

	Section Reference	Question	Answer
1		Could you please post the pre-bid attendance. We are a small veteran owned business, looking for a prime bidder.	Please refer to Addendum 1.
	Section Reference	Question	Answer
2	Appendix B, Draft CHIP Agreement Section V.L.10 CHIP-MCO Identification Cards	The language indicates that the ID card cannot differentiate a CHIP Enrollee from other MCO product enrollment through visual depiction or other marking. Can DHS please confirm that an MCO can include its CHIP-specific brand name or logo on Enrollee ID cards?	The agreement is a draft and subject to change prior to award. The CHIP MCO may use their CHIP-specific brand name or logo on Enrollee ID cards.
	Section Reference	Question	Answer
3	Appendix B, Draft CHIP Agreement Section V.X Executive Management	Like the current CHIP Agreement, the Appendix B Draft CHIP Agreement document includes the language, "These full-time positions must be assigned to the PA CHIP with the exception of the CHIP manager, the full-time positions listed below may also be assigned to commercial MCO operations. The positions below may not also work for the MCO's MA line of business if the MCO has an MA line of business." Earlier this year, DHS advised that it planned to remove the requirement that positions can't cross MA lines of business, but there will still be a requirement for a dedicated CHIP "program manager." Please confirm this requirement will be removed from the final CHIP Agreements awarded under this RFA.	The agreement is a draft and subject to change prior to award.
	Section Reference	Question	Answer
4	Part III Technical Submittal III-1. Geographic Service Area	Following the execution of the new contracts under this RFA, will MCOs continue to have the opportunity to execute geographic service area expansions over the life of the contract? If so, will the mechanism and approach for geographic expansion be the same as under the current contract?	Yes, the mechanism and approach will be the same as under the current agreement.



	Section Reference	Question	Answer
5	Appendix D and E	Please advise that an Applicant can count SDB/VBE spend for direct medical services to program beneficiaries toward the overall commitments.	No, this only applies to administrative services. Please refer to SDB-3-1, Letter of Commitment, Services/Supplies and Time Frame, which provides that "the SDB shall perform or provide the following administrative services" (emphasis added). There is identical language in the VBE-3-1.
	Section Reference	Question	Answer
6	III-4. Certification	Is there a "Certification" template for certifying NCQA accreditation and the services in the CHIP Agreement and Program Requirements?	There is no template.
	Section Reference	Question	Answer
7	I-23 Term of Agreement	The RFA states the Effective Date for the agreement will be fixed after the agreement is fully executed. Can the Department please provide an anticipated Effective Date?	DHS anticipates awarding Grant Agreements by April 2025, but this is subject to change.
	Section Reference	Question	Answer
8	RFA #41-21 I-14 Application Requirements, A. Application Submission	This section provides information on the subject line for application email. It states the subject line should read "RFA #41-21 Application" or if sending multiples "RFA #41-21 Application Part X of Y". If all applicants are submitting with the exact same subject line, how will you differentiate between the different applicant emails. Shouldn't the subject line include the applicant's organization name.	Responses will be grouped by sender e-mail address. Do not include the organization name in the subject line.
	Section Reference	Question	Answer
9	RFA #41-21 I-24 Applicant's Representations and Authorizations, I	This section states that until an applicant receives a fully executed and approved written agreement, no legal and valid agreement exists, in law or in equity, and the applicant shall not begin to perform. How does this work for existing MCOs? Existing MCOs contracts end December 31, 2024; what happens if fully executed contracts are not in place until after December 31, 2024?	This information is not needed to prepare a response to this RFA.



	Section Reference	Question	Answer
10	RFA #41-21 Part III – Technical Submittal – III-3	This section states that applicants must have an established health care provider networklicensed by the PA Insurance Department in each county and zip code in which it is to provide CHIP healthcare services. Exhibit Z of the Draft CHIP Agreement, includes requirements for access standards. These standards are based on provider type and the number of those providers available to a member with so much time for urban or rural areas. It is possible that a provider would not be available in a particular zip code within a county, particularly in a rural county/zip code. Does there have to be a provider available in every county and zip code?	The MCO must ensure that its Provider Network is adequate to provide its enrollees with access to quality enrollee care through participating professionals, in a timely manner, and without the need to travel excessive distances. See Exhibit Z, Section 1, Network Composition. If the provider network is unable to provide necessary services, the MCO must adequately and timely cover those services out of network.
	Section Reference	Question	Answer
11	Part III: Technical Submittal: III-4. Certification	First paragraph seems to indicate that there is an "or" but does not include the or. "Applicant is able to provide managed care services to children enrolled in CHIP using a health plan accredited by the National Committee for Quality Assurance ("NCQA") either by achieving NCQA Accreditation statues based on compliance with NCQA's requirements and the health plan's performance on Health Employer Data and Information Set ("HEDIS®") and Consumer Assessment of Health Care Providers and Systems ("CAHPS®") measures.	The word "either" is removed. Please refer to Addendum 4.
	Section Reference	Question	Answer
12	SDB/VBE Participation Goal	Is the SDB 11% and VBE 3% participation goals per year or over the life of the contract?	Participation Goals are applicable to the full term of the contract. Goals must be meet by the end of the contract term, including option years.
	Section Reference	Question	Answer
13	Part IV - SDB and VBE Participation	Can you please provide additional information on calculating the participation goal? As an example: Using the RFA assumption of \$23.99 PMPM/Admin and the participation goal of 11% for the SDB and a fictional 10,000 members per month. The calculation would be 23.99 X .11 = 2.63 X 10,000 X 12 = \$316,668/year or potentially \$2.2 million over the life of the contract (if using 5 yrs + 2 - 1 year extensions). Would this be the appropriate calculation?	Please Review SDB-3-1 and VBE 3-1 "Letter of Commitment" which reads: Percentage Commitment. These services or supplies represent% of the Administrative portion of the PMPM rate. Applicant agrees to utilize the SDB during the initial Agreement term and any extensions. Applicant shall pay SDBs, after receipt of a proper invoice and all



