ID	Questions	Answer
1.	Per the instructions of the RTM, for each SLA respondents are expected to "provide a recommended Liquidated Damages amount per measure for noncompliance." Will PRMP be evaluating and scoring the respondent's proposed liquidated damages? How does PRMP intend to approach liquidated damages if the amounts listed in the RFP vary from the respondents' recommended amounts?	PRMP will not be scoring the liquidated damages. The recommended amounts listed by the respondents in the RFP will be reviewed by PRMP. PRMP will be deciding the amounts for the contract.
2.	Should the "Puerto Rico Medicare Enterprise System" be "Puerto Rico Medicaid Enterprise System?"	Yes, it should be Puerto Rico Medicaid Enterprise System.
3.	Does PRMP wish to have a vendor who offers a team to establish and run their Medicaid Enterprise-wide Program Management Office or who supports the existing PRMP PgMO team as PRMP runs the PgMO?	Supports the existing PRMP PgMO team as PRMP runs the PgMO.
4.	Section 4.1 lists "Security Subject Matter Expertise" and "Security and Privacy Assessments" as activities in the Scope of the RFP. Section 5.2.4 mentions "MMIS Phase III Security Audits" within the MES Streamline Modular Certification Support Service Area. Is the RFP intention to procure Security Subject Matter Expertise and Security and Privacy Assessments as standalone Service Areas in this RFP or procure these services in this RFP only within the context of MMIS Phase III?	PRMP procures these services in this RFP across the whole Medicaid Enterprise System.
5.	Can PRMP please share who submitted a Notice of Intent to Respond?	No.
6.	The expected proposal format template makes no reference to Attachment H. Should vendors populate the RTM and include that with their proposal submission? If so, can PRMP please specify where they would like that to be included? Would PRMP like the vendor to print Attachment H to a PDF and include it in the Technical proposal submission, or would PRMP prefer a separate submission as an Excel file?	Vendor should print attachment H to a PDF and include it with the Technical Proposal.
7.	In Section 2.3, the RFP Schedule of Events currently reflects a contract execution date of December 28, 2023, and Section 4.2 indicates "PRMP targets a contract start date for the EOMC Vendor in December 2023." For scoping purposes, should vendors assume a contract start date of December 28, 2023?	Yes, vendors assume a contract start date of December 28, 2023.
8.	In Section 2.3, the RFP Schedule of Events currently reflects a contract execution date of December 28, 2023, and Section 4.2 indicates "PRMP targets a contract start date for the EOMC Vendor in December 2023." Should respondents expect there to be an overlap in EOMC services with the existing vendor subsequent to contract award?	The overlap will be part of the transition period in the event of a new vendor.
9.	Section 5.2.4. MES Streamline Modular Certification (SMC) Support Service Area (MES Outcomes-Based Certification (OBC) Support) states, "The EOMC Vendor will support PRMP with achieving and maintaining compliance with federal guidance and requirements for MES implementations, operations, certifications, and federal audits through MES SMC Support, PRMMIS, MEDITI3G, and MMIS Phase III Security Audits and PERM Compliance and Implementation Support." Should the EOMC vendor submit scope and costs associated with performing security assessment audits for PRMP's MES as a part of their response to Section 5.2.4?	Yes.

