



Purchasing Division  
2019 Washington Street East  
Post Office Box 50130  
Charleston, WV 25305-0130

State of West Virginia  
Request for Proposal  
34 — Service - Prof

Proc Folder: 643604

Doc Description: Addendum #4 RFP for Mountain Health Trust (MHT) Managed Care

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2020-01-08	2020-02-12 13:30:00	CRFP 0511 BMS2000000002	5

**BID RECEIVING LOCATION**

BID CLERK  
DEPARTMENT OF ADMINISTRATION  
PURCHASING DIVISION  
2019 WASHINGTON ST E  
CHARLESTON WV 25305  
US

**VENDOR**

Vendor Name, Address and Telephone Number:

**FOR INFORMATION CONTACT THE BUYER**

Brittany E Ingraham  
(304) 558-2157  
brittany.e.ingraham@wv.gov

Signature X

FEIN #

DATE

All offers subject to all terms and conditions contained in this solicitation

**ADDITIONAL INFORMATION:**

Addendum No. 4 - issued to provide the pre-bid meeting sign-in sheets.

No other changes.

INVOICE TO		SHIP TO	
PROCUREMENT OFFICER - 304-356-4861 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251  CHARLESTON WV25301-3709  US		PROCUREMENT OFFICER - 304-356-4861 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251  CHARLESTON WV 25301-3709  US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	MHT MCO FY2021	0.00000			

Comm Code	Manufacturer	Specification	Model #
85000000			

**Extended Description :**

MHT MCO FY2021

INVOICE TO		SHIP TO	
PROCUREMENT OFFICER - 304-356-4861 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251  CHARLESTON WV25301-3709  US		PROCUREMENT OFFICER - 304-356-4861 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251  CHARLESTON WV 25301-3709  US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	MHT MCO FY2022	0.00000			

Comm Code	Manufacturer	Specification	Model #
85000000			

**Extended Description :**

MHT MCO FY2022

INVOICE TO		SHIP TO	
PROCUREMENT OFFICER - 304-356-4861 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251  CHARLESTON WV25301-3709  US		PROCUREMENT OFFICER - 304-356-4861 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251  CHARLESTON WV 25301-3709  US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	MHT MCO FY2023	0.00000			

Comm Code	Manufacturer	Specification	Model #
85000000			

Extended Description :  
MHT MCO FY2023

INVOICE TO		SHIP TO	
PROCUREMENT OFFICER - 304-356-4861 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV25301-3709 US		PROCUREMENT OFFICER - 304-356-4861 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	MHT MCO FY2024	0.00000			

Comm Code	Manufacturer	Specification	Model #
85000000			

Extended Description :  
MHT MCO FY2024

SCHEDULE OF EVENTS		
Line	Event	Event Date
1	Pre-bid Meeting	2020-01-08
2	Questions Due	2020-01-17

# SOLICITATION NUMBER: CRFP BMS2000000002

## Addendum Number: 4

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The purpose of this addendum is to modify the solicitation identified as CRFP BMS2000000002 ("Solicitation") to reflect the change(s) identified and described below.

### Applicable Addendum Category:

- ☐ Modify bid opening date and time
- ☐ Modify specifications of product or service being sought
- ☐ Attachment of vendor questions and responses
- ☒ Attachment of pre-bid sign-in sheet
- ☐ Correction of error
- ☐ Other

### Description of Modification to Solicitation:

To provide the pre-bid meeting sign-in sheets.

No other changes.

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith and is specifically incorporated herein by reference.

### Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

# Pre-Bid Sign-In Sheet

Solicitation Number: CRFP BMS 20\*02

Date of Pre-Bid Meeting: 01/08/2020

Location of Prebid Meeting: One Davis Square, CR 134

**Please Note:**

Vendors must sign-in on this sheet to verify attendance at the Pre-Bid meeting.  
Failure to legibly sign in may be grounds for declaring a vendor ineligible to bid.  
For further verification, please also provide a business card if possible.