			other required documentation from an SDB, within 10 days after receipt of payment from the Commonwealth.
	Section Reference	Question	Answer
14	Part IV/Part V: SDB/VBE Participation Goal	If a vendor is chosen that is an SBD and VBE, and also complies with CPP/TANAF hiring, will that single vendor satisfy all 3 criteria? (SDB, VBE, CPP).	A subcontractor can meet both the SDB and VBE requirements, but the subcontractor must be a DGS certified vendor and registered as both an SDB and VBE vendor. CPP/TANF is a goal for new hires and is unrelated to the SDB/VBE program.
	Section Reference	Question	Answer
15	Contractor Partnership Program/SDB/VBE Submittals	Should those submissions follow the same compatibility and format instructions that are found on pages 5 and 7?	There is no standard formatting for the CPP submittal.
	Section Reference	Question	Answer
16	General Observation	Throughout the RFA documents there is a reference to Zones and/or Managed Care Program Zones. Should this reference be CHIP MCO Service Areas?	Please refer to Section II-4.C. Applicants must identify the county, counties, or zip codes they intend to serve. Most references to "Zones" or "Service Areas" may be read to refer to the county, counties, or zip codes each Applicant intends to serve. Please see the updated Pre-Application Conference presentation attached to Addendum 3.
	Section Reference	Question	Answer
17	Contractor Partnership Program V-2. Participation Requirements	Last paragraph, does the term "new hires" only refer to new hires who are external hires. Additionally, are there impacts if the 10% goal is not achieved?	New hires refers only to external hires. Selected Applicants must make a good faith effort to recruit, hire, and retain TANF recipients, engage with DHS network of Employment and Training ("E&T") providers and report all hires to Commonwealth Workforce Development System ("CWDS"). If



			the selected Applicant fails to meet their hiring target DHS may reach out to provide technical assistance and review the vendor's hiring plan for opportunities to identify qualified TANF recipients, in addition to other contractual remedies for performance deficiencies.
	Section Reference	Question	Answer
18	Appendix N: Program Requirements Section II: Requirements, E Enrollment	This states that the selected applicant shall provide all necessary communications with the CHIP applicant or enrollee concerning enrollment status. The Department will provide standardized forms and templates for such communications. CHIP MCOs do not do this today, this is the responsibility of the Department. CHIP MCOs can only send enrollment notices and packets. Is this changing?	This is not a change. MCOs currently send communications concerning enrollment status including, but not limited to, enrollment notices and packets as listed in the question. DHS is responsible for communications concerning eligibility which are separate from communications concerning enrollment. Please see Section II-E of Appendix N for additional details.
	Section Reference	Question	Answer
19	Appendix N: Program Requirements Section II: Requirements, I Collection of Premiums and Co- payments	Two questions: 1. 2nd paragraph - the Department may change the income eligibility limits as required by state or federal lawThe selected applicants must implement any such changes on the date detemined. The only place a CHIP MCO may need to update eligibility limits would be where we may provide them on materials. CHIP MCOs do not use these income eligibility limits for anything else. Will there be new requirements that we would be using these elsewhere: 2. 3rd paragraph states that the Department will provide standardized forms and templates for collection of premiums. That is not done today, is this changing?	CHIP-MCOs no longer determine eligibility, and therefore, have no need to implement any changes. The Department will allow the CHIP-MCOs to use approved templates. Nothing is changing.



	Section Reference	Question	Answer
20	Appendix N: Program Requirements Section II: Requirements, L Marketing and Outreach, #6	"Assume responsibility for the issuance of written material to enrollees covered by that supplier". Covered by what supplier?	The supplier referred to in this sentence is the CHIP MCO (the selected Applicant).
	Section Reference	Question	Answer
21	Appendix G: IT Terms and Conditions, DHS Addendum and Audit Clause 28. Termination	This sections mentions Section 30. Contract Controversies several times; however Section 30 is marked as "Reserved". When will Section 30 be available? In addition, the following sections are also marked "Reserved", when will those be available? Page 3, Section 6 Page 7, Section 19	Sections 6, 19, and 30 were removed and will not be included in the terms and conditions. These sections were marked as reserved to preserve the existing numbering of the document and avoid cross-reference errors. They will not be made available to the selected Applicants because they will not become part of the resulting agreements.
	Section Reference	Question	Answer
22	Appendix G: IT Terms and Conditions, DHS Addendum and Audit Clause Section 55. Single Audit Act of 1984	This references a Single Audit, however due to the IT transition in 2023, CHIP-MCOs were no longer required to do a Single Audit after April 2023. Is this section stating that we have to go back to having this audit completed?	MCOs are no longer required to process applications for eligibility and therefore, the Single Audit is no longer required. The agreement is a draft and subject to change prior to award. To the extent the draft agreement includes this requirement, DHS anticipates that this will be among the modifications made to the draft agreement prior to award.
	Section Reference	Question	Answer
23	Appendix G: IT Terms and Conditions, DHS	General observation - the page numbering on this document is wrong. Wanted to ensure that there was nothing missing from this Exhibit.	Please see Addendum 4, Appendix G – IT Terms and Conditions, DHS Addendum, and Audit Clause – Updated.



	Addendum and Audit Clause		
	Exhibit B: Requirements for Non- Commonwealth Hosted Applications/Servic es Section Reference		
	Section Reference	Question	Answer
24	Appendix B: Draft CHIP Agreement Section I: Incorporation of Documents, B. Operational Updates and Department Communications	#1. Is this a new process being implemented, as this is not how CHIP MCOs currently find CHIP transmittals and policy clarifications. #2. This section seems to not be complete, it seems that there should have been more to the last sentence.	The agreement is a draft and subject to change prior to award. MCOs will still be provided CHIP transmittals and Policy Clarifications via email. In addition, CHIP Transmittals and Policy Clarifications are available in the CHIP Collaboration Room.
	Section Reference	Question	Answer
25	Appendix B: Draft CHIP Agreement Section IV: Applicable Laws and Regulations, C- 11	"The CHIP-MCO shall be located with the United States and may not pay any Claim to a Provider, subcontractor, or financial institution outside of the United States". What if a CHIP member is traveling outside of the United States, how would the CHIP-MCO pay the claim to the provider?	The agreement is a draft and subject to change prior to award. The CHIP MCO is not to pay claims for providers, subcontractors, or financial institutions outside of the United States. If a CHIP member is travelling outside of the U.S. there are no provisions within this agreement to pay any claim from a country outside of the U.S.



	Section Reference	Question	Answer
26	Appendix B: Draft CHIP Agreement Section V: Program Requirements, A. CHIP State Plan Services, Co Pays and Premiums, 1. General	1st Paragraph refers to Appendix 2, State Plan, but there is no Appendix 2 included with Appendix B.	The agreement is a draft and subject to change prior to award. Appendices will be provided to selected applicants.
	Section Reference	Question	Answer
27	Appendix B: Draft CHIP Agreement Section V: Program Requirements, A. CHIP State Plan Services, Co Pays and Premiums, 1. General	Last paragraph of #1, discusses payment of premiums. Due to Continuous Enrollment rules, shouldn't this section be more specific about the termination of CHIP enrollees for non-payment? The way it is written is not accurate.	The agreement is a draft and subject to change prior to award. The CHIP Procedures Handbook, located on the CHIP website, https://www.pa.govhttps://www.pa.gov/en/agencies/dhs/resources/chip.html/en/agencies/dhs/resources/chip.html, provides detailed, specific instructions on disenrollment policies.
	Section Reference	Question	Answer
28	Appendix B: Draft CHIP Agreement Section V: Program Requirements, A. CHIP State Plan Services, Co Pays and Premiums, 3. Bright Futures	This section references an Appendix 3, but there is no Appendix 3 included with Appendix B. Where can this be found, besides the link provided?	The agreement is a draft and subject to change prior to award. Appendices will be provided to selected Applicants.



