

RFP MQD-2008-012
Question and Answers
Issued 2/5/08

QUEST Expanded Access (QExA) Enrollment Counselor for Medicaid Eligible Individuals who are Aged, Blind, or Disabled

Item #	RFP Section #	RFP Page #	Paragraph #	Question	Responses
1	N/A			Please provide the FY '09 appropriated amount for this administrative contract.	This is a competitive procurement for which we have described in great detail the scope of work. We are now requesting applicants to submit proposals that reflect the costs of providing the services described in the RFP. Therefore, the DHS is declining to respond to this question directly.
2	N/A			In order to clarify for all bidders, please provide a calendar of all events from contract effective date through the end of the transition period as well as a definition of each phase of the contract.	<p>Generally speaking, the Contractor shall conduct the outreach activities described in Section 40 during June and July and the enrollment activities described in Section 50 beginning in August and September. For specific deadlines for deliverables, please refer to Section 60.120.</p> <p>We acknowledge that the original RFP was ambiguous regarding the start date of certain components of the program. For this reason, Amendment #1 clarifies that the Call Center (described in Section 50.300) shall be open for general inquiries 120 days prior to the anticipated commencement of QExA health plan services. Further, the Contractor shall begin accepting enrollment requests 30 days later. Based on projected November 1st commencement of QExA health plan services, the Contractor would open the Call Center on or before July 1st and begin accepting enrollment requests on August 1st.</p>
3	N/A			What reporting capability will the contractor have out of the HPMMIS?	Any report from HPMMIS will be generated at the request of DHS. Thus, to the extent that the Contractor requires aggregate data or reports from HPMMIS, the Contractor shall direct such requests to DHS.

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4	N/A			In various sections of the RFP, the contractor is required to develop templates for the notices to be used for the QExA program. However, the RFP does not clarify who is responsible for generating and mailing each of these notices. Also, are the notices generated out of the HPMMIS or another system?	The notices will be generated from HPMMIS and mailed by the DHS' mailing vendor. The contractor shall be responsible for all of the other mailings (e.g., the Complaint Resolution Notice) as described in 50.620.4.
5	N/A			In regards to the translation of outreach materials, does the Department have a preferred vendor that it uses for the translation of materials for the ABD or the QUEST populations today? Our experience in other states indicates that use of a common vendor for all State program materials ensures a consistent message as well as a common understanding of the content because the preferred vendor is fully knowledgeable of the most common dialects, within a language, that are spoken in the state.	No.
6	General			The scope of services may be costly to the DHS. What is the approximate budget for this contract.	Please see response to item #1.
7	General			Will the DHS provide the contractor with criteria of those individuals/agencies who will be authorized to enroll in a QExA plan on behalf of the recipient?	Yes, DHS will provide a protocol. See Section 50.230.3, which states that, "If the enrollee or potential enrollee is unavailable, the Contractor shall confirm the identity of a <i>bona fide</i> authorized representative using The DHS protocol." For general reference, see the definition of "Authorized Representative" in Section 30.410 of the RFP.

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8	General			Will the recipient contact information provided to the contractor be current? Historically, information on DHS eligibility files are outdated or incorrect. Without accurate information, the contractor will not be able to comply with the timely enrollment.	DHS maintains the most current contact information that enrollees and potential enrollees have provided to the agency. Given that the aged, blind, or disabled (ABD) population is typically less mobile than the population in QUEST, QUEST-Ace, or QUEST-Net, the contact information on file should be relatively reliable. Additionally, the contact information for persons who become eligible after the commencement of QExA health plan services should be quite accurate because potential enrollees will have very recently reported this information to DHS. Yet, because of our experience regarding the integrity of the information, DHS included the outreach provisions of Section 40 and the enrollment counseling requirements described in Sections 50.150, 50.250, and 50.400. In this way, DHS hopes to ensure that all enrollees and potential enrollees receive information about the QExA program and transition.
9	30.210.2	33	1	Given retroactive enrollments, will the contractor be expected to do any reconciliation between the health plans and the enrollment system?	No.
10	30.210.1	33		During the open enrollment, does the contractor need to meet with all eligible individuals to see whether they wish to stay with their current plan or change?	No. Members will have the opportunity to change health plans during the annual Open Enrollment period, but will not be required to make a change. It is the members' choice to participate in the annual Open Enrollment period. Also, sections 50.220 and 50.400 require the Contractor to provide a face-to-face meeting when requested by the enrollee. These requirements apply beginning 90 days prior to the commencement of QExA health plan services and continue through and after annual Open Enrollment periods.