<u>Firm Represented:*</u>	<u>Rep Name (Printed):</u>	<u>Firm Address:</u>	<u>Telephone #:</u>	<u>Fax #:</u>	<u>Email:</u>
AmeriHealth Caritas	Rhonda Petr	100 Stevens Drive Philade/Phx, PA 19113	502 299-0550		rpetr@ amerihealthcaritas
Molina Healthcare	Shana Phares	local: 1210 Kanawha Blvd East Charleston WV 25301	502-233- 1076		michael.castorday@ molinahealthcare.com
Unicare	Jenna Tincher-Mann	200 Association Drive Suite 200 Charleston, WV 25311	513 569- 2331	877- 833-5729	jenna. tincher-mann @anthem.com
UniCare	Barbara Wessels	200 Association Drive Suite 200 Charleston, WV 25311	304-347- 2478	877-833- 5729	barbara.wessels@ anthem.com
Unicare	John Canfield	200 Association Dr. Suite 200 Charleston WV 25311	304-347- 2474	877-833- 5729	john.canfield@ anthem.com
DHHR	Susan Hall		356-4073		Susan.L.Hall@ WV.gov

**\*One Vendor Per Representative** - No one individual is permitted to represent more than one vendor at the pre-bid meeting. Any individual that does attempt to represent two or more vendors will be required to select one vendor to which the individual's attendance will be attributed. The vendors not selected will be deemed to have not attended the pre-bid meeting unless another individual attended on their behalf.



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<u>Firm Represented:*</u>	<u>Rep Name (Printed):</u>	<u>Firm Address:</u>	<u>Telephone #:</u>	<u>Fax #:</u>	<u>Email:</u>
BMS	Anita Ferguson	350 Capitol St Bm 251 Chas WV 25301			anita.f.ferguson@wv.gov
BMS	Katie Moss	" "			kathryn.l.moss@wv.gov
BMS	Christina Chill	" "			christina.m.chilla@wv.gov
Unicare Health Plan of WV, Inc.	TADD HAYNES	200 Association Driv Suite 200 Charleston, WV 25311	304-347-2474		Tadd.Haynes@anthum.com
Aetna Better Health of WV	TOOD WHITE	500 VIRGINIA ST. EAST Suite 400 CHARLESTON, WV 25301	304-348-2041	304-348-2064	twhite@Aetna.com
Aetna Better Health WV	Tina Bailes	500 Virginia St. East Suite 400 Charleston WV 25301	304-348-2003	304-348-2004	bailest@aetna.com

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<u>Firm Represented:*</u>	<u>Rep Name (Printed):</u>	<u>Firm Address:</u>	<u>Telephone #:</u>	<u>Fax #:</u>	<u>Email:</u>
AETNA BENTAL HEALTH, WV	GREG CARPENTER	500 VA. STREET, EAST SUITE 400 CHARLESTON, WV 25301	304 348 2017	304 348 2064	CARPENTERG@AETNA.COM
The Health Plan	Christy Donohue	141 Summers St Charleston WV 25301	304 720 4923		CDONOHUE@healthplan.org
The Health Plan	JASON LANDERS	141 Summers St Charleston WV 25301	304-482-7160		JLANDERS@healthplan.org
Unicare HP of WV	Kevin Geurtsen	200 Association Drive Suite 200 Charleston WV 25311	678-587-4927		Kevin.Geurtsen@anthem.com
AmeriHealth Caritas	Thomas LYMAN	200 STEVENS DRIVE Phila Pa. 19113	215-937-8564	215-937-5344	TLYMAN@AMERIHEALTHCARITAS.COM
AmeriHealth Caritas	Ylan Nguyen	200 STEVENS DRIVE Phila PA 19113	<del>215</del> 484-497-1613		Ynguyen@amerihealthcaritas.com

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BMS	FREDERICK S. LEWIS	Diamond Ridge	304 356 4831		FREDERICK.S.LEWIS@WV.GOV
BMS	Kelly J. Dowden	<del>1000 2nd Street</del> 350 Capitol St. 25301 Rm 251 Charleston, WV	304-356-4861		Jimmy.K.Dowden@WV.GOV
WVCHIP	JEAN KRANZ	350 Capitol St. Charleston, WV. 25301	304-957-7864		JEAN.G.KRANZ@WV.GOV
BMS	MORGAN SHEETS	350 CAPITOL ST CHARLESTON, WV 25301	304-356-4958		Morgan.j.sheets@wv.gov
BMS	Andrew Pack	350 Capitol St. Charleston, WV 25301	304-356-5880		Andrew.C.Pack@WV.gov