	Section Reference	Question	Answer
29	Appendix B: Draft CHIP Agreement Section V: Program Requirements, F. Maternal Home Visiting Program	There is a heading, but no information included about this subject. What are the requirements of this program?	The agreement is a draft and subject to change prior to award. This program is not applicable to CHIP, and this language will be removed.
	Section Reference	Question	Answer
30	Appendix B: Draft CHIP Agreement Section V: Program Requirements, L. Member Enrollment and Disenrollment, #2 CHIP-MCO Enrollment Procedures	1st paragraph - there is a reference to the Department's EAP broker. Today, the Department does not utilize an EAP broker for CHIP. Will the EAP broker be in place for CHIP with the implementation (effective) date of the new contract?	The agreement is a draft and subject to change prior to award. DHS intends to utilize an EAP broker for CHIP, but does not have a specific implementation date for a new contract. See RFA No. 11-23.
	Section Reference	Question	Answer
31	Appendix B: Draft CHIP Agreement Section V: Program Requirements, L. Member Enrollment and Disenrollment, #2 CHIP-MCO Enrollment Procedures	2nd paragraph - please explain how the Enrollment/Disenrollment dating rules apply to a CHIP-MCO. CHIP-MCOs are not determining eligibility, therefore only the Department would be determining eligibility/effective dates for enrollees. CHIP-MCOs enroll based on the date sent on the daily 834.	The agreement is a draft and subject to change prior to award. CHIP MCOs do not need to concern themselves with the MCO dating rules. CHIP MCOs will use the Enrollment date on the 834.



	Section Reference	Question	Answer
32	Appendix B: Draft CHIP Agreement Section V: Program Requirements, L.	Please explain how a CHIP-MCO would be able to enroll a newborn of a CHIP enrollee effective at the time of birth. CHIP-MCOs can only enroll members who we receive on the daily 834 files. If we enroll a member without receiving the enrollment through the 834 if a claim is paid and submitted through PROMISe it will reject. According to the current process CHIP-MCOs notify the Department of	The agreement is a draft and subject to change prior to award. The CHIP MCO must have written administrative policies and procedures to enroll a newborn reported eligible on the 834.
32	Member Enrollment and Disenrollment, #3 Enrollment of Newborns	a newborn of a CHIP enrollee and the Department determines the appropriate eligibility (MA or CHIP) as of the date of birth.	CHIP MCOs would not enroll a newborn before receiving the eligibility determination on the 834 file.
	Section Reference	Question	Answer
33	Appendix B: Draft CHIP Agreement Section V: Program Requirements, L. Member Enrollment and Disenrollment, #4 Transitioning Enrollees Between	Please explain how a CHIP-MCO would be able to initiate a transfer with the CAO. CHIP-MCOs do not currently handle any of the eligibility and enrollment activities for CHIP members. CHIP families work directly with the CAO.	The agreement is a draft and subject to change prior to award. The MCO shall assist in reporting transfer requests they may receive directly from a CHIP enrollee. The MCO should be prepared to transfer calls to the EAP and or CAO and cooperate with the EAP as a gaining or losing MCO.
	CHIP-MCOs Section Reference	Question	Answer
	Appendix B: Draft CHIP Agreement	3rd paragraph - how are CHIP-MCOs receiving Special Needs information from the EAP?	The agreement is a draft and subject to change prior to award. This information is not currently available.
34	Section V: Program Requirements, L. Member Enrollment and Disenrollment, #8		, and the second



	Services for New Enrollees		
	Section Reference	Question	Answer
35	Appendix B: Draft CHIP Agreement Section V: Program Requirements, L. Member Enrollment and Disenrollment, #9 New Enrollee Orientation	Last paragraph of this section, states that CHIP-MCOs are prohibited from contacting a potential enrollee who is identified on the Daily Membership File with an automatic assignment indicator until 5 days before the effective date. Please explain what this means. And is this in writing, or by telephone? Also, if we can't contact them until 5 days before the effective date, how do we send an initial premium payment notice to a potential enrollee and/or advise them of the need to select a PCP if they have not done so and get them an ID card before their effective date?	The agreement is a draft and subject to change prior to award. CHIP MCOs are permitted to contact potential enrollees. This language will be updated.
	Section Reference	Question	Answer
36	Appendix B: Draft CHIP Agreement Section V: Program Requirements, U. Member Complaint, Grievance, External Review and DHS Fair Hearing Process	1st paragraph on this page refers to required templates that can be found on Docushare. This is mentioned somewhere else with the Appendix B. For current CHIP-MCOs DocuShare is known, but for any new applicants it may be, should this reference to DocuShare explain what this is. Additionally, these templates are not currently in DocuShare, they are in the Collaboration Room.	Docushare is a platform used by the Department as a means for MCOs to upload files and documentation and for the Department to share documentation with the MCOs. Access is provided by the Department.
	Section Reference	Question	Answer
37	Appendix B: Draft CHIP Agreement Section V: Program Requirements, X. Executive Management	The 2nd sentence under X. Executive Management reads "These full-time positions must be assigned to the PA CHIP with the exception of the CHIP Manager, the full-time positions listed below may also be assigned to commercial MCO Operations." Should that read, "The full-time positions listed below may also be assigned to commercial MCO Operations, with the exception of the CHIP Manager."?	The agreement is a draft and subject to change prior to award. Please refer to the response to Q.3.



