Request for Proposals

RFP# 20047

Early Intervention Program Monitoring and Quality Improvement Services

Issued: July 14, 2020

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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.

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1.0 CALENDAR OF EVENTS

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<td>Issuance of Request for Proposals</td>
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2.0 OVERVIEW

Through this Request for Proposals (“RFP”), the New York State (“State”) Department of Health (The Department) is seeking competitive proposals from organizations with experience in monitoring and quality improvement to provide oversight and monitoring services as further detailed in Section 4.0 (Scope of Work). It is the Department’s intent to award one (1) contract from this procurement.

2.1 Introductory Background

The Program for Infants and Toddlers with Disabilities was reauthorized under Part C of the federal Individuals with Disabilities Education Act (IDEA), effective July 1, 2005. A statewide Early Intervention Program (EIP) was established at the New York State Department of Health (Department) under Public Health Law (PHL -Title II-A, Article 25) in 1992 and has been fully operational since July 1, 1993.

The EIP provides a range of therapeutic and supportive services for eligible children with disabilities and developmental delays, ages birth to age three, and their families. The mission of the EIP is “to identify and evaluate as early as possible those infants and toddlers whose healthy development is compromised and provide for appropriate intervention to improve child and family development.”

Title II-A of Article 25 and regulations require that providers of early intervention services be monitored by their approving state early intervention service agencies. The Department currently has the responsibility for monitoring 57 local municipalities and New York City as local administrators of the Early Intervention Program and providers who are approved by the Department. Providers may hold an Appendix Early Intervention Provider Agreement or a Basic Early Intervention Provider Agreement. Only approved appendix providers can be selected as a “provider of record.” A provider of record receives service authorizations directly from a municipality and is authorized to bill the EIP for services rendered. A provider who has only a Basic Early Intervention Provider Agreement will be limited to the role of a “rendering provider” under an agency that is an approved Appendix Provider. A rendering provider directly renders the service to the child and family on behalf of an agency who is the provider of record. As of September 30, 2019, there are approximately 495 agency/municipal and 11,659 individual providers who are approved to deliver early intervention services, that will be subject to monitoring reviews under this contract. Of these approved providers, 230 agency providers and 110 individual providers have facilities. See Attachment C for a breakdown of provider by service type.
The Department’s most recent contract is scheduled to end March 31, 2021 and will result in approximately 854 monitoring reviews. The monitoring protocols have evolved over time to remain current with revised regulations and Department policies and procedures, and the system generated monitoring reports are continuously updated to ensure consistent language and customized statements of findings.

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 five (5) 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

The Department will accept proposals from organizations with the following types and levels of experience as a prime Contractor.

Eligible organizations are not for profit, for profit or government entities which are legally authorized to perform the contracted services. Entities may not be directly or indirectly involved in the provision of early intervention services in New York State. Eligible organizations must meet the following requirements:

- three years of experience in quality improvement and utilization review

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 undertakes to perform a complete contract and may employ (and manage) one or more subcontractors to carry out specific parts of the contract.

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

3.2 Preferred Qualifications

Bidders who demonstrate the following experience are preferred:

- One year of experience with the coordination and support of a statewide quality improvement program, and/or;
- One year of experience with review of credentials of professional individuals, agencies, and organizations, and/or;
- One year of experience in developing, modifying, and managing an electronic data system/application to capture, analyze and report on monitoring data.

4.0 SCOPE OF WORK

For purposes of this RFP, the Department has established a target number of deliverables per deliverable category. This target is based on past monitoring experience, and the current demographics of the approved provider community.

The following section delineates the deliverables; monitoring and quality improvement services for the Early Intervention Program to be completed by the selected bidder throughout the contract term under this RFP. The Department reserves the right to modify the schedule and mix of types of monitoring reviews throughout the contract period using the pricing structure per deliverable submitted by the Contractor.

PLEASE NOTE: Bidders will be requested to provide responses that address all the requirements of this RFP as part of their 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

4.1.1 Early Intervention Monitoring Reviews

The Contractor will follow protocols and use monitoring tools developed in conjunction with the Department to conduct Monitoring reviews and develop draft responses to all Corrective Action Plans. Examples of these protocols and monitoring tools can be found in Attachments D1, D2, F, G and H. The Department reserves the right to modify these protocols and/or tools to address certain findings and/or for certain reviews. The Department anticipates that reviews will take the monitoring team an average of one to two days to complete and in general, teams will be made up of two individuals. Site reviews may require specialized expertise to evaluate building infrastructure and health and safety issues.

Contractors must complete these five monitoring reviews:

- 4.1.1.1 Comprehensive Early Intervention Monitoring Reviews for Regulatory Compliance (CRRC)
- 4.1.1.2 Municipalities as Administrator Reviews (MAR)
- 4.1.1.3 Investigative Monitoring Reviews (IMR)
- 4.1.1.4 Quality of Screening, Evaluation Reports and Eligibility Determination Reviews (SEED)
- 4.1.1.5 Verification of Correction Reviews (VR)

Specific requirements for the five review types are detailed below. Corrective Action Plans (CAP) are described in section 4.1.2 of this RFP.

4.1.1.1 Comprehensive Early Intervention Monitoring Reviews for Regulatory Compliance (CRRC)

Comprehensive Early Intervention Monitoring Reviews for Regulatory Compliance (CRRC) are defined as a systematic review of a service provider or municipality as a provider, in accordance with NYS regulations and applicable State and Federal laws. To complete CRRCs, the Contractor will follow specific protocols and use tools developed by the Contractor in conjunction with the Department. Examples of these protocols and tools are provided in Attachment D1 and D2.

In order to ensure there is no substantial lapse in current monitoring efforts, CRRCs must be scheduled and the Contractor must begin reviews within three (3) months of the first year of the contract.

i. The Contractor will be expected to conduct the following pre-review activities:

- Reviewing previous provider and municipality monitoring reports, and Department approved corrective action plans (CAP) that were a result of a systems complaint;
- Developing a monthly monitoring schedule from the Department approved list of providers and list of municipalities that is accessible to the Contractor through the Department's current Early Intervention data system;
- Inviting municipalities to attend the onsite monitoring review for providers who render EI services in their geographic location;
- Sending pre-review materials to the provider and municipality scheduled for the monitoring review, which include an Onsite Visit Agenda, and a list of items to be available during the monitoring review process;
- Determining, in collaboration with the Department, which and how many child records will be reviewed. The Department reserves the right to determine the sample selection criteria and the final number of child records the Contractor must examine in any instances when the Department receives a complaint regarding a specific issue that needs to be monitored. When determining the number of child records the Contractor will be directed to review on
The Department will consider factors, such as; the size of the municipality or provider, number and type of children served, level of state and local monitoring, and fiscal audit history of the municipality or provider. The approximate number of child records reviewed may be five for individual providers and up to 20 for agency providers and municipalities;

- Conducting parent interviews or conducting written parent surveys;
- Conducting municipality interviews of Appendix providers based on the counties/municipalities listed in their service catchment.
- Reviewing of pertinent individual provider, agency provider and municipal staff and contracted personnel information available to the Contractor through the Department's current EI data system.

ii. The Contractor will be expected to complete the following onsite review activities:

- Use protocols and tools developed by the Department and the Contractor to evaluate compliance with EI regulations, Public Health Law, and with signed and executed Provider Agreements between a provider and the Department;
- Employ a variety of methods to evaluate regulatory compliance, which may include a comparison of data in the Department’s current EI data system with data in agency source documents, review of child records, review of written policies and procedures, interviews with staff and program managers, observation of facilities where children receive EI services, and review of other documents utilized for the EI program;
- Review for compliance of DOH approved CAPs that were in result of a system complaint;
- Review provider credentials and other documents maintained in personnel records. For example: State Central Register clearance documents and other relevant background check information;
- Review of session notes, including electronic session notes to ensure the following criteria is being met:
  - Session notes must not be duplicative.
  - Session notes must contain all elements required by Medicaid.
  - Recorded information must be clear, legible, and support payment to the provider.
  - Notes must be related to the services outlined in the Individualized Family Service Plan (IFSP).
- Records review:
  - Review a sample of child’s records from the date of entry into the EI program to their exit.
  - Review evaluation reports
  - Review IFSPs
  - Review written orders
- Travel to various provider sites where records and staff are accessible. Individual provider CRRCs may occur at the provider’s place of business (which may be his/her home or office) or an appropriate community location, as agreed to by the Department and the Contractor.

iii. The Contractor will be expected to complete the following post-review activities:

- Produce a system-generated monitoring report that allows for the insertion of customized information (See Attachment J for a chart of reports currently provided and the required information needed in each type of report).
The Department reserves the right to request that certain CRRCs of a provider or municipality will be performed within 15 business days of the Department's request. These "priority" CRRCs must follow the same protocol as other CRRCs and will not take more time, effort or resources than other CRRCs of an agency or individual provider or a municipality. The Contractor will be paid the same rate for a "priority" CRRC as for routine CRRCs. A "priority" CRRC will count toward the agreed-upon target number of CRRCs to be completed each operational year of the contract. Results of CRRCs may be shared with municipalities located within the geographic municipal area in which the provider is approved to service.

It is projected that completion of the CRRC activities will take the monitoring team an average of:

- One to two days for a municipality, depending upon the size of the municipality
- One to two days for an agency provider, depending upon the size of the agency, and
- Half of a day for an individual provider.

Each municipality would undergo a CRRC at least once during the duration of the contract, or more frequently, depending upon certain factors, such as previous monitoring findings, data performance or other issues identified by the Department. The Department anticipates that 12 municipalities will have a CRRC during each year of the contract.

Agencies and individual providers, including providers who only contract with other EI agencies (subcontractors), that have delivered services during the past three years and have an agreement with the Department, may receive a CRRC at least once during the duration of the contract or more frequently depending on previous performance or other factors as determined by the Department.

The target number of agency providers statewide that will have a CRRC every year of the contract is 73; the target number of individual providers statewide, including subcontractors that will have a CRRC every year of the contract is 150.

