



Department of Health

Request for Proposals

RFP #18026

Medicaid Accelerated eXchange (MAX) Program Rapid Cycle Continuous Improvement Targeting High Utilizers of Avoidable Hospital Services

Issued: January 31, 2019

DESIGNATED CONTACT:

Pursuant to State Finance Law §§ 139-j and 139-k, the Department of Health identifies the following designated contact to whom all communications attempting to influence the Department of Health's conduct or decision regarding this procurement must be made.

Elizabeth Wood
Bureau of Contracts
New York State Department of Health
Corning Tower, Room 2827
Albany, New York 12237
Telephone: 518-474-7896
Email Address: elizabeth.wood@health.ny.gov

PERMISSIBLE SUBJECT MATTER CONTACT:

Pursuant to State Finance Law § 139-j(3)(a), the Department of Health identifies the following allowable contact for communications related to the submission of requests for Max Series content, written proposals, written questions, pre-bid questions, and debriefings.

Michael Lewandowski
New York State Department of Health
Office of Health Insurance Programs
Division of Employee and Program Support
Bureau of Programmatic Support
One Commerce Plaza, Room 1450
Albany, NY 12237
Telephone: 518-473-4657
Email Address: OHIPContracts@health.ny.gov

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1.0 CALENDAR OF EVENTS

RFP #18026– MEDICAID ACCELERATED EXCHANGE (MAX) PROGRAM RAPID CYCLE CONTINUOUS IMPROVEMENT TARGETING HIGH UTILIZERS OF AVOIDABLE HOSPITAL SERVICES	
<u>EVENT</u>	<u>DATE</u>
Issuance of Request for Proposals	January 31, 2019
Deadline for Submission of Written Questions	February 15, 2019 4:00 p.m. ET
Responses to Written Questions Posted by DOH	On or About March 1, 2019
Deadline for Submission of Proposals	March 22, 2019 4:00 p.m. ET
<i>Anticipated</i> Contract Start Date	August 1, 2019

2.0 OVERVIEW

Through this Request for Proposals (“RFP”), the New York State (“State”) Department of Health (“Department”) is seeking competitive proposals from organizations with experience in facilitating rapid cycle continuous process improvement programs and training, who are able to provide services further detailed in [Section 4.0](#) (Scope of Work) under the Department’s Medicaid Accelerated eXchange (MAX) Program. It is the Department’s intent to award one (1) contract from this procurement.

2.1 Introductory Background

The Delivery System Reform Incentive Payment (DSRIP) program is the main mechanism by which New York State is implementing the Medicaid Redesign Team (MRT) Waiver Amendment. DSRIP’s purpose is to fundamentally restructure the health care delivery system by reinvesting in the Medicaid program, with the primary goal of reducing avoidable hospital use by 25% over 5 years. Up to \$6.42 billion dollars are allocated to this program with payouts based upon achieving predefined results in system transformation, clinical management and population health.

To accomplish the goals of DSRIP, 25 Performing Provider Systems (PPS) were formed in regional areas statewide to address and complete various operational objectives. PPS include both major public hospitals and safety net providers, with a designated lead provider for the group. PPS safety net partners include an array of providers, including hospitals, health homes, skilled nursing facilities, clinics, and Federally Qualified Health Centers (FQHCs), behavioral health providers, community based organizations (CBOs), etc., who serve a substantial base of Medicaid members. For more information on DSRIP PPS by region, including PPS organizational information and reporting to date, please see the link below:

http://www.health.ny.gov/health_care/medicaid/redesign/dsrrip/pps_map/index.htm.

PPS are currently implementing their approved Project Plans, coordinating provider efforts, engaging within the surrounding community and monitoring milestones and metrics to ensure the implementation is successful. These goals include an improvement of patient-centered health care and reduced preventable hospital admissions.

The success of DSRIP and continued health care transformation post-DSRIP is dependent upon metrics-based performance to improve outcomes, quality and financial sustainability. To accomplish these goals, changes must be made at the point of care and include other community partners beyond the traditional silos of clinical care. Providers need to work together more effectively to share and integrate information, and develop treatment plans. Providers of care also need to work with community-based organizations to improve the Medicaid community’s

access to timely care, patient expectations, and payment for better health outcomes. These goals are accomplished through specific planned activities launched in specific regions/communities, or focused on a population health need, requiring a collective statewide change of process to achieve the statewide benchmarks.

As DSRIP entered into the Pay for Performance phase, achievement of DSRIP funds by the PPS focused more on the ability to move the needle on key DSRIP performance measures. In order to facilitate this health care transformation, the Department, with the assistance of an outside contractor, administered the first three Medicaid Accelerated eXchange (MAX) Series. The MAX Series was modeled on the Institute for Healthcare Improvement's (IHI) rapid-cycle evaluation methods.

The MAX Series is a structured program of facilitated support offered to interdisciplinary, cross-setting teams to accelerate delivery system redesign and process improvement aimed at achieving DSRIP goals of reducing avoidable hospital use by 25% over five (5) years and continued transformation to support a financially sustainable Medicaid delivery system. Through the offering of a workshop series focused on addressing the root causes of patients who have high utilization for avoidable causes, it supports the goal of transforming the system through the provision of high quality, integrated primary, specialty and behavioral health care in the community setting.

By enabling front-line clinicians to lead change at a grass-roots level, PPS have been able to generate impressive results including:

1. Measurable increases in screening rates and connections to services;
2. Capacity building in process improvement; and
3. Development of meaningful collaborations among partners, both inside and outside of provider sites.

In addition to the MAX Series, the Department launched the Train-the-Facilitator (TTF) program in 2016 to train dedicated staff from PPS teams across the State in the MAX methodology. The objective of the TTF program is to enable the PPS to scale the MAX efforts in their own settings and create a sustainable path for continuous improvement towards meeting DSRIP goals. The TTF focuses on key PPS organizational staff and seeks to empower trainers to lead, sustain, and scale change by leveraging the same Rapid Cycle Continuous Improvement (RCCI) methodology of the MAX Series Workshops.

2.2 Important Information

The bidder is required to review, and is requested to have legal counsel review, [Attachment 8](#), the DOH Agreement as the Bidder must be willing to enter into an Agreement substantially in accordance with the terms of [Attachment 8](#) should the bidder be selected for contract award. Please note that this RFP and the awarded bidder's proposal will become part of the contract as Appendix B and C, respectively.

It should be noted that Appendix A of [Attachment 8](#), "Standard Clauses for New York State Contracts", contains important information related to the contract to be entered into as a result of this RFP and will be incorporated, without change or amendment, into the contract entered into between DOH and the successful Bidder. By submitting a response to the RFP, the Bidder agrees to comply with all the provisions of Appendix A. Note, [Attachment 7](#), the Bidder's Certifications/Acknowledgements, should be submitted and includes a statement that the bidder accepts, without any added conditions, qualifications or exceptions, the contract terms and conditions contained in this RFP including any exhibits and attachments. It also includes a statement that the bidder acknowledges that, should any alternative proposals or extraneous terms be submitted with the proposal, such alternate proposals or extraneous terms will not be evaluated by the DOH.

Any qualifications or exceptions proposed by a bidder to this RFP should be submitted in writing using the process set forth in [Section 5.2](#) (Questions) prior to the deadline for submission of written questions indicated in [Section 1.0](#) (Calendar of Events). Any amendments DOH makes to the RFP as a result of questions and answers will be publicized on the DOH web site.

2.3 Term of the Agreement

This contract term is expected to be for a period of two (2) years commencing on the date shown on the Calendar of Events in [Section 1.0.](#), subject to the availability of sufficient funding, successful contractor performance, and approvals from the New York State Attorney General (AG) and the Office of the State Comptroller (OSC).

3.0 BIDDERS QUALIFICATIONS TO PROPOSE

3.1 Minimum Qualifications

NYSDOH will accept proposals from organizations with the following types and levels of experience as a prime contractor.

- A minimum of two (2) years of experience in providing rapid cycle continuous improvement (RCCI) related services; and
- Previous completion of an RCCI program related to a governmental program, healthcare system, university, OR for an organization that employs over 500 people.

Experience acquired concurrently is considered acceptable.

For the purposes of this RFP, a prime contractor is defined as one who has the contract with the owner of a project or job and has full responsibility for its completion. A prime contractor may employ (and manage) one or more subcontractors to carry out specific parts of the contract. However, a prime contractor must solely meet all Minimum Qualifications above and may not rely on a subcontractor's experience to meet such qualifications.

Failure to meet these Minimum Qualifications will result in a proposal being found non-responsive and eliminated from consideration.

4.0 SCOPE OF WORK

The Contractor will be required to continue the work of the MAX Series utilizing models of Rapid Cycle Continuous Improvement (RCCI) to support multiple PPS in achieving improvement on DSRIP measures related to hospital and emergency department (ED) admissions, focusing on the relatively small proportion of patients who account for a disproportionate amount of utilization and cost ("high utilizers"). This is aligned with the DSRIP goals of transforming the health care system and reducing avoidable hospital use by 25% in five (5) years' time.

The Contractor will redesign the current MAX Series content; with assistance from the Department and materials that have been used in previous MAX Series; with the goal of implementing a new MAX RCCI program. The Contractor will facilitate the MAX RCCI workshops by deploying a team of workshop facilitators and Subject Matter Experts (SMEs); individuals with experience in healthcare, medicine, process improvement, systems engineering, change management and program management.

Please note: The current MAX Series content will be made available to Bidders upon request. Bidders must submit their request via email to OHIPContracts@health.ny.gov for a copy of the MAX Series content.

If any materials, documentation, information, or data are discovered to be inaccurate or incomplete in the current MAX Series Content, such inaccuracy or incompleteness shall not constitute a basis for challenging the contract award or renegotiation of any rates bid either prior to or after contract award. The requirements in this RFP shall take precedence over any documentation contained in the current MAX Series content shared with Bidders.

The Contractor will be recruiting Action Teams of eight (8) to twelve (12) staff representing the PPS partner facility for participation in the MAX RCCI Workshops. For information on the previous MAX Series, including previous MAX participant sites, final reports and case studies, the MAX Symposium and other pertinent information, please visit the following site: https://www.health.ny.gov/health_care/medicaid/redesign/dsrrip/pps_workshops/max.htm.

In conjunction with the MAX RCCI program workshops, the Contractor will be required to conduct Train the Facilitator (TTF) workshops for five (5) PPS executive (Participants) per workshop per region, which will provide the experiential learning backbone of the MAX RCCI program. The TTF learning workshops will occur within seven (7) calendar days prior to the MAX RCCI program workshops, and the TTF participants will be expected to co-facilitate the MAX RCCI program workshops with the Contractor. The TTF workshops are required to ensure that participants can sustainably meet and monitor their DSRIP performance goals, and allow the MAX RCCI principles to permeate workflows in their partner facilities at a quicker rate than by MAX Series workshop alone. These goals will be achieved by allowing the newly trained facilitators to complete additional programs at their facilities, and/or continue the work that was begun during the initial MAX Series.

The MAX RCCI program should be structured with a foundation based in process engineering, lean, root cause analysis, the Theory of Constraints, and Change Management. The program objectives are to:

1. Improve patient outcomes and key metrics;
2. Improve staff efficiency, efficacy and work satisfaction;
3. Increase integration across the care delivery system; and
4. Develop and build sustainable RCCI capabilities for the State.