	Section Reference	Question	Answer
38	Appendix B: Draft CHIP Agreement Section V: Program Requirements, Z. Administration, #4 Management Information Systems, s.	This section discusses the Drug, Procedure Code and Diagnosis Code references that will be shared with CHIP-MCOs to effectively meet their obligations under this agreement. Currently, CHIP-MCOs do receive them, but do not use the Procedure and Diagnosis Code references because they are specific to the MA fee for service invoice editing system and they are not specific to CHIP. Does this mean CHIP specific files will be created?	The agreement is a draft and subject to change prior to award. No, there will be no CHIP specific files created.
	Section Reference	Question	Answer
39	Appendix B: Draft CHIP Agreement Section V: Program Requirements, AA. Assignment of PCP	3rd full bulleted item on this page. It starts out by saying that if an enrollee does not select a PCP within 14 days of enrollment the CHIP MCO must auto assign. But at the end of this same paragraph it says we have to make every effort to determin PCP choiceso that new Enrollees do not go without a PCP for a period of time after enrollment begins. Is it 14 days after we receive the enrollment on the daily 834 or 14 days after the effective date?	The agreement is a draft and subject to change prior to award. 14 days after the enrollment date, once the premium payment is made and processed.
	Section Reference	Question	Answer
40	Section Reference Appendix B: Draft CHIP Agreement Section V: Program Requirements, CC. Provider Network, #4 Specialists/School Based Health Centers as PCPs	Question There is no information in this section related to School Based Health Centers.	Answer The agreement is a draft and subject to change prior to award. This is not a requirement and will be updated in the final agreement.
40	Appendix B: Draft CHIP Agreement Section V: Program Requirements, CC. Provider Network, #4 Specialists/School Based Health		The agreement is a draft and subject to change prior to award. This is not a requirement and will be updated



	Section VII: Financial Requirements, D. Claims Processing Standard, Monthly Report and Assessments, 2. Assessments		
	Section Reference	Question	Answer
42	Appendix B: Draft CHIP Agreement #10 Telephonic Psychiatric Consultation Team Services	This seems out of place or to be missing some information, does this belong somewhere else?	The agreement is a draft and subject to change prior to award. Based on the section, the CHIP-MCO must provide expenditures of the funds upon request. This is in the right section.
	Section Reference	Question	Answer
43	Appendix B: Draft CHIP Agreement Section VII: Financial Requirements, F. Third Party Liability, 5. Third Party Resource Identification	2nd sentence in the first paragraph states, "In addition to newly identified resources, the CHIP-MCO must provide information on coverage for other household members. How would a CHIP-MCO know if other coverage information for another household member needs to be reported?	The agreement is a draft and subject to change prior to award. Such changes may include deletion of the reference to other household members.
	Section Reference	Question	Answer
44	Appendix B: Draft CHIP Agreement Exhibit A CHIP-MCO Pay for Performance	2nd paragraph - there are no dates in the Section II below, that is referenced. Is there something missing from this statement?	Nothing is missing.



	Section Reference	Question	Answer
	Appendix B: Draft CHIP Agreement	This section references an Appendix 3f, also referenced in III CHIP-MCO maximum payout amount. Where can this Appendix be found?	Appendix 3f will be included as part of the final agreement.
45	Exhibit A CHIP-MCO Pay for Performance; II Quality Withhold Amount		
	Section Reference	Question	Answer
46	Appendix B: Draft CHIP Agreement	Why is this called "IT Terms and Conditions", they seem to be just Terms and Conditions not specific to IT.	This information is not necessary for submitting a response to this RFA.
	Exhibit C IT Terms and Conditions		
	Section Reference	Question	Answer
	Appendix B: Draft CHIP Agreement	Shouldn't this Exhibit follow Exhibit F or just be included in F, as F covers preauthorization and these denial notices are required for preauth? Also, there is a reference in this Exhibit to Templates N (1) through N(6) and N(7), where can these	The agreement is a draft and subject to change prior to award. The denial notice templates can be found in
47	Exhibit K Notice of Denial	be found?	the Collaboration Room under the Procedures Handbook, numbered 15C through 15 G. Access to the Collaboration Room will be provided upon selection.
	Section Reference	Question	Answer
	Appendix B: Draft CHIP Agreement	Currently, CHIP MCOs participate in the TiPS program. Is this requirement in addition to TiPS or in place of TiPS?	It's the same program.
48	Exhibit M Telephonic Psychiatric Consultation Team Services		



	Section Reference	Question	Answer
49	Appendix B: Draft CHIP Agreement Exhibit S Complaint, Grievance, and External Review	What is the Operating Procedures Report (OPS) 11 Provider Education? Where can that be found?	The report will need to be developed.
	Process; #9		
	Section Reference	Question	Answer
50	Appendix B: Draft CHIP Agreement Exhibit S Complaint, Grievance, and External Review Process; D Department's Fair Hearing Requirements	Shouldn't this section be it's own Exhibit, as it does not have anything to do with Complaints and Grievances?	This section is in the correct place.
	Section Reference	Question	Answer
51	Appendix B: Draft CHIP Agreement Exhibit X	This references an annual agreement audit to be performed by an independent, licensed CPA and submitted no later than June 30 after the agreement year is ended. Is this a new audit and when will requirements be provided?	The agreement is a draft and subject to change prior to award. This is no longer a requirement and will be updated in the final agreement.
	Section Reference	Question	Answer
52	Appendix B: Draft CHIP Agreement Table of Contents - Appendices	There is a reference Appendices between the table of contents and the list of Exhibits; however there are no Appendices attached to Appendix B. Where can these be found? Also, there is an Appendix 3 listed, but there is no document name attached to it.	The agreement is a draft and subject to change prior to award. Appendices will be provided to selected applicants.



	Section Reference	Question	Answer
53	Appendix B: Draft CHIP Agreement Table of Contents - Agreement Exhibits	There is an Exhibit H in the list with no document name, but there is no Exhibit H included. Where can that be found, or is there not an Exhibit H?	The agreement is a draft and subject to change prior to award. Exhibits will be provided to selected applicants.
	Section Reference	Question	Answer
54	Appendix B: Draft CHIP Agreement General Question	Should all of the Exhibits be referenced somewhere in Sections I through XVI? I.e. Exhibit A CHIP-MCO Pay for Performance is not referenced in any of those sections. Although, Exhibit AA Outpatient Drug Services is referenced in those sections.	The agreement is a draft and subject to change prior to award. The related section is in DD.1.4 of Draft CHIP Agreement and the language there should include "as outlined in Exhibit A".
	Section Reference	Question	Answer
55	Appendix N- Program Requirements, I. Management and Staffing, A. Executive Management (Key Personnel) and B. Administrative Positions, Staffing Plans	Please confirm that the bios and organizational charts requested in Appendix N should not be included in our response to the RFA and should be prepared for the readiness review or onsite review	These documents should be prepared for the readiness review process and not submitted as part of the application.
	Section Reference	Question	Answer
56	Appendix N- Program Requirements, II. Requirements, A. Disaster Recovery	Please indicate if the Commonwealth requires a copy of the disaster recovery plan, as cited in <i>Appendix N-Program Requirements, II. Requirements, A. Disaster Recovery</i> , to be included in our response to this RFA.	Section II.A of Appendix N indicates that the applicant must have a Disaster Recovery Plan in place and be prepared to provide it to the Department upon request. There is no specification the Disaster Recovery Plan must be included with the response to this RFA. The technical submittal should consist of the information requested in Part III of the RFA,