4.1.1.2 Municipalities as Administrator Reviews (MAR)

Municipalities receive funding through Part C of the Individuals with Disabilities Act (IDEA) for local administration of the Early Intervention Program. Each municipality contracts with Bureau of Early Intervention through a non-competitive procurement. A MAR will focus on the work plan tasks as defined in each municipality’s contract. A municipality may receive a MAR review but may still be subject to a separate CRRC review if they are also providing EI services.

During a Municipality as Administrator Review the Contractor will develop and implement review instruments to evaluate the work plan activities for the following areas:

- Public Awareness and Child Find
- Family Centered Services
- Child and Family Outcomes
- Service Delivery and Natural Environments
- Delivery of Transportation and Respite Services
- Transition
- Administration

See Attachment E for the municipality work plan. (Work plan activities are subject to change.)

The target number of MAR Reviews will be 12 per contract year.
4.1.1.3 Investigative Monitoring Reviews (IMR)

An investigative monitoring review is defined as a more specified review of a provider or municipality that focuses on a complaint, inquiry or expression of concern received from stakeholders regarding a specific practice or practices of a provider or municipality. An IMR may be necessary to confirm any complaint or issue that has been raised. An IMR is specific to the nature of the concern and limited in scope. In most cases of IMRs, the provider will be given 24-hour notice to two weeks’ notice via overnight mail. The Contractor will use protocols and/or tools developed in conjunction with the Department. An example of an IMR protocol is provided in Attachment F. The child sample will vary in size and selection criteria, based on circumstances surrounding the review, as determined by the Department. The Contractor must use staff that is experienced in the specific area that will be investigated, as determined by the Department. It is projected that the completion of onsite activities, relative to an IMR, will take the monitoring staff an average of one day for a team of two review staff.

The Department anticipates approximately 15 IMRs will be needed per contract year.

The Contractor must be able to conduct IMRs within three months of the first year of the contract.

4.1.1.4 Quality of Screening, Evaluation Reports and Eligibility Determination Reviews (SEED)

To be eligible for the EIP, children must be under 3 years of age and have a confirmed disability or established developmental delay, as defined by the State, in one or more of the following areas of development: physical, cognitive, communication, social-emotional, and/or adaptive.

To be determined eligible for the Early Intervention Program a timely screening and/or multidisciplinary evaluation may be conducted. If the child does not have a qualifying diagnosis, but is suspected of having a developmental delay, the evaluator shall conduct a screening to determine if further evaluation is appropriate. If the results of the screening indicate further evaluation is needed the evaluator would then conduct a multidisciplinary evaluation (MDE).

The multidisciplinary evaluation team shall include two or more qualified personnel from different disciplines who are trained to utilize appropriate methods and procedures and have the necessary credentials, professional licensure and/or certifications as applicable; and at least one of whom shall be a specialist in the area of the child’s suspected delay or disability, if known. 10 NYCRR§69-4.8

The Contractor will work with the Department to develop and implement review instruments to assess the quality of provider screenings, evaluation reports and eligibility practices. These instruments will evaluate the above in the following areas:

i. Personnel Expertise
   • Contractor will evaluate the level of personnel preparedness through examination of evaluators’ participation in training and continuing education, in relation to the level, frequency, and applicability of training and continuing education experiences.
   • Contractor will evaluate the composition of evaluation teams through examination of the appropriateness of the disciplines represented on the team in relation to the presenting concerns and referral information provided for the child.

ii. Use of Informed Clinical Opinion
    • Contractor will evaluate the expertise with which the evaluator utilized informed clinical opinion and professional judgement during the evaluation of the child, and whether their conclusions in the report narrative are fully supported

iii. Quality of Eligibility Statement
    • Contractor will evaluate the degree to which the eligibility statement clearly conveys whether the child is or is not eligible for the EIP and verify that it does not convey eligibility for specific services.
iv. **Appropriate Recommendations**

- Contractor will evaluate the degree to which recommendations in the evaluation report are supported by evaluation findings, and recommendation for services, additional evaluations and other follow-up are made as appropriate to the needs identified during the evaluation.
- Contractor will evaluate the scope of recommendations for other resources and activities for follow-up provided to parents when children are found not eligible for the EIP.
- Contractor will determine that specific goals and/or outcomes are not included in the evaluation report.

Under SEED protocol, it is expected that pre-review, onsite review and post-review activities will be similar to those identified for CRRCs.

The targeted number of SEED Reviews will be 75 per contract year.

### 4.1.1.5 Verification ofCorrectionReviews (VR)

A Verification of Correction Review (VR) is defined as a systematic focused review of a provider or municipality that evaluates particular programmatic and/or administrative practices for which a provider was identified as being noncompliant during their comprehensive review and received a regulatory violation. The VRs must be completed within one year from when the provider received their original finding. Verification that the required correction occurred must be done through review of child records.

i. Verification ofCorrection reviews (VRs) may be conducted to determine:

- Whether a provider or municipality has complied with the terms of a Corrective Action Plan;
- Whether the provider or municipality has remediated previously identified health and safety and unqualified personnel issues;
- Verification of correction of findings that are violations of IDEA requirements;
- Staff knowledge of correct policies and procedures for delivering services as demonstrated through an interview; and,
- Other issues identified by the Department.

ii. The Contractor will be expected to complete all the following activities for a verification review, which may include activities for an on-site review, or a desk review of child records submitted to them, as determined by the Department:

- Identify providers who require verification reviews based on comprehensive review findings and submission of corrective action plans;
- In conjunction with the Department, develop a monthly schedule for verification reviews;
- Conduct required pre-review, onsite, and post-review activities;
- Review child records and/or other required documentation submitted by providers and municipalities to verify correction of noncompliance; and,
- Complete and submit a verification of correction report to the Department.

To complete the VR, the Contractor is expected to follow a protocol developed and approved by the Department, which may be similar to the protocol found in Attachment G of this RFP. However, for certain verification reviews, the Department reserves the right to modify that protocol and tool and/or develop a new protocol, tool and/or format for reporting verification review findings to the Department.

The sample size for child records to be reviewed for a VR may be five for an individual provider and 10 for an agency or municipality, as determined by the Department. The Department reserves the right to determine the sample selection criteria and the final number of child records the Contractor must examine in instances when the Department receives a complaint regarding a specific issue that needs to be verified as corrected. The targeted number of VRs will be 25 per contract year.
4.1.2 Corrective Action Plan Reviews

The Contractor will be responsible for receiving via email or mail and systematically tracking and screening all Corrective Action Plans (CAPs) received from municipalities and providers resulting from the associated types of reviews. The Contractor will review and develop draft responses to all CAPs, as described in the protocol in Attachment H, and will send all draft provider CAP responses to the Department. Finalized CAP responses will be issued by the Department.

When a provider or municipal report requires a CAP, the Contractor will be required to complete the following:

- Receive and track through Contractor’s application all CAPs;
- Grant extensions under circumstances defined by the Department;
- Screen all CAPs to ensure essential components are included;
- Follow-up on CAPs when not received or essential components are missing using standardized correspondence developed in conjunction with the Department;
- Within 10 business days of the screen, send all municipal CAPs which were screened and determined to be complete, with relevant correspondence, to the Department to review; and
- Within 45 days after provider CAPs are screened and determined to be complete, the Contractor will follow the protocol in Attachment H and review all provider CAPs (with enclosures and materials submitted), develop appropriate draft CAP responses (in a format determined by the Department), and send responses to the Department via email or other means agreed upon by the Department and Contractor.

As part of the CAP process, providers and municipalities may be required to submit child records to verify correction and implementation of their approved CAPs. The Contractor will be required to review the child records to verify correction of noncompliance and adherence to the approved CAP.

The Contractor will be required to provide standardized technical assistance to providers to assist with development of CAPs. When the providers’ CAP involves serious health and safety practice issues, unqualified personnel findings or other unusual circumstances that the Department identifies, the Department will work closely with the Contractor to develop appropriate CAP responses relative to the unique situations. It is estimated that no more than 10% of all CAPs will fall into this category.

Data shows that approximately 90% of monitoring reviews result in the submission of a CAP.

4.1.3 Early Intervention Monitoring Data

4.1.3.1 Develop and maintain EI Monitoring Application and store EI Monitoring Data

The Contractor will be responsible for hosting a secure application/database at their business location for collecting and maintaining monitoring data. This includes providing all hardware and equipment needed to support and maintain the monitoring data application.

The data application will need to perform the following functions:

- Allow for the collection of data during monitoring reviews using laptops or other devices with equivalent functionality provided by the Contractor to its employees/contract staff;
- Calculate the number of records examined and findings (as defined by the Department) associated with those records for each comprehensive review for regulatory compliance;
- Electronically capture notes made by monitoring team members on laptop computers while conducting reviews;
- Print provider and municipal computer-generated monitoring reports (see Attachment I, Exhibit A and Exhibit B) that contain:
- A standardized narrative explaining the monitoring process;
- Instructions about how to submit a Corrective Action Plan, if appropriate;
- Standardized phrases, based on system calculations, that explain how many indicators in each topical area met all Early Intervention Program requirements;
- Standardized phrases, based on system calculations and type of findings, that explain which indicators/findings in each topical area did not meet Early Intervention Program requirements and are considered regulatory citations or areas needing improvement, according to Department-defined standards; and
- Standardized phrases that can be customized, describing specific issues and problems identified during the monitoring review, or by the Department, that resulted in a finding.
- Capture and track data so the Contractor can periodically report to the Department the status of various monitoring events, documents and products, on a schedule determined by the Department;
- Assist with monitoring review scheduling for the Contractor;
- Allow Department staff to directly access, view, and print monitoring reports from the Contractor’s system; and,
- Maintain confidentiality of information and security of the data exchanged among the various Contractor sites and the Department, according to Department standards.

The Contractor will be responsible for supplying and hosting all the hardware to collect and manage the monitoring data.