The section below describes the MAX RCCI program and TTF tasks and deliverables that are required to be provided by the selected Contractor. Definitions of included terms can be found in [Attachment C](#). The selected Contractor must be able to provide all of these services throughout the contract term.

PLEASE NOTE: Bidders will be required to provide responses that address all of the requirements of this RFP as part of its Technical Proposal.

The terms “bidders”, “vendors” and “proposers” are also used interchangeably. For purposes of this RFP, the use of the terms “shall”, “must” and “will” are used interchangeably when describing the Contractor’s/Bidder’s duties.

4.1 Tasks/Deliverables

I. Deliverable Schedule

As part of the MAX RCCI and TTF programs, the Contractor will be required to perform, with the Department’s approval and oversight, the following deliverables, as further detailed in Sections 4.1.II - 4.1.IV. of this RFP:

Deliverable	Estimated Deliverable Completion
ROUND 1	
<u>Series Development (Round #1)</u>	
Finalize hiring (staff or subcontractors) of Contract Manager, subject matter experts (SMEs) and facilitators; collaborate with SMEs on the MAX RCCI and TTF programs.	<i>Within 15 days</i> of contract approval by OSC and prior to beginning participant recruitment for Round 1 of the MAX RCCI and TTF workshop series
Provide MAX RCCI and TTF workshop approaches, curricula, and content materials to the Department for approval.	<i>Within 30 days</i> of contract approval by OSC
<u>Participant Recruitment and Workshop Scheduling (Round #1)</u>	
Provide the Department with a plan outlining the MAX RCCI Action Team and TTF Participant recruitment strategies	<i>Within 15 days</i> of contract approval by OSC
Begin recruitment of both the MAX RCCI Action Teams and TTF participants for Round 1 Workshops.	<i>Within 30 days</i> of contract approval by OSC

Deliverable	Estimated Deliverable Completion
Schedule TTF and MAX RCCI workshops for Round 1 – upstate and downstate teams	<i>Within 2 months</i> of contract approval by OSC
<u>Workshop Delivery (Round #1)</u>	
TTF Workshop; Training Session 1, Round 1 – (one session to be held per region)	Between <i>contract months 3-5</i>
MAX RCCI Workshop Session 1 - Round 1 (one session per region)	<i>Within seven (7) calendar days</i> after TTF training session for that region
Provide support to MAX RCCI Action Teams and TTF Participants	Between workshop sessions 1 and 2
TTF Workshop; Training Session 2, Round 1 (one session to be held per region)	Between <i>contract months 6-8</i>
MAX RCCI Workshop Session 2 - Round 1 (one session per region for up to 7 teams in a region; two sessions are required for any region with 8-12 teams)	<i>Within seven (7) calendar days</i> after TTF training session for that region
Provide support to MAX RCCI and TTF Participants	Between workshop sessions 2 and 3
TTF Workshop; Training Session 3, Round 1 (one session to be held per region)	Between <i>contract months 9-11</i>
MAX RCCI Workshop Session 3 - Round 1 (one session per region for up to 7 teams in a region; two sessions are required for any region with 8-12 teams)	<i>Within seven (7) calendar days</i> after TTF training session for that region
<u>Reporting (Round #1)</u>	
Conduct a webinar with the PPS and the Department for all teams, upstate and downstate to review activities, lessons learned, overall process and results.	<i>Within 60 days</i> of completion of the Workshops for Round 1
Submit a final summary report on the MAX RCCI and TTF Workshops for Round 1 to the Department	<i>Within three (3) months</i> of completion of the Workshops for Round 1
ROUND 2	
<u>Series Development (Round #2)</u>	
Recommend and prepare revisions to the MAX RCCI and TTF workshops' approaches or content to the Department for review and approval	<i>Within one (1) month</i> after completion of Round 1 Workshops
<u>Participant Recruitment and Workshop Scheduling (Round #2)</u>	
Begin recruitment for both the MAX RCCI Action Teams and TTF Participants for the Round 2 Workshops.	No later than <i>Contract month 12</i>
Schedule TTF and MAX RCCI workshops for Round 2 – upstate and downstate teams	No later than <i>Contract month 12</i>
<u>Workshop Delivery (Round #2)</u>	
TTF Workshop; Training Session 1, Round 2 (one session to be held per region)	Between <i>contract months 13-15</i>

Deliverable	Estimated Deliverable Completion
MAX RCCI Workshop Session 1 - Round 2 (one session per region)	<i>Within seven (7) calendar days</i> after TTF training session for that region
Provide support to MAX RCCI and TTF Participants	Between workshop sessions 1 and 2
TTF Workshop; Training Session 2, Round 2 (one session to be held per region)	Between <i>contract months 16-18</i>
MAX RCCI Workshop Session 2 - Round 2 (one session per region for up to 7 teams in a region; two sessions are required for any region with 8-12 teams)	<i>Within seven (7) calendar days</i> after TTF training session for that region
Provide support to MAX RCCI and TTF Participants	Between workshop sessions 2 and 3
TTF Workshop; Training Session 3, Round 2 (one session to be held per region)	Between <i>contract months 19-21</i>
MAX RCCI Workshop Session 3 - Round 2 (one session per region for up to 7 teams in a region; two sessions are required for any region with 8-12 teams)	<i>Within seven (7) calendar days</i> after TTF training session for that region
<u>Reporting (Round #2)</u>	
Conduct a webinar with the PPS and the Department for all teams, upstate and downstate to review activities, lessons learned, overall process and results.	<i>Within 60 days</i> of workshop series round completion
Submit a final summary report on the MAX RCCI and TTF Workshops for Round 2 to the Department	<i>Within three (3) months</i> of workshop series round completion

II. Overview of TTF and MAX RCCI Workshop Series

The MAX RCCI workshops will follow each TTF workshop and will be delivered as a series of three (3) in-person collaborative sessions (“workshops”) bringing together multidisciplinary teams from each PPS partner facility and the specialized faculty to:

- A. focus on the high-utilizer issue,
- B. exchange ideas,
- C. develop action plans,
- D. implement action plans,
- E. review results, and
- F. continue to revise processes and goals as necessary towards positive results, e.g., reduction in high utilizer admission rates.

The general theme of the series will focus on ‘Targeting Avoidable Hospital Readmissions’. Data will be collected by the Action Teams, with the Contractor assisting the team in appropriate data collection and analysis, including provision of a uniform data collection tool. After the MAX RCCI series, the Action Team (and the facility) will have the means necessary to continue to collect data for the purposes of continuous monitoring and changes in line with the RCCI principles.

In order to accomplish this goal, the Contractor will:

- A. Conduct each workshop in person.
- B. Conduct two (2) rounds of workshops per region.
 - a. There are two (2) regions identified below:
 - i. Downstate: Hudson Valley, NYC and Long Island PPS; and
 - ii. Upstate: Rest of State PPS.

- C. Conduct two (2) types of workshops per round:
 - a. TTF Participant workshops and
 - b. MAX RCCI workshops.

- D. The TTF Participant workshops will consist of:
 - a. Three (3) initial training sessions, conducted with the TTF participants, and
 - b. Three (3) MAX RCCI workshops where the TTF participants act as co-facilitator for the MAX RCCI workshops.

The TTF initial training sessions must be completed no more than seven (7) calendar days before each MAX RCCI workshop is conducted.

- E. The MAX RCCI workshops will consist of:
 - a. Three (3) full day sessions.
 - b. Each session will occur approximately three (3) months after the previous session.
 - c. A maximum of twelve (12) Action Teams will participate per region, where as:
 - i. If more than seven (7) Action Teams (i.e., 8 to 12 teams) are recruited in a region, the Contractor will hold two (2) workshop sessions in that region that round and will split the Action Teams in to two (2) sub-workshop groups (e.g., if 9 teams are recruited, one series will have 5 teams and the other will have 4 teams).
 - ii. When two (2) sub-workshop groups are being conducted:
 - 1. The Session for workshop day 1 will take place on the same day at the same location for both sub-workshop groups. It is expected that workshop day 1 will include an initial “kickoff” session to be held with all Action Teams (i.e. all 8 to 12 teams in the region), followed by breakout sessions by sub-workshop groups.
 - 2. The Sessions for workshop days 2 and 3 should take place on or about the same time as the corresponding workshop for the other series.

III. Series Development

- A. The Contractor will provide TTF and MAX RCCI workshop approaches, curricula, and content materials to the Department for review and approval within 30 days of contract approval by OSC. The approaches (both TTF and MAX RCCI) will also contain the proposed schedule for the workshop series, including site locations, dates, and other logistical information.

- B. TTF Workshop Program Development
 - a. With the assistance of the Department and materials designed for previous MAX Series, develop TTF workshop approach and content, including baseline assessment tools, workshop presentation materials, action period tools, templates and staff responsible for conducting the TTF workshops. The Contractor will submit all materials and tools to the Department within 30 days of contract approval by OSC, or Departmental review and approval.
 - b. Once the materials are approved, it is expected that revisions to program content will occur only between the two MAX RCCI/TTF rounds;
 - i. The Department reserves the right to request revisions to the curriculum, workshop approach and/or all workshop materials;
 - ii. The Contractor must obtain the Department’s approval of all curriculum, approach and workshop materials before use; and
 - iii. The Department will retain ownership of all curriculum and workshop materials developed under this contract upon contract expiration;

- C. MAX RCCI Workshop Program Development
 - a. With the assistance of the Department and materials designed for previous MAX Series, develop the MAX RCCI workshop approach and content, including baseline assessment tools, workshop presentation materials, action period tools, templates and staff responsible for conducting the workshops. The Contractor will submit all materials and tools to the Department within 30 days of contract approval by OSC, for Departmental review and approval.
 - b. Once the approach and materials are approved by the Department, it is expected that revisions to workshop approach and content will occur only between the two MAX RCCI rounds.

- i. The Department reserves the right to request revisions to the curriculum, workshop approach and/or all workshop materials;
- ii. The Contractor must obtain the Department's approval of all curriculum, approach and workshop materials before use; and
- iii. The Department will retain ownership of all curriculum and workshop materials developed under this contract upon contract expiration.

D. Hire staff

- a. Through their own staff and/or subcontractors, Contractor will hire a Contract Manager, Subject Matter Experts (SMEs), facilitators and other staff responsible conducting the workshops, both MAX RCCI and TTF.
- b. All staff, Contractor's or subcontractors hired for this engagement, are subject to the Department's review and approval 15 days prior to beginning participant recruitment for Round 1 of the MAX RCCI and TTF workshop series.
- c. The Contractor is required to recruit and collaborate with specific and appropriate subject matter experts (SMEs) to support program refinement, team selection and continuous coaching throughout the duration of the contract period. The Contractor will recruit and retain the SMEs with the levels of experience identified in Section 4.2.A of the RFP;

IV. Participant Recruitment

A. Recruitment Strategy

- a. Within 15 days of contract approval from OSC, the Contractor will submit to the Department with a plan that can be immediately implemented outlining the TTF and MAX RCCI Action Team recruitment strategies, including but not limited to:
 - i. How the TTF participants will be selected;
 - 1. Enrollment in the TTF is limited PPS staff.
 - 2. The Contractor will recruit five (5) PPS staff per round per region to participate in the TTF workshops.
 - ii. A baseline assessment survey for prospective Action Teams participants;
 - 1. The MAX RCCI workshops are open to all partners from 25 PPS partner facilities and each round will take place in each of the two (2) regions.
 - 2. The Contractor will recruit up to twelve (12) Action Teams per region per round.
 - 3. Each Action Team will consist of a minimum of eight (8) but no more than twelve (12) participants;
 - iii. The SMEs involvement and assistance in recruitment;
 - iv. A timeline for recruitment; and
 - v. Process for recruiting the recommended numbers of Action Teams and staff within the teams as defined above in Section IV.A.2 and how the staff selected are the appropriate individuals to effect the required change within their facility.