		Quanting	including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA.
	Section Reference	Question	Answer
57	Appendix N- Program Requirements, II. Requirements, A. Emergency Preparedness	Please indicate if the Commonwealth requires a copy of the continuity of operations plan, as cited in <i>Appendix N-Program Requirements, II. Requirements, A. Emergency Preparedness</i> , to be included in our response to this RFA.	Section II.B of Appendix N indicates that the applicant must have an Emergency Preparedness Plan in place and be prepared to provide it to the Department upon request. There is no specification Emergency Preparedness Plan must be included with the response to this RFA. The technical submittal should consist of the information requested in Part III of the RFA, including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA.
	Section Reference	Question	Answer
58	Appendix N- Program Requirements, II. Requirements, D. Coverage Area and Provider Network Adequacy	Please indicate if the Commonwealth requires a copy of Certificate of Authority to operate as an HMO in Pennsylvania as well as a copy of the correspondence from the Pennsylvania PID granting operating authority in each county for which they were selected., as cited in <i>Appendix N-Program Requirements, II. Requirements, D. Coverage Area and Provider Network Adequacy</i> , to be included in our response to this RFA.	Section II.D of Appendix N indicates that by no later than the date of award, the applicant must provide to the Department a copy of their Certificate of Authority to operate as an HMO in Pennsylvania, as well as a copy of the correspondence from the Pennsylvania PID granting operating authority in each county for which they were selected. The RFA does not require the submission of this documentation with the application. The technical submittal should consist of the information requested in Part III of the RFA,



	Section Reference	Question	including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA. Answer
59	Appendix N- Program Requirements, II. Requirements	Please indicate if the Commonwealth requires enrollment communications, as cited in <i>Appendix N-Program Requirements, II. Requirements, E. Enrollment</i> , to be included in our response to this RFA.	Section II.E of Appendix N lists requirements concerning enrollment communications. These are requirements with which selected Applicants will be required to comply. No response is required for this section. The technical submittal should consist of the information requested in Part III of the RFA, including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA.
	Section Reference	Question	Answer
60	Appendix N- Program Requirements, II. Requirements, F. New Enrollee Orientation	Please indicate if the Commonwealth requires a copy of policies and procedures pertaining to new enrollee information, as cited in <i>Appendix N-Program Requirements, II. Requirements, F. New Enrollee Orientation</i> , to be included in our response to this RFA.	Section II.E of Appendix N lists requirements concerning enrollment communications. These are requirements with which selected Applicants will be required to comply. No response is required for this section. The technical submittal should consist of the information requested in Part III of the RFA, including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA.



	Section Reference	Question	Answer
61	Appendix N- Program Requirements, II. Requirements, G. Coordination of Care	Please indicate if the Commonwealth requires a copy of procedures and processes in place for continuity of care and care coordination when a child transitions between and among delivery systems, as cited in <i>Appendix N- Program Requirements, II. Requirements, G. Coordination of Care</i> , to be included in our response to this RFA.	Section II.G of Appendix N lists requirements concerning coordination of care. These are requirements with which selected Applicants will be required to comply. No response is required for this section. The technical submittal should consist of the information requested in Part III of the RFA, including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA.
	Section Reference	Question	Answer
62	Appendix N- Program Requirements, II. Requirements, L. Marketing and Outreach	Please indicate if the Commonwealth requires documentation of marketing and outreach, as cited in <i>Appendix N- Program Requirements, II. Requirements, L. Marketing and Outreach</i> , to be included in our response to this RFA.	Section II.L of Appendix N lists requirements concerning Marketing and Outreach. These are requirements with which selected Applicants will be required to comply. No response is required for this section. The technical submittal should consist of the information requested in Part III of the RFA, including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA.
	Section Reference	Question	Answer
63	Appendix N- Program Requirements, II. Requirements, P. Preventing, Detecting and	Please indicate if the Commonwealth requires documentation of written policies and procedures for the detection and prevention of fraud, waste, and abuse, as cited in <i>Appendix N-Program Requirements, II. Requirements, P. Preventing, Detecting and Reporting Fraud, Waste, and Abuse</i> , to be included in our response to this RFA.	Section II.P of Appendix N lists requirements concerning the prevention, detection, and reporting of fraud, waste, and abuse. These are requirements with which selected Applicants will be required to comply. No response is required for this section. The



	Reporting Fraud, Waste, and Abuse		technical submittal should consist of the information requested in Part III of the RFA, including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA.
	Section Reference	Question	Answer
64	Appendix D – Small Diverse Business Participation Packet, VI. Document Submittal Errors, 3. Solicitation with Multiple Zones	Please confirm that SDB-1, VI., (3) does not pertain to this procurement as the SDB Participation Packet forms do not contain Zone response fields. Please also confirm that only one SDB submission is required statewide. We are seeking this confirmation as this section instructs applicants to document Zones on SDB-2 – SDB Participation Submittal, SDB-3 – SDB Utilization Schedule, and SDB-3-1 – Letter of Commitment; however, these forms do not contain a corresponding Zone response field in which to enter a Zone name.	Please refer to the answer provided in question 16.
	Section Reference	Question	Answer
65	Appendix D – Small Diverse Business Participation Packet, SDB-3-1 Letter of Commitment, Services Supplies and Time Frame	Please confirm that the instruction provided within the <u>Services Supplies and Time Frame</u> section of this form is incorrect and that a new, corrected form that contains the proper product name will be issued to Applicants. The instruction in this section currently states "If Applicant is the selected CHC-MCO, the SDB shall perform or provide the following administrative services during the initial Agreement term and any extensions, as more specifically set forth below."	Please see Addendum 4, Appendix D – Small Diverse Business Participation Packet – Updated.
	Section Reference	Question	Answer
66	RFA 41-21, Part IV: Small Diverse Business and Veteran Business Enterprise Participation Information, VI-4.	Please confirm the Commonwealth's required payment terms as the instruction provided within the RFA on page 29 within Part IV, VI.4. C., 2.c. appears to conflict with the instructions provided within Appendix D on page 4 within SDB-1, V., 1.g., as follows: • RFA, Part IV, IV-4 (C.2.c) regarding required SDB/VBE contract terms states "Payment terms requiring payment to the SDB or VBE for work	The current applicable policy is noted in Appendix D, SDB-1 (V.1.g) and provides: "Applicant shall pay SDBs, after receipt of a proper invoice and all other required documentation from an SDB, within 10 days after receipt of payment from the Commonwealth."



