



# Department of Health

## Request for Proposals

**RFP #20482**

### **Preadmission Screening and Resident Review (PASRR) Level II Evaluation and Determination**

**Issued: June 21, 2024**

#### **DESIGNATED CONTACT:**

Pursuant to State Finance Law §§ 139-j and 139-k, the New York State Department of Health (hereinafter referred to as the “**Department**” or as “**DOH**”) identifies the following designated person to whom all communications attempting to influence the Department’s conduct or decision regarding this procurement must be made.

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#### **PERMISSIBLE SUBJECT MATTER CONTACT:**

Pursuant to State Finance Law § 139-j(3)(a), the Department ^ identifies the following allowable person to contact for communications related to the submission of written bids, written questions, pre-bid questions, and debriefings.

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## 1.0 CALENDAR OF EVENTS

<b>RFP # 20482 - PREADMISSION SCREENING AND RESIDENT REVIEW LEVEL II EVALUATION AND DETERMINATION</b>	
<b><u>EVENT</u></b>	<b><u>DATE</u></b>
Issuance of Request for Proposals	June 21, 2024
Deadline for Submission of Written Questions	On or Before July 9, 2024 at 5 PM EST
Responses to Written Questions Posted by DOH	On or About July 26, 2024
Deadline for Submission of Proposals	On or Before August 13, 2024 at 5PM EST
<i><u>Anticipated</u></i> Contract Start Date	December 1 <sup>st</sup> , 2024

## 2.0 OVERVIEW

Through this Request for Proposals (RFP), the New York State (State) Department of Health (the Department or DOH) is seeking competitive proposals from qualified bidders to provide services and conduct Level II Preadmission Screening and Resident Review (PASRR) Evaluations and Determinations for individuals suspected of having a mental illness (MI), 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

Congress enacted a sweeping reform to nursing home provisions in the Omnibus Budget Reconciliation Act of 1987. Included in the legislation was a Medicaid provision that prohibits nursing facilities (NF) from admitting any person with known or suspected mental illness (MI), intellectual disability (ID), or a related condition (RC), until they have been evaluated by the State's Preadmission Screening and Resident Review (PASRR) Program. The PASRR program was put into place to protect individuals with MI, ID, or a RC to ensure they receive Long-Term Services and Supports (LTSS) in the most integrated and least restrictive setting; to make sure they are not inappropriately placed in NFs; and they are evaluated for Specialized Services (see [Attachment D - New York State Medicaid State Plan, Section 4.39, \(ny.gov\) for further details](#)) if they are determined to need NF placement. The PASRR program also has an important role in diverting individuals away from NFs and transitioning them from NFs back into the community.

There are two parts within the PASRR program, which are known as the Level I identification function (referred to as Level I SCREEN in New York State), and the Level II evaluation and determination. The Preadmission Screening (used interchangeably with the term "Level II"), is composed of an evaluation and determination, and must be completed prior to NF admission. Once the individual becomes a resident of a NF, a Resident Review (RR), which is also composed of a Level II evaluation and determination, is completed when there is a significant change in status ([defined below](#)).

Any individual who is being considered for NF admission needs to have a PRI (Patient Review Instrument, which is New York's nursing facility level of care assessment) and SCREEN (Level I) completed prior to NF admission. Individuals who flag positive on the Level I SCREEN will be referred for a Level II evaluation and determination unless the individual qualifies for a categorical determination.

The purpose of the Level II evaluation is to evaluate, and then determine, whether the individual needs NF level of care, or if their needs can be met in a setting other than the NF, and whether the individual needs Specialized Services, which are services beyond what the NF provides. In the State of New York, Specialized Services may only be provided by a psychiatric hospital or an Institution for Mental Diseases (IMD). NFs are prohibited from providing Specialized Services and may neither admit nor retain those individuals for whom a Specialized Services recommendation has been made.

In February 2020, The Centers for Medicare and Medicaid Services (CMS) published a notice of proposed rulemaking (NPRM) for PASRR. CMS and the PASRR Technical Assistance Center (PTAC) have issued guidance disclosing when states are making changes to their PASRR programs, they are to be based off proposed regulations. The Department is looking for the support of a Vendor to make the transition between current and proposed federal regulations seamless. This RFP will refer to both current and proposed Federal Regulations in 42 CFR parts 431, 433, 435, 441, and 483, as New York prepares for the adoption of proposed regulations. The Vendor will be expected to comply with final federal regulations as New York transitions. In addition, anticipated changes to the Patient Review Instrument (PRI) and Level I SCREEN process may result in more Level II referrals than currently occur.