B. The Contractor will begin recruitment of TTFs and Action Teams for the workshops within 30 days of contract execution by the Office of the State Comptroller.

C. Implement Recruitment Strategy for both the TTF and MAX workshops;

- a. For the TTFs, identify participants, trying, where possible, to ensure participants represent different organizations/systems than the action teams to test cross-sector compatibility.
- b. For MAX RCCI workshops: Identify sites and recruit Action Team participants by conducting baseline assessment surveys, interviews and/or site visits with PPS and PPS partner facilities.

V. WORKSHOP DELIVERY:

The workshops should focus on key topics of patients who are frequently admitted for avoidable causes to the emergency department and inpatient service ("high utilizers"). The workshops will support the goals of transforming the system by engaging with direct patient care "Action Teams" that include community partners, expanding beyond the traditional medical models. Through these TTF and MAX RCCI workshops, teams will be trained by the Contractor to use data to examine operational workflows, to conduct root cause analysis of patient's needs, to set defined actions and accountability, and to use data collected by the Action Team for constant performance monitoring and improvement.

Each round of workshops is expected to be delivered over a 12-month period and conducted in a sequence of three (3) phases, there are two (2) rounds

- A. The Contractor will be responsible for:
 - a. The development, coordination, reproduction, and distribution of all required workshop materials needed to effectively deliver each workshop;
 - b. Obtaining approval of the workshop materials prior to conducting the workshops,
 - c. Distributing the workshop materials prior to conducting the workshops, and
 - d. Securing the required workshop delivery locations.
 - e. Conduct and facilitate two rounds of the TTF and MAX RCCI workshop; preferably one per contract year.

- B. During the workshop delivery phase, the Contractor will be required to focus the workshops on:
 - a. Improving identification and recognition of patient needs that drive unnecessary utilization;
 - b. Increasing partnerships and working relationships to address patient needs that drive unnecessary utilization;
 - c. Improving collaboration among team members and additional partners
 - d. Establishing better connections to health networks; and
 - e. Improving overall patient access and coordination of care.

- C. Each workshop series will consist of an TTF training session workshop, subsequent MAX RCCI workshops (with the TTF participants co-facilitating), and on-going action period support as follows:
 - a. For the TTF workshops, the Contractor will perform the following tasks:
 - i. Conduct three (3) TTF Training Sessions:
 - 1. Each session consisting of a one (1) full-day training session; and
 - 2. Each session will occur within **seven (7) calendar days** prior to each MAX RCCI workshop.
 - b. For the TTF Workshop, participants will be expected to be able to:
 - i. Co-facilitate the subsequent MAX RCCI workshops (under facilitator's supervision)
 - ii. Implement MAX RCCI workshops in their PPS network.
 - c. For the MAX RCCI workshops, the Contractor will:
 - i. Perform a Baseline Assessment for the Action Teams;
 - ii. Deliver and facilitate three (3) individual full day MAX RCCI workshops to complete a series;
 - iii. Complete each individual MAX RCCI workshop about 2-3 months apart from the previous workshop (see Section 4.1.I for timetable);
 - iv. Focus the workshops on the following:
 - 1. Workshop 1: Goals that can be achieved within a 30-day time period;
 - 2. Workshop 2: Detailed process redesign; and
 - 3. Workshop 3: Detailed process redesign and a continuous improvement plan to sustain process improvement;
 - v. Conduct one (1) MAX RCCI workshop series in each region;
 - 1. There are two (2) regions identified below:
 - Downstate: Hudson Valley, NYC and Long Island PPS; and
 - Upstate: Rest of State PPS.
 - vi. MAX RCCI Workshops will be conducted with the Actions Team,
 - 1. Action Teams include clinicians, administrators, and community providers from PPS partner facilities.
 - d. The Contractor will provide Facilitator coaching of the TTFs during the MAX RCCI Workshops.
 - e. For the Action Period Support;
 - i. During the period between workshops, the Contractor will provide the TTF's with continued support, such as:
 - 1. Coaching calls as needed; and
 - 2. Call-in technical support (e.g., mentoring/coaching) to assist them with being able to facilitate their own independent workshops.
 - ii. During the support period between workshops, the Contractor, with the assistance of the SMEs, will be required to maintain on-going assistance and assess the success of the Action Teams back in their work environment by conducting:
 - 1. Weekly status calls;
 - 2. Online discussion forums; and
 - 3. One (1) site visit to each Action Team's partner facility between workshop sessions 1 and 2,

and again between workshop sessions 2 and 3. The SME will not be expected to attend all site visits. Reimbursement for travel expenses related to these site visits will be per Office of the State Comptroller (OSC) rules and regulations associated with travel (<http://osc.state.ny.us/agencies/travel/travel.htm>), rates must not exceed OSC's published rates without prior Departmental approval and will not be reimbursed without supporting documentation. Any additional travel expense will need to be provided by the contractor. See Section 5.4 Payment, Section 6.2 Cost Proposal and Attachment B for additional information

VI. Completion of TTF and MAX RCCI Workshop Series

The Contractor will:

- A. Conduct meetings with the Department, PPS Leadership and/or Executive Sponsorship to inform on the progress of the teams and reinforce on-going support necessary for success of the projects.
 - a. These meetings may be conducted via conference calls or webinars, but the Contractor is expected to attend in-person meetings, if needed to ensure success of the project.
- B. Assist the action teams with collection, analyzing and reporting data, including providing a uniform data collection tool, assistance with collection of appropriate data and analyzing data, and timely submission of data reports to the Department.
 - a. This will ensure the facility has the ability to continue to monitor progress of patients and use the data collection/analysis to continue making changes to their processes as needed to maintain program success as defined by the program parameters (i.e., rapid cycle continuous improvement post-MAX program).
- C. Provide, at the end of each workshop, each participant with an evaluation form which will inform the Contractor on the general success of the workshop, e.g., how the workshops could be improved upon, whether they would recommend the series to colleagues, etc.
- D. Use the evaluation feedback for continual improvement of subsequent workshop facilitation.

4.2 Staffing Requirements

Success of the MAX Series has been in the supporting work, including data support and technical assistance, strong project management by the contractor, the subject matter experts (SMEs), and facilitators with experience in change management or RCCI programs. With this in mind, the contractor should follow the guidelines below for hiring and maintaining staff.

- A. The Contractor must retain the Subject Matter Experts (SMEs) for the duration of the contract period. The SMEs will have experience in the following areas:
 - a. At least one (1) "high utilizer" SME with the following:
 - i. Two (2) years' experience in healthcare or medicine, AND
 - ii. Experience leading or directly participating in projects to decrease Emergency Department use by high utilizersThe high utilizer SME(s) will assist in formulating the methodology for identifying the patient population and main goals to be accomplished in the series.
 - b. At least one (1) SME who has completed at least two (2) improvement/systems engineering/change management projects for a governmental program, healthcare system, university, OR for an organization that employs over 500 people.
- B. The Contractor must maintain a sufficient number of staff to run the workshops who have experience in healthcare, Medicaid, and/or RCCI-type training assistance. These workshop facilitators should have at least two years' experience in change management or RCCI programs. It is expected that one facilitator will be assigned to each Action Team during the MAX RCCI workshops;
- C. The Contractor should employ staff with knowledge and experience with New York State Healthcare initiatives such as the Medicaid Redesign Team and the DSRIP Program;
- D. The Contractor must dedicate a full-time Contract Manager who possesses strong management skills necessary to coordinate the activities outlined in Section 4.1.

- E. The Department reserves the right to approve or deny any or all Personnel proposed prior to the commencement of work on this project. In the event the proposed Personnel becomes unavailable at any point of this agreement, the Contractor must provide the Department with written notice, within 15 calendar days' of such event, and provide up to three (3) resumes for Departmental review and approval of the replacement. In the event that the proposed Personnel is not performing the tasks required for the job to the satisfaction of the department or non-performance in a way that causes the program components to be insufficiently or inadequately completed, the Contractor will remedy the situation by providing the Department a suitable replacement, which the department reserves the right to approve.

4.3 Reporting Requirements

The Contractor shall:

- A. Provide a participant/team recruitment plan, including a baseline assessment survey, to the Department for approval within 15 days of contract approval by OSC.
- B. Submit a report within fifteen (15) days of finalization of recruitment for each region's series detailing, at a minimum, the number of teams, demographics of teams and timeline for series implementation.
- C. Submit bi-weekly progress reports (unless specific report is otherwise waived by NYS) consisting of, at a minimum:
 - a. Activities conducted;
 - b. Summary and highlight of significant progress areas of each Action Team;
 - c. Summary of accomplishments in each activity area where work was performed;
 - d. Work completed by SMEs/subcontractors; and
 - e. Summary of any updates or changes.

In addition to the reports, bi-weekly meetings will be held with Department staff to report on progress. These meetings may be held at the Department offices in Albany or NYC, or by conference call at the request of the Department.

- D. Upon successful completion of each workshop series, the Contractor must adhere to the following reporting requirements:
 - a. Conduct a final webinar with all teams (upstate and downstate), within 60 days of the end of the workshop series, to present to both PPS and Department staff, outlining:
 - i. Team to team sharing of results;
 - ii. Lessons learned from the initiatives; and
 - iii. Recommended next steps
 - b. Provide a final report to the Department, within four (4) months of the end of each round, which will be published on the Department website, consisting of, at a minimum:
 - i. A summary of the Action Team initiatives implemented;
 - ii. documentation of change that occurred as a result of real time intervention;
 - iii. Lessons learned from the initiatives; and
 - iv. Recommended next steps.

5.0 ADMINISTRATIVE INFORMATION

The following administrative information will apply to this RFP. Failure to comply fully with this information may result in disqualification of your proposal.

5.1 Restricted Period

"Restricted period" means the period of time commencing with the earliest written notice, advertisement, or solicitation of a Request for Proposals ("RFP"), Invitation for Bids ("IFB"), or solicitation of proposals, or any other method for soliciting a response from Bidders intending to result in a procurement contract with DOH and ending with the final contract award and approval by DOH and, where applicable, final contract approval by the Office of the State Comptroller.

This prohibition applies to any oral, written, or electronic communication under circumstances where a reasonable person would infer that the communication was intended to influence this procurement. Violation of any of the requirements described in this Section may be grounds for a determination that the bidder is non-responsible and therefore ineligible for this contract award. Two violations within four years of the rules against impermissible contacts during the “restricted period” may result in the violator being debarred from participating in DOH procurements for a period of four years.

