



Department of Health

RFP C042530

New York State Elderly Pharmaceutical Insurance Coverage (EPIC) and American Indian Health (AIH) Programs

Questions and Answers Posted May 12, 2026

Question #	Corresponding RFP Section	Question	Answer
1.	General Question	Will the Department please provide the average monthly volume of calls handled by the call center broken out by member?	Average of 8,700 per month.
2.	General Question	Will the Department please provide the average monthly volume of calls handled by the call center broken out by pharmacy?	Average of 900 per month.
3.	General Question	Will the Department please provide the average monthly volume of calls handled by the call center broken out by prescribing provider?	Average of 50 per month.
4.	General Question	Will the Department please provide the monthly average call hold time?	The average hold time is 90 seconds.
5.	RFP Section 1.0 (Calendar of Events) and Section 2.3 (Term of the Agreement) Pg. 4; Pg. 6	The Calendar of Events lists an anticipated contract start date of June 1, 2027 and a Go Live date of December 1, 2027. Section 2.3 states that the contract term is seven (7) years commencing on the date shown in the Calendar of Events, with a six-month implementation period ending at Go Live.	The 7-year term begins at the start date, not the Go Live date. Anticipated start date is 5/1/2027. Please see Amendment #2 for an updated Calendar of Events.

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		Can the Department please clarify whether the seven (7) year contract term includes the six-month implementation period noted prior to Go Live, or whether the seven-year term begins at the Go Live date?	
6.	RFP Section 1.0 (Calendar of Events) Pg. 4	The Calendar of Events lists the proposal due date as May 26, 2026 and an Anticipated Contract Start Date of June 1, 2027. Will the Department please confirm the June 1, 2027 Contract Start Date?	The 6/1/27 Start date was posted in error. The correct Start Date is 5/1/2027. Please see Amendment #2 for an updated Calendar of Events.
7.	RFP Section 1.0 (Calendar of Events) and Section 2.3 (Term of the Agreement) Pg. 4	The Calendar of Events lists an anticipated contract start date of June 1, 2027 and a Go Live date of December 1, 2027. Given the scope and complexity of the EPIC and AIH Programs PBM implementation—including systems integration and testing, data conversion and validation, regulatory and CMS compliance requirements, stakeholder and provider readiness, operational training, and overall risk mitigation—would the Department consider extending the required implementation timeline from six (6) months to up to twelve (12) months to support a stable, compliant, and low-risk program Go Live?	The implementation timeline cannot be adjusted and the anticipated contractor must adhere to the implementation timeline of six (6) months. The Go Live date is November 1, 2027. Please see Amendment #2 for an updated Calendar of Events.
8.	RFP Section 4.1.1€(4) and Section 4.1.1€ Pg. 9	Section 4.1.1€(4) requires establishment of an office within a 20-mile radius of One Commerce Plaza, Albany, NY, while Section 4.1.1€ requires establishment of an office within 25 miles of the New York State Capitol Building within 60 days. Could the Agency please clarify the discrepancy regarding the required number of miles for establishing an office, including from which reference location the distance is intended to be measured?	Establishment of an office must be within a 20-mile radius of One Commerce Plaza, Albany, NY Please see Amendment #2.