	Contract Requirements – SDB and VBE Participation, C. Subcontract requirements, 2.c. Appendix D - Small Diverse Business Participation Packet, SDB-1, V. Additional Requirements, 1.g.	satisfactorily completed within 14 calendar days of the selected Applicant's receipt of payment from the Commonwealth for such work." Appendix D, SDB-1 (V.1.g) states "Applicant shall pay SDBs, after receipt of a proper invoice and all other required documentation from an SDB, within 10 days after receipt of payment from the Commonwealth."	
	Section Reference	Question	Answer
67	RFA 41-21, Part IV: Small Diverse Business and Veteran Business Enterprise Participation Information, IV.1 SDB and VBE Participation Goals	Please confirm that an Applicant can count SDB/VBE spend for direct medical services to program beneficiaries toward the overall commitment.	Please refer to the answer provided to Question 5.
	Section Reference	Question	Answer
68	Technical Submittal, III-5. Market Outreach	Is this question regarding market outreach seeking details on new member acquisition strategies, or on existing member outreach, or both?	This section addresses new member acquisition strategies.



	Section Reference	Question	Answer
69	Appendix B – Draft CHIP Agreement, Exhibit AA: Outpatient Drug Services, 1. General Requirements	Are MCOs required to provide policies to show compliance for this Exhibit as part of the RFA response or will they only be needed for readiness review? 1. General Requirements: h. The CHIP-MCO must submit for review and approval a policy for each section of this Exhibit that includes the requirements in the respective section and the CHIP-MCO's procedures to demonstrate compliance.	No, these need not be submitted as part of the application. The technical submittal should consist of the information requested in Part III of the RFA, including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA. The agreement is a draft and subject to change. Compliance with the agreement will be assessed as part of readiness review.
	Section Reference	Question	Answer
70	Appendix L	With respect to Appendix L, Iran Free Procurement Certification form is not included under Section 4: Additional Application Information as a form to include in our response. Please advise where to include this form within our response.	The Iran Free requirement is being removed.
	Section Reference	Question	Answer
71	Part III-6.B	Specific to Part III-6.B., in the instance where the bidding entity is wholly owned by an entity which in turn is wholly owned by another entity through multiple ownership levels up to the ultimate parent (all wholly owned), is the MCO required to provide the financial documents requested in parts III-6-B.1 through III-6.B-11 (i.e. audited financials, credit agency ratings) for all intermediary ownership entities between the bidding entity and the ultimate parent, or may the MCO limit submission items to the bidding entity and ultimate parent? i.e. Bidding Entity "A" is wholly owned by "Entity B" which in turn is wholly owned by "Entity C", which in turn is wholly owned by "Entity D", which in turn is wholly owned by "Entity E", the ultimate parent of the Bidding Entity. May the MCO limit financial data requested to Bidding Entity "A" and "Entity E" (ultimate parent), or must the MCO submit all applicable financial documents for every entity in the chain of ownership?	The applicant must provide the required financial information for the applicant company and any entities that own at least 5% in the applicant company.



	Section Reference	Question	Answer
72	Appendix B, Section VII.7.c.i.	In Appendix B, Section VII.7.c.i. (page 118), the document states that "10% of the medical portion of the capitation rate must be expended through VBP". But the next sentence references 15%. Can you clarify which percentage is correct?	The agreement is a draft and subject to change prior to award. There is no established percentage at this time. This will be updated prior to award.
	Section Reference	Question	Answer
73	Appendix B, Section VII.7.c.i.	In Appendix B, Section VII.7.c.i. (page 118), the document references strategies found in section "8.a.ii. through 8.a.v.", which don't appear in Section VII. Should this refer to sections 7.a.ii. through 7.a.v.?	The agreement is a draft and subject to change prior to award. The reference should be to section 7.a.ii through 7.a.v.
	Section Reference	Question	Answer
74	Part III-2. Licensure	Part III-2. Licensure states that "Applicant is able to provide managed care services to children enrolled in CHIP using a health plan accredited by the National Committee for Quality Assurance ("NCQA") either by achieving NCQA Accreditation statues based on compliance with NCQA's requirements and the health plan's performance on Health Employer Data and Information Set ("HEDIS®") and Consumer Assessment of Health Care Providers and Systems ("CAHPS®") measures". Where is the "or" that matches the "either"? Is the Applicant required to submit all of the choices within the sentence?	Part III-2 does not contain this specific language. If this refers to the language in Section III-4, please refer to the answer provided in Question 11.
	Section Reference	Question	Answer
75	Appendix B, F. Maternal Home Visiting Program	In Appendix B, F. Maternal Home Visiting Program is listed in Section V: Program Requirements. There is no information describing this requirement.	The agreement is a draft and subject to change prior to award. This is not a current requirement so the reference will need to be removed from the final agreement.
	Section Reference	Question	Answer
76		As we are developing our marketing and outreach plan for inclusion in our RFA response, can the department confirm, in Appendix B, is the Employee Assistance Program (EAP) referring to the CAO (Certified County Assistance Office) enrollment process, or will this be a new CHIP enrollment program managed by another entity?	The Enrollment Assistance Program ("EAP") will assist eligible persons in selecting an MCO and a PCP, and in obtaining information regarding CHIP. See RFA No. 11-23.



	Section Reference	Question	Answer
77	Appendix B	Appendix B defines and references Managed Care Program Zones (MCP Zone). How many MCO zones are there for CHIP, and which counties represent each zone?	Please refer to the answer provided to Question 16.
	Section Reference	Question	Answer
78	Section I-23	Section I-23 of the RFA states "the Department will fix the Effective Date after the agreement has been fully executed by the selected Applicant and the Commonwealth and all approvals required by the Commonwealth have been obtained." Does this mean that effective dates can vary by Applicant? Is there a target timeframe for the effective dates and what factors determine what the effective date will be?	Please refer to the answer provided to Question 7.
	Section Reference	Question	Answer
79	Part III-7.A.1	Specific to Part III-7.A.1, with regard to the RFP language regarding applicant must use the PA.GOV domain for proposed websites and digital services while referring to the Commonwealth Information Technology Policy ("ITP") ITP-NET005 — Commonwealth External and Internal Domain Name Services ("DNS"), and that Applicants shall acknowledge its understanding of and compliance with this requirement in its application, is the intent of the state of Pennsylvania to require use of PA.gov domain for Aetna based digital assets like AetnaBetterHealth.com/PA and Aetna Medicaid Web Portal for members, with the understanding that PA would have to issue and manage security certificates and renewals?	No. The requirements in ITP-NET005 are applicable only to commonwealth owned websites. It does not apply to vendor web sites.
	Section Reference	Question	Answer
80	Part III-7.A.3	Specific to Part III-7.A.3, from the state's description of the enterprise data management program strategy, PA CHIP would have access to multiple sources of data from multiple state agencies. Our assumption is that the payer will rely on the PA CHIP administrators to manage the member profiles. Is our understanding correct?	Refer to ITP-INF000 found at ITP-INF000 Enterprise Data and Information Management Policy (pa.gov) All current IT polices can be found at IT Policies (pa.gov)