See Attachment J for a chart of reports currently provided and the required information needed in each type of report.

4.1.3.2 Modify the EI Monitoring Data Application

During the previous monitoring contracts, the Department made necessary adjustments to monitoring protocols, tools and criteria based on clarifications or new or revised program regulations and/or requirements. The Department requires that the Contractor have the ability to modify the application as required.

Modifications will include, but not be limited to:

- Improving the capability for Department staff to directly access monitoring data “on demand” by developing the capability to produce ad hoc management reports in a secure environment. Department staff will determine the content and format of these ad hoc reports by selecting chosen data fields. These ad hoc monitoring reports should produce a summary of selected indicator findings as well as track providers with violations of federal regulation that have corrected their findings within one year of identification. It is anticipated most reports will be in Microsoft Excel formats;
- Adding or deleting tool indicators with corresponding report statements, and changing the corresponding calculations, as approved by the Department. The report database must be flexible enough to allow for language changes within the report template by the Contractor. These editing activities must be accomplished within the prescribed timeframes as determined by the Department and at no added cost;
- Using parameters defined by the Department, adjusting the calculation function to distinguish between “met,” “improvement opportunity” and “regulatory finding” and to print out appropriate corresponding text for additional or revised report statements;
- Developing the capability to maintain old data when indicators are no longer used and/or new indicators are added;
- Maintaining the capability to link old data, as appropriate, to related new data for purposes of trend analysis. The ad hoc management report system should allow for integration of report findings across all past years of monitoring;
- Developing the capability to search text for selected phrases and key words in selected individual or groups of monitoring reports;
• Developing the capability for the application to produce customized monitoring reports, in a format defined by the Department, for comprehensive reviews for regulatory compliance, verification reviews and other reviews as indicated within this RFP;
• Ensuring that the text of the application can be copied and pasted into Microsoft applications.

The Contractor will be expected to work with the Department throughout the contract period to make modifications to the Early Intervention Monitoring data application to accommodate changes in the monitoring tools and reports, based on any new regulatory requirements or changes in Public Health Law.

The cost of modifications and maintaining the monitoring application will be reimbursed based on a proposed hourly rate for modifying the monitoring application and an hourly rate for maintaining the monitoring application. The projected number of hours for each of these activities, per year of the contract, is included in the EI Cost Proposal Bid Detail Sheet (Attachment B).

4.1.3.3 Maintenance of the EI Data Application

The Contractor will be expected to work with the Department, throughout the life of the contract, to adjust and improve the data application based on clarifications and new or revised program regulations and requirements. Programming for these adjustments, as well as programming that will allow the application to continue to operate in an effective and timely manner, will be considered “ongoing maintenance.” “Ongoing maintenance” of the electronic monitoring data application is defined as all activities involved in programming or adjusting for ongoing changes/clarifications of EIP requirements and keeping the application in good working order, including any routine adjustments required to correct faults, improve performance or other attributes (e.g., new functions, faster, or more compatible with other systems), or to otherwise adapt the application to meet the Department’s needs. The above stated routine adjustments must be completed within ten business days upon written request (including email) of the Department.

4.1.3.4 Turnover

The Contractor will be expected to provide for an orderly and controlled turnover of the data application to either the Department or a successor Contractor at the end of the contract period, without disruption of report generation, provision of monitoring reviews, or any other contract activity (see Section 4.6 of this RFP). At the end of the contract, the Contractor will turn over complete electronic monitoring data application and associated database, with title, leasing, or license rights to the Department, or at the Department’s option, a successor Contractor. The Contractor shall similarly transfer to the Department or the successor Contractor all nonproprietary system software, data files, application programs and documentation. Additionally, the Contractor must turn over all written policies and procedures, training materials, validation tools, and any resources utilized in conducting monitoring reviews (e.g., checklists or internal tools used by the Contractor’s staff).

The Contractor must include a plan in the proposal which specifies what will be turned over, how the successor Contractor will be trained in protocols and practices, and how delivery of the system specifics will be made to the successor.

4.1.4 Early Intervention Administrative Services & Supports

4.1.4.1 Reporting Serious Problems to the Department

The Contractor must immediately, within two business days, communicate, in writing, to the Department any provider or municipal situations that are identified during monitoring that have the potential for imminent danger for children and/or their families receiving services, or that may indicate inappropriate fiscal practices. These situations include, but are not limited to: poor, inadequate or dangerous health and safety practices, unsafe physical plant, unqualified personnel providing services, failure to screen appropriate staff through the State Central Register of Child Abuse and Maltreatment, duplicate billing,
services billed but not delivered, etc. Any findings of this nature should be communicated by the Contractor to the Department in writing to include significant details of the findings within two business days of the monitoring review. The Contractor must also report findings of this nature immediately to the provider during the exit interview and provide them with guidance so that they may immediately remedy the situation. The Contractor should contact the Department during the review for direction on what technical assistance should be provided to the provider or municipality with the serious finding.

4.1.4.2 Required Meetings

The Contractor will schedule meetings with the Department and the Program Manager at least two days each month in the first year of the contract, and a minimum of one day each month thereafter, to coordinate and evaluate the progress of contract deliverables and resolve outstanding problems as identified by the Department. Contractor staff (direct or contracted) may be asked by the Department to attend these meetings when appropriate. These meetings may occur by phone or in person in either Albany or another location as agreed to by the Department and Contractor.

The Contractor must convene a full day meeting in Albany, of the individuals conducting monitoring activities during the first year of the contract (at least quarterly), for the purpose of meeting with Department staff to review various aspects of monitoring, to train on new monitoring protocols, or other activities. During the remaining term of the contract, the Contractor will convene at least two full day meetings each year in Albany of the staff conducting monitoring activities for the purpose of meeting with Department staff, so that new protocols and procedures or other training can be conducted.

The Contractor is responsible for all costs associated with the meetings described above and the costs for attendees working on behalf of the Contractor.

In addition to the meetings described above, the Project Manager, Monitoring Coordinator, Data Manager, as described below, must be available to participate in weekly conference calls with Department staff to report on and discuss work progress, clarify issues, respond to questions, request guidance, and discuss other pertinent issues related to monitoring activities.

4.2 Staffing

4.2.1 Key Personnel

The key positions of Early Intervention are the Project Manager, Monitoring Coordinator, Monitoring Assistants, and Data Manager. These key positions cannot be subcontracted out, nor may they be employed on a consultant basis. These positions must be filled by employees of the Contractor. Within 30 days of the contract award, the Contractor will be required to submit resumes and other supporting documentation demonstrating that the key staff possess the credentials required by the DOH. Final award is contingent upon DOH’s review and approval of the key staff proposed. All proposed key staff must be available on the contract start date. The Department requires at least 30 days’ notice of any change in key personnel, and an updated list of all personnel on the project, or a statement of no changes on a quarterly basis.

The Contractor is responsible for implementing training protocols to ensure consistency in monitoring staff and for maintaining the staffing levels required to ensure all deliverables are met in an accurate and timely manner throughout the contract period.

An organizational chart shall be provided that delineates titles and staff responsibilities for fulfilling the tasks described in the Scope of Work, their lines of communications, and demonstrates how the Contractor intends to utilize management, key personnel and other staff for this project.
4.2.1.1 Project Manager

The Contractor must designate a “Project Manager” who will be responsible for overall implementation and delivery of contract deliverables for the duration of the contract period. The Project Manager must have a minimum of two years of experience with the New York State (NYS) Early Intervention Program and at least one year of experience in the areas of quality improvement, utilization review, and performance-based monitoring. The Project Manager should also have considerable knowledge of EIP provider qualifications, credential review, and training and technical assistance. This person will ensure that all work conducted under the contract is performed according to Early Intervention Program policies and standards of performance. The Project Manager will be responsible for the overall quality, accuracy, and timeliness of contract deliverables. In addition, the Project Manager will have responsibility for oversight of data application enhancement and maintenance conducted by direct or contracted staff. The Project Manager will also provide oversight of data report generation functions conducted by direct or contracted staff, to ensure the accuracy and quality of data reports produced, and to ensure the reports meet the needs of the State. The Project Manager must be available to meet with Department staff at least two days each month in the first year of the contract, and a minimum of one day each month thereafter, to coordinate and evaluate the progress of contract deliverables and resolve outstanding problems as identified by the Department.

4.2.1.2 Monitoring Coordinator

The Contractor must designate one fulltime employee (FTE) to serve as “Monitoring Coordinator.” The Monitoring Coordinator will coordinate all statewide monitoring team activities and must be available for meetings in person or by teleconference at the discretion of the Department.

The Monitoring Coordinator will be responsible for day-to-day implementation of contract deliverables and resolution of problems relating to monitoring encounter activities. S/he will coordinate scheduling, training, and other monitoring encounter activities that require a statewide approach.

The Monitoring Coordinator will be responsible for supervising the review teams that complete monitoring reviews of municipalities, agency and individual early intervention providers and ensuring that individuals conducting monitoring reviews:

- Use approved monitoring tools and follow approved monitoring protocols;
- Receive up-to-date information regarding revisions to the monitoring protocol and changes to the early intervention law, regulations, or Department policy and procedure;
- Receive initial and ongoing training, including orientation and promotion of consistent implementation of the monitoring protocol, tools, and regulations;
- Are observed while performing onsite activities;
- Receive ongoing technical assistance when they have questions;
- Are formally evaluated regarding the quality and quantity of their work on a regularly scheduled basis, including direct observation;
- Produce complete, and accurate reports and documents;
- Provide accurate technical assistance when needed;
- Appropriately screen, review and recommend approval for corrective action plans; and,
- Conduct themselves in a professional manner.

The Monitoring Coordinator will be the primary contact with the Department regarding day-to-day monitoring activities. S/he will work closely with the Department to successfully address any concerns about team member conduct, technical assistance, monitoring protocols, content of computer-generated monitoring reports and recommendations regarding corrective action plans. The Monitoring Coordinator
must have two years of experience in the area of quality improvement, utilization review, or performance-based monitoring, training, and technical assistance and must have an understanding of special education services under NY Education Law § 4410 as related to an Individualized Education Plan (IEP) and an Individualized Family Service Plan (IFSP).