The NYS Office for People with Developmental Disabilities (OPWDD) is responsible for PASRR Level II evaluations and determinations for NF applicants and residents suspected of having an ID or RC. The local Developmental Disabilities Services Offices (DDSO) maintains responsibility for conducting PASRR Level II evaluations and determinations for those individuals with possible ID or RC. The Contractor will not be responsible for completing Level II evaluations and determinations for this population but will be expected to communicate with OPWDD and make an appropriate referral when an individual evaluated for suspicion of MI is found to also display signs of ID or RC.

42 CFR § 483.106(e)(2) states the State Medicaid Authority (SMA) cannot delegate MI Level II evaluations to the State Mental Health Authority (SMHA). This must be performed by an entity that does not have an affiliation with the SMHA, and Level II evaluations must not be conducted by NFs.

PASRR Level II MI evaluations and determinations are conducted for:

- Persons known or suspected of having a mental illness (MI) and who are seeking admission to a nursing facility (NF) certified under the Medicaid program;
- Residents of a NF who are newly diagnosed with a MI;
- Residents of a NF who have been identified as part of the PASRR population and have experienced a significant change (improvement or decline) in their physical or mental condition;
- Residents of a NF who were not previously identified by the Level I SCREEN for possibly having a MI, but the NF notices there may be evidence of a possible MI; and,
- Residents whose exemptions have expired.

For purposes of this RFP, a “significant change” in the resident’s physical or mental condition will affect the individual’s disability-specific needs. 42 CFR § 483.20(b)(2)(ii) describes a “significant change” as a “major decline or improvement in the resident’s status that:

- will not normally resolve itself without further intervention by staff or by implementing standard disease-related clinical interventions, is not “self-limiting” (for a decline in status only);
- has an impact on more than one area of the resident’s health status; and,
- requires interdisciplinary review or revision of the individual’s care plan (or both).”

According to 42 CFR § 483.114(c)(1), a referral for a significant change must be made within 72 hours of the NF noticing the significant change.

Through a person-centered process, the evaluator will examine the data that will allow for validation of a diagnosis of MI and will assist in determining whether a program of Specialized Services is needed. If Specialized Services are not needed, the evaluator will identify the need for mental health Services of a Lesser

Intensity (SLI) and provide a recommendation for placement in the least restricted, most integrated setting consistent with the individual's desires and their specific physical and behavioral health needs.

Federal PASRR legislative authority includes but is not limited to:

- Social Security Act § 1919, 42 U.S.C. § 1396r, as added by Omnibus Budget Reconciliation Act of 1987 (Pub. L. 100-203 § 4211) as amended by OBRA '90 (Pub. L. 101-508, § 4801).
- Public Law 104-315 which amended § 1919(e)(7) of the Social Security Act.
- Federal Regulations 42 CFR Parts 431, 433, 435, 441, and 483, Subparts B, C and E.
- Medicaid State Operations Letter 96-30: Amendment of the PASRR Program.

NYS PASRR legislative authority includes Social Service Law § 363a. The State authority for PASRR is specified in Federal Regulation 42 CFR § 483.104, which declares States must operate a PASRR program that meets requirements §§ 483.100 through 483.138.

### 2.1.1 New York State PASRR Program

#### Acronym Table:

PASRR	Preadmission Screening and Resident Review
RFP	Request for Proposals
DOH	Department of Health
CFR	Code of Federal Regulations
NF(s)	Nursing Facility/Nursing Facilities
MI	Mental Illness
ID	Intellectual Disability
RC	Related Condition
LTSS	Long-Term Services and Supports
RR	Resident Review
PRI	Patient Review Instrument-New York's Nursing Facility Level of Care Assessment
SCREEN	New York's Level I Identification Function
IMD	Institution for Mental Diseases
CMS	Centers for Medicare and Medicaid Services
NPRM	Notice of Proposed Rule Making
PTAC	PASRR Technical Assistance Center
OPWDD	Office for People with Developmental Disabilities-State Intellectual Disability Authority
DDSO	Developmental Disabilities Services Offices
SMA	State Medicaid Authority
SMHA	State Mental Health Authority
SIDA	State Intellectual Disability Authority
SLI	Services of Lesser Intensity
OMH	Office of Mental Health-State Mental Health Authority
MFP	Money Follows the Person
ADA	Americans with Disabilities Act
RUGs	Resource Utilization Group-it is on the PRI form
PAS	Preadmission Screening
HIPAA	Health Insurance Portability and Accountability Act
ITS	Information Technology Services
DUA	Data Use Agreement
MCD	Medicaid Confidential Data
BSC	Business Service Center
SDVOBs	Service-Disabled Veteran-Owned Businesses
AG	New York State Attorney General
OSC	Office of the State Comptroller
RHCF	Residential Healthcare Facility