	Section Reference	Question	Answer
81	Part III-7.A.3	Specific to Part III-7.A.3., regarding the sharing of integrated data, what kinds/categories of data is expected to be exchanged? Please define the purpose of the Enterprise Data Catalog, the potential model of integration, and the data contained within the Enterprise Data Catalog?	Refer to BPD-INF003D found at BPD-INF003D Core Citizen Data Model and Data Elements (pa.gov) All current IT polices can be found at IT Policies (pa.gov)
	Section Reference	Question	Answer
82	Part III-7.A.3	 Specific to Part III-7.A.3., please elaborate on the technology solutions as described below or provide additional documentation? Core Resident and Business Profiles ("Golden Records") Universal Identifiers and ID Linkage Master Data Management Enterprise Messaging and Queuing Services Data API/Data Integration Services Enterprise Data Catalog 	Definitions of associated terms are published on the Office of Administration's public portal: http://www.oa.pa.gov/Policies/Pages/Glossary.asp All current IT polices can be found at IT Policies (pa.gov)
	Section Reference	Question	Answer
83	Part III-7.A.3	Specific to Part III-7.A.3., please elaborate on the purpose of the Golden Record and the data that is contained within the Golden Record?	Refer to BPD-INF003D found at BPD-INF003D Core Citizen Data Model and Data Elements (pa.gov) All current IT polices can be found at IT Policies (pa.gov)
83	Part III-7.A.3 Section Reference		Core Citizen Data Model and Data Elements (pa.gov) All current IT polices can be found at IT



	Section Reference	Question	Answer
85	Part III-7.A.6.	2. Specific to Part III-7.A.6., when the RFA mentions resident, business, and solution/system/application data, what types of data does this involve? Does this data go beyond what is listed in C.3 as "field-level data (e.g., profile/demographics/preferences of users) and outcomes data from the proposed solution (e.g., user logins, user journey history, completed applications)?"	Definitions of associated terms are published on the Office of Administration's public portal: http://www.oa.pa.gov/Policies/Pages/Glossary.asp All current IT polices can be found at IT Policies (pa.gov)
	Section Reference	Question	Answer
86	General Information	Should Appendices L and M be placed in the Application immediately following Appendix K? It is missing from the Technical Submittal Application Format instructions.	Iran Free requirement is being removed. Appendix M should follow Appendix K.
	Section Reference	Question	Answer
87	III Technical Submittal	Are there page limits for narrative responses to any of the Eligibility Requirements in the Technical Submittal?	There are no page limits for narrative responses; however, the Department does not anticipate that applications will require voluminous responses. The technical submittal should consist of the information requested in Part III of the RFA, including the attachments referenced in Section I-14.B.1 of the RFA.
	Section Reference	Question	Answer
88	III Technical Submittal	Does the Technical Submittal for this application need to meet 508 accessibility requirements?	No.
	Section Reference	Question	Answer
89	III-4 Technical Submittal, Certification	As part of its response to this RFA, the Applicant must provide a certification signed by an authorized corporate officer that the Applicant is able to provide managed care services to children enrolled in CHIP using a health plan accredited by the National Committee for Quality Assurance ("NCQA") either by achieving NCQA Accreditation statues based on compliance with NCQA's requirements and the health plan's performance on Health Employer Data and Information Set	There is no form. Applicants should create their own certification format to comply with this requirement. The applicant may provide separate certifications or one combined certification as



		("HEDIS®") and Consumer Assessment of Health Care Providers and Systems ("CAHPS®") measures. As part of its response to this RFA, the Applicant must also provide a certification signed by an authorized corporate officer that the Applicant is able to provide the services prescribed by this RFA and all of its appendices, including, but not limited to, Appendix B, Draft CHIP Agreement, and Appendix N, Program Requirements. Is there a form for this Certification or should the applicant create its own certification format? Should the Applicant provide two separate certifications: 1) to certify that we are an accredited NCQA health plan and 2) to certify that we can provide the services prescribed by this RFA and all appendices, including, but not limited to, Appendix B, Draft CHIP Agreement, and Appendix N, Program Requirements? Or should the Applicant combine all requirements in the Certification section into one certification document?	it prefers, as long as the applicant complies with the certification requirement.
	Section Reference	Question	Answer
90	III-7.A Technical Submittal, Bolstering Service Delivery through a Digital Experience Strategy	Keystone Login is the Commonwealth's single login solution. Keystone Login provides a consistent and secure approach to account administration by offering Pennsylvanians, individuals, and in the future, Business Partners, a single online point of access to services offered by multiple Commonwealth agencies or other Business Partners. It is critical that by using Keystone Login any Pennsylvanian or Business Partner can work with any Commonwealth agency or other Business Partner through the Commonwealth's public facing applications using a single login credential. Regarding Keystone Login integration and SSO, will the Commonwealth be acting as the Identity Provider using SAML2.0 or OIDC?	Refer to the Developer Integration Guide at http://keystonelogindevelopers.pa.gov .
	Section Reference	Question	Answer
91	III-6.B.2	Provide the following for the Applicant and for each entity that owns at least five percent (5%) of the Applicant. (The Applicant may also include information for other Affiliates as long as they still provide the requested information for each entity that owns at least 5%): Unaudited financial statements for the period between the last date covered by the audited statements through the quarter before the submission of the application.	In this specific scenario, the applicant should submit the unaudited Q2 financial statements and submit an explanation why the Q3 unaudited financial statements were not submitted. For instance, an applicant might explain that the Q3 unaudited financial



