self-insured. Will the contractor accept this form of insurance?	Insurance requirements will be prescribed by the selected contractor; however they must meet or exceed requirements stated in section 5.1.2.3, 5.1.3.3.2, 5.1.10.1.13, 5.4.2.1.19, 5.11.3.10, 9.3 and 10.

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50			Will liquidated damages be assessed against the contractor or their sub-contracted transportation provider?	Any liquidated damages imposed by the Department would be assessed against the selected contractor.
51	5.1.2.2		Will the selected contractor be required to follow the Medicaid handbook for SMVs regarding driver standards for sub-contracted transportation providers?	Yes. Additionally, please refer to sections 5.1.2.2, 5.1.4 and 5.1.5, which describe driver and attendant standards.
52	Section VI(B)(2)(a)	106	The sentence does not say that the assessment would be for not implementing on a scheduled day. It just says that damages can be assessed every day after the implementation date. Can the Department please provide clarification?	Liquidated damages may be assessed by the State, in the amount of $20,000 per working day, not to exceed one-half the total annual amount of the Contract, for every day past the negotiated Implementation Date if the project is not implemented on that date. Please refer to Amendment #2.
53	Amendment #2 (section 6.2.15), Addendum 11		Can the addenda be amended to show how many trips required/utilized an attendant?	Please refer to section 6.2.15 (Addendum 11) as modified by Amendment #2.
54	VI(B)(2)(c)	107	Can the Department please clarify the definition of "Provider Late"? There could may be different causes which could create a situation where a member may be late for a service such as a member themselves not coming out in a timely fashion, weather-related changes, traffic, and other extenuating circumstances beyond the control of a transportation provider. How will the Department address these issues when they define "Provider Late"? Will the contractor or transportation provider be responsible for the assessed damages?	Provider Late is defined as the transportation provider arriving late to provide NEMT services , as described in section 5.1.2.4, 5.2.2 (and subsections) and 5.2.3 of the RFP, or the member arriving late to their appointment because of the provider. The Department would have the ability to assess liquidated damages against the selected contractor only. The Department may take into account mitigating circumstances such as accidents and weather when substantiating late trips. Please refer to the answer to question #22.
55	5.11.9.34		Does the State prefer a physical map (e.g. GeoAccess map) or a report of number of vehicles over/under capacity by county?	While this is not a requirement of the RFP, as stated in section 5.11, the Department will work with the selected contractor during the implementation process to determine the design and frequency of reports.
56	5.4.4.2.1		How will a transportation contractor know if a recipient is exempt from co-pays?	The Department will work with the selected contractor to ensure a process is in place for the selected contractor to determine if a member is exempt from co-pays.
57	Amendment #2 (section 6.2.15), Addendum 11		Will the State please provide the following data: - Number of member and provider no-shows - Number of late trips - Number of trips with and costs of attendants	Please refer to section 6.2.15 (Addendum 11) as modified by Amendment #2. Costs for attendants should be based upon the proposer's experience and agreements with sub-contracted providers.
58	Addendum 2		Please define the term "county referred."	This term is used by the current contractor to describe volunteer drivers who were referred by a county agency to provide transportation services.
59	9.1		Will the state consider late trips "substantiated" if the late trip is caused by unforeseeable events, such as traffic, accidents or weather?	As stated in the RFP, the State may, at its sole discretion, assess liquidated damages for the situations listed in Section 9.1 that have been investigated and substantiated by the State. The Department may take into account mitigating circumstances such as accidents and weather when substantiating late trips.

