

Cancer Management Services RFI

9/24/2014

Time Extension

The timeline for submitting responses to the Cancer Management Services RFI has been extended by two weeks to **October 9th, 2014**.

Vendor Questions and Answers

Question ID:	1
Date Question Asked:	09/12/2014
Question:	How do you reimburse for infused and oral drugs? (Average Wholesale Price (AWP), Average Sales Price (ASP)+6 percent, Wholesale Acquisition Cost (WAC)+6 percent or other mechanism)
AGENCY Answer:	Outpatient pharmacy drugs through an NCPDP claim is reimbursed based on Average Acquisition Cost (AAC), or WAC+0% if no AAC is present. Physician Administered Drugs (PAD) through a CMS1500/HCPC claim is reimbursed based on Medicare's current rate based on ASP.
Question ID:	2
Date Question Asked:	09/12/2014
Question:	What is the difference between chemo dollars and chemo prescription dollars in Attachment A
AGENCY Answer:	Chemo Dollars are the cost of the chemo administration plus the cost of the chemo medication billed by the hospital (CPT code 96401-96549 and j9000-j9999). While Chemo prescription dollars are cost just for the medication where AHFS CLASS='10000000'.
Question ID:	3
Date Question Asked:	09/12/2014
Question:	What components are included in the Chemo dollars? e.g. infused and oral drugs only or are there other components e.g. professional services, lab, etc.?
AGENCY Answer:	Chemo Dollars are the cost of the chemo administration plus the cost of the chemo medication billed by the hospital (CPT code 96401-96549 and j9000-j9999).

Question ID:	4
Date Question Asked:	09/12/2014
Question:	Can you provide us with the eligible membership by category (e.g. SOBRA, MLIF, Refugees, SSI)? What is the age breakdown? If you removed children under age 18 what would be the eligible membership and their median age?
AGENCY Answer:	Medicaid has an approximate combined total population for the identified groups of 720,000 (Total average of Eligible membership overall). While Medicaid cannot provide the age breakdown at this time, the utilization table on page 7 of the RFI provides the # eligible members with cancer for each listed population group for the time period applicable. However, Medicaid is open to any vendor information regarding specific experiences or recommendations regarding age breakdown codes that may offer an increase in effectiveness and cost savings through a managed services program.
Question ID:	5
Date Question Asked:	09/12/2014
Question:	Will you provide utilization data based on recommended CPT codes that would be managed for a comprehensive program?
AGENCY Answer:	This information not known in its entirety at this time. Medicaid has provided a utilization table of populations currently served by the Medicaid services for oncology and radiation treatment. Medicaid is open to any vendor information regarding specific experiences or recommendations regarding CPT codes that may offer an increase in effectiveness and cost saving through a managed services program.
Question ID:	6
Date Question Asked:	09/12/2014
Question:	Can you clarify prior authorization of cancer studies?
AGENCY Answer:	Medicaid considers prior authorizations to be “pre-approvals before treatment or treatment program is initiated for the patient.”
Question ID:	7
Date Question Asked:	09/23/2014
Question:	How does this coincide with the Alabama Medicaid RCO programs that are being developed? What kind of overlap or coordination of care is needed? How will those programs need to work together?

AGENCY Answer:	Currently, these services are not included in the RCO program. At this time, the approach and overlap of these programs are not considered to be relative to the purposes of this RFI.
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