



*Delaware Health  
And Social Services*

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**DIVISION OF MANAGEMENT SERVICES**

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PROCUREMENT

DATE: February 20<sup>th</sup> 2013

HSS 13 015

Marketplace Assister Entity

FOR

Division of Medicaid and Medical Assistance

Date Due: March 6<sup>th</sup> 2013  
11:00AM

ADDENDUM # 2

Please Note:

THE ATTACHED SHEETS HEREBY BECOME A PART  
OF THE ABOVE MENTIONED BID. questions and  
answers.

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**Q1** I am curious as to what type of entities would likely consider being an "MPA"? Would it be Independent Health insurance Agencies or Brokerage agency?

The State is open to considering any entity, outside of the limitations set forth in the Organizations Ineligible to Bid section of RFP# HSS-13-015, which is willing and able to effectively provide outreach and consumer assistance to potential Exchange consumers. While agents and brokers are not prohibited from applying, please review the certification standards in Appendix H for further information on the expectations of certified individuals with respect to conflict of interest and financial disclosures.

**Q2** What are the criteria or qualifications to become a marketplace assister?

The key Marketplace Assister requirements are in Section II Scope of Services in RFP# HSS-13-015. In addition, the contractor(s) must satisfy the MPA Certification Standards contained in Attachment H.

**Q3** Our organization serves a population with a specific health condition. We would only be able to assist our own population and I was not sure if you were looking for an organization that has a broader scope?

Marketplace Assister services are new for Delaware, as well as the rest of the country. In the absence of historical data the State is open to considering any entity, outside of the limitations set forth in the Organizations Ineligible to Bid section of RFP# HSS-13-015, that is willing and able to effectively provide outreach and consumer assistance to potential Exchange consumers. Consult Section VII Selection Process, Subsection A in the RFP for further detail regarding the criteria upon which proposals will be judged.

**Q4** What type of time commitment would be required for someone with becoming a marketplace assister?

The State will consider proposals that include full time assisters, part time assisters, or any combination thereof. In the proposal, bidders should include an estimate of the number of hours of coverage their entity would provide and/or the number of consumers the entity would be able to assist and any assumptions supporting that estimate.

**Q5** When are positions expected to become available?

Delaware anticipates having its MPA contract(s) in place by April 2013.

**Q6** What is the MPA's Job Description?

Delaware expects the MPAs to be the main outreach arm for the state's Health Insurance Exchange, providing ongoing assistance to Exchange consumers throughout the state. MPAs are expected to possess strong connections to the various communities targeted for outreach by the Exchange, as well as provide case management services for consumers with questions and concerns that require communication and follow up with other State entities. Additionally Section 1.C of RFP# HSS-13-015 contains further detail regarding the role and responsibilities of MPAs.

**Q7** I assume the positions would be under DPH. If so, what division?

The MPA bid solicitation is through the Delaware Health and Social Services' Division of Medicaid and Medical Assistance (DMMA), not the Division of Public Health (DPH). All MPA entities will be managed by a multi-agency organization, consisting of the Department of Insurance (DOI) Consumer Services Division and DMMA. The DOI will handle the main program management duties associated with the MPA program, while DMMA will provide support for training and administer MPA entity grants.

**Q8** What are the Training and Certification requirements for both Assisters and Navigators?

MPA certification and training are operations performed by the State. Certification and training standards are included in Appendix H of RFP# HSS-13-015. It is anticipated the federal government will release associated standards for the Navigator program in late spring 2013.

**Q9** Will Delaware be responsible for training and certification of both Assisters and Navigators?

Delaware is only responsible for MPA certification and training. The federal government will certify and train Navigators, though Navigators will be required to complete State-specific training.

**Q10** What is the mechanism for target audience to contact the MPAs? Will the MPAs be expected to provide an 800 toll-free phone line?

The Exchange call center will provide toll-free phone assistance to individuals seeking assistance. The call center will refer individuals seeking in-person assistance to resources available in the State. While the MPA entity will not need to provide a toll-free 800 number, the MPA entity will need to provide or ensure consistent contact points for consumers, such as a local phone number and email addresses for the MPAs.

**Q11** Page 8 (paragraph 3): Could you clarify the meaning of “case management”?

MPAs that have made contact with individuals seeking assistance will be expected to conduct referrals and follow up activities to ensure that the individual receives the information they need. This function could require the MPA to contact State agencies and other resources in order to obtain answers to individual inquiries.

**Q12** Page 8 (Program Management section, second sentence): Could you define the DOI’s role, the DMMA’s role, and the vendor’s role related to program management?