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61	2.4		We have identified the following attachments that would complement the information requested in the RFP; would the State consider allowing any of the following items? - Sample Call Scripts - Sample Training Manual (including the training plan requested in 7.3.1) - Sample Forms: Level of Service, Denial, etc.	Vendors may include anything they believe relevant to addressing the requirements. However, Section 7 requirements and the Cost Proposal are the only score able elements of the proposal.
62	Addendum 8		The membership in November 2012 for Non SEWI Members increased by 77,881 from October and for SEWI HMO Members decreased by 64,073. What was the cause of this dramatic membership change for both groups? Is the November 2012 membership with a consistent growth rate roughly what the contractor can expect going forward?	The data provided in Addendum #8 reflects an estimated, eligible member population and is provided as reference only. Membership shifting from the SEWI HMO population to fee for service is a result of a large HMO terminating its contract with the State of Wisconsin. It should be noted that NEMT eligibility was not impacted, and that it merely shifted from the SEWI WI NEMT contract to the initial Non-SEWI NEMT contract (fee for service members in SEWI). Please refer to the following URL for additional information: https://www.forwardhealth.wi.gov/kw/pdf/2012-56.pdf
63	Addendum 8		Membership for SEWI HMO Members for Badger Care + Children is listed at 167,000 and membership for Badger Care + Adults/Pregnant Women, WWMA,FP is listed at 80,000 for both September and October 2012. Were these membership numbers estimations until the correct membership was determined in November 2012?	The data provided in Addendum #8 reflects an estimated, eligible member population and is provided as reference only. Membership shifting from the SEWI HMO population to fee for service is a result of a large HMO terminating its contract with the State of Wisconsin. It should be noted that NEMT eligibility was not impacted, and that it merely shifted from the SEWI WI NEMT contract to the initial Non-SEWI NEMT contract (fee for service members in SEWI). Please refer to the following URL for additional information: https://www.forwardhealth.wi.gov/kw/pdf/2012-56.pdf
64	1.2.5		What are the current rates for Ambulance and SMV transports (base rate and mileage rates)?	For current fee for service rates, which are outside the scope of this RFP, please see https://www.forwardhealth.wi.gov/WIPortal/Max%20Fee%20Home/Max%20Fee%20Search/tabid/78/Default.aspx Please refer to Amendment 2 regarding changes to section 1.2.5.
65			Does the Contractor provide attendants or will the member be required to provide their own attendant?	Section 5.4.2.1.4 describes that attendant services must be included within the selected contractor's master services agreement (MSA) to be utilized for provision of transportation services. The selected contractor will be responsible for ensuring that attendant services are provided. As stated in section 5.1.2.1 of the RFP, the contractor shall obtain a statement of the appropriateness for any additional attendants from the health care

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Question	Section	Pg#	Question	Answer
				provider. The definition of transportation attendant is listed in section 1.4.
66	5.1.4.19		Section: 5.1.4.19 states drivers cannot have a felony or be convicted of a felony during the duration of the contract; is this any type of felony or specific types of felonies within a certain time period?	Amendment #2 has been issued to provide the following clarification: Drivers must pass a criminal background check, with no felony convictions the circumstances of which substantially relate to the circumstances of the particular job and may not have any such felony convictions during the contract period.
68	1.2.5		Will the Contractor be allowed to use their own level of need form rather than the state's CON form for healthcare providers to verify that a member requires SMV transport?	The Department currently does not require a certificate of need for transportation services unless the level of service is ambulance with ALS or BLS. Please refer to Amendment 2 regarding changes to section 1.2.5.
69	5.1.7		Will prior authorization be received via a faxed form, email or phone call?	The Department will work with the selected contractor on the format for receiving prior authorization information.
70	5.2.1.2.4		The Contractor must have determination on approval or denial or trip request within two business days of member's request or one business day prior to trip date, whichever is sooner….what happens if the Contractor is waiting on a prior authorization from the state and has not yet received the authorization to transport?	The requirements described in section 5.2.1.2.4 must be adhered to. However, if PA has not been adjudicated within 1 business day prior to the scheduled trip the contractor may cancel the trip.
71	5.2.1.3.10		Is a member allowed to choose their contractor of choice?	No.
72	5.4.4.2.2		Will the different categories that do not have to pay a co-pay be identified on the eligibility download?	The Department will work with the selected contractor to ensure a process is in place for the selected contractor to determine if a member is exempt from co-pays.
73	5.2.2		Please consider changing the two-business day scheduling timeframe to at least three business days.	The Department declines to amend this requirement.
74			Does the complaint line really need to be manned 24X7?	Yes.
77	Addenda		Please provide addendums 1-8 (there are multiples for 4 and 5) in Excel format.	The Department declines this request.
78	1.1.1	4-5	Please clarify that the experience the proposer must have is for a population of at least 600,000 people for a minimum of two years within a single state, performing a state, federal or local transportation benefit program.	The Proposer must have experience operating a, centrally-managed single operations center which has served a volume of at least 600,000 members for an uninterrupted period of at least two years. The member volume may be composed of residents of one or more states – contiguous or otherwise
79	5.2.1.1, 5.11.7, 5.11.8	31, 64	The Contractor receives an updated daily eligibility file of all members, but in this fileno flag (unique indicator) is provided to identify the Managed Care members. Would DHS provide in the daily eligibility the member identification number with a flag (unique indicator) identifying the Managed Care	The Department will work with the selected contractor to identify appropriate data elements for inclusion on the member eligibility file, including the identifier of which HMO (if any) the member belongs to.

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			members?	