4.2.1.3 Monitoring Assistants

The Contractor must designate at least two full-time employees (FTE’s) Monitoring Assistants to work under the direction of the Monitoring Coordinator. These individuals will assist the Project Manager, Monitoring Coordinator and Review Staff with all activities involved in the scheduling and implementation of monitoring reviews and subsequent issuance of reports, screening and recommending approvals for CAPs, and CAP-related correspondence, and quality assurance activities.

4.2.1.4 Data Manager

The Contractor must directly employ one “Data Manager” at least a half FTE. This individual will be responsible to oversee the following data-related functions as they pertain to the monitoring application and database and the VPN:

- Data management;
- Application programming; and,
- Data analysis.

The Data Manager must have qualifications that include at least three years of experience in the field of computer programming and systems analysis and expertise including, but not limited to, the design and implementation of data applications, the conduct of feasibility studies, development of program and application specifications, flowcharting, coding, development of test data, program and parallel testing, and post implementation follow-up.

The Contractor may subcontract staff to perform application programming and/or report development and data analysis. The Data Manager will work closely with the Project Manager and Department staff to identify and resolve problems and deficiencies with respect to the application and associated database, and Virtual Private Network (VPN). This individual will direct and coordinate the work of any Contractor staff or subcontractors, who improve, enhance and maintain the monitoring application or database.

Data Management functions include:

- Ensuring the accuracy and timeliness of changes to the monitoring application;
- Ensuring the quality of products produced by the monitoring application;
- Selection of child samples for all providers and municipalities to be reviewed from the Department’s Early Intervention Data System using criteria established by the Department;
- Providing the Department with timely, understandable documentation regarding the monitoring application and database, contract products, and the VPN;
- Collaborating directly with Department Early Intervention Program and/or Information Technology staff to ensure the monitoring application, database and VPN are meeting the needs of the Department; and,
- Working directly with the Project Manager, Monitoring Assistants, and Monitoring Coordinator to ensure the monitoring application and the VPN meet the needs of both the Contractor and the Department with respect to monitoring activities, reporting, and data analysis activities.

Programming functions include:

- Ensuring the VPN is completed in a timely manner and meets the needs of the Department and the Contractor;
• Ensuring requested improvements, modifications, and changes to the existing monitoring application are completed in a timely manner and meet the needs of the Department and the Contractor; and,
• Ensuring the Department has direct access to the monitoring and provider application data.

Data analysis and reporting functions include:
• Ensuring tracking systems for monitoring and application review events and products for the Department and Contractor are developed and implemented;
• Providing routine and ad hoc reports that meet Department and Contractor’s needs;
• Working with the Project Manager, Monitoring Coordinator, Monitoring Assistants, and the Department to ensure data are accurately collected and recorded;
• Ensuring methodologies used to analyze data are appropriate; and, reports generated are accurate and timely.

4.2.2 Teams to Conduct Statewide Early Intervention Monitoring Reviews

The Contractor must provide individuals to comprise teams that will conduct simultaneous monitoring reviews throughout the state as described in this RFP. All monitoring reviews will be conducted using a team of at least two individuals, unless otherwise specified by the Department, who meet the following qualifications:
• Individuals must have had at least one year experience in the administration and/or fiscal management of organizations providing health and human services, preferably to young children with developmental delays and their families (the Contractor may provide such training, after Departmental approval, and should be prepared to conduct that training prior to implementation);
• Individuals must have at least one year of experience in the area of quality improvement (e.g., utilization review, performance-based monitoring, technical assistance);
• One of the team members must be recognized as qualified personnel by the Early Intervention Program, as defined in Public Health Law, Section 2541, preferably with experience in the provision of developmental services/therapies to children ages birth to five years and their families. The Contractor will be responsible for verifying the currency of certification, registration and licensure of each team member at least every six months during the term of employment; and
• One of the team members must be personnel qualified to ensure health and safety, and infrastructure requirements are met when monitoring a provider with a facility site.

Verification of Correction Reviews (VR) may be conducted by one staff person, as determined by the Department, depending upon the extent of the review and expertise required to conduct the VR.

Individuals conducting the monitoring reviews must disclose if they have ever provided EI services as an individual provider, as an agency provider or for a municipality as a provider and if so, where. This is to ensure that there is not a conflict of interest with respect to the relationship with the provider(s) or municipalities being monitored. Under no circumstance can they review any provider or municipality where they are currently working, or were contracted or employed, and they cannot review any municipality where they previously provided services.

4.2.3 Administrative Support

The Contractor must provide other administrative support, that may be in addition to those duties performed by the Monitoring Assistants, that will allow the Project Manager, EI Data Manager, Monitoring
Coordinator, and monitoring teams to complete monitoring project activities timely. This support includes but is not limited to:

- Secretarial services;
- Data entry services;
- Mass mailing capability;
- Access to and use of overnight mail;
- Access to and use of courier services;
- Appropriate equipment, including cellular phones and laptop computers;
- Local supervision and oversight; and,
- Adequate, secure storage.

The Contractor may add, at their own expense and with Department approval, professional support as necessary to complete the project requirements in a timely and accurate manner.

The Contractor must designate the location and hours of administrative services and provide a description of the facility and resources to be dedicated to this contract. If multiple sites will be used, a description of each site must be provided.

4.3 Reporting

4.3.1 Early Intervention Weekly Reports

During each year of the contract, the Contractor will submit weekly reports on the numbers and status of unusual monitoring findings or problems, and newly identified health and safety issues, unqualified personnel or fiscal issues or other issues as identified by the Department. The formats for these weekly statistical reports will be determined by the Department (most statistical reports will be an exchange of data in Excel spreadsheet formats).

4.3.2 Early Intervention Monthly Progress Reports

During the contract period, the Contractor will submit monthly statistical reports summarizing the numbers and types of activities related to monitoring completed during the previous month, including completed monitoring reviews, completed and mailed reports, number of Corrective Action Plans received, and outstanding Corrective Action Plans. The Contractor will also report any changes made to the monitoring data application and any other data or information requested by the Department in these reports.

The Department reserves the right to determine the format and content of monthly statistical reports.

4.3.3 Early Intervention Quarterly Reports

During each contract period, the Contractor will submit four quarterly reports, each describing contract activities for the previous three-month period that includes quarterly statistical reports summarizing the numbers and types of activities related to monitoring completed during the previous quarter, changes made to the monitoring data application, progress made in achievement of deliverables, completed activities, status of incomplete activities, issues or problems that were encountered and resolved or are outstanding, and any other data or information requested by the Department. These reports must also include data related to findings determined through monitoring efforts that are violations of Federal regulations and requirements. This data will include for each provider or municipality monitored, each of the findings made related to federal noncompliance and the verification of correction data for each of
these findings per individual child and overall. The Department reserves the right to determine the format and content of quarterly reports.

4.3.4 Early Intervention Annual Reports

The Contractor will submit an annual report describing monitoring activities for the previous year per the Quarterly Report requirements stated above, and which also summarizes all other monitoring-related activities completed during the previous 12 months.

4.3.5 Early Intervention Ad Hoc Reports

The Contractor will also report on any other data or information requested by the Department. All reports must be submitted in a format as determined by the Department.

Attachment J shows a chart of reports currently provided and the required information needed in each type of report.

4.4 Information Technology

The application and all systems and components supporting it, including but not limited to any forms and databases that include Personal Health, Personal Identification or other New York State information, must comply with all NYS security policies and standards listed at http://its.ny.gov/tables/technologypolicyindex.htm.

4.5 Security

The selected Contractor shall comply with all privacy and security policies and procedures of the Department (https://its.ny.gov/eiso/policies/security) and applicable state and federal law and administrative guidance with respect to the performance of this contract. The Contractor is required, if applicable, to execute a number of security and privacy agreements with the Department including a Business Associate Agreement (Appendix H) and a Data Use Agreement (DUA) at contract signing.

The Contractor is required to maintain and provide to the Department upon request their data confidentiality plans and procedures for meeting security requirements as they relate to the deliverables and services within this RFP, including all plans as they relate to subcontractor work where applicable. These plans and procedures must be provided to the Department within 30 days of the contract start date.

The Contractor will develop and maintain adequate fully trained staff to respond to all stakeholder inquiries while protecting confidentiality and maintaining the security and integrity of all systems. Staff must be trained to understand and observe requirements related to confidentiality and operating guidelines for functions included in this RFP.
The Contractor will comply fully with all current and future updates of the security procedures of the DOH, as well as with all applicable State and federal requirements, in performance of this contract.

4.6 Transition

The transition represents a period when the current contract activities performed by the Contractor must be turned over to the Department, another Department agent or successor Contractor during or at the end of the contract.

The Contractor shall ensure that any transition to the Department, Departmental agency or successor Contractor be done in a way that provides the Department with uninterrupted monitoring services. This includes a complete and total transfer of all data, files, reports, and records generated from the inception of the contract through the end of the contract to the Department or another Department agent should that be required during or upon expiration of its contract.

The Contractor shall provide technical and business process support as necessary and required by the Department to transition and assume contract requirements to the Department or another Department agent should that be required during or at the end of the contract.

The Contractor shall manage and maintain the number of staff needed to meet all requirements listed in the RFP during the transition. All reporting and record requirements, security standards, and performance standards are still in effect during the transition period.

The Contractor is required to develop a work plan and timeline to securely and smoothly transfer any data and records generated from the inception of the Contract through the end of the contract to the Department or another Department agent should that be required during or upon expiration of its contract. The plan and documentation must be submitted to the Department no later than four (4) months before the last day of its contract with the Department of Health or upon request of the Department.

