

**QVL SOLICITATION
AMENDMENT #2**

YH26-0001 QVL Specialty Contract for Transplantation Services	Solicitation Due Date July 8, 2025, 3:00 pm Arizona Time	Procurement Officer: Cynthia Smolens Email: procurement@azahcccs.gov
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A signed copy of this amendment must be submitted with your Application documents.

The attached Answers to Questions are incorporated as part of this solicitation amendment.

This QVL Solicitation is amended as follows:

Paragraph # or Title	Page #	Amendment
Exhibit D		Exhibit D - Day 11+61+ Transplant Stage Component Outlier Worksheet Instructions has been removed and replaced in response to Question 2 of the Questions and Answers Form.

OFFEROR HEREBY ACKNOWLEDGES RECEIPT AND UNDERSTANDING OF THIS SOLICITATION AMENDMENT.	THIS SOLICITATION AMENDMENT IS HEREBY EXECUTED ON THIS DAY, IN PHOENIX, AZ.
SIGNATURE OF AUTHORIZED INDIVIDUAL:	SIGNATURE: SIGNATURE ON FILE
TYPED NAME:	TYPED NAME: Meggan LaPorte, CPPO, MSW
TITLE:	TITLE: Chief Procurement Officer
DATE:	DATE:



QUESTIONS AND ANSWERS (Q & A) FORM

#YH26-0001 QVL Specialty Contract for Transplantation Services

Questions shall be submitted electronically on this form to Procurement@azahcccs.gov no later than

June 12, 2025, 3:00 PM, Arizona Time

Question #	CONTRACTOR NAME	Paragraph # or Title	Page #	Vendor Question	AHCCCS Response
1.	Banner Health	Attachment 1, bullet 5	1	Please provide clarification on what data we would retrieve from ASFS that will need to be destroyed.	This refers to any confidential documents that AHCCCS would share with the Applicant. There are no confidential documents being shared for this solicitation.
2.	Banner Health	Exhibit D	1	The Exhibit has Attachment E-1 (page 1) and Attachment E-2 (page 2) listed in the top right corner. Attachment E-1 or E-2 are not included in the packet. Should they be?	There is not an Attachment E1 or E-2. The document has been corrected through Solicitation Amendment 2 with this reference removed.
3.	Banner Health	Insurance Requirements	24-27	We are self-insured and in the past AHCCCS has accepted our evidence of insurance. Will AHCCCS still accept this to meet the requirement for insurance?	AHCCCS will consider self-insurance on a case-by-case basis.
4.	Banner Health	Uniform Terms and Conditions, 3.7	31	Please elaborate on what the expectation is or what the State is looking for Continuous Improvement?	This term is generic across all state contracts. AHCCCS does not have defined expectations at this time.
5.	Banner Health	Uniform Terms and Conditions, 3.9	31-32	Please clarify if this language applies to a new procedural standard or clinical technique.	No, this is not applicable to any new procedural standard or clinical technique.



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6.	Mayo Clinic	Scope of work 6.1 Authorization request	4	Is requesting prior authorization from AHCCCS American Indian Health Plan for AHCCCS members enrolled in Fee-For Service, including eligible American Indians who choose to serve through the Indian Health Service or tribal health programs a new process.	No, The AHCCCS Division of Fee For Service Management (DFSM) has been authorizing these transplants for a number of years now.
7.	Mayo Clinic	<u>Scope of work 6.1</u> Authorization request	6	When AHCCCS issues the approved Authorization Request can AHCCCS issue an Approved Authorization request for Transplant Evaluation instead of an Authorization for Consult only? When a prior auth request is received for Consult only it requires the staff to call again for an Authorization for Transplant Evaluation.	No, transplant consultations are not paid under the transplant contract. They are paid FFS. The health plan determines if transplant consult is required before transplant evaluation.
8.	Mayo Clinic	Insurance Requirements	24-27	Mayo Clinic is Self-Insured and has a Certificate of Liability (COL) therefore we do not have an insurance rating. SAM coverage is NOT Excluded for Mayo's self-funded COL. Will Self-funded Certificate of Liability be accepted. AHCCCS has accepted it in the past.	Please see response to question #3.
9.	Mayo Clinic	Covered Transplant Services	Attach# 3	Simultaneous Heart/Liver & Simultaneous Heart/Kidney are new offerings. Will AHCCCS provide the rates since AHCCCS policy for reimbursement is 50% for the second organ.	AHCCCS is postponing negotiations for these organ types.



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10.	Mayo Clinic	Special Terms and Conditions	20	<p>Mayo Clinic does not obtain a signed confidentiality statement containing language approved by AHCCCS from its employees , agents, and subcontractor. Mayo Clinic Policy Dictates Contractor has a Confidential Business Information Policy (the “Policy”) that is a component of Contractor’s Code of Ethics and Conduct (“Code of Ethics”). Pursuant to the Policy and Code of Ethics, all Contractor employees are required to protect confidential information and access to confidential information from non-Mayo parties is limited to a need-to-know basis. Moreover, unauthorized use or disclosure of confidential information will result in disciplinary action, including but not limited to termination from employment. All subcontractors are contractually subject to strict confidentiality obligations. In consideration of Contractor’s Policy and Code of Ethics, Contractor does not require its employees or subcontractors to execute a confidentiality agreement specific to any payer relationship.</p> <p>Will this governing policy meet AHCCCS subcontractor confidentiality statement?</p>	The Applicant may submit their policy for AHCCCS to review. AHCCCS will not unreasonably withhold approval.
11.	Phoenix Children’s Hospital	Phoenix Children's Hospital pricing matrix	3	<p>In the matrix that you sent over on 5/22, it appears that there was an error on the pediatric haploid related per diem rate. The rate listed in the matrix was \$2,394. We believe it should be \$2,474 which mirrors the per diem rate for all other transplant types including adult haploid.</p>	Update will be made.



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12.	Phoenix Children's Hospital	Transplant Extended Eligibility-Option 1 and Option 2 7.17.2.1.	12	How does AHCCCS determine that a Member is "medically ineligible"? All documentation on the link provided did not provide a definition.	If a member is listed for Transplant they are medically eligible.
13.	Phoenix Children's Hospital	Transplant Extended Eligibility-Option 1 and Option 2 7.17.2.2.	12	Several transplant types (heart, deceased donor liver, deceased donor kidney) cannot be scheduled. How would this timing work if a transplant is done emergently/non-scheduled? Also, what reassurance would providers have the patient will be re-enrolled and insured for transplant services?	The Member will be enrolled for the duration of the transplant services and the facility will be reimbursed for those services other than share of cost. Facilities will be able to verify Member's enrollment during transplant.
14.	Phoenix Children's Hospital	Transplant Extended Eligibility-Option 1 and Option 2 7.17.2.2.	12	The underlying disease/diagnosis for which the patient needs a transplant will require ongoing treatment until patient receives transplant. How would providers be reimbursed for treating the underlying diagnosis in this scenario?	With Option 2 Extended Eligibility, the Member would be responsible for all other services other than the transplant. For this reason, this Option is not selected very often by Members.