Pursuant to State Finance Law §§ 139-j and 139-k, the Department of Health identifies a designated contact on face page of this RFP to whom all communications attempting to influence this procurement must be made.

5.2 Questions

There will be an opportunity available for submission of written questions and requests for clarification with regard to this RFP. All questions and requests for clarification of this RFP should cite the particular RFP Section and paragraph number where applicable and must be submitted via email to OHIPContracts@health.ny.gov. It is the bidder’s responsibility to ensure that email containing written questions and/or requests for clarification is received at the above address no later than the Deadline for Submission of Written Questions as specified in [Section 1.0](#) (Calendar of Events). Questions received after the deadline may **not** be answered.

5.3 Right to Modify RFP

DOH reserves the right to modify any part of this RFP, including but not limited to, the date and time by which proposals must be submitted and received by DOH, at any time prior to the Deadline for Submission of Proposals listed in [Section 1.0](#) (Calendar of Events). Modifications to this RFP shall be made by issuance of amendments and/or addenda.

Prior to the Deadline for Submission of Proposals, any such clarifications or modifications as deemed necessary by DOH will be posted to the DOH website.

If the bidder discovers any ambiguity, conflict, discrepancy, omission, or other error in this RFP, the Bidder shall immediately notify DOH of such error in writing at OHIPContracts@health.ny.gov and request clarification or modification of the document.

If, prior to the Deadline for Submission of Proposals, a bidder fails to notify DOH of a known error or an error that reasonably should have been known, the bidder shall assume the risk of proposing. If awarded the contract, the bidder shall not be entitled to additional compensation by reason of the error or its correction.

5.4 Payment

The contractor shall submit invoices and/or vouchers to the State's designated payment office:

Preferred Method: Email a .pdf copy of your signed voucher to the BSC at: AccountsPayable@ogs.ny.gov with a subject field as follows:

Subject: Unit ID: 3450437 Contract #:

Alternate Method: Mail vouchers to BSC at the following U.S. postal address:

NYS Department of Health
Unit ID 3450437
c/o NYS OGS BSC Accounts Payable
Building 5, 5th Floor
1220 Washington Ave.
Albany, NY 12226-1900

Payment for invoices and/or vouchers submitted by the CONTRACTOR shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with ordinary

State procedures and practices. The CONTRACTOR shall comply with the State Comptroller's procedures to authorize electronic payments. Authorization forms are available at the State Comptroller's website at www.osc.state.ny.us/epay/index.htm, by email at epayments@osc.state.ny.us or by telephone at 518-474-6019. CONTRACTOR acknowledges that it will not receive payment on any invoices and/or vouchers submitted under this Contract if it does not comply with the State Comptroller's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

In addition to the Electronic Payment Authorization Form, a Substitute Form W-9 must be on file with the Office of the State Comptroller, Bureau of Accounting Operations. Additional information and procedures for enrollment can be found at <http://www.osc.state.ny.us/epay>.

Completed W-9 forms should be submitted to the following address:

NYS Office of the State Comptroller
 Bureau of Accounting Operations
 Warrant & Payment Control Unit
 110 State Street, 9th Floor
 Albany, NY 12236

Payment of such invoices and/or vouchers by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law.

Payment will be made upon successful completion of the Deliverables identified in Section 6.3: Cost Proposal and Attachment B: Cost Proposal, based on the Deliverable Prices provided by the bidder. Such Deliverables are identified below:

Deliverable	Number of Deliverables	Price for Series Development Deliverable	
<u>Series Development – One price only to be paid prior to the start of Round 1</u>	1		
Deliverable	Number of Deliverables per Round	Price for Up to 7 Action Teams	Price for 8 to 12 Action Teams
<u>Upstate Participant Recruitment and Workshop Scheduling – TTF and MAX RCCI</u>	1		
<u>Downstate Participant Recruitment and Workshop Scheduling – TTF and MAX RCCI</u>	1		
<u>Workshop 1 Deliverable Price: Upstate</u> <i>(Upstate TTF Support/Coaching and all RCCI related services, reporting and meetings for Workshop 1 from recruitment end to end of Workshop 1 including report)</i>	1		
<u>Workshop 1 Deliverable Price: Downstate</u> <i>(Downstate TTF Support/Coaching and all RCCI related services, reporting and meetings for Workshop 1, work from end of recruitment to end of Workshop 1 including reports)</i>	1		
<u>Workshop 2 Deliverable Price: Upstate</u> <i>(Includes TTF Support/Coaching and all Upstate RCCI related services, reporting and meetings for Workshop 2, work from end of Workshop 1 to end of workshop 2 including reports)</i>	1		

Deliverable	Number of Deliverables per Round	Price for Up to 7 Action Teams	Price for 8 to 12 Action Teams
<u>Workshop 2 Deliverable Price: Downstate</u> (Includes TTF Support/Coaching and all Downstate RCCI related services, reporting and meetings for Workshop 2, work from end of Workshop 1 to end of Workshop 2 including reports)	1		
<u>Workshop 3 Deliverable Price: Upstate</u> (Includes TTF Support/Coaching and all Upstate RCCI related services, reporting and meetings for Workshop 3, work from end of Workshop 2 to end of Workshop 3 including reports)	1		
<u>Workshop 3 Deliverable Price: Downstate</u> (Includes TTF Support/Coaching and all Downstate RCCI related services, reporting and meetings for Workshop 3, work from end of Workshop 2 to end of Workshop 3 including reports)	1		
Deliverable	Number of Deliverables	Price for Final Deliverables	
<u>Final Webinar (one statewide)</u>	1		
<u>Final Reports (one each upstate and downstate)</u>	2		

Invoices will be submitted after the workshop has been completed.

The bid price per deliverable is an all-inclusive price to cover the cost of furnishing all of the said services, including but not limited to materials, equipment, meeting room(s) rental, meals, , profit and labor, to the satisfaction of the Department of Health and the performance of all work set forth in said specifications.

Travel for the Contractor's staff to conduct these deliverables included in Section 4.0 Scope of Work, must be included in the all-inclusive deliverable price bid with the exception of travel costs specifically related to the Action Team Site visits. Reimbursement for travel to the Action Team's partner facilities will be reimbursed per Office of the State Comptroller (OSC) rules and regulations associated with travel (<http://osc.state.ny.us/agencies/travel/travel.htm>), Rates must not exceed OSC's published rates without prior Departmental approval and will not be reimbursed without supporting documentation (receipts). The Contractor is responsible for keeping adequate records to substantiate any claims for reimbursement by personnel for travel in performance of these site visits. Any additional travel expense beyond those associated with the site visits must be included in the deliverable costs and provided by the contractor.

5.5 Minority & Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the New York State Department of Health ("DOH") recognizes its obligation to promote opportunities for maximum feasible participation of certified minority-and women-owned business enterprises and the employment of minority group members and women in the performance of DOH contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of minority-and women-owned business enterprises in state procurement contracting versus the number of minority-and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the

enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that DOH establish goals for maximum feasible participation of New York State Certified minority- and women – owned business enterprises (“MWBE”) and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, DOH hereby establishes an overall goal of **30%** for MWBE participation, **15%** for Minority-Owned Business Enterprises (“MBE”) participation and **15%** for Women-Owned Business Enterprises (“WBE”) participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A contractor (“Contractor”) on the subject contract (“Contract”) must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that DOH may withhold payment pending receipt of the required MWBE documentation. For guidance on how DOH will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at: <https://ny.newnycontracts.com>. The directory is found in the upper right hand side of the webpage under “Search for Certified Firms” and accessed by clicking on the link entitled “MWBE Directory”. Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented.

By submitting a bid, a bidder agrees to complete an MWBE Utilization Plan ([Attachment 5](#), Form #1) of this RFP. DOH will review the submitted MWBE Utilization Plan. If the plan is not accepted, DOH may issue a notice of deficiency. If a notice of deficiency is issued, Bidder agrees that it shall respond to the notice of deficiency within seven (7) business days of receipt. DOH may disqualify a Bidder as being non-responsive under the following circumstances:

- a) If a Bidder fails to submit a MWBE Utilization Plan;
- b) If a Bidder fails to submit a written remedy to a notice of deficiency;
- c) If a Bidder fails to submit a request for waiver (if applicable); or
- d) If DOH determines that the Bidder has failed to document good-faith efforts;

The Contractor will be required to attempt to utilize, in good faith, any MBE or WBE identified within its MWBE Utilization Plan, during the performance of the Contract. Requests for a partial or total waiver of established goal requirements made subsequent to Contract Award may be made at any time during the term of the Contract to DOH, but must be made no later than prior to the submission of a request for final payment on the Contract.

The Contractor will be required to submit a Contractor’s Quarterly M/WBE Contractor Compliance & Payment Report to the DOH, by the 10th day following each end of quarter over the term of the Contract documenting the progress made toward achievement of the MWBE goals of the Contract.

If the Contractor is found to have willfully and intentionally failed to comply with the MWBE participation goals set forth in the Contract, such finding will constitute a breach of Contract and DOH may withhold payment from the Contractor as liquidated damages.

Such liquidated damages shall be calculated as an amount equaling the difference between: (1) all sums identified for payment to MWBEs had the Contractor achieved the contractual MWBE goals; and (2) all sums actually paid to MWBEs for work performed or materials supplied under the Contract.

New York State certified Minority- and Women-Owned Businesses (M/WBE) may request that their firm’s contact information be included on a list of M/WBE firms interested in serving as a subcontractor for this procurement. The listing will be publicly posted on the Department’s website for reference by the bidding community. A firm requesting inclusion on this list should send contact information and a copy of its NYS M/WBE certification to OHIPContracts@health.ny.gov before the Deadline for Questions as specified in [Section 1.0](#) (Calendar of Events). Nothing prohibits an M/WBE Vendor from proposing as a prime contractor.

Please Note: Failure to comply with the foregoing requirements may result in a finding of non-responsiveness, non-responsibility and/or a breach of the Contract, leading to the withholding of funds, suspension or termination of the Contract or such other actions or enforcement proceedings as allowed by the Contract.

5.6 Equal Employment Opportunity (EEO) Reporting

By submission of a bid in response to this solicitation, the Bidder agrees with all of the terms and conditions of [Attachment 8](#) Appendix A including Clause 12 - Equal Employment Opportunities for Minorities and Women. Additionally, the successful bidder will be required to certify they have an acceptable EEO (Equal Employment Opportunity) policy statement in accordance with Section III of Appendix M in [Attachment 8](#).

Further, pursuant to Article 15 of the Executive Law (the "Human Rights Law"), all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor and sub-contractors will not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

The Contractor is required to ensure that it and any subcontractors awarded a subcontract over \$25,000 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work"), except where the Work is for the beneficial use of the Contractor, undertake or continue programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation. This requirement does not apply to: (i) work, goods, or services unrelated to the Contract; or (ii) employment outside New York State.

To ensure compliance with this Section, the Bidder should submit with the bid or proposal an Equal Employment Opportunity Staffing Plan ([Attachment 5](#), Form #4) identifying the anticipated work force to be utilized on the Contract. Additionally, the Bidder should submit a Minority and Women-Owned Business Enterprises and Equal Employment Opportunity Policy Statement ([Attachment 5](#), Form # 5), to DOH with their bid or proposal.

