

Addendum to: RFP Number HTH-100-RW-2013-15, “Ryan White HIV/AIDS Treatment Extension Act of 2009 Part B HV/AIDS Care Services.”

The following questions were submitted to the STD/AIDS Prevention Branch of the Hawaii Department of Health in reference to RFP Number HTH-100-RW-2013-15, “Ryan White HIV/AIDS Treatment Extension Act of 2009 Part B HV/AIDS Care Services.” Immediately following each question is the STD/AIDS Prevention Branch response.

Question 1

Can subcontracts with the contracted agency change during the grant cycle without changes in the contract with DOH?

Response

Subcontracts with the contracted agency may change during the term of the agreement. However, the Department of Health fully expects that the contracted agency shall discuss the matter with the Department of Health prior to terminating any subcontract for the provision of Ryan White Part B services.

Question 2

Page 2-31 M: Please clarify if this applies to the contracted agency, subcontracts or both. Please also define “good faith effort”

Response

Item “m” on page 2-31 applies to both the contracted agency and subcontractors. This requirement applies to all providers of HIV/AIDS care services under contract with the Department of Health. This requirement is intended to ensure that providers of HIV/AIDS care services have a mechanism to gather input and feedback from the recipients of their services and other interested parties in the community. “Good faith effort” is intended to mean a genuine and conscientious attempt to recruit an individual or individuals who can provide relevant information on the quality or quantity of HIV/AIDS care services being delivered by the contractor.

Question 3

When referring to 75% of all RW funds must go to core services, does this mean accumulative or each subcontracted agency must have 75% of all funds go to core services? Will DOH give us a percentage once the entire budget and DOH’s plans for funds internally are decided?

Response

At the present time, the intent of this requirement is 75% of the total funds awarded to the contractor selected to provide services described in this RFP. When the Department of Health finalizes its budget for the 2014 Ryan White fiscal year, it shall inform the contractor whether or not funds need to be allocated to assist the Department of Health to meet its own 75% requirement and the actual dollar amount that must be allocated for core medical services. This amount will apply to the contracted agency's overall budget. The amount or relative portion each subcontracted agency devotes to core medical services is not specified within the constraints of the contractor meeting the requirement.

Question 4

How does the prior HIV +services prioritization by the Hawaii Community Planning group apply to this RFP?

Response

To the greatest extent possible, the Department of Health expects the contracted agency to adhere to the prioritization of HIV care services as determined by the Hawaii Community Planning Group. However, the Ryan White legislation, from which this procurement receives its funding, establishes its own priority of services, and in the event there is a disagreement between the two, the Ryan White prioritization shall be implemented.

Question 5

For Medical Case Management, there is concern about confidentiality if the case manager has access to everyone's medical records. As long as the medical case manager is part of the team and gets the information on each client, does this fulfill intent? (difference between having physical access to records vs. having access to information in records)

Response

The expectation of the Department of Health is that a case manager needs to have access to the medical records of his or her own clients only.

Question 6

For all of the data required (2-15 through 2-25) can it be left at the subcontractors unless needed or does all the information need to be at each site providing services? (example, oral health – can the records stay at dentist office or does agency need them on-site?)

Response

All of the items listed under “**4. Ryan White Requirements,**” pages 2-15 through 2-25, address the situation where the provider of the Ryan White Part B service is the direct subcontractor to the contracted agency. In that situation, all of the client's records may remain at the provider's

office. All clients' records shall be accessible to the contracted agency and the Department of Health.

Question 7

If there is an HIV provider who will not sign an MOA, can RW eligible clients still access this service?

Response

A Ryan White-eligible client may still receive services from the HIV provider who refuses to sign an MOA. However, Ryan White funds may not be used to reimburse a medical case management provider for medical case management services to that client. In addition, medical case management can be provided only when the medical case manager is part of the clinical team. If a client's medical provider chooses not to enter into an agreement to allow the medical case manager to be part of the clinical care team, medical case management cannot be provided. In that situation the client can be provided with State-funded case management or Ryan White-funded non-medical case management.

Question 8

If a staff is fully funded through RW and is working with a RW-eligible client who then becomes uneligible, does staff have to cease working with client?

Response

Staff need not cease working with the client who is no longer Ryan White-eligible. However, the subcontractor may not bill Ryan White for the services provided to the ineligible client.

Question 9

The RFP states that emergency rooms are not considered core medical services and yet on Neighbor Islands, this may be only option at times. Will DOH ask for a waiver?

Response

Emergency room services are specifically disallowed as a fundable Ryan White service. The Department of Health will not be seeking a waiver from the core medical services requirement.

Question 10

RFP states funds cannot be used for insurance and yet it would be much cheaper to buy RW eligible clients dental insurance rather than pay per service. Is this an option?

Response

Insurance for dental care is not fundable under the Ryan White grant.

Question 11

Are all subcontractors required to provide all services given the language that providers must be flexible and provide RW-eligible clients RW-eligible services when requested?

Response

Unless Ryan White funds are no longer available, and to the best of the capability of its subcontractors, the contracted agency is required to provide all Ryan White fundable services listed in the RFP to any client who meets the Ryan White eligibility requirements. The contracted agency may use a different subcontractor to provide different services and each subcontractor may not necessarily provide all services.