10.	Section 5.2.4. MES Streamline Modular Certification (SMC) Support Service Area (MES Outcomes-Based Certification (OBC) Support) states, "The EOMC Vendor will support PRMP with achieving and maintaining compliance with federal guidance and requirements for MES implementations, operations, certifications, and federal audits through MES SMC Support, PRMMIS, MEDITI3G, and MMIS Phase III Security Audits and PERM Compliance and Implementation Support." Does PRMP wish responding vendors to submit scope and costs for annual security assessment audits for their MES?	Yes.
11.	Section 5.2.6 IMES Support Service Area solely references the need for providing new tools and program management plans to improve PgMO capabilities. In Section 3, PRMP describes PRMP's desire to have an "Enterprise-wide Program Management Office that manages PRMES projects." Does PRMP wish to have PgMO support that is consistent with the services requested in Section 3 and Section 5.2.6?	Yes.
12.	There does not seem to be a location in Attachment A: Cost Proposal – Cost Workbook for respondents to include a narrative supporting the cost proposal. Would PRMP be ok with Vendors adding a section in the proposal response or in the cost workbook that allows for vendors to provide a short narrative (absent of any financial detail) supporting the approach taken with the cost proposal? This could help maximize transparency into a vendor's cost and the proposal narrative.	Yes. See amendment: Attachment A – Cost Proposal_Amendement_1
13.	It does not appear as though additional rows can be added to Sheet 3. Labor Rate Card of Attachment A. Can PRMP please update this to allow for rows to be added?	Yes. See amendment: Attachment A – Cost Proposal_Amendement_1
14.	Attachment A: Cost Proposal – Cost Workbook currently has an average hourly rate and total cost that is inclusive of "Other EOMC Support Area" costs. The unknown scope of the "Other EOMC Support Area" and the costs associated with it may limit the competitiveness of the cost proposal response – particularly for those with awareness of PRMP needs. Will PRMP consider taking one or more of the following actions? The following are typical approaches SMAs take when requesting "additional support:" 1. Remove the "Other EOMC Support" section as a scorable element of the cost proposal. 2. Consider costs associated with "Other EOMC Support" as a part of the contract negotiation phase. It is our preference that "Other EOMC Support" be a non-scoreable element of the cost proposal driven by the rate card and that those services be something discussed as a part of the contract negotiations phase of this opportunity.	The Cost Proposal was updated to a maximum quantity of 6,500 support hours.
15.	Should a signature line be added after the "date" line?	Yes.
16.	Does PRMP want the "Percentage of Revenue from State and Local Government" to be from the last fiscal year?	Yes.
17.	Mandatory qualification #1 references having at least (3) years of experience in establishing and maintaining an office of similar size, scope, and complexity as described in this RFP. Is this sentence intended to ask vendors to	Services of similar scope.

	confirm that they have at least three (3) years of experience in performing services of similar size, scope, and complexity as described in this RFP? Or was it PRMP's intention to make this specific to an "office?" Could PRMP please update the RFP to clarify this further?	
18.	Attachment D, Section 3.2 asks vendors to provide two (2) references for each proposed key staff. The size of the RFP and the length of time for a vendor response may inhibit proposing vendors from being able to secure two references for each key staff member. Would PRMP be open to receiving one reference for each member of the key staff team? Although asking for references for key staff is typical of SMAs procurement, given the timeframe for response, this will likely be a challenge.	Minimum of one (1) reference for each proposed key staff.

See amendment: 2023-PRMP-MES-EOMC-004_Amendment_1 |
| 19. | Should a signature line be added after the "date" line? | Yes. |
| 20. | Mandatory Requirement 11 states: "The vendor must perform all work associated with this contract within the continental United States (U.S.) or U.S. Territories."
This mandatory requirement is typical of system vendor contracts. Given the services outlined in this RFP and Puerto Rico's location, would PRMP be willing to consider exceptions to this requirement as a part of contract negotiations? Allowing an exception to this has allowed for other SMA clients to greatly benefit from resources that have extensive Medicaid expertise. | No, this is a CMS requirement. |
| 21. | Mandatory requirement #14(c) states that we must provide PRMP with a list of all deliverables and services completed within an invoice period as well as evidence that PRMP has accepted and approved the work.
Historically, PRMP acceptance and approval of deliverables and services occurs subsequent to the invoicing period in which the work occurred. Would PRMP consider the following revision to this Mandatory Requirement or some other alternative?
"Provide PRMP with a list of all deliverables and services completed within an invoice period." | Vendors must provide deliverables in 60 days divided into stages and billed by stages. Estimate what work will be done in each stage. |
| 22. | PRMP states the following in Attachment 9.6: "Describe the overall approach and plan for assessing PRMP, programs and processes, including an illustration of the timeline with key activities, deliverables, and milestones that includes the anticipated resource allocations by labor category that will support the proposed plan."
Can PRMP clarify the scope of this question? Is PRMP looking for responding vendors to describe the approach and plan for how responding vendors will assess PRMP PgMO processes in support of the IMES support area? | PRMP is looking for the vendor to give support, resources, and time to the PgMO. |
| 23. | Would it be acceptable to convert the Word Document into a PDF and include an electronic signature on this and other attachments requiring a signature? The signed PDF would then be printed and submitted according to the RFP instructions. | Yes. |
| 24. | It is atypical for a contract of this scope and size to require a performance bond, and typically obtaining these can be quite costly for the Vendor. Can PRMP please clarify as a part of the Q&A whether or not a performance bond will be required, and if so, how much is required? | A performance bond will not be required for this RFP. |