5.7 Sales and Compensating Use Tax Certification (Tax Law, § 5-a)

Section 5-a of the Tax Law, as amended, effective April 26, 2006, requires certain contractors awarded state contracts for commodities, services and technology valued at more than \$100,000 to certify to the Department of Tax and Finance (DTF) that they are registered to collect New York State and local sales and compensating use taxes. The law applies to contracts where the total amount of such contractors' sales delivered into New York State are in excess of \$300,000 for the four quarterly periods immediately preceding the quarterly period in which the certification is made, and with respect to any affiliates and subcontractors whose sales delivered into New York State exceeded \$300,000 for the four quarterly periods immediately preceding the quarterly period in which the certification is made.

This law imposes upon certain contractors the obligation to certify whether or not the contractor, its affiliates, and its subcontractors are required to register to collect state sales and compensating use tax and contractors must certify to DTF that each affiliate and subcontractor exceeding such sales threshold is registered with DTF to collect New York State and local sales and compensating use taxes. The law prohibits the State Comptroller, or other approving agencies, from approving a contract awarded to an offerer meeting the registration requirements but who is not so registered in accordance with the law.

The successful Bidder must file a properly completed Form ST-220-CA with the Department of Health and Form ST-220-TD with the DTF. These requirements must be met before a contract may take effect. Further information can be found at the New York State Department of Taxation and Finance's website, available through this link: <http://www.tax.ny.gov/pdf/publications/sales/pub223.pdf>.

Forms are available through these links:

- ST-220 CA: http://www.tax.ny.gov/pdf/current_forms/st/st220ca_fill_in.pdf
- ST-220 TD: http://www.tax.ny.gov/pdf/current_forms/st/st220td_fill_in.pdf

5.8 Workers' Compensation and Disability Benefits Certifications

Sections 57 and 220 of the New York State Workers' Compensation Law (WCL) provide that DOH shall not enter into any contract unless proof of workers' compensation and disability benefits insurance coverage is produced. Prior to entering into a contract with DOH, successful Bidders will be required to verify for DOH, on forms authorized by the New York State Workers' Compensation Board, the fact that they are properly insured or are otherwise in compliance with the insurance provisions of the WCL. The forms to be used to show compliance with the WCL are listed below. Any questions relating to either workers' compensation or disability benefits coverage should be directed to the State of New York Workers' Compensation Board, Bureau of Compliance at (518) 486-6307. Failure to provide verification of either of these types of insurance coverage by the time contracts are ready to be executed will be grounds for disqualification of an otherwise successful Proposal.

The successful Bidder must submit the following documentation to the Department within 10 calendar days of notification of award.

A. Proof of Workers' Compensation Coverage:

ONE of the following forms as Workers' Compensation documentation:

1. **Form C-105.2** – Certificate of Workers' Compensation Insurance issued by private insurance carrier (or Form U-26.3 issued by the State Insurance Fund); or
2. **Form SI-12** – Certificate of Workers' Compensation Self-Insurance (or Form GSI-105.2 Certificate of Participation in Workers' Compensation Group Self-Insurance); or
3. **Form CE-200** – Certificate of Attestation of Exemption from New York State Workers' Compensation and/or Disability Benefits Coverage.

B. Proof of Disability Benefits Coverage:

ONE of the following forms as Disability documentation:

1. **Form DB-120.1** – Certificate of Disability Benefits Insurance; or
2. **Form DB-155** – Certificate of Disability Benefits Self-Insurance; or
3. **Form CE-200** – Certificate of Attestation of Exemption from New York State Workers' Compensation and/or Disability Benefits Coverage.

Further information is available at the Workers' Compensation Board's website, which can be accessed through this link: <http://www.wcb.ny.gov>.

5.9 Subcontracting

Bidder's may propose the use of a subcontractor. The Contractor shall obtain prior written approval from NYSDOH before entering into an agreement for services to be provided by a subcontractor. The Contractor is solely responsible for assuring that the requirements of the RFP are met. All subcontracts shall contain provisions specifying that the work performed by the subcontractor must be in accordance with the terms of the prime contract, and that the subcontractor specifically agrees to be bound by the confidentiality provisions set forth in the agreement between the DOH and the Contractor. DOH reserves the right to request removal of any bidder's staff or subcontractor's staff if, in DOH's discretion, such staff is not performing in accordance with the Agreement. Subcontractors whose contracts are valued at or above \$100,000 will be required to submit the Vendor Responsibility Questionnaire upon selection of the prime contractor.

5.10 DOH's Reserved Rights

The Department of Health reserves the right to:

1. Reject any or all proposals received in response to the RFP;
2. Withdraw the RFP at any time, at the agency's sole discretion;
3. Make an award under the RFP in whole or in part;
4. Disqualify any bidder whose conduct and/or proposal fails to conform to the requirements of the RFP;
5. Seek clarifications and revisions of proposals;
6. Use proposal information obtained through site visits, management interviews and the state's investigation of a bidder's qualifications, experience, ability or financial standing, and any material or

information submitted by the bidder in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFP;

7. Prior to the bid opening, amend the RFP specifications to correct errors or oversights, or to supply additional information, as it becomes available;
8. Prior to the bid opening, direct bidders to submit proposal modifications addressing subsequent RFP amendments;
9. Change any of the scheduled dates;
10. Eliminate any mandatory, non-material specifications that cannot be complied with by all of the prospective bidders;
11. Waive any requirements that are not material;
12. Negotiate with the successful bidder within the scope of the RFP in the best interests of the state;
13. Conduct contract negotiations with the next responsible bidder, should the Department be unsuccessful in negotiating with the selected bidder;
14. Utilize any and all ideas submitted in the proposals received;
15. Every offer shall be firm and not revocable for a period of three hundred and sixty-five days from the bid opening, to the extent not inconsistent with section 2-205 of the uniform commercial code. Subsequent to such three hundred and sixty-five days, any offer is subject to withdrawal communicated in a writing signed by the offerer; and,
16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's proposal and/or to determine an offerer's compliance with the requirements of the solicitation.

5.11 Freedom of Information Law ("FOIL")

All proposals may be disclosed or used by DOH to the extent permitted by law. DOH may disclose a proposal to any person for the purpose of assisting in evaluating the proposal or for any other lawful purpose. All proposals will become State agency records, which will be available to the public in accordance with the Freedom of Information Law. **Any portion of the proposal that a Bidder believes constitutes proprietary information entitled to confidential handling, as an exception to the Freedom of Information Law, must be clearly and specifically designated in the proposal as directed in [Section 6.1 \(D\)](#) of the RFP.** If DOH agrees with the proprietary claim, the designated portion of the proposal will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

5.12 Lobbying

Chapter 1 of the Laws of 2005, as amended by Chapter 596 of the Laws of 2005, made significant changes as it pertains to development of procurement contracts with governmental entities. The changes included:

- a) made the lobbying law applicable to attempts to influence procurement contracts once the procurement process has been commenced by a state agency, unified court system, state legislature, public authority, certain industrial development agencies and local benefit corporations;
- b) required the above mentioned governmental entities to record all contacts made by lobbyists and contractors about a governmental procurement so that the public knows who is contacting governmental entities about procurements;
- c) required governmental entities to designate persons who generally may be the only staff contacted relative to the governmental procurement by that entity in a restricted period;
- d) authorized the New York State Commission on Public Integrity, (now New York State Joint Commission on Public Ethics), to impose fines and penalties against persons/organizations engaging in impermissible contacts about a governmental procurement and provides for the debarment of repeat violators;
- e) directed the Office of General Services to disclose and maintain a list of non-responsible bidders pursuant to this new law and those who have been debarred and publish such list on its website;

- f) required the timely disclosure of accurate and complete information from offerers with respect to determinations of non-responsibility and debarment; (Bidders responding to this RFP should submit a completed and signed [Attachment 1](#), "Prior Non-Responsibility Determination".)
- g) increased the monetary threshold which triggers a lobbyist's obligations under the Lobbying Act from \$2,000 to \$5,000; and
- h) established the Advisory Council on Procurement Lobbying.

Subsequently, Chapter 14 of the Laws of 2007 amended the Lobbying Act of the Legislative Law, particularly as it related to specific aspects of procurements as follows: (i) prohibiting lobbyists from entering into retainer agreements on the outcome of government grant making or other agreement involving public funding; and (ii) reporting lobbying efforts for grants, loans and other disbursements of public funds over \$15,000.

The most notable, however, was the increased penalties provided under Section 20 of Chapter 14 of the Laws of 2007, which replaced old penalty provisions and the addition of a suspension option for lobbyists engaged in repeated violations. Further amendments to the Lobbying Act were made in Chapter 4 of the Laws of 2010.

Questions regarding the registration and operation of the Lobbying Act should be directed to the New York State Joint Commission on Public Ethics.

5.13 State Finance Law Consultant Disclosure Provisions

In accordance with New York State Finance Law Section 163(4)(g), State agencies must require all contractors, including subcontractors, that provide consulting services for State purposes pursuant to a contract to submit an annual employment report for each such contract.

The successful bidder for procurements involving consultant services must complete a "State Consultant Services Form A, Contractor's Planned Employment From Contract Start Date through End of Contract Term" in order to be eligible for a contract.

The successful winning bidder must also agree to complete a "State Consultant Services Form B, Contractor's Annual Employment Report" for each state fiscal year included in the resulting contract. This report must be submitted annually to the Department of Health, the Office of the State Comptroller, and Department of Civil Service.

State Consultant Services Form A: Contractor's Planned Employment and Form B: Contractor's Annual Employment Report may be accessed electronically at: <http://www.osc.state.ny.us/agencies/forms/ac3271s.doc> and <http://www.osc.state.ny.us/agencies/forms/ac3272s.doc>.

5.14 Debriefing

Once an award has been made, bidders may request a debriefing of their proposal. Please note the debriefing will be limited only to the strengths and weaknesses of the bidder's proposal, and will not include any discussion of other proposals. Requests must be received no later than ten (10) business days from date of award or non-award announcement.

5.15 Protest Procedures

In the event unsuccessful bidders wish to protest the award resulting from this RFP, bidders should follow the protest procedures established by the Office of the State Comptroller (OSC). These procedures can be found in Chapter XI Section 17 of the Guide to Financial Operations (GFO). Available on-line at: <http://www.osc.state.ny.us/agencies/guide/MyWebHelp/>

5.16 Iran Divestment Act

By submitting a bid in response to this solicitation or by assuming the responsibility of a Contract awarded hereunder, Bidder/Contractor (or any assignee) certifies that it is not on the "Entities Determined To Be Non-Responsive Bidders/Offerers Pursuant to The New York State Iran Divestment Act of 2012" list ("Prohibited

Entities List”) posted on the OGS website (currently found at this address: <http://www.ogs.ny.gov/about/regs/docs/ListofEntities.pdf>) and further certifies that it will not utilize on such Contract any subcontractor that is identified on the Prohibited Entities List. Additionally, Bidder/Contractor is advised that should it seek to renew or extend a Contract awarded in response to the solicitation, it must provide the same certification at the time the Contract is renewed or extended.