### 2.1.2 Level I Overview

According to 42 CFR § 483.106(c), the State Medicaid Authority's (SMA) PASRR responsibilities include: "general responsibility for ensuring and enforcing the PASRR program's compliance with federal regulations; executing and enforcing written interagency agreements among the SMA, State Intellectual Disability Authority (SIDA), and the State Mental Health Authority (SMHA) as required at § 483.621; designating an entity to perform evaluations for individuals with MI; ensure timely and accurate reporting of data as required in proposed § 483.130(j); and, all PASRR functions not explicitly assigned to another entity by statute or regulation."

Federal regulations require the State PASRR program to identify all NF applicants and residents with a possible MI, ID, or RC diagnosis (i.e., all individuals who are required to be evaluated under the PASRR program). This process begins with the Level I SCREEN. Qualified personnel in hospitals, nursing facilities, certified home health agencies, long term home health care programs, and other community-based agencies perform the Level I SCREEN using the Department's SCREEN instrument (Form DOH-695 (2/2009)), found at <http://www.health.ny.gov/forms/>, under "SCREEN/PASRR." The Level I SCREEN is used to capture individuals with known or suspected MI, ID, or RC so they can be evaluated with a Level II Preadmission Screening prior to NF admission. 42 CFR § 483.20(k)(2)(ii) requires every new admission to have a Level I SCREEN completed prior to NF admission. This includes individuals who qualify for categorical determinations.

The entity responsible for completing the Level I SCREEN will notify the Contractor of those NF applicants or residents with a MI for whom the Contractor must perform a Level II evaluation and determination. A SCREEN form may only be completed by health care professionals, including but not limited to, social work and discharge planning professionals who have completed the New York State Department of Health SCREEN Training and have been issued a ten-digit SCREENER identification number.

### 2.1.3 Level II Overview

Determinations for both NF applicants and residents must be based on independent physical and mental evaluations performed by a person or entity other than the Office of Mental Health (OMH). The person or entity may not be NF staff or have a direct or individual relationship with a NF. The determination must consider the need for NF services and Specialized Services beyond what a NF can provide. This is the responsibility of DOH and its Contractor and therefore supports the necessity of this RFP.

For those individuals requiring a Level II evaluation, the Contractor determines the level and type of services needed following the evaluation. If the Contractor determines the applicant or resident requires Specialized Services for MI, NF placement will be deemed inappropriate. Recommendations for Specialized Services will only be made after the OMH Clinical Director determines the appropriateness of the recommendation. Therefore, the Contractor will be responsible to forward all applicable material reviewed during its evaluation to the OMH Clinical Director for review.

Level II evaluation criteria is described in detail in Federal Regulations 42 CFR §§ 483.128 through 483.134.

## 2.2 Important Information

The Bidder **must** review, and is requested to have its legal counsel review, [Attachment 8](#), the DOH Agreement (Standard Contract), as the successful Bidder must be willing to enter into the Contract awarded pursuant to this RFP in the terms of [Attachment 8](#), **subject only to any amendments to the Standard Contract agreed by the Department during the Question and Answer Phase of this RFP** (see, [Section 5.2](#)). Please note that this RFP and the awarded Bidder's Bid 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, terms and conditions 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 this RFP, the Bidder agrees to comply with all the provisions of the Contract, including all of the provisions of Appendix A.

Note, [Attachment 7](#), the Bidder’s Certified Statements, **must** be submitted by each Bidder 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, including, without limitation, [Attachment 8](#). It also includes a statement that the Bidder acknowledges that, should any alternative proposals or extraneous terms be submitted with its Bid, 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 such qualifications or exceptions that are not proposed prior to the deadline for the submission of written questions will not be considered by DOH after contract award. Any amendments DOH makes to the RFP as a result of questions and answers will be publicized on the DOH web site and will be available and applicable to all Bidders equally.