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11	30.210.4	33	Auto Assign	Fifteen days is a very short time especially for community-based programs. Will the MQD consider a longer time period?	No. To clarify, the 15-day period for plan selection (after which DHS will auto-assign a potential enrollee) applies only to individuals who become eligible after the commencement of QExA health plan services.
12	30.210.4	33-34	Auto Assign	For long term care facilities, will most of the residents be auto-assigned depending on the plan the facility signs up for? Who will inform the long term care facilities that they must become participating providers wotj [sic] the selected QExA plans and will this be done prior to the start of the Enrollment Period?	No. Members living in long-term care facilities will have the same opportunity to choose health plans as all other members. The QExA health plans will be required to obtain adequate networks which includes long-term care providers. This will be done prior to the start of the enrollment period.
13	30.210.4; 30.230.2	33-34; 38-39		If a client is a resident of the long term care facility and that facility participates only in the "capped" health plan, is the DHS planning to transfer that patient to a facility that participates in the "non-capped" plan? Suggest adding a fourth exception to the cap which states: "Enrollees who are residents of a long term care facility that participates in the capped plan only."	Thank you for the suggestion, but this change to the enrollment cap will not be made in the QExA health plan contract.

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14	30.210.7	37	1st paragraph after bullets	What is DHS' protocol for enrollees "alleging good cause to change health plans" and who will be the contact person? Additionally, how long will this process take?	The DHS protocol for adjudicating claims of "good cause" is outlined in Section 30.250 of this RFP. DHS will delegate the responsibility for these determinations to MQD staff members. The request to change health plan for good cause should be referred to MQD's customer service branch. As Section 50.250.3 notes, MQD must complete these determinations by the first day of the second month following the month in which the enrollee files the request; any failure by DHS to do so will result in automatic approval of the enrollee's request.
15	30.210.7	36	3rd paragraph	Who at DHS will make the "good cause" decision?	Please see response to item #14.
16	30.250.2	40		Will DHS' system flag the reasons for disenrollment stated in this section and will the contractor have access to this information?	We will take this question under advisement.
17	30.310	42	7th bullet	What is the process for "exemption determination"?	A small number of subpopulations within the larger ABD population are ineligible for QExA enrollment. The State will make these determinations.
18	30.310	42	10th bullet	How will DHS facilitate the contractor's outreach efforts? Will they attend all meetings?	DHS will supplement the Contractor's contact information of key stakeholders and will work to facilitate introductions. DHS will also attend some meetings. For this reason and per the requirements of Section 40 (e.g., in Section 40.210.4), the Contractor shall keep DHS apprised of its meetings and events.

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19	30.360.1; 30.360.3	46		Is the web enrollment system the same as the web interface that will be used by the contractor's staff to enter enrollments?	Yes. The Contractor will use DHS' web enrollment application.
20	30.360.1; 30.360.3	46		Please describe the web interface or similar system (e.g., data elements, number of fields, screen prototype, hours of availability, etc.) to be provided by DHS for the contractor to access eligibility and enrollment data and to enter plan selections and changes.	Please see Section 30.360.3 and the response to item #19. There are 61 data elements to include member's name, address, telephone number, primary language, nursing facility (if applicable), health plan choice, and PCP, to name a few.
21	30.360.1; 30.360.3	46		What hardware/software will need to be provided by the contractor?	As described in Section 30.360, DHS will provide to the Contractor a Web-accessible system for (a) creating and processing enrollment and plan change transactions and (b) accessing relevant and available data on QExA potential enrollees and enrollees. The Contractor would be responsible for all information and telecommunications technology required to fulfill its responsibilities under the terms of this RFP.
22	30.360.3	48	1	What is the date the web enrollment system will be available for the contact center to start entering enrollments?	August 1, 2008.
23	30.410; 30.210.5; Amend #1	62, 35	Transition Period	For planning purposes, what date has DHS identified as 90 days prior to the commencement of QExA health plan services?	Please see response to item #2.

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24	40.110.2	64		Since the implementation dates in Section 60 have been established and all outreach and educational materials must be approved by DHS prior to being printed, posed on the Web site or disseminated, what is the turnaround time for DHS approval? Can the contractor develop a timeline with deadlines to which both DHS and the contractor would be accountable?	DHS will generally provide a response within 10-14 calendar days of receiving documents to review. Other specific documents (e.g., PSAs, DVDs, and certain outreach mailings) may require more time. DHS looks forward to establishing a review timetable that is acceptable to both the State and the Contractor.
25	40.110.6	65		For the 37,251 eligibles identified for participation in the QExA program, will DHS please provide a breakdown of eligibles (# of eligibles) by each language spoken.	No. DHS does not have an accurate breakdown of languages spoken by members.
26	40.110.6	65		Will the web enrollment system have a field for tracking a member's preferred language? This field would be beneficial for mailing purposes, ensures the member receives information that is understandable, and eliminates unnecessary expenses associated with duplicate mailings.	Yes.
27	40.110.5	65		How have other contractors for other programs submitted documentation on the methodology for measuring reading levels on outreach materials?	Contractors have used a variety of methods. Because Microsoft Word can automatically calculate the Flesch-Kincaid Grade Level score, many Contractors have relied on this approach. However, DHS will accept any of the methods described in Section 40.110.5.