25.	Attachment H: RTM contains a sheet that details SLAs and a column that asks for proposing vendors to propose liquidated damages for non-compliance. There are liquidated damages noted in Appendix 1 of the RFP. Should responding vendors do as instructed within Appendix 1 or Attachment H?	Vendors should do as instructed within Appendix 1 and Attachment H. PRMP will not be scoring the liquidated damages. The recommended amounts listed by the respondents in the RFP will be reviewed by PRMP. PRMP will be deciding the amounts for the contract.
26.	Attachment H: Requirement #5 states, "The EOMC vendor will comply with the timelines that PRMP will establish." Can PRMP clarify the intent of this requirement?	The intent of this requirement is to state that the vendor will comply with the SLAs and timelines established by PRMP.
27.	The contract remedies/liquidated damages associated with SLA 1, 2, 7, 8, and 9 reference an "acceptable" deliverable or PRMP's "acceptance" of a deliverable. Vendors can respond for timeliness of the deliverables, but acceptance by PRMP is beyond the vendor's control, pertaining to the SLA. Would PRMP consider removing the references to "acceptable" and "acceptance" and instead focus on the timely submission of deliverables?	SLAs will cover Timeliness and Quality of the deliverables.
28.	The SLA Subject Area indicates "Monthly Status Reports, while the Contract Remedies references 'weekly report'." Can PRMP provide clarity as to if status reports are to be monthly or weekly?	Monthly.
29.	Please define the relationships and lines of demarcation between the EOMC vendor, the Medicaid Enterprise System (MES) Program Management Office (PgMO), and the individual MES project management offices (PMOs). Specifically, please clarify what roles and responsibilities within the operation of the PRMP, including but not limited to MES projects and PRMP programmatic initiatives, fall within each entity and how the PRMP anticipates these entities will interact in support of one another and the projects/initiatives. While there is a general statement in the RFP to the effect of "...all work and work products completed by the EOMC Vendor will require significant collaboration with PRMP and others.", for resourcing and cost proposal purposes it is important for us to understand the breadth and depth of EOMC vendor roles and responsibilities vis-à-vis other parties under contract to the PRMP.	The new vendor must work hand and hand with the PgMO. They are expected to collaborate with the Medicaid and PgMO teams to address the areas of the RFP. The approach is to collaborate with everyone based on the requirements.
30.	Regarding the Procurement Support service area, is the actual development of procurement documents (requests for proposal, requests for quote, requests for information, etc.) in scope for the EOMC vendor?	Yes.
31.	Regarding the Procurement Support service area, is the actual facilitation of procurements in scope for the EOMC vendor? Facilitation of procurements can include the following activities: developing the procurement work plan and schedule, organizing and managing pre-proposal conferences, collecting and supporting the responses to prospective bidder questions, developing proposal evaluation methodologies and tools, training proposal evaluation team members on evaluation methodologies and tools, facilitating proposal evaluation team meetings, documenting proposal evaluation team proceedings, and helping PRMP adjudicate any protests or disputes following contract awards.	PRMP will provide the time and material. The rest will be requested by PRMP on a case-by-case basis.
32.	Regarding the Procurement Support service area, if the PRMP expects the EOMC vendor to develop procurement documents and/or facilitate procurements, can the PRMP provide a list/profile of the types and numbers of	The information available to the public is on our website: https://medicaid.pr.gov/Home/AvisosPublicos/