4.7 Performance Standards

4.7.1 Early Intervention Timelines for Deliverables

4.7.1.1 Early Intervention Monitoring Products

All required monitoring activities completed must have final monitoring reports available for release within 45 days of the completion of the onsite review unless otherwise determined by the Department. In no event should a report be released more than 90 days from the date of the review, in the case of unusual determinations that would require input from the Department or input from other State agencies:

- Corrective action plans (CAPs) must be screened, determined to be complete or requiring additional information, and a letter sent to the provider/municipality explaining problems, within seven days of receipt;
- All monitoring-related activities must be entered into a tracking database within five business days;
- Verification of correction correspondence must be reviewed by the Contractor within 30 days of receipt of submitted documents, and the corresponding reports submitted to the Department of the outcome for each VR within 45 business days. The Contractor must verify correction of identified findings through review of subsequent child records at the time of the monitoring and collect additional child records post review to ensure correction within one year of the monitoring event;
- Related monitoring correspondence and materials must be provided to the Department.
4.7.1.2 Early Intervention Progress Reports

- The weekly reports specified earlier in this RFP must be submitted no later than Wednesday of the following week;
- The monthly statistical reports specified earlier in this RFP must be submitted within five calendar days of the end of each month during each year of the contract;
- The quarterly progress reports specified earlier in this RFP must be submitted within 30 calendar days of the end of the last month of each quarter during each year of the contract; and,
- The annual report specified earlier in this RFP must be submitted within 30 calendar days of the end of each contract year.

4.7.1.3 Monitoring Reviews - All types (comprehensive; municipal; investigative, screening, evaluation and eligibility review; verification reviews)

- Reports released to the provider must be within 45 days of the onsite monitoring review, free from errors in calculation, containing no typographical or grammatical errors, and be easily understood, with respect to findings and additional comments, by the reader. Payment may be withheld for reports not meeting Department standards, and such reports may have to be corrected and/or re-released to the Department.

- Four (4) quarterly reports, summarizing the CAP activities in the preceding quarter and an annual report summarizing the preceding contract year, respectively, including a list of providers associated with the draft CAP reviews completed, is due by the earlier of either 30 calendar days after the end of the quarter or the date which an invoice is submitted for payment. CAP responses must contain no typographical or grammatical errors and be easily understood by the reader. Payment for the CAPs completed may be withheld for CAP responses not meeting Department standards, and such CAP responses may have to be corrected and/or re-released before payment is issued, as determined by the Department.

4.7.2 What the New York State Early Intervention Program will provide

The Department will automatically provide all updated guidance documents and/or emails and letters to the field, and links to current policy guidance memoranda to the Contractor. The Department will also provide the current protocols and tools developed for monitoring for regulatory compliance and any other protocols developed for investigative reviews, verification of correction reviews and quality of services reviews. The Department will provide the Contractor with access to the current EI Data System, which is the data system utilized by all EI providers and municipalities that captures EI child case management, and provider data for all EI eligible children. Contract staff will need to access this Data System in order to review provider information, child sample information and other data captured to conduct pre-review activities for monitoring reviews. In order for the Contractor staff to access to the EI Data System, the Contractor staff must sign confidentiality agreements with the Department and have a Health Commerce System account.
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 (2) violations within four (4) 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 (4) 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 EI-PMQIS@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 EI-PMQIS@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 Business Services Center (BSC) at: AccountsPayable@ogs.ny.gov with a subject field as follows:

Subject: Unit ID 3450257 <Contract #TBD>

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

NYS Department of Health
Unit ID 3450257
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 terms will be:

In exchange for the provision of all monitoring reviews, clinical record reviews, modifications and maintenance of the electronic monitoring data application, in accordance with the terms and conditions specified in this Request for Proposals and the Department’s protocol, the Contractor will be entitled to receive payment for each deliverable produced to the satisfaction of the Department. Such payment will be based upon the amount enumerated in the Bidder’s Proposal, which will be incorporated into the resultant contract as Appendix C.

The Department will pay the Contractor an administrative services fee in four equal quarterly payments annually based upon the administrative services fee enumerated in the Contractor’s Proposal. The Administrative Services price may not exceed ten percent of the grand total five year bid price.

In order to be eligible for payment, specific information outlined below must accompany each invoice submitted by the Contractor. For ease of submission reporting information may be combined into one
quarterly or annual report (as applicable) with separate categories for each of the following areas that will need to match the invoice:

**Monitoring Reviews** (for Regulatory Compliance reviews; Quality of Screening, Evaluation Reports and Eligibility Determination reviews; Investigative reviews; and Verification of Correction reviews).
A review will be considered eligible for 100% of payment when the pre-review and onsite review activities are completed, and the report is issued. This also applies to verification review activities whether they are completed at the providers site or by desk review of documentation submitted.

A Quarterly Report summarizing the monitoring review activities in the preceding quarter and contract year, respectively is due by the earlier of either 30 calendar days after the end of the quarter or the date which an invoice is submitted for payment and must include:

- a list of providers and provider types associated with the delivery of each of the monitoring reviews.
- The review type that was completed for each provider.
- The initiation date of each review.
- The date the monitoring report was sent to the provider.

The annual report will be submitted with the 4th quarter voucher and report.

**Corrective Action Plans (CAP)**
A CAP Review will be considered complete and eligible for payment when:

- The draft response for an Approved CAP is received and approved by the Department.
- The draft response for an Accepted with Technical Assistance CAP has been submitted and approved by the Department.
- The Department approved draft response for a Needs Correction CAP has been issued, and the Contractor, or Department if applicable, has received the corrected CAP from the provider. If at that time the CAP continues to need correction it will be referred to the Department. In cases where the provider does not respond within the prescribed timeline, the contractor will make one attempt for follow up. If they are unsuccessful in receiving an acceptable response to the Needs Correction CAP, the Contractor will refer the case to the Department for review and for possible further administrative action.

Payment for the CAPs completed may be withheld for CAP responses not meeting Department standards, and such CAP responses may have to be corrected and/or re-released before payment is issued, as determined by the Department.

The Contractor must submit a quarterly report with each invoice, summarizing the CAP activities in the preceding quarter, and an annual report at the end of the contract year. These four quarterly reports and the annual report must include:

- A list of providers associated with the draft CAP reviews completed.
- CAP due dates (45 days from receipt of the monitoring report)
- The completion date of each CAP review.
- Documentation of all contact attempts made to obtain CAPs not received by the due date.

**Modify Monitoring Application**: A quarterly or annual report (as appropriate), delineating the status of each task related to modifications of the monitoring application that have been completed and the tasks (modifications) in progress during the preceding quarter and accomplished throughout the contract year, respectively. The payment for this component of the Contract will be paid quarterly, based on hours of modification completed during the quarter and according to the fee in the bidder's proposal. If the Contractor fails, in the reasonable judgment of the State, to make the required modifications to the Early
Intervention monitoring application, full or partial payment for this category may be withheld by the State until such time as the State reasonably determines that the application meets the needs of the State.

Maintain Monitoring Application and Associated Database: The payment for this component of the contract will be paid quarterly based on hours of maintenance completed during the quarter and according to the fee in the successful bidder’s proposal. A Quarterly or Annual Report will delineate the activities undertaken related to the ongoing maintenance of the monitoring application during the preceding quarter or contract year, as appropriate. "Ongoing maintenance" of the monitoring application and associated database is defined as all activities involved in keeping the application and database in good working order. The Quarterly or Annual Reports will reflect the status of these activities and the progress made during the preceding quarter. These Reports are due by the earlier of either 30 calendar days after the end of the quarter or the date which an invoice is submitted for payment.

In addition to the above information, the Annual Report shall include the following documentation regarding the monitoring application:

- Application user and operation manuals;
- Identification of the operating system(s), version and release being used to operate the monitoring application and store the associated database;
- Lists of personnel employed/contracted to perform development/maintenance work on the monitoring application and associated database;
- One copy of the following documentation:
  
  i. All software, including computer programs written and all subroutines called, executed, or otherwise used by the Early Intervention monitoring application and associated database;
  
  ii. Source code program listings, on paper, for all production programs;
  
  iii. The job control language to operate the elements set forth in the three preceding clauses;
  
  iv. File and record descriptions of all data files, including data elements, used by the Contractor in collecting data during monitoring encounters and producing reports;
  
  v. Description of all manual procedures associated with the elements set forth in all preceding clauses of this Section; and
  
  vi. Description of facilities and equipment related to the monitoring application and associated database.

The Contractor shall provide the documentation required by this Section to the State as specified, unless the State, in its discretion, waives a submission. In the event documentation is unavailable or incomplete, the Contractor shall report on the status of the unavailable or incomplete documentation, including a projected date for completion, and reason(s). All information and documentation must be in a form acceptable to and usable by the State. Delivery of information and documentation by the Contractor constitutes a material obligation of performance under this Agreement.

Payment Penalties.

1. If at the end of any quarter during the contract period, the Contractor fails, in the reasonable judgment of the State, to properly maintain the Early Intervention monitoring application and associated database, full or partial payment for that category may be withheld by the State until such time as the State reasonably determines that the system meets the needs of the State.

2. If at the end of any contract operating year, the number of monitoring reviews, CAP reviews, and/or clinical record reviews acceptable to the State is less than 80% of the target number agreed to under this contract, the Contractor’s claim for the administrative services fee may be withheld by the State in an amount equal to the proportional percent of the target deliverables not completed up to 25%,
whichever is less. If the Contractor desires to complete more monitoring activities or application reviews than the target number agreed to under this contract, at any time during the contract, they may do so only with the approval of the Department. Completing more monitoring activities or application reviews than the target number agreed to under this contract will not increase the administrative fee.

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 group 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 EI-PMOIS@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, demolition, 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 offeror 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](http://www.tax.ny.gov/pdf/publications/sales/pub223.pdf).

Forms are available through these links:

5.8 Contract Insurance Requirements

Prior to the start of work under this Contract, the CONTRACTOR shall procure, at its sole cost and expense, and shall maintain in force at all times during the term of this Contract, insurance of the types and in the amounts set forth in Attachment 8, the New York State Department of Health Contract, Section IV. Contract Insurance Requirements as well as below.