## **2.3 Term of the Agreement**

The term of the Contract that will be entered into between the Department and the successful Bidder pursuant to this RFP will be for a period of two (2) years commencing on the date shown on the Calendar of Events in [Section 1.0](#). After the initial contract term expires, at the discretion of DOH, the Contract may be extended, upon request, for three (3) additional one (1) year periods, 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 NYSDOH will accept proposals from bidders with the following types and levels of experience as a prime contractor:

- A minimum of three (3) years’ experience completing PASRR evaluations to the behavioral health population; and,
- A minimum of three (3) years’ experience completing PASRR determinations for the behavioral health population.

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.

## 4.0 SCOPE OF WORK

This Section describes the services that are required to be provided by the selected bidder. The selected bidder must be able to provide all of these services throughout the contract term.

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

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

### 4.1 Tasks/Deliverables

The Contractor will be responsible for:

- Providing PASRR evaluations and determinations in compliance with the federal regulations governing the PASRR process, the Supreme Court’s decision in *Olmstead v. L.C.*, and the Americans with Disabilities Act (ADA);
- Ensuring that all requirements of 42 CFR §§ 483.100-138 are met;
- Performing Level II evaluations and determinations, consistent with Federal and NYS PASRR requirements; and,
- Assuring that placement options comply with 42 CFR § 483.118 within the applicable timeframes described in Section 4.2.

These PASRR Level II evaluations and determinations will be conducted for:

- Persons known or suspected of having a mental illness (MI) and who are seeking admission to a nursing facility (NF) certified under the Medicaid program;
- Residents of a NF who are newly diagnosed with a MI;
- Residents of a NF who have been identified as part of the PASRR population and have experienced a significant change (improvement or decline) in their physical or mental condition;
- Residents of a NF who were not previously identified by the Level I SCREEN for possibly having a MI, but the NF notices there may be evidence of a possible MI; and,
- Residents whose exemptions have expired.

The Contractor must perform the following consistent with the performance standards/expectations listed above:

- Evaluate all NF applicants or residents with a MI, or suspected to have a MI, who are referred to the Contractor, regardless of the applicant’s source of payment. The average number of reviews for 2023 was 180 per month.<sup>1</sup>
- Ensure that the minimum level of documentation, listed below, is obtained, to make a determination. The minimum level of documentation includes:
  - Physician request for services which may be a written order or supporting documentation for Residential Health Care Facility placement/stay;
  - Hospital/Community Patient Review Instrument (PRI) including Resource Utilization Group (RUGs) calculation score;
  - A copy of the Level I SCREEN that triggered this requested Level II referral;

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<sup>1</sup> The New York Level I identification function is subject to change in the future, which could cause an increase in the amount of Level II referrals submitted to the Contractor.



- Complete medical history and physical including last two (2) years of inpatient history and treatment;
  - Current drug history;
  - Neurological evaluation including motor function and sensory function;
  - Psychosocial evaluation;
  - A detailed psychiatric evaluation. If this person has had a psychiatric hospitalization within the past two (2) years, the applicable discharge summary is needed.
- Evaluate each individual using a person-centered approach, which may include obtaining additional information as needed for each individual unique case.
  - Evaluate the applicant or resident via an in-person meeting. The evaluation must be face-to-face in the hospital, NF, other setting in which the NF applicant or resident is receiving care, or in the NF applicant's home, if they are residing in the community. If the resident is a beneficiary of NYS Medicaid and residing in a facility outside NYS, the Contractor must make a reasonable effort to complete such evaluation in-person. If the Contractor cannot conduct the in-person evaluation, the NYS DOH must be contacted via email at [PASRR@health.ny.gov](mailto:PASRR@health.ny.gov). The DOH will retain express authority and will make the decision and provide prior approval for any alternate means of conducting the Level II evaluation.
  - Evaluate a NF applicant or resident upon request. The Contractor must ensure that those NF applicants or residents who are the fiscal responsibility of NYS's Medicaid program receive Level II evaluations when requested/required. This responsibility extends to out-of-state residents who are the fiscal responsibility of NYS Medicaid and who experience a significant change in condition and will require an evaluation. In these out-of-state instances, the Contractor should work with the resident's out of state healthcare professionals and placement coordinator to collect and review all the necessary documents. The anticipated number of reviews conducted for out of state NYS Medicaid recipients is approximately thirty-five (35) per year. The Contractor may, on rare occasions complete a telehealth evaluation via videoconferencing [483.128(f)], solely upon express permission from the DOH, contacted via email at [PASRR@health.ny.gov](mailto:PASRR@health.ny.gov).
  - Ensure that each evaluation assesses for the potential primary diagnosis of dementia. This must include a dementia diagnosis by the individual's qualified clinician.
  - Must notify and confer with OPWDD prior to finalizing PASRR determinations for individuals known or suspected of also having an ID or RC.
  - The evaluation must determine if the individual requires Services of Lesser Intensity (SLI) or a referral to OMH for an evaluation for Specialized Services.
  - Ensure that the person who performs the Level II evaluation assesses whether a NF applicant or a resident with MI requires Specialized Services based on the New York State definition of Specialized Services ([see Attachment D and New York State Medicaid State Plan, Section 4.39 \(ny.gov\)](#)).
  - Ensure that, for NF applicants for whom the Contractor is recommending Specialized Services, the Contractor completes Level II evaluations and forwards required documents (as noted in the second bullet point above) to the OMH Clinical Director within five (5) calendar days after the day on which the entity that performed the Level I SCREEN referred the applicant to the Contractor for a Level II evaluation.
  - Ensure the evaluator assesses what services someone would need to live in the community, including, but not limited to, a Money Follows the Person (MFP) funded Nursing Home Transition Assistance Program Referral.