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28	40.110.6	65		Since outreach materials must be distributed in English, Ilocano, Tagalog, Mandarin Chinese and Korean or have a block referring to the call center in these specific languages, is the contractor responsible for staffing its call center with those who speak these languages or can this be subcontracted?	<p>To clarify: Section 40.110.6 requires that the Contractor translate and reproduce all printed materials in English, Tagalog, Mandarin Chinese and Korean. In addition, it requires that (to the maximum extent possible) all materials include a language block. Thus, it is a "both-and" rather than an "either-or" requirement.</p> <p>The Contractor may staff its call center with employees who speak languages other than English or subcontract for language services, particularly for those languages with limited prevalence within the requirements of Section 50.220.4. If an applicant does not plan to employ bi-lingual or poly-lingual enrollment counselors, then the applicant shall explain in its responses to Sections 80.330 and 80.340 how it will ensure that its complete reliance on a subcontracted interpretation services will not unreasonably delay an enrollee's or potential enrollee's ability to obtain enrollment counseling (or otherwise create a barrier to services among persons who do not speak English).</p>
29	40.110.8	66		What percentage of the ABD population is blind and/or requires materials in an alternative format (i.e., large font, Braille, audiotapes)?	DHS is unable to provide a specific estimate at this time.
30	40.120	66-70		How many of each item listed in section 40.120 should the contractor plan to develop and distribute to potential enrollees as well as community organizations during the Transition Phase?	For purposes of its response, applicants should assume that they will need to print a total of 40,000 brochures. This estimate does not include the 30,000 brochures for the Pharmacy Refill Initiative described in Section 40.130.

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31	40.120	66-70		Please confirm that approximately 100 ABD eligibles fall in/out of Medicaid on a monthly basis as stated in the Orientation on January 23rd.	The number of ABD eligibles that fall in/out of Medicaid is approximately 100 to 200 persons per month.
32	40.120	66-70		Based on the RFP's statement that DHS plans to contract with a vendor for the mailing of QExA materials, does DHS have required specifications related to outreach materials (e.g., type, weight, and size of paper, colors that can/cannot be used, font, etc.)? We want to make sure that we plan and budget for materials that are within the Department's fulfillment and postage budget.	No, DHS does not wish to expand upon the required specifications related to outreach materials beyond the requirements described in section 40.110.4.
33	40.150	70		The contractor is required to develop PSAs "in anticipation that radio stations and other media will broadcast them from July 2008 to 90 days following the commencement of QExA health plan services." PSAs by their nature are run on a space-available basis. Will DHS hold the contractor accountable for ensuring the PSAs run during this time period?	DHS expects that Contractor to make a reasonable, good faith effort to ensure that the PSAs are broadcast during this period.

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34	40.210.2	72		Will DHS apprise the contractor of what the distinguishing features between the health plans are in a timely manner? Will lthe [sic] contractor be apprised of why this program is better than the current program, and what benefits will be covered, such as medications, supplies, durable medical equipment, etc.?	DHS will provide the Contractor (in a timely fashion) with the materials necessary for it to distinguish the plans in an accurate manner. The State expects the Contractor to be prepared to develop these materials in consultation with DHS. The DHS will educate the Contractor regarding why the QExA program was developed and the benefits of the QExA program over the current Fee-For-Service (FFS) system. In addition, DHS expects the Contractor to remain an objective, dispassionate source of information about QExA health plans for enrollees and potential enrollees.
35	40.220	74		For planning purposes, please define "sufficient quantities of outreach materials". How many of each item should the contractor plan to distribute during the Transition Phase?	Refer to item #30.
36	40.220.3	75	1	Is the contractor responsible for the print costs of all outreach materials or is this a pass through?	Consistent with Sections 40.110.1 and 50.140, the Contractor shall be responsible for these costs.
37	Section 50	77		This project is extremely intensive with a short time line from contact award to first deliverable. Will the DHS be open to amending the timeline?	No. This aggressive timeframe is necessary in order to ensure that appropriate outreach and choice counseling occurs prior to the commencement of QExA health plan services.
38	50.130.1	79	1st paragraph	How will the contractor be apprised of who the "potential enrollees" are?	DHS will provide these data via the web-based system described in Section 30.360.3 and reports.
39	50.140.4	82		Please define as referenced in this section what constitutes bulk materials.	For the purposes of this subsection, "bulk materials" include all materials (including printed information, envelopes, special stationary, etc.) that the Contractor is responsible for delivering to the DHS mailing vendor.