During the term of the Contract, should DOH receive information that a person (as defined in State Finance Law §165-a) is in violation of the above-referenced certifications, DOH will review such information and offer the person an opportunity to respond. If the person fails to demonstrate that it has ceased its engagement in the investment activity which is in violation of the Act within 90 days after the determination of such violation, then DOH shall take such action as may be appropriate and provided for by law, rule, or contract, including, but not limited to, seeking compliance, recovering damages, or declaring the Contractor in default. DOH reserves the right to reject any bid, request for assignment, renewal or extension for an entity that appears on the Prohibited Entities List prior to the award, assignment, renewal or extension of a contract, and to pursue a responsibility review with respect to any entity that is awarded a contract and appears on the Prohibited Entities list after contract award.

5.17 Piggybacking

New York State Finance Law section 163(10) (e) (see also <http://www.ogs.ny.gov/purchase/snt/sflxi.asp>) allows the Commissioner of the NYS Office of General Services to consent to the use of this contract by other New York State Agencies, and other authorized purchasers, subject to conditions and the Contractor’s consent.

5.18 Encouraging Use of New York Businesses in Contract Performance

Public procurements can drive and improve the State’s economic engine through promotion of the use of New York businesses by its contractors. New York State businesses have a substantial presence in State contracts and strongly contribute to the economies of the state and the nation. In recognition of their economic activity and leadership in doing business in New York State, bidders/proposers for this contract for commodities, services or technology are strongly encouraged and expected to consider New York State businesses in the fulfillment of the requirements of the contract. Such partnering may be as subcontractors, suppliers, protégés or other supporting roles. All bidders should complete [Attachment 6](#), Encouraging Use of New York Businesses in Contract Performance, to indicate their intent to use/not use New York Businesses in the performance of this contract.

5.19 Diversity Practices Questionnaire

Diversity practices are the efforts of contractors to include New York State-certified Minority and Women-owned Business Enterprises (“MWBES”) in their business practices. Diversity practices may include past, present, or future actions and policies, and include activities of contractors on contracts with private entities and governmental units other than the State of New York. Assessing the diversity practices of contractors enables contractors to engage in meaningful, capacity-building collaborations with MWBEs.

5.20 Participation Opportunities for New York State Certified Service-Disabled Veteran-Owned Businesses

Article 17-B of the New York State Executive Law provides for more meaningful participation in public procurement by certified Service-Disabled Veteran-Owned Businesses (“SDVOBs”), thereby further integrating such businesses into New York State’s economy. DOH recognizes the need to promote the employment of service-disabled veterans and to ensure that certified service-disabled veteran-owned businesses have opportunities for maximum feasible participation in the performance of DOH contracts.

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, Bidders/Contractors are strongly encouraged and expected to consider SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as protégés, or in other partnering or supporting roles.

For purposes of this procurement, DOH conducted a comprehensive search and determined that the Contract does not offer sufficient opportunities to set specific goals for participation by SDVOBs as subcontractors, service

providers, and suppliers to Contractor. Nevertheless, Bidder/Contractor is encouraged to make good faith efforts to promote and assist in the participation of SDVOBs on the Contract for the provision of services and materials. The directory of New York State Certified SDVOBs can be viewed at: <https://ogs.ny.gov/veterans/>

Bidders are encouraged to contact the Office of General Services' Division of Service-Disabled Veteran's Business Development at 518-474-2015 or VeteransDevelopment@ogs.ny.gov to discuss methods of maximizing participation by SDVOBs on the Contract.

5.21 Intellectual Property

Any work product created pursuant to this agreement and any subcontract shall become the sole and exclusive property of the New York State Department of Health, which shall have all rights of ownership and authorship in such work product.

5.22 Vendor Assurance of No Conflict of Interest or Detrimental Effect

All bidders responding to this solicitation should submit [Attachment 4](#) to attest that their performance of the services outlined in this IFB does not create a conflict of interest and that the bidder will not act in any manner that is detrimental to any other State project on which they are rendering services

6.0 PROPOSAL CONTENT

The following includes the requested format and information to be provided by each Bidder. Bidders responding to this RFP must satisfy all requirements stated in this RFP. All Bidders are required to submit complete Administrative, Technical, and Cost proposals. A proposal that is incomplete in any material respect will be rejected.

To expedite review of the proposals, Bidders are requested to submit proposals in separate Administrative, Technical, and Cost packages inclusive of all materials as summarized in Attachment B, Proposal Documents. This separation of information will facilitate the review of the material requested. No information beyond that specifically requested is required, and Bidders are requested to keep their submissions to the shortest length consistent with making a complete presentation of qualifications. Evaluations of the Administrative, Technical, and Cost Proposals received in response to this RFP will be conducted separately. Bidders are therefore cautioned not to include any Cost Proposal information in the Technical Proposal documents.

DOH will not be responsible for expenses incurred in preparing and submitting the Administrative, Technical, or Cost Proposals. Such costs should not be included in the Proposal.

6.1 Administrative Proposal

The Administrative Proposal should contain all requirements listed below. A proposal that is incomplete in any material respect may be eliminated from consideration. The information requested should be provided in the prescribed format. Responses that do not follow the prescribed format may be eliminated from consideration. All responses to the RFP may be subject to verification for accuracy. Please provide the forms in the same order in which they are requested.

A. M/WBE Forms

Submit completed Form #1 and/or Form #2, Form #4 and Form #5 as directed in [Attachment 5](#), "Guide to New York State DOH M/WBE RFP Required Forms."

B. Bidder's Disclosure of Prior Non-Responsibility Determinations

Submit a completed and signed [Attachment 1](#), "Prior Non-Responsibility Determination."

C. Vendor Responsibility Questionnaire

Complete, certify, and file a New York State Vendor Responsibility Questionnaire. DOH recommends that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions at www.osc.state.ny.us/vendrep/vendor_index.htm or go directly to the VendRep System online at <https://portal.osc.state.ny.us>.

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the OSC Help Desk at 866-370-4672 or 518-408-4672 or by email at ciohelpdesk@osc.state.ny.us.

Vendors opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, www.osc.state.ny.us/vendrep, or may contact the Office of the State Comptroller's Help Desk for a copy of the paper form. Bidder's should complete and submit the Vendor Responsibility Attestation, [Attachment 3](#).

D. Freedom of Information Law – Proposal Redactions

Bidders must clearly and specifically identify any portion of the proposal that a Bidder believes constitutes proprietary information entitled to confidential handling as an exception to the Freedom of Information Law. See [Section 5.11](#), (Freedom of Information Law)

E. Bidder's Certified Statements

Submit [Attachment 7](#), "Bidder's Certified Statements", which includes information regarding the Bidder. [Attachment 7](#) must be signed by an individual authorized to bind the Bidder contractually. Please indicate the title or position that the signer holds with the Bidder. DOH reserves the right to reject a proposal that contains an incomplete or unsigned [Attachment 7](#) or no [Attachment 7](#).

F. Encouraging Use of New York Businesses in Contract Performance

Submit [Attachment 6](#), "Encouraging Use of New York State Businesses" in Contract Performance to indicate which New York Businesses you will use in the performance of the contract.

G. References

Provide references using [Attachment 9](#), (References) for three similar projects. Provide firm names, addresses, contact names, telephone numbers, and email addresses.

H Diversity Practices Questionnaire

The Department has determined, pursuant to New York State Executive Law Article 15-A, that the assessment of the diversity practices of respondents to this procurement is practical, feasible, and appropriate. Accordingly, respondents to this procurement should include as part of their response, [Attachment 10](#), "Diversity Practices Questionnaire". **Responses to the questionnaire will be formally scored and evaluated.**

I. Vendor Assurance of No Conflict of Interest or Detrimental Effect

Submit [Attachment 4](#), Vendor's Assurance of No Conflict of Interest or Detrimental Effect, which includes information regarding the Bidder, members, shareholders, parents, affiliates or subcontractors. Attachment 4 must be signed by an individual authorized to bind the Bidder contractually.

J. Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination

Submit [Attachment 11](#) certifying that it does not have institutional policies or practices that fail to address the harassment and discrimination of individuals on the basis of their age, race, creed, color, national

origin, sex, sexual orientation, gender identity, disability, marital status, military status, or other protected status under the Human Rights Law.

6.2 Technical Proposal

The purpose of the Technical Proposal is to demonstrate the qualifications, competence, and capacity of the Bidder to perform the services contained in this RFP. The Technical Proposal should demonstrate the qualifications of the Bidder and of the staff to be assigned to provide services related to the services included in this RFP.

A Technical Proposal that is incomplete in any material respect may be eliminated from consideration. The following outlines the required information to be provided, in the following order, by Bidders. The information requested should be provided in the prescribed format. Responses that do not follow the prescribed format may be eliminated from consideration. All responses to the RFP will be subject to verification for accuracy.

While additional data may be presented, the following should be included. Please provide the information in the same order in which it is requested. Your proposal should contain sufficient information to assure DOH of its accuracy. Failure to follow these instructions may result in disqualification.

Pricing information contained in the Cost Proposal must not be included in the Technical Proposal documents.

A. Title Page

Submit a Title Page providing the RFP subject and number; the Bidder's name and address, the name, address, telephone number, and email address of the Bidder's contact person; and the date of the Proposal.

B. Table of Contents

The Table of Contents should clearly identify all material (by section and page number) included in the proposal.

C. Documentation of Bidder's Eligibility Responsive to Section 3.0 of RFP

Bidders must be able to meet all the requirements stated in Section 3.1 of the RFP. The Bidder must submit documentation that provides sufficient evidence of meeting the criterion. This documentation may be in any format needed to demonstrate how they meet the minimum qualifications to propose.

- A minimum of two (2) years of experience in providing rapid cycle continuous improvement (RCCI) related services; and
- Previous completion of an RCCI program related to a governmental program, healthcare system, university, OR for an organization that employs over 500 people.

D. Technical Proposal Narrative

1. Background Experience

Bidders should provide, in relation to responsibilities set forth in Sections 4.0-4.3 of this RFP and referenced attachments:

- i. A description of the bidder's organizational structure and background;
- ii. A description of the bidder's experience in conducting the tasks outlined in Section 4.0: Scope of work of the RFP. Specifically, the bidder should state its experience in:
 - a. Conducting RCCI type workshops;
 - b. Implementing large scale RCCI Training programs;
 - c. Providing consultative coaching to teams and executive level staff; and
 - d. New York State Healthcare initiatives, such as Medicaid Redesign and the DSRIP program.