The DOI Consumer Services Division will provide ongoing oversight and management of the MPA program and MPA activities. This oversight role includes regular and periodic evaluation of MPA assistance activities. DMMA, as a Division of DHSS and recipient of federal funding for this program, will coordinate with DOI to manage grants and contracts for MPA entities.

The vendor will be responsible recruiting individual MPAs and providing access to technology defined within this RFP. The vendor will also provide regular status reports in a format defined by DOI and DMMA on the activities of the MPAs under that vendor’s purview and the progress of outreach activities conducted.

**Q13** Page 9 (next-to-last bullet): What are the service level expectations for phone calls, applications, initial follow-ups, etc. for this contract?

The following service expectations will be observed.

- Phone calls – within 24 hours of initial contact
- Email and other correspondence – within 48 hours of receipt

**Q14** Page 9 (Section 1, last sentence): Will the State (DOI or DMMA) provide office space?

The State does not expect to provide office space for MPA vendors at this time.

**Q15** Page 50 (sub-bullet 5): Is the State of Delaware considered an “other entity” related to compensation?

No.

**Q16** What is the difference between Delaware’s role with MPAs and the federal government’s role with Navigators?

Delaware retains responsibility for in-person consumer assistance as part of the State Partnership Exchange (SPE), with the exception of Navigator selection and funding that fall under federal responsibility. Delaware developed the MPA role as part of the larger consumer assistance strategy. MPAs will be the main consumer outreach arm for the Exchange and provide ongoing assistance to consumers. MPAs will be grant funded and selected by the State.

The Navigator role is codified in the Affordable Care Act (ACA) as required for any Federal exchange. SPEs are required to have a Federal Navigator program. The Navigators’ outreach will be specifically targeted to hard-to-reach populations. It is expected that there will be fewer Navigators in the State than MPAs. Navigators will be selected and awarded grants directly by the Federal government. Navigator training will include the same state-specific training that MPAs will receive, and will be provided by the federal government.

MPAs and Navigators will both be responsible for learning and possessing a variety of skills such as accessing and using the federal portal, understanding the services offered by Department of Social Services, understanding eligibility cost sharing reductions, etc.

While the administration of MPA and Navigator programs differs from one another, services provided by either entity will be seamless to the consumer. Day-to-day programmatic oversight will be performed within the state for both MPAs and Navigators.

**Q17** Are the day to day functions of MPAs and Navigators the same, but administratively the two groups just have different bodies of authority?

It is expected that the MPAs will have a much larger outreach focus and in-person assistance role than the Navigators will have. MPAs will also serve a broader spectrum of consumers. The State will be responsible for the day to day programmatic management and oversight of the Navigators. The Federal Government will be responsible for selecting the navigators, and notifying the state of their selections. The State will then engage with the Navigators moving forward. Grant administration for Navigators will be performed by the federal government. Navigators will be accountable to the state programmatically, and financially accountable to the federal government.

**Q18** Will MPAs be required to provide marketing efforts, such as broad mass communication, education?

MPAs will be expected to provide initial and ongoing in-person outreach and education to the specific communities and populations that they are engaging with. Outreach will begin prior to the October 2013 enrollment. The State is planning to contract with an independent communication firm to for a larger, mass marketing and communication effort. Through the work of the communications contractor, the State will provide MPAs with printed materials and other communications resources to assist outreach efforts and ensure continuity of messaging.

**Q19** How much funding is available for MPAs in total? How many MPAs will be needed for our state? How many by county, by city/municipality?

As part of their response, Vendors are asked to submit the required operating budgets based on the MPA roles responsibilities and requirements contained in the RFP# HSS-13-015. MPA funding estimates were created for federal grant applications as part of the planning process, however these estimates are subject to change based on the demand for MPAs, the responses received from this RFP, the populations vendors intend to cover, their skill sets, and other factors. The RFP contains the necessary information concerning Delaware that vendors should use to make legitimate budget estimates for MPA services. Publically available resources and information may be helpful to vendors in determining their budget for this RFP. Additionally, Delaware's Exchange research is available on the Delaware Health Care Commission website, including all presentations made to the Commission.

**Q20** From an evaluation perspective what is the expectation on how much reach MPAs are expected to have? There is no clear estimate on how many people they are required to touch.

The RFP does not specify a specific number of individuals that MPAs will be required to reach, however this will be taken into account in the evaluation of responses. The State will ensure that, through the Navigators and MPAs, all uninsured populations and underserved communities will be touched. The vendor's response should be based on the size of the population that the vendor has successfully served in the past, the vendor's managerial capacity (i.e. how many individuals the vendor would be able to successfully manage), and the geographic distribution of the population the vendor intends to serve.