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40	50.140.3	82	2	In RFP section 50.140.3 it is stated that "The State shall provide letterhead stationary and envelopes for the mailing of official notices." Can the State please specify which mailings are considered "official notices"? For instance, is the Welcome Letter an official notice?	For the purposes of this subsection, "official notices" refer to the types of correspondence listed in Section 50.130 as well as the Welcome Letter described in Section 50.120.3.
41	50.150.2	83		Three (3) business days may be insufficient.	Thank you for this observation. However, DHS declines to amend this requirement.
42	50.310.4	94		Is the contractor allowed to be creative in responding to the real-time access to telephone translation services as well as interpreter services?	Yes, the applicant may be creative in its response as long as it adheres to the relevant RFP requirements and State and Federal law.
43	50.320.10	96-97	Bulleted List	It is our understanding that the official record of enrollment is in the enrollment system therefore this is a duplicative requirement within the call tracking system and will unnecessarily increase contractor costs. Is this correct?	For all transactions (including those executed orally with a Call Center-based enrollment counselor), the official record of enrollment is the Enrollment Application Form, which is a paper form and is described in Section 50.120.4, or the Plan Selection Record for both phone-based or community-based enrollment counseling sessions, which is described in Section 50.230.10. In addition, DHS's goal is to have the Contractor generate call volume reports; therefore, the Contractor needs to capture the information about enrollees or potential enrollees in order to produce reports as described in Section 50.320.10. See #1 in amendment #2.
44	50.430	99	In Home Meetings	Please clarify the expected number and circumstances for in home meetings with clients.	DHS expects the applicant to base its response on its experience and its projection of the likely volume of face-to-face enrollment counseling among members in in the QExA program.

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45	50.420.2	99		The RFP states that the contractor is to "provide adequate office space in MQD and BESSD/First-to-Work Centers...for face-to-face enrollment counseling". Are these offices the preferred sites for enrollment counseling on all islands? Will there be a charge to the contractor for use of this space that the contractor should include? What infrastructure is in place for the contractor to use in these places (e.g., desk, chair, phone, connectivity, etc.)	To clarify, Section 30.310 of the RFP states that DHS will "[p]rovide adequate office space in MQD and BESSD/First-to-Work Centers to the Contractor for face-to-face enrollment counseling". In addition, Section 50.420.3 requires the Contractor to provide face-to-face counseling at other types of community access points throughout the State. DHS has no preference as to the venue at which enrollees and potential enrollees choose for an enrollment counseling session. DHS is simply offering enrollees and potential enrollees the option of going to a MQD and BESSD/First-to-Work centers because these offices may be convenient and familiar venues. DHS will not charge the Contractor for the use of these facilities. DHS plans to provide the Contractor with a desk and chair; the Contractor would need to provide a telephone, computer (e.g., a laptop computer), and connectivity.
46	50.440	100		Please clarify if the contractor is required to conduct facility sweeps during the transition phase only or throughout the duration of the contract.	DHS will leave this decision up to the Contractor. The Contractor may find that certain facilities have sufficient volume to justify facility sweeps throughout the life of the contract, particularly during Open Enrollments. However, the Contractor may also decide to conduct face-to-face meetings with individual residents of such facilities as requested.
47	50.530.4	105		Please specify the date in which the Outbound Contact component of the Interview Guide is due to DHS as RFP section 60.120 is silent to this date.	This component is actually part of the "Policies and Procedures Manual" as described in Section 50.530.3. As such, the Contractor shall submit this by the date specified for the Policies and Procedures Manual in Section 60.120.
48	50.710.5	109		When will the HIPAA standards be finalized?	Section 50.710.5 is intended to address any development in data and document management standards that results from HIPAA-related statutory or regulatory activity.