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9.	RFP Section 2.3 and Section 4.7(a) Pg. 6; Pg. 32	Section 2.3 states that the Contractor will not be paid for any operational expenses until all implementation activities have been implemented, while Section 4.7(a) provides for milestone-based implementation payments prior to Go Live. Can the Department please confirm whether implementation milestone payments referenced in Section 4.7(a) are intended to be the only compensation for all pre-Go Live implementation activities, including staffing, systems configuration, and operational readiness costs?	Yes. That is correct. The implementation payments are the only payments until implementation is complete. Then monthly operations payments begin.
10.	RFP Section 4.0 (Functional Summary Chart) and Section 4.1.2.12 Pg. 7; Pg. 19-20	The functional summary chart in Section 4.0 indicates that eligibility determination applies to EPIC only, while Section 4.1.2.12 assigns AIHP enrollment validation, including reenrollment activity and other eligibility-related activities to the Contractor. Can the Department please clarify the Contractor's responsibility for eligibility determination and reenrollment validation for the AIHP program, including whether eligibility is determined solely by Tribal Nations or requires Contractor adjudication or verification?	AIH eligibility is determined solely by Tribal Nations and does not require contractor adjudication or verification.
11.	RFP Section 4.1.2 Operations, 8. Customer Service / Member and Provider Relations Pg. 15; Pg. 16	In Section A, the RFP states that the call center will provide customer service for members and pharmacy providers through telephone and written inquiries. However, Section C on page 16 indicates that the call center will assist prescribers, pharmacies/pharmacists, vendors, and Medicare Part D plans to address errors, process prior authorizations, and avoid issues during claims processing. Could the Agency please clarify the intended scope of call center support and confirm which stakeholder groups are to be served?	The call center will primarily assist members, pharmacy providers and prescribers, but should be available and able to assist any caller. Call staff need to be trained and capable of responding to a wide variety of questions, complaints and inquiries.

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12.	RFP Section 4.1.2.18 and Section 4.7(d) Pg. 23; Pg. 32	<p>Section 4.1.2.18 states that routine enhancements and modifications must be provided at no cost, while Section 4.7(d) allows reimbursement for Department-approved system programming changes.</p> <p>Can the Department please clarify how “routine” system enhancements that must be provided at no cost are distinguished from Department approved system programming changes that may be billable?</p>	<p>Routine system enhancements would be scheduled, proactive updates or modifications to improve performance.</p> <p>Billable system programming changes would be related to the incorporation of a new requirement or related to a change based on new state or federal laws.</p>
13.	RFP Section 4.6 and Section D.6(d) Pg. 32; Pg 52	<p>Section 4.6 requires submission of a transition plan no later than twelve (12) months prior to contract end, while D.6(d) references fifteen (15) months. Can the Department please confirm whether the required transition plan must be submitted twelve (12) months or fifteen (15) months prior to contract expiration, as the RFP references both timelines?</p>	<p>Confirming the required transition plan must be submitted twelve (12) months prior to contract expiration. The language has been corrected in Amendment #2.</p>
14.	Attachment C (SLA Table) Sheet #1	<p>Attachment C includes two separate SLAs both labeled as “Number 6” (Online Inquiry and Data Access Systems Availability and Claims Payment Accuracy).</p> <p>Can the Department please confirm the correct SLA numbering and whether these are intended to be distinct SLAs? RECOMMEND: Can the Department please review and correct the numbering sequence in Attachment C, as SLA #6 appears to be duplicated in numbering but has separate SLA statements?</p>	<p>Claims Payment Accuracy should be #7. The numbering is corrected in Amendment #2.</p>
15.	Attachment C (Claims Payment Accuracy) Sheet #1	<p>The Claims Payment Accuracy SLA includes corrective action requirements but does not specify a measurable performance standard, reporting methodology, penalty structure, or cap.</p>	<p>The SLA states “In cases of overpayments that were in the control of the contractor but could not be corrected by reprocessing and/or adjusting, the State shall be</p>

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		Can the Department please clarify whether this SLA is intended to be informational only, or if performance thresholds and penalties will be added?	reimbursed by the Contractor for the amount of the overpayments". The amount of the overpayments, which cannot be corrected by the Contractor would be the penalty amount.
16.	Attachment C (SLAs #5 and #6) Sheet #1	Multiple SLAs exclude "scheduled downtime" from availability calculations but do not define allowable duration, frequency, or approval process. Can the Department please clarify how scheduled downtime is defined and governed?	Scheduled down time must be reported in advance to the Department and done outside of normal business hours.
17.	Attachment F3 Pg. 4; Flowchart	Attachment F3 references submission of RFAI data to a third party vendor and SSA. Could the Agency please confirm whether the third party vendor used for RFAI submission and SSA/LIS determinations is a state designated (fixed) vendor, or if bidders may propose a contractor selected approved vendor that meets all applicable requirements?	Bidders may propose a vendor that meets all applicable requirements.
18.	Attachment 8 DOH Agreement Pg. 9	Are affiliates considered subcontractors for purposes of approval, reporting, and Vendor Responsibility Questionnaires?	An affiliate is not necessarily a subcontractor unless they are working on the services of the contract along with the prime. They would also need to be slated to earn 100K or more over the life of the contract.
19.	RFP Section 4.10 Pg. 34	The requirement states the following: If (a) the Department determines that the Contractor is not in compliance with the M/WBE requirements of the Contract and the Contractor refuses to comply with such requirements, or (b) the Department finds that the Contractor has willfully and intentionally failed to comply with the M/WBE participation goals established in the Contract, the Contractor may be	This is standard language. There is not a typo. If the Contractor intentionally fails to comply with the MWBE participation goals established in the Contract, the Contractor may be required to pay to the Department liquidated damages and will be considered during future Vendor Responsibility Profile reviews should the