5.8.1. Data Breach and Privacy/Cyber Liability

The Contractor and any subcontractor retained by the Contractor shall carry and maintain applicable coverage during and for a period of one (1) years after completion of this contract, Data Breach and Privacy/Cyber Liability Insurance, including coverage for failure to protect confidential information and failure of the security of the Contractor’s computer systems or the Department’s Authorized Users’ systems due to the actions of the Contractor with results in the unauthorized access to the Department’s data.
5.9 Subcontracting

Bidders 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 lobbyists 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.

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 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  

Pursuant to Section 163(9)(c) of the State Finance Law, any unsuccessful Bidder may request a debriefing regarding the reasons that the proposal or bid submitted by the Bidder was not selected for award. Requests for a debriefing must be made within fifteen (15) calendar days of release of the written or electronic notice by the Department that the Bid submitted by the Bidder was not selected for award. Requests should be submitted in writing to a designated contact identified in the award/non-award letter.

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 NYS Certified Service-Disabled Veteran-Owned Businesses (For use when no SDVOB Goals Exist)

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 RFP 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.

5.23 Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination

The New York State Human Rights Law, Article 15 of the Executive Law, prohibits discrimination and harassment based on age, race, creed, color, national origin, sex, pregnancy or pregnancy-related conditions, sexual orientation, gender identity, disability, marital status, familial status, domestic violence victim status, prior arrest or conviction record, military status or predisposing genetic characteristics. In accordance with Executive Order No. 177, the Offeror certifies that they do not have institutional policies or practices that fail to address those protected status under the Human Rights Law.

6.0 PROPOSAL CONTENT

The following includes the 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 requested to submit complete Administrative and Technical Proposals and are required to submit a complete Cost Proposal. A proposal that is incomplete in any material respect may 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 A, 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.

6.1 Administrative Proposal

The Administrative Proposal should contain all items 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. Bidder's Disclosure of Prior Non-Responsibility Determinations

Submit a completed and signed Attachment 1, “Prior Non-Responsibility Determination.”

B. 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)

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 http://www.osc.state.ny.us/vendrep/index.htm or go directly to the VendRep System online at https://onlineservices.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. Vendors 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.

E. 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.”

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. Bidder’s Certified Statements

Submit Attachment 7, “Bidder’s Certified Statements”, which includes information regarding the Bidder. Attachment A 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.

H. References

Provide references using Attachment 9, (References). At the discretion of the Evaluation Committee, references may be checked at any point during the process.

I. 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 of this procurement is practical, feasible, and appropriate. Accordingly, respondents to this procurement should include as
part of their response to this procurement, [Attachment 10 “Diversity Practices Questionnaire”]. Responses will be formally evaluated and scored.

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 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 information requested to be provided 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 may 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 cannot 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 evidence of meeting the criterion. This documentation may be in any format needed to demonstrate how they meet the minimum qualifications to propose.

C.1 Minimum Qualifications

- Three years of experience in quality improvement and utilization review
C.2 Preferred Qualifications

Bidders who demonstrate the following experience are preferred:

- Have one year of experience with the coordination and support of a statewide quality improvement program, and/or;

- Have one year of experience with review of credentials of professional individuals, agencies, and organizations, and/or;

- Have one year of experience in developing, modifying, and managing an electronic data system/application to capture, analyze and report on monitoring data.

D. Technical Proposal Narrative

The technical proposal must provide evidence to the satisfaction of the Department of the Bidder’s ability to meet, and expressly respond to, each element listed below. Bidder’s should respond to each element listed below and label their responses with the corresponding section letter/number.

The bidder should describe in detail their experience, capacity, and proposed approach to fulfilling all responsibilities described in Section 4.0 (Scope of Work) of this RFP. If the use of subcontractors is proposed for any of the deliverables, the bidder’s proposal should explain how they plan to manage and control the work of subcontractors.

Elements of the technical proposal are as follows:

D1. Experience – Performing Tasks/ Deliverables

D1.1.1 The Bidder should describe in detail, how they will be ready to conduct Comprehensive Early Intervention Monitoring Reviews for Regulatory Compliance (CRRC) within three (3) months of the first year of the contract.

D1.1.1.i The Bidder should detail their approach to completing the following pre-review activities:

- Reviewing previous provider and municipality monitoring reports, and Department approved corrective action plans (CAP) that were a result of a systems complaint;

- Developing a monthly monitoring schedule from the Department approved list of providers and list of municipalities that is accessible to the Contractor through the Department’s current Early Intervention data system;

- Inviting municipalities to attend the onsite monitoring review for providers who render El services in their geographic location;

- Sending pre-review materials to the provider and municipality scheduled for the monitoring review, which include an Onsite Visit Agenda, and a list of items to be available during the monitoring review process;

- Determining, in collaboration with the Department, which and how many child records will be reviewed;

- Conducting parent interviews or conducting written parent surveys;

- Conducting municipality interviews of Appendix providers based on the counties/municipalities listed in their service catchment.

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• Reviewing of pertinent individual provider, agency provider and municipal staff and contracted personnel information available to the Contractor through the Department’s current EI data system.

ii. The Bidder should detail their plans to complete the following onsite review activities:

• Use protocols and tools developed by the Department and the Contractor to evaluate compliance with EI regulations, Public Health Law, and with signed and executed Provider Agreements between a provider and the Department;

• Employ a variety of methods to evaluate regulatory compliance, which may include a comparison of data in the Department’s current EI data system with data in agency source documents, review of child records, review of written policies and procedures, interviews with staff and program managers, observation of facilities where children receive EI services, and review of other documents utilized for the EI program;

• Review for compliance of DOH approved CAPs that were in result of a system complaint;

• Review provider credentials and other documents maintained in personnel records. For example: State Central Register clearance documents and other relevant background check information;

• Review of session notes, including electronic session notes to ensure the following criteria is being met:
  - Session notes must not be duplicative.
  - Session notes must contain all elements required by Medicaid.
  - Recorded information must be clear, legible, and support payment to the provider.
  - Notes must be related to the services outlined in the Individualized Family Service Plan (IFSP).

• Records review:
  - Review a sample of child’s records from the date of entry into the EI program to their exit.
  - Review evaluation reports
  - Review IFSPs
  - Review written orders

• Travel to various provider sites where records and staff are accessible. Individual provider CRRCs may occur at the provider’s place of business (which may be his/her home or office) or an appropriate community location, as agreed to by the Department and the Contractor.

iii. The Bidder should detail their approach to completing the following post-review activities:

• Produce a system-generated monitoring report that allows for the insertion of customized information (See Attachment J for a chart of reports currently provided and the required information needed in each type of report).

iv. The Bidder should also address how they will be able to complete priority CRRCs as requested by the Department.

D1.1.1.2 The Bidder should detail how they plan to develop and implement review instruments for the Municipality as Administrator Reviews and how these instruments will enable the bidder to evaluate the work plan (Attachment E - EI Administrative work plan) activities for the following areas:

• Public Awareness and Child Find
• Family Centered Services
• Child and Family Outcomes
• Service Delivery and Natural Environments
• Delivery of Transportation and Respite Services
• Transition
• Administration

D1.1.1.3 The Bidder should describe how they will use protocols and/or tools developed in conjunction with the Department to conduct Investigative Monitoring Review (IMR), and how they plan to use staff that are experienced in the specific area that will be investigated, as determined by the Department.

D1.1.1.4.a The Bidder should describe how they will work with the Department to develop and implement review instruments to assess the quality of provider screenings, evaluation reports and eligibility practices and how these instruments will evaluate the above in the following areas as outlined in this section of the RFP:

i. Personnel Expertise
ii. Use of Informed Clinical Opinion
iii. Quality of Eligibility Statement
iv. Appropriate Recommendations

D1.1.1.4.b. The Bidder should also include details on how it will conduct any pre-review, onsite review and post-review activities similar to those identified for CRRCs.

D1.1.1.5.a. The Bidder should describe their approach to completing all the following activities for a verification review (VR), which may include activities for an on-site review, or a desk review of child records submitted to them, as determined by the Department:

• Identify providers who require verification reviews based on comprehensive review findings and submission of corrective action plans;
• In conjunction with the Department, develop a monthly schedule for verification reviews;
• Conduct required pre-review, onsite, and post-review activities;
• Review child records and/or other required documentation submitted by providers and municipalities to verify correction of noncompliance; and,
• Complete and submit a verification of correction report to the Department.

D1.1.1.5.b. The Bidder should describe their plans to follow the protocols developed and approved by the Department, and how they will work with the Department to incorporate any modifications to the protocols, tools and/or formats for reporting VR findings to the Department, that may be needed for certain VR reviews.

D1.2 a. The Bidder should detail their plan for receiving via email or mail and systematically tracking and screening all Corrective Action Plans (CAPs) received from municipalities and providers resulting from the associated types of reviews.

D1.2.b The Bidder should describe their approach to reviewing and developing draft responses to all CAPs, as described in the protocol in Attachment H, and sending all draft provider CAP responses to the Department so that the finalized CAP responses can be issued by the Department.

D1.2.c The Bidder should demonstrate how they will complete the following when a provider or municipal report requires a CAP:

• Receive and track through Contractor’s application all CAPs;
• Grant extensions under circumstances defined by the Department;
• Screen all CAPs to ensure essential components are included;
• Follow-up on CAPs when not received or essential components are missing using standardized
correspondence developed in conjunction with the Department;
• Within 10 business days of the screen, send all municipal CAPs which were screened and determined to be complete, with relevant correspondence, to the Department to review; and
• Within 45 days after provider CAPs are screened and determined to be complete, the Contractor will follow the protocol in Attachment H and review all provider CAPs (with enclosures and materials submitted), develop appropriate draft CAP responses (in a format determined by the Department), and send responses to the Department via email or other means agreed upon by the Department and Contractor.

D1.2.d. The Bidder should detail their plan to review the child records to verify correction of noncompliance and adherence to the approved CAP.