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		Given a mid-October submission deadline close in proximity to the close of a quarter, unaudited financial statements for the quarter ending September 30, 2024, may not yet be available for Applicant's submission. For applicants operating on a fiscal year that coincides with the calendar year, can applicants provide unaudited financial statements for the period between the last date covered by the audited statements through Q2 (i.e., January 1, 2024 through June 30, 2024)?	statements were not available at the time of RFA submission.
	Section Reference	Question	Answer
92	III-6.H	List any ownership interest in proposed subcontractors. Copies of proposed subcontract arrangements are to be included as an appendix. The Department will approve all subcontracts used by the selected Applicant. The reference focuses on the identification of ownership interest in any proposed subcontractors. Is the Department seeking copies of subcontract arrangements of only those subcontractors with which the Applicant has any ownership interest or all subcontract arrangements under the CHIP agreement?	Yes, all subcontract arrangements under the CHIP Agreement.
	Section Reference	Question	Answer
93	IV, I-12, Small Diverse Business and Veteran Business Enterprise Participation Information	Small Diverse Business ("SDB") and Veteran Business Enterprise ("VBE") Participation. The DGS Bureau of Diversity, Inclusion and Small Business Opportunities ("BDISBO") has developed a goal setting policy based upon recommendations from its 2018 Disparity Study. The goal setting policy requires BDISBO and agencies identify contract-specific participation goals for SDBs (which include Minority Business Enterprises ("MBE"), Women Business Enterprises ("WBE"), LGBT Business Enterprises ("LGBTBE"), Disability-Owned Business Enterprises ("DOBE"), and Service-Disabled Veteran-Owned Small Businesses ("SDVBE")) and VBEs (which include Veteran-Owned Small Businesses and Service-Disabled Veteran-Owned Small Businesses). Applicants must either agree to meet the participation goals in full or must request and obtain a full or partial Good Faith Efforts waiver from one or both of the participation goals. DHS will reject as unresponsive any application that fails to meet either participation goal or to establish its Good Faith Efforts to meet the participation goals in full or in part. The established goals for this Project are set forth below: SDB Participation: 11% VBE Participation: 3%	Participation Goals are applicable to the full term of the contract. Goals must be met by the end of the contract term.



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		Further information can be found in Part IV of this RFA. For assistance in determining whether a firm meets these requirements, you may contact BDISBO at (717) 783-3119 or RA-BDISBOVerification@pa.gov. Are SDB & VBE commitments on an annual basis or life of CHIP contract?	
	Section Reference	Question	Answer
94	Appendix B, Section V.L.8	Services for New Enrollees states "If a Special Need is indicated, the CHIP-MCO must refer the member to the Medical Assistance Children with Special Needs (PH95) Program Referral Process. Appendix B Draft CHIP Agreement Exhibit Q CHIP-MCO Enrollee Handbook, Section 5 "Special Needs: [MCO Name] wants to make sure all our enrollees get the care they need. We have trained case managers that help our enrollees with special needs have access to the care they need. The case managers help enrollees with physical or behavioral disabilities, complex or chronic illnesses, and other special needs. [MCO Name] understands that you and your family may need help with issues that may not be directly related to your health care needs." Appendix B Draft CHIP Agreement Exhibit CC Patient Centered Medical Home Program B.13 "Will refer any Enrollee who reports having a special need to the Enrollee's CHIP-MCO's Special Needs Unit" Please clarify if a Special Needs Unit is required of the CHIP MCO or if CHIP enrollees with a special need should be referred to the Medical Assistance Children with Special Needs (PH95) Program Referral Process?	The agreement is a draft and subject to change prior to award. DHS is not requiring a Special Needs Unit under CHIP but children with a special need can be referred to MA through the MA Referral Process for PH95.
	Section Reference	Question	Answer
95	Appendix B, Section V.F	This section of the agreement has no text. Please clarify if a Maternal Home Visiting Program is required and what the requirements are for the CHIP MCO.	The agreement is a draft and subject to change prior to award. This is not a requirement. This reference will be removed.
	Section Reference	Question	Answer
96	Appendix B, Section VII.E.7, Other Financial Requirements, Value Based Purchasing	Contract Year 1 - 10% of the medical portion of the capitation rate must be expended through VBP. At least 50% of the 15% must be from a combination of strategies 8.a.11. through 8.a.v. In Section c.i. of the VBP financial goals, is there a typo for Contract year 1? Should the target be 10% or 15%?	The agreement is a draft and subject to change prior to award. The VBP is currently being developed by DHS and subject to change with final agreement.



	Section Reference	Question	Answer
97	Appendix B, Section V.X, Executive Management	The positions below may not also work for the MCO's MA line of business if the MCO has an MA line of business. Appendix B indicates that these eight (8) fulltime positions may not also work for the MA LOB. Would you confirm that these positions may work for other lines of business such as commercial, State-based exchange, and/or Medicare?	The positions outlined in Appendix B under V.X Executive Management may work for the commercial lines of business. Applicant should refer to Medicare and the state-based exchange policies to confirm if these positions may also work on CHIP line of business.
	Section Reference	Question	Answer
98	Appendix B	There are appendices referenced in Appendix B that are not included. Will the Commonwealth provide Appendices 4, 4a, 4b, 4c, and 5 so that we may adequately compare and prepare?	The agreement is a draft and subject to change prior to award. Appendices will be provided to selected Applicants.
	Section Reference	Question	Answer
99	Appendix G, IT Contract Terms and Conditions, DHS Addendum, and Audit Clause	Is the Applicant expected to provide a response to Appendix G?	No. The technical submittal should consist of the information requested in Part III of the RFA, including the attachments referenced in Section I-14.B.1 of the RFA. If applicants wish to include additional information, they may do so as an appendix to their application as set forth in Section I-14.B of the RFA.
	Section Reference	Question	Answer
100	Mentioned during the Pre-Application Conference Webinar	Please clarify whether the CHIP program in the Commonwealth's 67 counties is divided into specific zones (such as the five HealthChoices zones), as referenced during the Pre-Application Conference Webinar regarding the SBD and VBE submissions?	Please refer to the answer provided to question 16.
	Section Reference	Question	Answer
101	Mentioned during the Pre-Application	During the RFA webinar, it was mentioned that four copies of the SBD and VBE need to be submitted. However, the RFA states that the application must be submitted to the Issuing Office at RA@PWRFAQUESTIONS@PA.GOV as outlined in	Applicants should submit a complete response to this RFA to the Issuing Office via email to RA@PWRFAQUESTIONS@PA.GOV. The Applicant should provide one copy of the



	Conference Webinar	Part I, Sections I-14 and I-14.A. Could you please clarify the submission requirements and method?	Contractor Partnership Program submittal, SDB Participation Submittal, (which must include the SDB Utilization Schedule, the Good Faith Efforts Documentation to Support Waiver Request, or both), and one copy of the VBE Participation Submittal (which must include the VBE Utilization Schedule, the Good Faith Efforts Documentation to Support Waiver Request, or both). Applicants should submit their applications in the format, including heading descriptions as outlined in Part I, Section I-14.B of the RFA.
	Section Reference	Question	Answer
102	Slide number 32 as presented at the Pre-Application Conference	"Complete SDB/VBE packets for each ZONE." However, it is our understanding that the intent of RFA 41-21 is to provide Children's Health Insurance Program services on a county basis. Can DHS please clarify the zones it would like the SDB/VBE packets submitted for?	•
102	presented at the Pre-Application	the intent of RFA 41-21 is to provide Children's Health Insurance Program services on a county basis. Can DHS please clarify the zones it would like the SDB/VBE	•