

**ITB 10-X-2212639**  
**Bidders Questions Submitted to Medicaid**

1. Is the ITB and the Operational Manual the same as the ITB and Operational Manual issued as part of ITB #10-X-2193986? If not, please identify the areas of distinction.

**Response:** The specific areas of change are the

- ITB number,
- the schedule of activities,
- The Bid Submission Requirements -The outside cover of the package containing the bid shall be marked as follows: Maternity District Being Bid was changed from District 1 -14 to District 8
- Amendment documents- Number one from Amendment One was deleted as it had no information pertaining to this rebid.

There were no changes to Amendment Two.

2. What is the Medicaid rural fee-for-service rate for caesarean and vaginal deliveries for delivering health care providers?

**Response:** Procedure Code 59400 the rural rate is \$1700.00  
Procedure Code 59510 the rural rate is \$1700.00

3. What will Medicaid do with respect to the provision of maternity care services in District 8 if there are no bidders?

**Response:** This has no bearing on the procurement of a new contract.

Is there any possibility that the ceiling will be raised?

**Response:** No.

4. Can a provider of Covered Services participate in the Medicaid program but withhold certain services to Maternity Care Program beneficiaries by refusing to contract with certain MCP bidders, particularly when such a provider is the only provider of these services in a particular area (e.g. anesthesia services provided solely by hospital employees or a Delivering Health Care Provider that is a sole source of such services in a particular part of a District)?

The withholding of services that we are inquiring about could be in the form of refusing to contract with a potential bidder or demanding compensation in excess of reasonable rates. Should such a situation occur, is there any other way through which an MCPbidder can show a complete network?

**Response:** The Primary Contractor can direct the DHCP's to utilize those hospitals with which the Primary Contractor has a contract for anesthesia services. There is no

requirement under the ITB that the hospitals have to be within 50 miles of all areas of the district. However, the Primary Contractor does remain responsible for payment of anesthesia services for its recipients, no matter where the delivery occurs. While a Medicaid provider, such as a physician or hospital, is not required by agency regulations to accept all Medicaid-eligible patients, any anti-trust or anti-competitive activities by a provider related to this procurement could be subject to prosecution under federal and state law.

5. ITB Section 2.6a, p. 28: If a potential bidder submits a proposal lacking a contract for a hospital-based service (anesthesia) and the only provider of such service is a sole community provider that refuses to contract with the potential bidder, will the potential bidder be disqualified for failure to show a complete network?

**Response:** The ITB requires that letters of intent to subcontract be provided for anesthesia services but does not require that these services be subject to the 50-mile requirement.