D1.2.e. The Bidder should describe their approach to providing standardized technical assistance to providers to assist with development of CAPs, and to working closely with the Department to develop appropriate CAP responses relative to unique situations, such as when the providers’ CAP involves serious health and safety practice issues, unqualified personnel findings or other unusual circumstances that the Department identifies.

D1.3.a. The Bidder should detail their plan for hosting a secure application/database at their business location for collecting and maintaining monitoring data, as well as providing all hardware and equipment needed to support and maintain the monitoring data application.

The Bidder should describe how the data application will be able to perform the following functions:

• Allow for the collection of data during monitoring reviews using laptops or other devices with equivalent functionality provided by the Contractor to its employees/contract staff;
• Calculate the number of records examined and findings (as defined by the Department) associated with those records for each comprehensive review for regulatory compliance;
• Electronically capture notes made by monitoring team members on laptop computers while conducting reviews;
• Print provider and municipal computer-generated monitoring reports (see Attachment I, Exhibit A and Exhibit B) that contain:
  - A standardized narrative explaining the monitoring process;
  - Instructions about how to submit a Corrective Action Plan, if appropriate;
  - Standardized phrases, based on system calculations, that explain how many indicators in each topical area met all Early Intervention Program requirements;
  - Standardized phrases, based on system calculations and type of findings, that explain which indicators/findings in each topical area did not meet Early Intervention Program requirements and are considered regulatory citations or areas needing improvement, according to Department-defined standards; and
  - Standardized phrases that can be customized, describing specific issues and problems identified during the monitoring review, or by the Department, that resulted in a finding.
• Capture and track data so the Contractor can periodically report to the Department the status of various monitoring events, documents and products, on a schedule determined by the Department;
• Allow Department staff to directly access, view, and print monitoring reports from the Contractor’s system; and,
• Maintain confidentiality of information and security of the data exchanged among the various Contractor sites and the Department, according to Department standards.

D1.3.2.a. The Bidder should demonstrate how the application will have the ability to be modified as required, including but not be limited to:

• Improving the capability for Department staff to directly access monitoring data “on demand” by developing the capability to produce ad hoc management reports in a secure environment.
Department staff will determine the content and format of these ad hoc reports by selecting chosen data fields to produce a summary of selected indicator findings and to track providers with violations of federal regulation that have corrected their findings within one year of identification. It is anticipated most reports will be in Microsoft Excel formats;

- Adding or deleting tool indicators with corresponding report statements, and changing the corresponding calculations, as approved by the Department. The report database must be flexible enough to allow for language changes within the report template by the Contractor. These editing activities must be accomplished within the prescribed timeframes as determined by the Department and at no added cost;
- Using parameters defined by the Department, adjusting the calculation function to distinguish between “met,” “improvement opportunity” and “regulatory finding” and to print out appropriate corresponding text for additional or revised report statements;
- Developing the capability to maintain old data when indicators are no longer used and/or new indicators are added;
- Maintaining the capability to link old data, as appropriate, to related new data for purposes of trend analysis. The ad hoc management report system should allow for integration of report findings across all past years of monitoring;
- Developing the capability to search text for selected phrases and key words in selected individual or groups of monitoring reports;
- Developing the capability for the application to produce customized monitoring reports, in a format defined by the Department, for comprehensive reviews for regulatory compliance, verification reviews and other reviews as indicated within this RFP;
- Ensuring that the text of the application can be copied and pasted into Microsoft applications.

D1.3.2.b. The Bidder should describe their approach to working with the Department throughout the contract period to make modifications to the Early Intervention Monitoring data application to accommodate changes in the monitoring tools and reports, based on any new regulatory requirements or changes in Public Health Law.

D1.3.3.a. The Bidder should describe in detail their ability to work with the Department, throughout the life of the contract, to adjust and improve the data application based on clarifications and new or revised program regulations and requirements.

D1.3.3.b. The Bidder should describe how they will provide “Ongoing maintenance” of the electronic monitoring data application as defined in Section 4.1.3.c of this RFP, and how they can ensure that the ongoing maintenance will be completed within ten business days upon written request (including email) of the Department.

D1.3.4. The Bidder should describe in detail how they plan to provide for an orderly and controlled turnover of the data application to either the Department or a successor contractor at the end of the contract period, without disruption of report generation, provision of monitoring reviews, or any other contract activity (see Section 4.6 of this RFP). This includes the complete electronic monitoring data application and associated database, with title, leasing, or license rights, all nonproprietary system software, data files, application programs and documentation, and all written policies and procedures, training materials, validation tools, and any resources utilized in conducting monitoring reviews (e.g., checklists or internal tools used by the Contractor’s staff).

The Bidder should include in the plan specifics, as to what will be turned over, how the successor contractor will be trained in protocols and practices, and how delivery of the system specifics will be made to the successor.

D1.4.1.a. The Bidder should detail their approach to communicating, in writing, including significant details of the findings within two business days of the monitoring review to the Department, any provider or municipal situations that are identified during monitoring that have the potential for imminent danger for children and/or their families receiving services, or that may indicate inappropriate fiscal practices. These situations include, but are not limited to poor, inadequate or dangerous health and safety practices,
unsafe physical plant, unqualified personnel providing services, failure to screen appropriate staff through the State Central Register of Child Abuse and Maltreatment, duplicate billing, services billed but not delivered, etc.

D1.4.1.b. The Bidder should also include their plan to report findings of this nature verbally, immediately to the provider during the exit interview, how they plan to provide them with guidance so that they may immediately remedy the situation, and how they plan to contact the Department during the review for direction on what technical assistance should be provided to the provider or municipality with the serious finding.

D1.4.2.a. The Bidder should demonstrate how they will schedule meetings with the Department and the Program Manager at least two days each month in the first year of the contract, and a minimum of one day each month thereafter, to coordinate and evaluate the progress of contract deliverables and resolve outstanding problems as identified by the Department, including how they will ensure any Contractor staff (direct or contracted) asked by the Department to attend these meetings will be available by phone or in person in either Albany or another location as agreed to by the Department and Contractor.

D1.4.2.b. The Bidder should describe their plan to convene a full day meeting in Albany, of the individuals conducting monitoring activities during the first year of the contract (at least quarterly), for the purpose of meeting with Department staff to review various aspects of monitoring, to train on new monitoring protocols, or other activities, and during the remaining term of the contract, to convene at least two full day meetings each year in Albany of the staff conducting monitoring activities for the purpose of meeting with Department staff, so that new protocols and procedures or other training can be conducted.

D1.4.2.c. The Bidder should describe their approach to ensuring the Project Manager, Monitoring Coordinator, Data Manager, as detailed in Section 4.2 of this RFP, will be available to participate in weekly conference calls with Department staff to report on and work progress, clarify issues, respond to questions, request guidance, and discuss other pertinent issues related to monitoring activities.
D2. Staffing

The bidder should provide a staffing plan for completion of services that includes detailing the following for each:

D2.1

a. Bidder’s process for designating key personnel that have all required qualifications as described in Section 4.2.1 of this RFP;
b. Bidder’s process for ensuring all Contractor and subcontractor staff are appropriately trained and how the training protocols provide for consistency among monitoring staff and the analysis of findings;
c. How the Bidder intends to maintain the staffing levels and personnel planned;
d. An organizational chart that delineates the titles of the staff responsible for fulfilling the tasks/deliverable detail in Section 4.0 (Scope of Work), their lines of communications, and demonstrates how the organization intends to utilize management, key personnel and other staff for this project.

D2.2.a. The Bidder should detail how they plan to provide individuals to comprise teams of at least two individuals, unless otherwise specified by the Department, that will conduct simultaneous monitoring reviews throughout the state as described in this RFP, who meet the following qualifications:

- Individuals must have had at least one year experience in the administration and/or fiscal management of organizations providing health and human services, preferably to young children with developmental delays and their families (the Contractor may provide such training, after Departmental approval, and should be prepared to conduct that training prior to implementation);
- Individuals must have at least one year of experience in the area of quality improvement (e.g., utilization review, performance-based monitoring, technical assistance);
- One of the team members must be recognized as qualified personnel by the Early Intervention Program, as defined in Public Health Law, Section 2541, preferably with experience in the provision of developmental services/therapies to children ages birth to five years and their families. The Contractor will be responsible for verifying the currency of certification, registration and licensure of each team member at least every six months during the term of employment; and
- One of the team members must be personnel qualified to ensure health and safety, and infrastructure requirements are met when monitoring a provider with a facility site.

D2.2.b. The Bidder must describe how they plan to ensure that the individuals conducting the monitoring reviews disclose if they have ever provided EI services as an individual provider, as an agency provider or for a municipality as a provider and if so, in order to make certain there is not a conflict of interest with respect to the relationship with the provider(s) or municipalities being monitored.

D2.3.a. The Bidder should demonstrate how they plan to provide other administrative support, that may be in addition to those duties performed by the Monitoring Assistants, that will allow the Project Manager, EI Data Manager, Monitoring Coordinator, and monitoring teams to complete monitoring project activities timely. This support includes but is not limited to:

- Secretarial services;
- Data entry services;
- Mass mailing capability;
- Access to and use of overnight mail;
- Access to and use of courier services;
• Appropriate equipment, including cellular phones and laptop computers;
• Local supervision and oversight; and,
• Adequate, secure storage.

D2.3.b The Bidder should describe their plan to designate the location and hours of administrative services and provide a description of the facility(s) and resources to be dedicated to this contract.

D3.1. The Bidder should describe their proposed approach for submitting weekly reports, in a format determined by the Department, on the numbers and status of unusual monitoring findings or problems, and newly identified health and safety issues, unqualified personnel or fiscal issues or other issues as identified by the Department.

D3.2 The Bidder should describe their proposed approach to submitting monthly statistical reports, in a format determined by the Department, summarizing the numbers and types of activities related to monitoring completed during the previous month, including completed monitoring reviews, completed and mailed reports, number of Corrective Action Plans received, and outstanding Corrective Action Plans, as well as any changes made to the monitoring data application and any other data or information requested by the Department in these reports.

