**REQUEST FOR PROPOSALS (RFP)**

**REHABILITATIVE CLAIMS SUBMISSION AND PROVIDER REVIEWS**

**OBF/GMD/13-001-S**

**Amendment No. 4**

**August 6, 2013**

Prospective Offerors:

This amendment is being issued to amend certain information in the above named RFP. All information contained herein is binding on all Offerors who respond to this RFP. Specific parts of the RFP have been amended. The changes are listed below. New language has been double underlined and marked in bold (i.e., **word**) and language that has been deleted has been marked with a strikethrough (i.e. ~~word~~).

1. Section 1.1, Page 1 **Summary Statement**

The Department of Human Resources (Department or DHR), Division of Budget and Finance, Cost Allocation and Revenue Management (CARM), intends to acquire contractual services for the purpose of providing Rehabilitative Claims Submissions and Provider Review Services. The successful Offeror shall use its own software to convert the Medicaid Claims received from DHR and Department of Juvenile Services (DJS) into the Health Insurance Portability and Accountability Act (HIPAA) compliant format, ANSI ASC X12N 837P format, version ~~4010~~ **5010** (HIPAA- Compliant 837-P Format), for submission to the Maryland Medicaid Management Information System (MMIS). The successful Offeror shall develop and implement an online system for the submission of the rehabilitative services attendance data and provide Medicaid Residential Rehabilitation Services Program (Program) training on the use of the online claims submission process to DHR and providers of therapeutic and rehabilitative group home services (Providers). The successful Offeror shall also work with DHR and DJS to assist and train Providers on how to maintain records and documentation in accordance with federal, State and local regulations, policy and procedures. The resulting Contract shall be for a three year period beginning on or about September 1, 2013 and ending on or about August 31, 2016. Only one award is anticipated from this solicitation.

1. Section 1.10 A **835 Form**

835 Health Care Claim Payment/Advice (Version ~~004010~~**~~0~~**~~X091A1~~ **005011X221A1**). This transaction is used to communicate the results of claim adjudication. It is used to convey and Explanation of Benefits (EOB) which explains what is or is not being paid on the claim that has been submitted and why. This form is also called the Remittance Advice.

1. Section 1.10 B **837P Form**

837 Health Care Claim ~~Institutional~~ **Professional** Version ~~004010X096A1~~ **005010X222A1**. This transaction can be used to submit health care claim/encounter billing information from providers of health care services to Maryland Medicaid, either directly or through an intermediary (i.e.. clearinghouses, etc.). Refer to Companion Guide for 837 Health Care Claim ~~Institutional~~ **Professional** Version ~~004010X096A1~~ **005010X222A1** at dhmh.state.md.us website. ~~(Version 5, May 14, 2007).~~

**Important Note:** The purpose of the amendment is to advise that the 4010 format is no longer in use. Therefore, all references in the RFP to the 4010 format shall be revised to indicate the 5010 format, as may be revised, including any and all accompanying forms. Offerors shall have until the close of business on **August 10, 2013** to acknowledge the change and submit any revisions or clarifications to its proposals deemed necessary.

Should you require clarification of the information provided in this Amendment, please contact me via email at aung.htut@maryland.gov or by telephone at (410) 767-7775.

By:

Aung Htut

 Procurement Officer