

**Questions and Answers for Alabama Medicaid Agency Radiology Management  
Services ITB (14-X-2250220)  
August 6, 2013**

<p>Will Alabama provide a member eligibility and a provider file for use in the Contractor's applications?</p>	<p><b>Alabama Medicaid Agency Response:</b> Yes.</p>
<p><b>Page 5, Section 1.1:</b> The ITB states that the contract will commence on September 1, 2013; however, the Schedule of Activities on Page 6 states that the contract will start on November 1, 2013. Please identify which is the correct date.</p>	<p><b>Alabama Medicaid Agency Response:</b> The contract start date will begin on November 1, 2013. An amendment has been made to Section 1.1 under General ITB Requirements to say the following: 'Medicaid will enter into one contract for 24 months commencing November 1, 2013, through October 31, 2015.'</p>
<p><b>Page 18, Section 2.3: Reporting, Section C:</b> Can you please expand on the information anticipated for the following requirement: Number of approvals for advanced imaging studies other than as requested.</p>	<p><b>Alabama Medicaid Agency Response:</b> Only the number of approval determinations made by the Contractor is required in the prior authorization statistics section.</p>
<p><b>Page 18, Section 2.3: Reporting, Section E:</b> Can you please provide additional information on what you anticipate to be "reasonable notice" due to the extensive development that may be required for complex ad hoc report requests.</p>	<p><b>Alabama Medicaid Agency Response:</b> 'Reasonable notice' will be determined between Medicaid and the Contractor and will depend on several factors, such as involvement of Medicaid's fiscal agent, HP, Medicaid staff time, and the complexity of the request.</p>
<p><b>Page 18, Section 2.3: Reporting, Section F:</b> Can you please provide additional information concerning the Problem Identification Report? As stated, the reports that may be required to fulfill this request are not fully defined to allow vendors to ensure they appropriately meet this requirement, such as what problem areas are to be reported on.</p>	<p><b>Alabama Medicaid Agency Response:</b> If any problem has been identified, this report is required. This may include problems that have been identified by providers and reported to the Contractor for corrective action or may be a problem that has been identified by the Contractor and reported to Medicaid for system correction, etc.</p>
<p><b>Page 18, 2.3 Reporting, Section G. A monthly claims feed is required to provide an accurate monthly savings analysis. Will Alabama have the ability to provide a monthly claims feed?</b></p>	<p><b>Alabama Medicaid Agency Response:</b> Yes.</p>
<p><b>Page 19, 2.6 Management Criteria and Protocol (Additional Contractor Responsibilities).</b> We currently manage members in Alabama using Radiologists in addition to physicians of many other specialties who are trained specifically on the evidence-based guidelines for the Radiology Program. For the purpose of this program, can a board-certified physician work under the direct supervision of a board-certified radiologist who is licensed in the state of Alabama for the purpose of making adverse determinations?</p>	<p><b>Alabama Medicaid Agency Response:</b> Yes. An amendment has been made to this section as follows:</p> <p>Ensuring that board-certified, Alabama licensed radiologists or board certified physicians (licensed in Alabama) working under the direct supervision of a board-certified radiologist make all decisions to deny covered services or approve services other than as requested on the basis that services are not medically necessary.</p>

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<p><b>Page 21, Section 2.11: Informal Review and Fair Hearing, Section A: Fair Hearings:</b> Will the vendor's consulting physician be allowed to attend fair hearings telephonically?</p>	<p><b>Alabama Medicaid Agency Response:</b> Physical representation by a witness at a fair hearing will be required</p>
<p><b>Page 21, 2.11: Informal Review and Fair Hearing.</b> Are the vendor representatives required to be physically present at Fair Hearings or may the representatives be available via phone?</p>	<p><b>Alabama Medicaid Agency Response:</b> Physical representation by a witness at a fair hearing will be required.</p>
<p><b>Page 26, Section 2.14: Key Personnel, Section C: Physician Reviewers, Section 4:</b> Will the vendor's physician reviewer be allowed to attend appeal hearings and defend denial decisions telephonically?</p>	<p><b>Alabama Medicaid Agency Response:</b> Physical representation by a witness at a fair hearing will be required.</p>
<p><b>Attachment E: CPT Code Listing:</b> Does Alabama Medicaid include 78606 (Brain PET, perfusion) as part of its coverage? While this has been included in the CPT codes list, most CMS-related entities do not cover this procedure.</p>	<p><b>Alabama Medicaid Agency Response:</b> Procedure code 78606 (Brain PET, perfusion) has not been included in Attachment E of this ITB.</p>
<p><b>Page 7, section 1.4, d</b> requests two performance references. The evaluation checklist (#7) on page 65 requests 3 client references. Please clarify the difference between performance references and client references.</p>	<p><b>Alabama Medicaid Agency Response:</b> A minimum of two performance references is required. An amendment has been made to Attachment F, 'Evaluation Checklist', item 7.</p>