D3.3 The Bidder should describe their proposed approach to submitting four quarterly reports, in a format determined by the Department, each describing contract activities for the previous three-month period that includes quarterly statistical reports summarizing the numbers and types of activities related to monitoring completed during the previous quarter, changes made to the monitoring data application, progress made in achievement of deliverables, completed activities, status of incomplete activities, issues or problems that were encountered and resolved or are outstanding, and any other data or information requested by the Department. The Bidder should also include how they plan to include data related to findings determined through monitoring efforts that are violations of Federal regulations and requirements, which includes for each provider or municipality monitored, each of the findings made related to federal noncompliance and the verification of correction data for each of these findings per individual child and overall.

D3.4 The Bidder should describe their proposed approach to submitting an annual report describing monitoring activities for the previous year per the Quarterly Report requirements stated above, and which also summarizes all other monitoring-related activities completed during the previous 12 months.

D3.5 The Bidder should describe their proposed approach to providing ad hoc reports, in a format determined by the Department, on any other data or information requested by the Department.

D4. The Bidder should describe their proposed approach for Information Technology (see Scope of Work Section 4.4)

D5. The Bidder should describe their proposed approach for Security (see Scope of Work Section 4.5)

D6.a. The Bidder should describe their proposed approach to ensuring that any transition to the Department, Departmental agency or successor contractor will be done in a way that provides the Department with uninterrupted monitoring services including a complete and total transfer of all data, files, reports, and records generated from the inception of the contract through the end of the contract to the Department or another Department agent should that be required during or upon expiration of its contract.

D6.b. The Bidder should describe their plan to provide technical and business process support as necessary and required by the Department to transition and assume contract requirements to the Department or another Department agent should that be required during or at the end of the contract.

D6.c The Bidder should demonstrate how they plan to manage and maintain the number of staff needed to meet all requirements listed in the RFP during the transition, including all reporting and record
requirements, security standards, and performance standards that are still in effect during the transition period.

D6.d. The Bidder should detail their approach to developing a work plan and timeline to securely and smoothly transfer any data and records generated from the inception of the contract through the end of the contract to the Department or another Department agent should that be required during or upon expiration of its contract, no later than four (4) months before the last day of its contract with the Department of Health or upon request of the Department.

D7.1.1 The Bidder should demonstrate their ability to meet the timelines described in section 4.7.1.1 of this RFP for Early Intervention Monitoring Products.

D7.1.2 The Bidder should demonstrate their ability to meet the timelines described in section 4.7.1.2 of this RFP for Early Intervention Progress Reports.

D7.1.3 The Bidder should demonstrate their ability to meet the timelines described in section 4.7.1.3 of this RFP for Monitoring Reviews.

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 is to cover the cost of furnishing all of the said services, including but not limited to travel, materials, equipment, overhead, profit and labor to the satisfaction of the Department of Health and the performance of all work set forth in said specifications.

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 requested format and volume for submission of each part. Proposals should be submitted in all formats as prescribed below.

<table>
<thead>
<tr>
<th></th>
<th>Electronic Submission</th>
<th>Paper Submission</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative Proposal</td>
<td>2 dedicated flash drives or CDs labeled “Administrative Proposal” containing a standard searchable PDF file with copy/read permissions only.</td>
<td>2 Originals</td>
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<tr>
<td></td>
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<td>4 Copies</td>
</tr>
<tr>
<td>Technical Proposal</td>
<td>2 dedicated flash drives or CDs labeled “Technical Proposal” containing a standard searchable PDF file with copy/read permissions only.</td>
<td>2 Originals</td>
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<td></td>
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</tr>
<tr>
<td>Cost Proposal</td>
<td>2 dedicated flash drives or CDs labeled “Cost Proposal” containing standard searchable PDF file(s) with copy/read permissions only.</td>
<td>2 Originals</td>
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<tr>
<td></td>
<td></td>
<td>4 Copies</td>
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</tbody>
</table>

1. All hard copy proposal materials should be printed on 8.5” x 11” white paper (single-sided) and be clearly page numbered on the bottom of each page with appropriate header and footer information. A font size of eleven (11) points or larger should be used. The Technical Proposal materials should be presented separate from the sealed Cost Proposal.
2. Where signatures are required, the proposals designated as originals should have a handwritten signature and be signed in blue 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 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# 20047 (EI Program Monitoring and Quality Improvement Services) – (Administrative) (Technical) or (Cost) Proposal submitted by (Bidder’s name)”. The three (3) sealed proposals may be combined into one (1) 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 # 20047)
Attention: MaryJo Polfleit
NYS Department of Health
Corning Tower, Empire State Plaza Room 859
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 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 (Proposal Content) and Section 7.0 (Proposal Submission), including documentation requested 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:

\[
C = (A/B) \times 30\%
\]

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 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).

8.7 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.

8.8 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 accord 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 included in this RFP and 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
7. Bidder’s Certified Statements
8. DOH Agreement (Standard Contract)
9. References
10. Diversity Practices Questionnaire
11. Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination

The following attachments are attached and included in this RFP:

A. Proposal Document Checklist
B. Cost Proposal

The following attachments have been posted as a bidder’s library along with this RFP at https://www.health.ny.gov/funding
C. Approved and Contracted Providers
D1. Comprehensive Monitoring Review Protocol
D2. Sample Comprehensive Monitoring Review Tool
E. EI Administrative Workplan
F. Sample Investigative Protocols
G. EI Verification of Correction Review Protocol
H. Corrective Action Plan Review Protocol
I. Sample Monitoring Report:
J. Management Reports
   Exhibit A
   Exhibit B
Please reference Section 7.0 for the appropriate format and quantities for each proposal submission.

### FOR THE ADMINISTRATIVE PROPOSAL

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<td>Attachment 3- Vendor Responsibility Attestation</td>
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<td>Attachment 5 Form 1</td>
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<td>Attachment 5 Form 2 (If Applicable)</td>
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<td>§ 6.1.H</td>
<td>Attachment 7 - Bidder’s Certified Statements, completed &amp; signed.</td>
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### FOR THE TECHNICAL PROPOSAL

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<td>Documentation of Bidder’s Eligibility (Requirement)</td>
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<td>§ 6.2.D</td>
<td>Technical Proposal Narrative</td>
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<td>&lt;&lt;List any Required Attachments to Complete Technical Proposal&gt;&gt;</td>
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### FOR THE COST PROPOSAL REQUIREMENT

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<td>Attachment B- Cost Proposal</td>
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</table>
ATTACHMENT B: COST PROPOSAL Bid Sheet

RFP #20047
ATTACHMENT B    BIDDER’S ORGANIZATION NAME ________________________________

The bidder must submit a completed and signed Attachment B - Cost Proposal. The bidder must use the Attachment B Cost Proposal and shall comply with the format and content requirements as detailed in this document. Failure to comply with the format and content requirements will result in disqualification.

Price must be inclusive of all Scope of Work in Section 4.0 for the RFP. Specific sections have been provided for reference within each deliverable, however it is expected that the total bid price is reflective of the performance of all work set forth in said specifications to the satisfaction of the Department of Health. In addition to the cost of furnishing all said services, the proposal prices must also cover the cost of materials, equipment, insurance, overhead, meetings, training, reporting, analysis labor, travel and any other costs required to complete all deliverables and adhere to all standards of this RFP to the satisfaction of the Department of Health. Transition costs will not be reimbursed separately.

For Section A, Cost Proposal by Deliverable, Bidders must provide a:
  • Price per review for each deliverable for years one through three
  • Price per review for each deliverable for years four through five

For Section B, Cost Proposal by Deliverable Early Intervention Application, Bidders must provide:
  • Price per hour for each deliverable for years one through three
  • Price per hour for each deliverable for years four and five

For Section C, Cost Proposal by Deliverable Administrative Services, Bidders must provide:
  • Price per year for each deliverable for years one through three
  • Price per year for each deliverable for years four through five
# A. COST PROPOSAL BY DELIVERABLE

<table>
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<tr>
<th>DELIVERABLE</th>
<th>Estimated Number of Reviews per year</th>
<th>Price per review Years 1-3</th>
<th>Price per Review Years 4 and 5</th>
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<td>1A. Comprehensive Reviews for Regulations Compliance - Agency Reviews, including municipalities (CAPs required)</td>
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<tr>
<td>1B. Comprehensive Reviews for Regulations Compliance - Individual provider reviews (CAPs required)</td>
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<td>2. Municipality as Administrator Review (CAPs required)</td>
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<td>3. Investigative Reviews (CAPs required)</td>
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<td>4. Quality of Screening, Evaluation and Eligibility Determination Reviews (CAPs required)</td>
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<td>5. Verification of Correction Reviews</td>
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<td>6. CAP Reviews</td>
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# B. COST PROPOSAL BY DELIVERABLE EARLY INTERVENTION APPLICATION

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<th>Price Per Hour Years 4 and 5</th>
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<tr>
<td>7. Develop and Maintain Early Intervention Monitoring Application and Data</td>
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<td>8. Modify Early Intervention Monitoring Data Application</td>
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# C. COST PROPOSAL BY DELIVERABLE ADMINISTRATIVE SERVICES

<table>
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<tr>
<th>DELIVERABLE</th>
<th>Price Per Year for Years 1-3</th>
<th>Price Per Year for Years 4 and 5</th>
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<tr>
<td>Administrative Services</td>
<td>$</td>
<td>$</td>
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By signing this Cost Proposal, bidder attests that the following information is true and accurate to the best of my knowledge and that the Bidder organization(s) agrees to abide by the terms of the approved proposal and is fully able and willing to carry out the deliverable contained herein.

A price MUST be submitted for all of the above deliverable categories. Cost Proposals that do not include a price for each category will be disqualified.

Authorized Signature ________________________________
Date ________________________________

Print Name ________________________________
Title ________________________________