2. Staffing Requirements, Qualifications, and Training

- i. Bidder should include an organizational chart that delineates the titles of the staff responsible for fulfilling the series requirements, their lines of communication, and their location(s) where they will be working. This should include all proposed Personnel, including subject matter experts and/or subcontractors;
- ii. Bidder should provide a summary of the proposed training initiatives to be utilized to ensure that all staff that will be assigned to this contract will be appropriately trained; and
 - a. Describe the bidder's plan for recruitment and retainment of contractor staff, in a manner which will allow for the bidder to meet all required timeframes and deliverables associated with this RFP. This plan should include: How the bidder will recruit and retain the appropriate Contract Manager, subject matter experts and facilitators for the duration of the two (2) rounds of two RCCI workshop series. The Bidder should elaborate on the skills they will be seeking to ensure that the staff engaged possess:
 1. Strong management skills necessary to coordinate the activities outlined in Section 4.1.;
 2. SME experience as described in Section 4.2;
 3. Experience in overseeing and/or facilitating RCCI training workshops and initiatives; and
 4. Previous experience managing state or federal contract engagements.
 - b. How the bidder will maintain a sufficient number of staff who have experience in healthcare, Medicaid, and/or RCCI-type training assistance, with facilitator staff having the experience outlined in Section 4.2;
 - c. How the bidder plans to employ staff with a sufficient knowledge of New York State Healthcare initiatives, such as Medicaid Redesign and the DSRIP Program to support and enhance the project; and

3. Program Implementation

- i. The bidder should include timeframes and timelines for all tasks to be completed to ensure timely implementation of the proposed project.
- ii. The bidder should include a detailed implementation plan for all tasks to be completed under the resulting contract as outlined in Section 4.1, including how the bidder plans to:
 - a. Develop and implement the bidders Recruitment Plan for the TTF and RCCI workshops;
 - b. Conduct the TTF sessions and RCCI workshops within each series, consisting of three (3) workshops per series, including the proposed locations and set-up of the workshops.
 - c. Describe how they will use the materials and develop/implement their own program;
 - d. Provide Action Team Support between workshops to maintain on-going assistance and assess the success of the Action Teams in their environment;
 - e. Facilitate TTF Coaching between sessions and provide support for the delivery of independent workshops;
 - f. Utilize SMEs in all areas of the workshops and on-going support; and
 - g. Evaluate all program components against the original curriculum goals.
- iii. The bidder should provide a description of the methods to be utilized to maintain the level of cooperation with the Department necessary for proper performance of all contractual responsibilities and to apprise the Department of any issues and status.
- iv. The bidder should include, in outline format, a reporting format for all reporting requirements as described in Section 4.3.

6.3 Cost Proposal

Submit a completed and signed [Attachment B – Cost Proposal](#). The Cost Proposal shall comply with the format and content requirements as detailed in this document and in Attachment B. Failure to comply with the format and content requirements may result in disqualification.

The bid price per deliverable is an all-inclusive price to cover the cost of furnishing all of the said services, including but not limited to materials, equipment, meeting room(s) rental, meals, profit and labor to the satisfaction of the Department of Health and the performance of all work set forth in said specifications.

Travel for the Contractor's staff to conduct these deliverables included in Section 4.0 Scope of Work, must be included in the all-inclusive deliverable price bid with the exception of travel costs specifically related to the Action

Team Site visits. Reimbursement for travel to the Action Team’s partner facilities will be reimbursed per Office of the State Comptroller (OSC) rules and regulations associated with travel (<http://osc.state.ny.us/agencies/travel/travel.htm>), Rates must not exceed OSC’s published rates without prior Departmental approval and will not be reimbursed without supporting documentation (receipts). The Contractor is responsible for keeping adequate records to substantiate any claims for reimbursement by personnel for travel in performance of these site visits. Any additional travel expense beyond those associated with the site visits must be included in the deliverable costs and provided by the contractor.

To complete the Cost Proposal, Bidders must provide an all-inclusive Deliverable Price for each of the Deliverables outlined below and in Attachment B: Cost Proposal. This is a price per deliverable per round and the department anticipates two (2) rounds will be conducted during the contract period.

Deliverable	Number of Deliverables	Price for Series Development Deliverable	
<u>Series Development – One price only to be paid prior to the start of Round 1</u>	1		
Deliverable	Number of Deliverables per Round	Price for Up to 7 Action Teams	Price for 8 to 12 Action Teams
<u>Upstate Participant Recruitment and Workshop Scheduling – TTF and MAX RCCI</u>	1		
<u>Downstate Participant Recruitment and Workshop Scheduling – TTF and MAX RCCI</u>	1		
Deliverable	Number of Deliverables per Round	Price for Up to 7 Action Teams	Price for 8 to 12 Action Teams
<u>Workshop 1 Deliverable Price: Upstate</u> <i>(Upstate TTF Support/Coaching and all RCCI related services, reporting and meetings for Workshop 1 from recruitment end to workshop end including reports)</i>	1		
<u>Workshop 1 Deliverable Price: Downstate</u> <i>(Downstate TTF Support/Coaching and all RCCI related services, reporting and meetings for Workshop 1, work from end of recruitment to end of Workshop 1 including reports)</i>	1		
<u>Workshop 2 Deliverable Price: Upstate</u> <i>(Includes TTF Support/Coaching and all Upstate RCCI related services, reporting and meetings for Workshop 2, work from end of Workshop 1 to end of workshop 2 including reports)</i>	1		
<u>Workshop 2 Deliverable Price: Downstate</u> <i>(Includes TTF Support/Coaching and all Downstate RCCI related services, reporting and meetings for Workshop 2, work from end of Workshop 1 to end of Workshop 2 including reports)</i>	1		
<u>Workshop 3 Deliverable Price: Upstate</u> <i>(Includes TTF Support/Coaching and all Upstate RCCI related services, reporting and meetings for Workshop 3, work from end of Workshop 2 to end of Workshop 3 including reports)</i>	1		
<u>Workshop 3 Deliverable Price: Downstate</u> <i>(Includes TTF Support/Coaching and all Downstate RCCI related services, reporting and meetings for Workshop 3, work from end of Workshop 2 to end of Workshop 3 including reports)</i>	1		

Deliverable	Number of Deliverables	Price for Final Deliverables
<u>Final Webinar</u>	1	
<u>Final Reports (one each upstate and downstate)</u>	2	

7.0 PROPOSAL SUBMISSION

A proposal consists of three distinct parts: (1) the Administrative Proposal, (2) the Technical Proposal, and (3) the Cost Proposal. The table below outlines the required format and volume for submission of each part. Proposals should be submitted in all formats as prescribed below.

	Electronic Submission	Paper Submission
Administrative Proposal	2 dedicated flash drives or CDs labeled “Administrative Proposal” containing a standard searchable PDF file with copy/read permissions only.	4 Originals 6 Copies
Technical Proposal	2 dedicated flash drives or CDs labeled “Technical Proposal” containing a standard searchable PDF file with copy/read permissions only.	4 Originals 6 Copies
Cost Proposal	2 dedicated flash drives or CDs labeled “Cost Proposal” containing standard searchable PDF file(s) with copy/read permissions only.	4 Originals 6 Copies

1. All hard copy proposal materials should be printed on 8.5” x 11” white paper (two-sided) and **be clearly page numbered on the bottom of each page with appropriate header and footer information.** A type size of eleven (11) points or larger should be used. The Technical Proposal materials should be presented separate from the sealed Cost Proposal. The sealed Cost Proposal should also be presented in separate three-ring binder(s);
2. Where signatures are required, the proposals designated as originals should have a handwritten signature and be signed in ink.
3. The NYSDOH discourages overly lengthy proposals. Therefore, marketing brochures, user manuals or other materials, beyond that sufficient to present a complete and effective proposal, are not desired. Elaborate artwork or expensive paper is not necessary or desired. In order for the NYSDOH to evaluate proposals fairly and completely, proposals should follow the format described in this RFP to provide all requested information. The Bidder should not repeat information in more than one section of the proposal. If information in one section of the proposal is relevant to a discussion in another section, the Bidder should make specific reference to the other section rather than repeating the information;
4. Audio and/or videotapes are not allowed. Any submitted audio or videotapes will be ignored by the evaluation team; and
5. In the event that a discrepancy is found between the electronic and hardcopy proposal, the original hardcopy will prevail.

The complete proposal must be received by the NYSDOH, no later than the Deadline for Submission of Proposals specified in [Section 1.0](#), (Calendar of Events). Late bids will not be considered.

Proposals should be submitted in three (3) separate, clearly labeled packages: (1) Administrative Proposal, (2) Technical Proposal and (3) Cost Proposal, prepared in accordance with the requirements stated in this RFP. Mark the outside envelope of each proposal as “RFP#18026 Medicaid Accelerated sXchange (MAX) Program Rapid Cycle Continuous Improvement Program Targeting High Utilizers of Avoidable Hospital Services – (Administrative) (Technical) or (Cost) Proposal submitted by (Bidder’s name)”. The three sealed proposals may be combined into one mailing, if desired.

Proposals must be submitted, by U.S. Mail, by courier/delivery service (e.g., FedEx, UPS, etc.) or by hand as noted below, in a sealed package to:

Department of Health (RFP # 18026)
Attention: Michael Lewandowski, Health Program Administrator I
One Commerce Plaza
Room 1450
Albany, NY 12237

NOTE: You should request a receipt containing the time and date received and the signature of the receiver for all hand-deliveries and ask that this information also be written on the package(s).

Submission of proposals in a manner other than as described in these instructions (e.g., fax, electronic transmission) will not be accepted.

7.1 No Bid Form

Bidders choosing not to bid are requested to complete the No-Bid form [Attachment 2](#).

8.0 METHOD OF AWARD

8.1 General Information

DOH will evaluate each proposal based on the “Best Value” concept. This means that the proposal that best “optimizes quality, cost, and efficiency among responsive and responsible offerers” shall be selected for award (State Finance Law, Article 11, §163(1)(j)).

DOH at its sole discretion, will determine which proposal(s) best satisfies its requirements. DOH reserves all rights with respect to the award. All proposals deemed to be responsive to the requirements of this procurement will be evaluated and scored for technical qualities and cost. Proposals failing to meet the requirements of this document may be eliminated from consideration. The evaluation process will include separate technical and cost evaluations, and the result of each evaluation shall remain confidential until both evaluations have been completed and a selection of the winning proposal is made.

The evaluation process will be conducted in a comprehensive and impartial manner, as set forth herein, by an Evaluation Committee. The Technical Proposal and compliance with other RFP requirements (other than the Cost Proposal) will be weighted **70%** of a proposal’s total score and the information contained in the Cost Proposal will be weighted **30%** of a proposal's total score.

Bidders may be requested by DOH to clarify the contents of their proposals. Other than to provide such information as may be requested by DOH, no Bidder will be allowed to alter its proposal or add information after the Deadline for Submission of Proposals listed in [Section 1.0](#) (Calendar of Events).

In the event of a tie, the determining factors for award, in descending order, will be: (1) lowest cost and (2) proposed percentage of MWBE participation.

8.2 Submission Review

DOH will examine all proposals that are received in a proper and timely manner to determine if they meet the proposal submission requirements, as described in [Section 6.0](#) (Proposal Content) and [Section 7.0](#) (Proposal Submission), and include the proper documentation, including all documentation required for the Administrative Proposal, as stated in this RFP. Proposals that are materially deficient in meeting the submission requirements or have omitted material documents, in the sole opinion of DOH, may be rejected.

8.3 Technical Evaluation

The evaluation process will be conducted in a comprehensive and impartial manner. A Technical Evaluation Committee comprised of program staff of DOH will review and evaluate all proposals.

Proposals will undergo a preliminary evaluation to verify Minimum Qualifications to Propose (Section 3.0).

The Technical Evaluation Committee members will independently score each Technical Proposal that meets the submission requirements of this RFP. The individual Committee Member scores will be averaged to calculate the Technical Score for each responsive Bidder.

The technical evaluation is **70% (up to 70 points)** of the final score.

8.4 Cost Evaluation

The Cost Evaluation Committee will examine the Cost Proposal documents. The Cost Proposals will be opened and reviewed for responsiveness to cost requirements. If a cost proposal is found to be non-responsive, that proposal may not receive a cost score and may be eliminated from consideration.