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		required to pay to the Department liquidated damages and will be considered during future Vendor Responsibility Profile reviews should the bidder bid on future opportunities with the Department. This appears to be a typo. Should this say that the Contractor may be required to pay to the Department liquidated damages and will not be considered during future Vendor Responsibility Profile reviews should the bidder bid on future opportunities with the Department?	bidder bid on future opportunities with the Department.
20.	RFP Section D.1.2.13 Pg. 48	Bullet a states "Bidders should describe how their proposed claims processing claims will meet all the requirements listed in this RFP (Section 4.1.2.13)." Should this say "Bidders should describe how their proposed claims processing system will meet all the requirements listed in this RFP (Section 4.1.2.13)"?	RFP Section D.1.2.13 Pg. 48 Yes.
21.	Section 4.5 (Security) Pg. 29	Pg. 29 references a "System Overview" document that is not included with the RFP. "All bidders must complete the System Overview document – which is attached to this RFP – to thoroughly and accurately describe the technical and security that will support the proposed system." Can the State make that document available to bidders?	This particular section and language are no longer relevant. Bidders may ignore this request. Amendment # 2 advises this section is stricken from the RFP.
22.	Attachment A Proposal Document Checklist; Pg. 57	Attachment 14 added by Amendment 1 does not appear on the Attachment A checklist. Will the State please provide a corrected copy of Attachment A?	A corrected Attachment A is included in Amendment #2.
23.	Attachment B Cost Proposal; C. Systems Development; Pg. 9-2	It is not clear what should go in the Total System Development Cost column. Please provide the formula that should be used to calculate the Total System Development Cost.	Multiply the hourly rate for each year by 200 (estimated annual hours per year) and add them all up for a total for each job title and then add those up for a grand total.

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24.	6.1.12 State Finance Law Consultant Disclosure Provisions; Pg. 39	The RFP description of the State Finance Law Consultant Provisions indicates that the successful bidder must complete Forms A and B. Please clarify if all bidders must complete these forms and submit them with their proposals or does only the successful bidder complete and submit the forms after receiving notice of intent to award.	Only the successful bidder will be required to complete Forms A and B after receiving the notice of award.
25.	6.1.12 State Finance Law Consultant Disclosure Provisions; Pg. 39	Form B appears to be intended for a yearly report to the State. Bidders would not be able to report on the activity for this contract before it is awarded. Please clarify which forms (Form A and Form B or only Form A) need to be submitted with bidders' proposals.	Forms A and B are not submitted with bidders' proposals. Forms A and B are submitted by the winning bidder.
26.	1.0 Calendar of Events; Pg. 4	The current contract ends on April 30, 2027. Is the anticipated contract start date of June 1, 2027, correct?	No, the anticipated contract start date is changed to 5/1/27.
27.	4.1.1 Implementation; Pg. 8	What are the required written communications for AIHP?	See 11. Mailroom and Printing Services; Page 18, and 12. American Indian Health Program; Page 19-20
28.	4.1.1 Implementation; Pg. 8	What are the requirements for member relations for AIHP?	See 12. American Indian Health Program; Page 19-20.
29.	4.1.1 Implementation; Pg. 8	Are AIHP mail functions required?	Yes, see 4.1.2.11, a2, b1, c3
30.	11.c. Printing Services; Pg. 19	What mailroom equipment is required for the new contract?	The Contractor must provide all equipment deemed necessary to meet the requirements listed in Section 4.1.2.11
31.	11.c. Printing Services; Pg. 19	Are the mail carrier services required in this contract?	No.
32.	11.b Outgoing Mail; Pg. 18	How are the member email and text message information collected currently? Is the information required on the EPIC application?	This information is currently not collected or required on the EPIC application.
33.	11.b Outgoing Mail; Pg. 18	Does the member need to actively select and opt in/opt out for email and text message as their preferred communication method?	An effective outreach plan will include innovative approaches that meet the needs of the member and allow for effective delivery of program information.