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49	50.710.7	109	1	Routine system maintenance. The requirement states "The Contractor shall absorb the cost of routine maintenance, inclusive of defect correction, System changes required to effect changes in State and federal statute and regulations, and production control activities, of all Systems within its Span of Control." Can DHS clarify that "System changes" refers to only routine changes? Changes in State and federal statutes often require significant system and operational changes.	DHS will address the costs associated with changes in State and Federal statute and/or regulation that significantly impact the design of the QExA program (and, as a result, the design and operation of the QECC) through the contract amendment process. DHS would expect that the Contractor would factor other, less substantive changes into its "cost of doing business" (e.g., the cost of complying with Sarbanes-Oxley provisions and HIPAA provisions).
50	50.710.9	109	1	Connectivity to State Network and Systems. Could DHS provide more detail on whether they will require this connectivity and technical specifications as to what will be required since the contractor is to bear the full cost? What are these systems used for?	This requirement refers to the communications infrastructure required to connect to State systems, as needed. DHS does not expect this infrastructure to be over and above or different from the infrastructure that the Contractor would employ to access its own systems. As such, DHS expects these costs to be built into the applicant's proposal.
51	50.710.10	110	"open systems"	If this is a Web-based system, wouldn't the designated DHS staff already have such access?	The open systems requirement is specific to Contractor systems, not to DHS systems.
52	50.730.2	111		For planning purposes, can the Department provide an estimate of the number of ad hoc reports to be requested each year during the contract?	DHS is unable to provide a specific estimate at this time.

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53	60.220.3; 60.220.3	123 & 125		Reports due on the 5th of each month. With the volume of items to report, calculate for daily calls, counseling sessions, etc. would DHS consider amending the due date to the 15th of the month?	DHS has revised Section 60.220.3 such that the reports described therein for the preceding month are due on the seventh (7th) calendar day of the current month. DHS declines to extend the timeframe beyond seven (7) days for two reasons. First, DHS wants to monitor the Call Center performance closely and review these reports in as close to "real time" as possible. Second, DHS expects the Contractor to largely if not completely automate the generation of the reports described in Section 60.220.3; for this reason, the Contractor should not require a substantial period of time to produce these reports and submit them to DHS. See #2 in amendment #2.
54	60.320	126		The measurement methodology in this section appears cumbersome and does not seem meaningful to measure compliance and caller satisfaction.	DHS acknowledges that the RFP requires a degree of specificity in the measurement definitions in these reports. However, we believe that this approach reflects the lessons learned from Call Center and enrollment counselor program implementations in other jurisdictions.
55	71.200	133	Liquidated Damages	Please clarify that the state does not impose both liquidated damages and other sanctions or penalties for the same incident.	While it is possible that DHS might impose more than one type of penalty for a particularly egregious violation or breach, such action would be highly unusual.

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56	70.200	133	2	The RFP states, "The State of Hawaii operates on a fiscal year basis, which runs from July 1st to June 30th of each year. Funds are available for only the first fiscal period of the contract ending June 30th in the first year of the initial term. The contractual obligation of both parties in each fiscal period succeeding the first fiscal period is subject to the appropriation and availability of funds to the DHS." Please define what is meant by "first fiscal period of the contract ending June 30th in the first year of the initial term". Also, is it a safe assumption that the funding is available to pay the contractor for services rendered in the current FY '08 as well as FY '09?	This provision is part of the State of Hawaii's general terms and conditions. DHS fully understands the scope of and expects to pay for the contract obligations that it assumes.
57	70.300	134	Contract Changes	Where in the proposal and in what format (e.g. attachment to transmittal letter) does the state want the proposer to provide its suggested contract changes?	The State will consider contract changes at its discretion after it selects a Contractor. Applicants should not provide any such information with its Technical or Business Proposals.
58	70.600	136		What is the turnaround time for DHS to review and render a decision on subcontract agreements?	DHS will generally provide a response within 10-14 calendar days of receiving documents to review.

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59	70.100	139	1, last sentence	How will the contractor be paid during Pre-Implementation until Steady State and ongoing? How will the contractor be paid Steady State? Is there a standard invoice?	Pre-Implementation will be paid in equal monthly installments. The first installment would be paid after DHS has reviewed certain deliverable (i.e., the Implementation Plan). The second installment would be paid after the Contractor passes readiness. The final installment would be paid after opening call center 120 days prior to QExA implementation. Steady State and ongoing would be paid monthly through DHS' invoice system. There is no standard invoice but contractor must submit an original invoice.
60	70.900	149		This section goes into great detail on the DHS terminating the contract. Please provide a reference for the contractor terminating the contract.	This provision is part of the State of Hawaii's general terms and conditions. DHS fully understands the scope of and expects to pay for the contract obligations that it assumes.
61	71.400	146	Performance Bond	Will the state accept an annually renewable performance bond as long as it is continuously renewed?	Yes.