	procurements the PRMP already has in its pipeline for the next two years? This is critical information for resourcing and cost proposal development purposes.	
33.	Regarding the Advance Planning Documents (APD) Support service area, can the PRMP provide an inventory of currently active APDs of any type (Planning, Implementation, Operations)? This is critical information for resourcing and cost proposal development purposes.	PRMP prepares four (4) APDs per year.
34.	Regarding the Advance Planning Documents (APD) Support service area, can the PRMP elaborate on specific projects/initiatives for which the PRMP anticipates submitting APDs over the next two years?	No.
35.	Regarding the MITA SS-A Support service area, can the PRMP share the most recent MITA SS-A report? The report will help us with scoping and resourcing this service area plus it will help us understand PRMP's operations improvements and technology modernization goals.	No.

36.	Regarding the Certification service area - RFP section 5.2.4, can the PRMP clarify its expectations for the EOMC vendor; specifically, is the EOMC vendor expected to perform any or all of the following:
	    a. Direct certification-specific activities within specific projects,
	    b. Develop artifacts required by CMS for certification of specific systems/modules,
	    c. Review artifacts required by CMS for certification of specific systems/modules,
	    d. Maintain a certification requirement and submission status log for all pertinent projects,
	    e. Conduct functionality audits of specific systems/modules (i.e., does the system/module meet functionality requirements), and/or
	    f. Conduct security audits of specific systems/modules
		The EOMC vendor is expected to perform all of the following:
		    a. Direct certification-specific activities within specific projects,
		    b. Develop artifacts required by CMS for certification of specific systems/modules,
		    c. Review artifacts required by CMS for certification of specific systems/modules.
		
		D, E, F do not apply.

37.	Regarding the Certification service area - RFP section 5.2.4, there is a discussion specific to electronic visit verification (EVV) systems in the section but no mention of a specific EVV system project in the RFP. Is there an EVV system project in the PRMP project portfolio or pipeline?	N/A - EVV refers to the first CMS project in this methodology. PRMP does not have an EVV system project in the portfolio or pipeline.
38.	Regarding the Payment Error Rate Measure (PERM) Compliance and Implementation Support service area, does the PRMP expect the EOMC vendor to perform specific PERM functions - such as the retrieval and delivery of data as requested by PERM statistical contractors - or only to oversee and provide advice on those functions?	Yes, to retrieve and deliver data as requested by PERM statistical contractors.
39.	Regarding the Payment Error Rate Measure (PERM) Compliance and Implementation Support service area, does the PRMP expect the EOMC vendor to interact directly with CMS or its PERM contractors (statistical, review, eligibility review)?	Yes.
40.	Regarding the Integrated MES Program Management (IMES) Support service area, does the PRMP anticipate the EOMC vendor to assess the current state of MES program management processes and systems (including the maturity of those processes and systems against "best practices") in addition to proposing changes?	Yes.