The Cost Proposals will be scored based on a maximum cost score of 30 points. The maximum cost score will be allocated to the proposal with the lowest all-inclusive not-to-exceed maximum price. All other responsive proposals will receive a proportionate score based on the relation of their Cost Proposal to the proposals offered at the lowest final cost, using this formula:

$$C = (A/B) * 30\%$$

A is Total price of lowest cost proposal;

B is Total price of cost proposal being scored; and

C is the Cost score.

The cost evaluation is **30% (up to 30 points)** of the final score.

8.5 Composite Score

A composite score will be calculated by the DOH by adding the Technical Proposal points and the Cost points awarded. Finalists will be determined based on composite scores.

8.6 Interviews

For all bids, and as part of the bid review process, the Department reserves the right to interview proposed project participants. The purpose of an interview is to allow the evaluators to validate the Bidder's experience and qualifications.

8.7 Reference Checks

The Bidder should submit references using [Attachment 9](#) (References). At the discretion of the Evaluation Committee, references may be checked at any point during the process to verify bidder qualifications to propose (Section 3.0).

8.8 Best and Final Offers

NYSDOH reserves the right to request best and final offers. In the event NYSDOH exercises this right, all bidders that submitted a proposal that are susceptible to award will be asked to provide a best and final offer. Bidders will be informed that should they choose not to submit a best and final offer, the offer submitted with their proposal will be construed as their best and final offer.

8.9 Award Recommendation

The Evaluation Committee will submit a recommendation for award to the Finalist(s) with the highest composite score(s) whose experience and qualifications have been verified.

The Department will notify the awarded Bidder(s) and Bidders not awarded. The awarded Bidder(s) will enter into a written Agreement substantially in accordance with the terms of [Attachment 8](#), DOH Agreement, to provide the required services as specified in this RFP. The resultant contract shall not be binding until fully executed and approved by the New York State Office of the Attorney General and the Office of the State Comptroller.

ATTACHMENTS

The following attachments are available via hyperlink or can be found at: <https://www.health.ny.gov/funding/forms/>

- 1 [Bidder's Disclosure of Prior Non-Responsibility Determination](#)
- 2 [No-Bid Form](#)
- 3 [Vendor Responsibility Attestation](#)
- 4 [Vendor Assurance of No Conflict of Interest or Detrimental Effect](#)
- 5 [Guide to New York State DOH M/WBE Required Forms & Forms](#)
- 6 [Encouraging Use of New York Businesses in Contract Performance](#)
- 7 [Bidder's Certified Statements](#)
- 8 [DOH Agreement](#) (Sample Contract)
- 9 [References](#)
- 10 [Diversity Practices Questionnaire](#)

The following attachments are found attached to this end of this RFP:

- A Proposal Document Checklist
- B Cost Proposal
- C Definition of Deliverable Terms

**ATTACHMENT A
PROPOSAL DOCUMENT CHECKLIST**

Please reference Section 7.0 for the appropriate format and quantities for each proposal submission.

RFP # 18026 Medicaid Accelerated eXchange (MAX) Program Rapid Cycle Continuous Improvement Targeting High Utilizers of Avoidable Hospital Services		
FOR THE ADMINISTRATIVE PROPOSAL		
RFP §	Criteria	INCLUDED
§ 6.1.A	M/WBE Participation Requirements:	<input type="checkbox"/>
	Attachment 5 Form 1	<input type="checkbox"/>
	Attachment 5 Form 2 (If Applicable)	<input type="checkbox"/>
	Attachment 5 Form 4	<input type="checkbox"/>
	Attachment 5 Form 5	<input type="checkbox"/>
§ 6.1.B	Attachment 1 – Disclosure of Prior Non-Responsibility Determinations, completed and signed.	<input type="checkbox"/>
§ 6.1.C	Attachment 3- Vendor Responsibility Attestation	<input type="checkbox"/>
§ 6.1.D	Freedom of Information Law – Proposal Redactions (If Applicable)	<input type="checkbox"/>
§ 6.1.E	Attachment 7 - Bidder’s Certified Statements, completed & signed.	<input type="checkbox"/>
§ 6.1.F	Attachment 6- Encouraging Use of New York Businesses in Contract Performance	<input type="checkbox"/>
§ 6.1.G	Attachment 9 - References	<input type="checkbox"/>
§ 6.1.H	Attachment 10- Diversity Practices Questionnaire	<input type="checkbox"/>
§ 6.1.I	Attachment 4- Conflict of Interest or Detrimental Effect	<input type="checkbox"/>
§ 6.1.J	Attachment 11 – EO 177 Prohibiting Contracts with Entities that Support Discrimination	<input type="checkbox"/>
FOR THE TECHNICAL PROPOSAL		
RFP §	Criteria	INCLUDED
§ 6.2.A	Title Page	<input type="checkbox"/>
§ 6.2.B	Table of Contents	<input type="checkbox"/>
§ 6.2.C	Documentation of Bidder’s Eligibility	<input type="checkbox"/>
§ 6.2.D	Technical Proposal Narrative	<input type="checkbox"/>
FOR THE COST PROPOSAL REQUIREMENT		
RFP §	REQUIREMENT	INCLUDED
§ 6.3	Attachment B- Cost Proposal	<input type="checkbox"/>

**ATTACHMENT B
COST PROPOSAL**

Bidders Name: _____

Cost Proposal Instructions:

To complete the Cost Proposal, Bidders must provide an all-inclusive Per Deliverable Price for the deliverables outlined below.

The bid price per deliverable is an all-inclusive price to cover the cost of furnishing all of the said services, including but not limited to materials, equipment, meeting room(s) rental, meals, profit and labor to the satisfaction of the Department of Health and the performance of all work set forth in said specifications.

Travel for the Contractor’s staff to conduct these deliverables included in Section 4.0 Scope of Work, must be included in the all-inclusive deliverable price bid with the exception of travel costs specifically related to the Action Team Site visits. Reimbursement for travel to the Action Team’s partner facilities will be reimbursed per Office of the State Comptroller (OSC) rules and regulations associated with travel (<http://osc.state.ny.us/agencies/travel/travel.htm>), Rates must not exceed OSC’s published rates without prior Departmental approval and will not be reimbursed without supporting documentation (receipts). The Contractor is responsible for keeping adequate records to substantiate any claims for reimbursement by personnel for travel in performance of these site visits. Any additional travel expense beyond those associated with the site visits must be included in the deliverable costs and provided by the contractor.

To complete the Cost Proposal, Bidders must provide an all-inclusive Deliverable Price for each of the Deliverables outlined below and in Attachment B: Cost Proposal. This is a price per deliverable per round and the department anticipates two (2) rounds will be conducted during the contract period.

Deliverable	Number of Deliverables	Price for Series Development Deliverable	
<u>Series Development – One price only to be paid prior to the start of Round 1</u>	1		
Deliverable	Number of Deliverables per Round	Price for Up to 7 Action Teams	Price for 8 to 12 Action Teams
<u>Upstate Participant Recruitment and Workshop Scheduling – TTF and MAX RCCI</u>	1		
<u>Downstate Participant Recruitment and Workshop Scheduling – TTF and MAX RCCI</u>	1		
<u>Workshop 1 Deliverable Price: Upstate</u> <i>(Upstate TTF Support/Coaching and all RCCI related services, reporting and meetings for Workshop 1 from recruitment end to workshop end including reports)</i>	1		
<u>Workshop 1 Deliverable Price: Downstate</u> <i>(Downstate TTF Support/Coaching and all RCCI related services, reporting and meetings for Workshop 1, work from end of recruitment to end of Workshop 1 including reports)</i>	1		
<u>Workshop 2 Deliverable Price: Upstate</u> <i>(Includes TTF Support/Coaching and all Upstate RCCI related services, reporting and meetings for Workshop 2, work from end of Workshop 1 to end of workshop 2 including reports)</i>	1		

Workshop 2 Deliverable Price: Downstate <i>(Includes TTF Support/Coaching and all Downstate RCCI related services, reporting and meetings for Workshop 2, work from end of Workshop 1 to end of Workshop 2 including reports)</i>	1		
Workshop 3 Deliverable Price: Upstate <i>(Includes TTF Support/Coaching and all Upstate RCCI related services, reporting and meetings for Workshop 3, work from end of Workshop 2 to end of Workshop 3 including reports)</i>	1		
Workshop 3 Deliverable Price: Downstate <i>(Includes TTF Support/Coaching and all Downstate RCCI related services, reporting and meetings for Workshop 3, work from end of Workshop 2 to end of Workshop 3 including reports)</i>	1		
Deliverable	Number of Deliverables	Price for Final Deliverables	
Final Webinar	1		
Final Reports (one each upstate and downstate)	2		

By signing this Cost Proposal Form, the signatory certifies that they are authorized to bind the Bidder contractually and agrees that the prices above are binding for 365 days from the proposal due date.

Signature: _____

Title: _____ Date: _____

ATTACHMENT C
DEFINITION OF DELIVERABLE TERMS

Term	Definition
Downstate PPS	<p>PPS located in the Hudson Valley, NYC, and Long Island regions of New York State.</p> <p>Currently, this includes: Refuah Community Health Collaborative, Montefiore Hudson Valley Collaborative, WMCHealth, NYU Langone PPS, Community Care of Brooklyn, Staten Island Performing Provider System, The New York and Presbyterian Hospital, Bronx Health Access, Bronx Partners for Health Communities, Mount Sinai PPS, New York – Presbyterian/Queens, OneCity Health, SOMOS Community Care, Suffolk Care Collaborative, and Nassau Queens PPS.</p>
Upstate PPS	<p>PPS located in the areas outside those identified as Downstate.</p> <p>Currently, this includes: Adirondack Health Institute, Alliance for Better Health Care, Better Health for Northeast New York, Care Compass Network, Central New York Care Collaborative, Finger Lakes Performing Provider System, Leatherstocking Collaborative Health Partners, Millennium Collaborative Care, North Country Initiative, and Community Partners of Western New York.</p>
Workshop	A full day of trainings/presentations on the designated topic.
Workshop Series	The full set of trainings/presentations conducted. These series are to be three (3) full days in length, though it is not the Department's intention to have all three days of a series be presented consecutively. There will be four (4) series total for the contract. Each contract year will have two (2) Workshop Series, one (1) for Upstate PPS and one (1) for Downstate PPS.
Workshop Sub-series	If there are more than seven (7) action teams recruited in a region, that region is to be split in to two sub-series to ensure that no more than seven (7) action teams are participating at one time.
Train the Facilitator (TTF) Workshop Series	A separate 3-day workshop series conducted within seven (7) days prior to the RCCI Workshop Series to train co-facilitators of the RCCI Workshop Series. Each RCCI Workshop Series will include five (5) co-facilitators, for 20 total co-facilitators.
Workshop Series Round	The set of Upstate and Downstate series (or sub-series) which are presented during a contract year. There will be two (2) Workshop Series Rounds total for this contract.
Participants	Individuals who attend the Workshop Series.
Action Teams	Teams of eight (8) to twelve (12) participants representing a single PPS partner facility. There is a maximum of twelve (12) Action Teams per Workshop Series.