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34.	8. Customer Service / Member and Provider Relations; Pg. 15	Are the hours of Operation for the AIHP line the same as the EPIC member line? Monday – Friday 8:00 am- 5:00 pm.	Yes.
35.	8. Customer Service / Member and Provider Relations; Pg. 15	Will the EPIC provider line receive closed phone prompt between the non-available hours on weekdays (9:01pm- 6:59am), weekends and holidays (5:31pm and 8:29 am)?	Yes.
36.	8. Customer Service / Member and Provider Relations; Pg. 16	What are the types of prior authorizations?	Prior authorizations are required for individual drug claims that exceed five thousand dollars (\$5000) or claims for drugs for the treatment of sexual or erectile dysfunction as outlined in New York State Elder Law Section 241(1)(d).
37.	Attachment C - RFP SLA; Customer Service/ Member and Provider relations	Are calls abandoned within 15 seconds counted or excluded from the abandonment rate? Would DOH consider excluding calls abandoned within 15 seconds from counting towards the abandonment rate?	DOH would consider excluding calls abandoned within 15 seconds from this SLA. This will be negotiated with the successful bidder after contract award.
38.	7.0 Proposal Submission; Pg. 53	Are there any file size limits when sending proposals to the State via email?	While there is no file size limit, the department discourages overly lengthy proposals and encourages bidders to submit proposals several hours prior to the deadline in case there are deliverability issues. Please see Section 7.0 Proposal Submission that states : Submit three (3) separate, searchable, and open and permission password protected, PDF proposals in three (3) separate emails to: OHIPContracts@health.ny.gov. Use this naming convention for the subject line of each email: <Type of Proposal Submission, Bidder Name, RFP#XXXXXX>.

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39.	Request for Additional Information (RAI) Process; Pg. 14	What source is used to identify mismatched and rejected records?	Mismatched or rejected records occur when the CMS COB file is matched to the EPIC members. When that occurs, follow-up is required via phone calls or written inquiries.
40.	4. Scope of Work (Pharmacy Audit); Pg. 7	What is the expected volume and type of pharmacy audits required?	There is no expected volume. Please refer to 4.1.2 Operation Section 13, h and i and Section 16, a b and c. and 4.3 Reporting Section 4.3.4
41.	Key Personnel; Pg. 16	Does a qualified interim staff member qualify as meeting the requirement that a key staff position is not vacant for more than 45 business days?	Subject to approval by the Department, yes. All key staff positions will be full-time roles filled by individuals that are 100% dedicated with no conflict of interest to this initiative. All replacement key staff must meet the requirements outlined in Attachment D and be approved by the Department.
42.	Banking Services; Pg. 23	Will the Department cover the banking fees?	Per the RFP, see page 23: "All bank charges are the liability of the contractor and must be built into the applicable administrative fee."
43.	13.i Claims Payment; Pg. 21	Can the State confirm the reporting entities are Call Center and Quality Teams for analyzing and monitoring claim submissions to identify errors, fraud or abuse, and reporting?	The bidder is required to analyze and monitor claim submissions to identify errors, fraud or abuse and report such information to the State. The State doesn't expect this task is limited to certain teams, rather we would expect a process for immediate reporting and escalation is documented for all staff using one of the bidder's approved reporting channels.