41.	Regarding the Spenddown Implementation Support service area, can the PRMP provide more details on the history and current status of this policy initiative and, if applicable, the date by which it intends to complete implementation of the initiative?	This will be discussed with the winning vendor.
42.	Regarding the State Plan Amendments (SPA) Support service area, can the PRMP provide an inventory of SPAs currently under CMS review as well as a list of SPAs that it already expects to submit over the next two years? The latter may include SPAs that are already being developed. This information will factor into our resourcing and cost proposal development.	No.
43.	Regarding the State Plan Amendments (SPA) Support service area, has CMS indicated to the PRMP whether there are specific elements of the State Plans that need to be added, amended or otherwise addressed? If the answer to this question is YES, can the PRMP elaborate on those elements and indicate whether CMS has provided the PRMP with a specific date by which these gaps in the State Plans need to be resolved?	Not at this moment.
44.	Regarding the State Plan Amendments (SPA) Support service area, does the PRMP anticipate submitting SPAs over the next two years that specifically address provider reimbursement and the associated reimbursement methodologies?	SPAs will be requested as needed.
45.	Regarding the Money Follows the Person (MFP) Implementation Planning Support service area, can the PRMP provide more details on the current status of this initiative - particularly, the status of the evaluation that was initiated after receipt of the MFP planning grant?	PRMP began its planning phase by gathering data from stakeholders and creating research instruments (surveys and focus groups) that will give us a better understanding of the target population's need in terms of home and community-based services HCBS. Currently, PRMP is drafting and testing the research instruments as well as the MOU to collaborate with our key stakeholders which will facilitate the participants of the study. Once the data is gathered in a LTSS Needs Assessment, PRMP will begin to draft an operational protocol (OP).
46.	Regarding the Money Follows the Person (MFP) Implementation Planning Support service area, is there a specific date by which the Commonwealth intends to complete implementation of this initiative?	The implementation phase of the project will begin after September 2026 once the OP is approved and additional funding is requested for this phase of the project.
47.	Regarding the Other EOMC Support service area, how does the PRMP anticipate managing "other supports"? As an example, would the PRMP employ a change request/change order process through which the EOMC vendor would provide a work plan, resource plan and cost proposal for a particular project which PRMP would then approve?	Stick to the hour limit – no change in hours. Subproject funds.
48.	Are there page limitations that apply to the proposal, either to specific sections of the proposal or to the proposal as a whole?	See Attachment D for limits.
49.	To respond to the reference requirements in Table 8 and Table 11, can a bidder include experience from projects and proposed team members if the experience is from work performed before the team member joined the bidder's organization?	Yes.

50.	Does the PRMP have specific requirements for on-site presence? We understand that PRMP will not reimburse for travel expenses, but an on-site presence expectation will be helpful in developing a resource plan and cost proposal.	Yes, based on the needs.
51.	The RFP does not allude to the Productivity and Operations Platform, the Medicaid Outreach Campaign, the HIT Scan or the Printing and Mailing Services projects which are currently in progress (in the last twelve months, RFPs were published for all of these projects). Can PRMP indicate what role, if any, the EOMC vendor will have in those projects? Additionally, are there any other initiatives not listed in the RFP as published on September 11, 2023 that EOMC vendor bidders should incorporate into their proposals?	Concentrate on programs asked in the RFP, not those stated here.
52.	In the Requirement Traceability Matrix attachment, items 22 and 23 (which seem to be duplicates) suggest that the EOMC vendor cannot hold other contracts with the PRMP. Can the PRMP confirm our interpretation of this requirement or otherwise clarify the requirement?	The EOMC vendor cannot hold other contracts with the PRMP that may have a conflict of interest.
53.	It appears an award is yet to be made for RFP 2023-PRMP-MES-CPEC-001. Please clarify the responsibilities of the EOMC vendor with respect to the Centralized Provider Enrollment and Credentialing project.	The EOMC vendor will provide expectation, guidance and oversee all areas of the Medicaid Enterprise System.
54.	Does the PRMP expect the EOMC vendor to set up and maintain a document management and collaboration system for the purpose of sharing and storing documents and other information, or does it expect the EOMC vendor to utilize a document management and collaboration system that is already in use by the PRMP?	The EOMC vendor does not create the system.
55.	2.3. RFP Schedule of Events With the extensive nature of the forms and the breadth of services requested in the solicitation that vendors must respond to, will The Puerto Rico Department of Health (PRDoH) Puerto Rico Medicaid Program (PRMP) consider extending the due date to October 25, 2023?	No.
56.	*"The Vendor will be required to work with PRDoH and CMS to ensure compliance with CMS standards."*, pg. 6 What CMS standards are they referring to?	Please see the CMS website: https://www.cms.gov/
57.	*"All the Vendor Key staff must have at least five (5) years of experience working with Medicaid and CMS."* Pg 6 Are vendors able to supplement the Team with some staff with less experience with Medicaid/CMS as long as the majority of our Team has 5 years or more?	Yes, nevertheless Leads must have at least 5 years of experience.
58.	*"PRMP expects the EOMC vendor to execute assignments in a manner that is consistent with best practice processes defined by the PgMO."*, section 5.1 Can you please clarify? *"The EOMC Vendor must establish and run a Medicaid Enterprise-wide Program Management Office"*. If 4.1 requires this Vendor to stand up a Program Management Office, and be responsible for success and standards, how can they adhere to the EPgMO since they will be it.	This office is already established. Vendors must work in collaboration with PMO and supply areas that PgMO doesn't have the resources.