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# TSG CONSULTING

Public Relations • Governmental Affairs • Health Care

**Shana Phares**  
Senior Strategy and Policy Consultant

shanaphares@TSGsolution.com

1210 Kanawha Boulevard East • Charleston, WV 25301  
P. 304-345-1161 • F. 304-345-8111 • C. 304-541-3324  
www.TSGsolution.com

**Todd R. White**  
Chief Executive Officer

Aetna Better Health® of West Virginia  
500 Virginia Street East, Suite 400  
Charleston, WV 25301

TWhite@aetna.com  
304-348-2041 T  
304-348-2064 F



**Greg Carpenter**  
Chief Operations Officer

Aetna Better Health® of West Virginia  
500 Virginia Street East, Suite 400  
Charleston, WV 25301

CarpenterG@aetna.com  
304-348-2017 T  
304-543-8631 M



An Anthem Company

200 Association Drive  
Suite 200  
Charleston, WV 25311  
Tel 888 611-9958  
email tadd.haynes@anthem.com

**Tadd Haynes, MPH**  
President

**Tina Bailes**  
Director, Finance

Aetna Better Health® of West Virginia  
500 Virginia Street East, Suite 400  
Charleston, WV 25301

BailesT@aetna.com  
304-348-2063 T  
304-348-2064 F



**Christy Donohue**  
Assistant V.P., Medicaid

cdonohue@healthplan.org  
Direct: 304.720.4923  
Cell: 304.395.3938

141 Summers Street  
Charleston, WV 25301-0953

[www.TSGsolution.com](http://www.TSGsolution.com)

[aetnabetterhealth.com/westvirginia](http://aetnabetterhealth.com/westvirginia)

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[aetnabetterhealth.com/westvirginia](http://aetnabetterhealth.com/westvirginia)



[healthplan.org](http://healthplan.org)



**Jason Landers**  
Senior V.P.,  
Administrative Services

**jlenders@healthplan.org**  
Direct: 304.907.6606  
Cell: 304.482.7160

1110 Main Street  
Wheeling, WV 26003-2704



**An Anthem Company**

**Barbara Wessels**  
Business Change Manager

200 Association Drive  
Suite 200  
Charleston, WV 25311  
Tel 304 347-2478  
Cell 304 590-0673  
email barbara.wessels@anthem.com

**Thomas G. Lyman**  
Senior Vice President, Market Development

AmeriHealth Caritas Family of Companies  
200 Stevens Drive, Philadelphia, PA 19113-1570  
O: 215-937-8564  
F: 215-937-5344  
tlyman@amerihealthcaritas.com  
www.amerihealthcaritas.com



**Ylan Nguyen**  
Manager, Market Development

AmeriHealth Caritas Family of Companies  
200 Stevens Drive, Philadelphia, PA 19113-1570  
O: 484-497-1613  
ynguyen@amerihealthcaritas.com

www.amerihealthcaritas.com





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Leading America in Health Care Solutions  
for the Underserved and Chronically Ill.



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**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: CRFP BMS2000000002**

**Instructions:** Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

**Acknowledgment:** I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

**Addendum Numbers Received:**

(Check the box next to each addendum received)

<input type="checkbox"/> Addendum No. 1	<input type="checkbox"/> Addendum No. 6
<input type="checkbox"/> Addendum No. 2	<input type="checkbox"/> Addendum No. 7
<input type="checkbox"/> Addendum No. 3	<input type="checkbox"/> Addendum No. 8
<input type="checkbox"/> Addendum No. 4	<input type="checkbox"/> Addendum No. 9
<input type="checkbox"/> Addendum No. 5	<input type="checkbox"/> Addendum No. 10

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

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Company

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Authorized Signature

---

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.