**Q21** Will MPAs also be working on the expansion of Medicaid?

MPAs efforts will not be directly targeted at the Medicaid expansion population. However, MPAs are expected to be familiar with Medicaid expansion as they may encounter newly eligible Medicaid individuals who are looking to access coverage. MPAs are expected to assist the consumer in connecting them to the most appropriate health coverage. For some consumers this coverage will be in the commercial insurance market, while for others it will be public health care assistance (Medicaid, CHIP). MPAs will need to have an understanding of both markets to properly direct consumers to the appropriate path for enrollment.

**Q22** Will the contractor be able to use vehicles from the state's Fleet Services or would the contractor be responsible for providing transportation to perform MPA duties?

The state will not provide transportation for the contractor. Please include estimated transportation costs in Appendix B Budget Detailed Worksheet, under the "Travel and Other Staff Costs" budget category.

**Q23** What is the indirect cost rate allowance?

12%.

**Q24** Will MPAs be required to be located at Department of Insurance offices or is this something that may occur at some point in the future?

While the State does not anticipate providing regular office space for MPAs, as addressed in Q13, the State is currently considering whether MPAs will be required to co-locate at critical state offices for brief periods of time. Details of this requirement will be negotiated with the chosen vendors.

**Q25** Should MPAs and Navigator locate to a state office do they become state employees?

No. The MPAs will be considered contractors.

**Q26** If the vendor submits a proposal specifying where MPAs will be located geographically in the state, does the vendor have any say if the vendor believes their model will be disrupted by having MPAs relocated to a critical state location(s)?

Vendors are asked to outline and describe their strategy within your response to the RFP, and encouraged to provide as much detail as possible. Once the MPAs are selected, the state will work with the vendor(s) to determine the most effective strategy.

**Q27** What is the difference between what the Call Center will be doing versus MPAs and Navigators?

The Call Center will be operated by the Federal government, and will not be providing outreach and education. Delaware is working closely with the Centers for Medicare and Medicaid Services (CMS) to determine how the Call Center responsibilities will be rolled out. Our current understanding is that the Call Center will direct callers requiring additional or in-person assistance to the Consumer Services Division of the Delaware Department of Insurance (DOI) who would then triage the case. Based on the needs of the case, the DOI would then make the determination as to which entity would best assist the caller, such as an MPA, Navigator, Medicaid Office, or the DOI itself. The complete operational details supporting this process are still pending, and will be provided to the public as soon as they are finalized.

**Q28** Are MPAs able to help consumers choose a private insurance product?

No. MPAs may assist consumers compare insurance products, but are not licensed to provide advice as to which insurance product is best for the customer. Consumers may consult licensed agents within the state to provide this guidance. Please consult the MPA certification standards included in the RFP.

**Q29** Do Call Center agents have the same restrictions as the MPAs and Navigators?

Current federal guidance indicates that the Federal Call Center will not be operated by licensed insurance agents. Therefore, the State expects that Call Center agents would not provide advice at a level that would require licensure in the State of Delaware.

**Q30** Will MPAs be required to cover any upfront cost, such as the cost of running a background check?

Vendors should include all predicted initial and operating costs in Appendix B Budget Detailed Worksheet. Costs of completing criminal background checks shall be included in the section "Travel and Other Staff Costs" as noted in the section description. Detail regarding funding for the background check is included in page 9 of RFP# HSS-13-015.

**Q31** Assuming there are multiple MPA vendors, is there an expectation in DMMA that staff from these multiple vendors will be pooled? Can vendors offer consumer assistance services using current resources rather than hiring staff to conduct outreach?

The State does not anticipate pooling MPAs from multiple vendors at this time. It is critical to the State's selection of MPA entities that potential vendors include in their response a detailed description of the populations that the entity has experience serving and intends to serve as an MPA entity (See Section IV, subsections E and G of RFP# HSS-13-015).

Under the MPA program, the state expects each potential vendor to include in its response the organization's strategy and approach for meeting all mandatory requirements listed in Section 1.C, including both outreach and ongoing consumer assistance functions.

**Q32** Is there a salary limit for MPAs?

There is no salary limit specified in this RFP. Vendors are expected to estimate and prepare an appropriate budget necessary to provide the MPA roles and responsibilities as outlined in RFP#HSS-13-105.

**Q33** Please provide detail concerning what information is required in the work plan as described page 16 in Section G of RFP# HSS-13-015.

The State expects work plan activities to vary from vendor to vendor given their target population(s), expected number of MPAs, etc. Vendors are encouraged to provide as much detail as possible at this time.