59.	*"PRMP expects the EOMC vendor to execute assignments in a manner that is consistent with best practice processes defined by the PgMO.", section 5.1* Can you please provide a copy of ALL EPgMO Standards?	No.
60.	*"The EOMC Vendor will support the procurement office, when a procurement need is identified…",* section 5.2.1 them How many procurements in a year do they anticipate?	Cannot be anticipated, it depends on needs identified.
61.	*"The EOMC Vendor will work with PRDoH and PRMP to support the facilitation, development, monitoring and tracking of APDs and APD related activities",* section 5.2.2 How many APD's is PRDoH planning to work on in a year?	PRMP prepares four (4) APDs per year.
62.	*"The EOMC Vendor will support PRMP with achieving and maintaining compliance with federal guidance and requirements for MES implementations, operations, certifications, and federal audits through MES SMC Support, PRMMIS, MEDITI3G, and MMIS Phase III Security Audits and PERM Compliance and Implementation Support",* section 5.2.4 Does PRDoH expect the Winning Vendor to perform the Phase III Security Audits? While it says "support", that does that also include doing them?	It is expected that the winning vendor will do them but does not apply to Phase III.
63.	*"The EOMC vendor will support PRMP, by providing new tools and Program Management practice plans to improve PgMO capabilities…",* section 5.2.6 Are you expecting the Winning Vendor to provide tools for their EPgMO Vendor to use, or for us to use?	Provide tools.
64.	*"…and comparing the Medicaid State Plan with the PRMP's…",* section 5.2.8 Can you please provide a copy of the PRMSPs?	Please see the Department of Health website: https://www.salud.pr.gov/
65.	*"The EOMC Vendor will support by filling in gaps of expertise and provide recommendations for the LTSS Needs Assessment and Implementation Planning activities as needed/requested…",* section5.2.9 Can you please provide a list of known gaps, or anticipated gaps so that we understand where things currently are?	One of the most challenging gaps is building workforce capacity. We expect a shortage of both providers of direct and indirect care (nurses, social workers, caregivers, doctors, therapists…) that will serve the target population with HCBS. Another mayor challenge is that transitions from LTC to HCBS will require the LTC facilities to be either certified by CMS or meet CMS standards. Few LTC facilities are certified by CMS on the island and the rest are licensed by the Department of Family. These challenges need to be addressed before the implementation phase of the project.
66.	According to section 3., all BAs, and SMEs are considered "Key Staff", yet you want a scaled staffing approach (*"requesting a scaled staffing approach so that EOMC staffing levels can easily flex in accordance with short and long-term assignments…").* Will you consider making BA's and SMEs, Variable EOMS Staff based on scaled staffing approach?	No.

GOBIERNO DE PUERTO RICO
Departamento de Salud
Programa Medicaid

Vendor Questions and Answers

67.	Section 2.1, Requirement #2 on page 6 We believe this to be a typo but 2.a notes the Puerto Rico Enterprise *MEDICARE* system (PRMES). If you cross reference with the Glossary, PRMES spells out *Medicaid*, not *Medicare* Please confirm whether this is a typo.	Yes, it is a typo. It should read *Puerto Rico Medicaid Enterprise System*.
68.	Section 10.1 Appendix 1: SLA's on page 57 related to "Email Triage and Acknowledgment". The Performance Standard states that "The vendor must triage all inquiries received from PRMP-approved email addresses. All emails received must be acknowledged within twenty-four (24) hours of receipt and resolved within three (3) business days unless otherwise approved by PRMP." What is considered an PRMP-Approved email, and what is considered to be resolved withing 3 business days?	This will be discussed with the winning vendor.