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November 14, 2013

**ADDENDUM # 3**

**RFP#7514372**

**Title: Development and Implementation of a Cost Allocation Plan for the Rhode Island Medicaid Program**

**Bid Closing Date & Time: Thursday, November 21, 2013 @ 10:00 AM (ET).**

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**Notice to Vendors: Attention All Bidders**

**ATTACHED ARE VENDOR QUESTIONS WITH STATE RESPONSES.**

**NO FURTHER QUESTIONS WILL BE ANSWERED.**

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**Interdepartmental Project Manager**

*Interested parties should monitor this website, on a regular basis, for any additional information that may be posted.*

**Round 2-Vendor Questions for RFP # 7514372 Development and Implementation of a Cost Allocation Plan for the Rhode Island Medicaid Program**

Question 1: Does the 50 page limit for the technical proposal still apply for the entire scope of work (for everything except for the required forms, cost proposal, and the resumes and attachments identified in full Addendum #1)?

Answer to question 1: Yes, the page limit only applies to the technical proposal.

Question 2: Will the State designate a single project manager for all of the Departments/divisions or will there be separate project managers for each effort?

Answer to question 2: EOHHS will have one project manager for the entire project; however, each agency will have a lead who will work closely with the EOHHS project manager.

Question 3: With the change to the scope of work, please confirm that there are four plans that the vendor is expected to complete for each of the following entities: EOHHS, DEA, BHDDH, and DOH.

Answer to question 3: Correct, there are four work plans needed. The new EOHHS cost allocation plan and an indirect cost plan for DEA may have an impact on DHS, the successful vendor should analyze how the EOHHS new plan changes DHS cost allocation and what steps need to be imposed to modify DHS cost allocation to continue to maximize federal sources.

Question 4: Can the State confirm whether DHS was purposefully left out of the list of Department's on page 2 of Addendum #2 or if they should have been included? If DHS is included, can the State provide exactly what scope of work is requested regarding existing time studies?

Answer to question 4: DHS is included as the Division of Elderly Affairs is organized under the DHS and the current Medicaid cost allocation plan is currently managed by the DHS.

Question 5: For each Department (DOH, BHDDH, and DEA) listed on page 2 of Addendum #2 as part of the scope expansion, can the State provide further information on the current state of each Department and whether they have an indirect cost allocation plan and/or indirect cost rate in place already? Please provide the same information for DHS.

Answer to question 5:

BHDDH has an approved Indirect Cost Allocation Plans for two areas that must be re-written. The scope of the approved plans are very limited and leave out many expenses that should be included. The vendor selected for this contract will be given access to the currently approved plans.

DOH does have an indirect cost rate in place.

Question 6: In Addendum #2 on page 2, #4 of the scope of work references December 30, 2013 as a due date for the ICAPs, but an assessment must take place first. Can the State please update or address this specific date?

Answer to question 6:

June 20, 2014

Question 7: On page 3 of Addendum #2, can the State clarify that the date provided as part of our Question 3 above is the same updated date for Deliverable #2?

Answer to question 7:

June 30, 2014

Question 8: Can the State confirm what the “Note” provided on page 3 of Addendum #2 means? Has the contract period changed from the original RFP where it was confirmed in the first round of bidder’s questions to be January 2014 – December 2014?

Answer to question 8: No it has not changed.

Question 9: In Addendum #2, can the State clarify that the first ICAP will be prepared using FY14 data for use in FY15? Or, is the state looking to follow OMB A-87 requirements for public assistance plans that would produce each CAP on a quarterly basis?

Answer to question 9: Yes, correct the ICAP will use FY14 data for FY15. For DOH it would be FY 13 information. Last year the Department submitted FY 12. FY 14 data will not be available until next fall.

Question 10: Is the state anticipating that the other new plans (DOH, BHDDH, DEA and possibly DHS, if included) will be prepared annually or quarterly?

Answer to question 10: DOH prepares their report Quarterly, but the remaining agencies are anticipating annual preparation.