- Ensure the PASRR evaluation report and determination notice [483.128(l)] are forwarded in accordance with federal regulations to the:
  - Evaluated individual and his/her legal representative [483.130(f)];
  - State Mental Health Authority (SMHA), as appropriate, within in required times [483.128(l)(2)];
  - Admitting or retaining NF (or other placement) [483.130(f)(2)];
  - Person's physician most involved in their medical care [483.130(f)(3)]; and,
  - Discharging hospital, if applicable [483.130(f)].
- Responsible for ensuring the PASRR evaluation report and determination notice [483.128 (l)] are:
  - Explained to the evaluated individual and his or her legal representative [483.128(k)]; and,
  - Filed in the individual's medical records [483.130(e)].
- Ensure that the Contractor completes a Preadmission Screening or Resident Review within nine (9) calendar days of when they receive a referral for a Level II evaluation and determination [483.112(c)(1)].
- Have a Quality Assurance/Process Improvement system in place to assure the appropriateness of evaluator recommendations and to take the appropriate corrective action, including but not limited to, individualized and periodic evaluator education and competency review (administrative and on-site reviews) necessary to support the goals of the PASRR process.
- The Contractor's organization, employees, and volunteers will implement and maintain policies, an internal control process for oversight and monitoring, and procedures to assure the confidentiality of personal identifiable data and protected health information.
- The Contractor will maintain confidentiality as it relates to HIPAA and will maintain confidentiality in collecting all information described in this RFP.

## **4.2 Staffing**

The Contractor will be responsible for recruiting and training an adequate number of appropriately trained and qualified individuals to perform the work in Section 4.0 Scope of Work. The Contractor will submit resumes of staff hired under the terms of this contract for DOH review prior to the start of work. The Department reserves the right to approve or disapprove any of the Contractor's proposed staffing.

### **4.2.1 Qualified Persons Allowed to Conduct Evaluations:**

The Contractor must ensure that only the following licensed persons perform Level II evaluations [483.128(b)]:

- A NYS licensed psychiatrist who is board-certified or board-eligible;
- A NYS licensed social worker who has a master's degree in social work and recent experience (within the past 3 years) in performing comprehensive psychiatric evaluations;
- A NYS licensed registered nurse who has recent experience (within the past 3 years) in performing comprehensive psychosocial or psychiatric evaluations;
- A NYS licensed psychologist who has recent experience (within the past 3 years) in performing comprehensive psychiatric evaluations; or,
- A NYS licensed nurse practitioner who has recent experience (within the past 3 years) in performing comprehensive psychiatric evaluations.

The Department of Health reserves the right to require the Contractor to replace evaluators at any time during the contract period. The Contractor has up to four (4) weeks to submit proposed replacement candidates for the Department to approve prior to the start of work.

## 4.3 Reporting

**Reporting:** The Contractor is required to prepare and submit the following reports to DOH and the Office of Mental Health (OMH) within thirty (30) days after the end of the reporting period:

### 4.3.1 Monthly Reports

*4.3.1.1 Monthly Activity Report:* The Contractor will create reports on each month's activity. The reports will include, at a minimum:

- Number of evaluations and determinations completed that month
- Approved cost per evaluation and determination
- County and Out-of-State Activity
- The Level II Evaluation and Determination Activity-Detail and Summary to include:
  - Evaluator name
  - Individual's name who is being evaluated
  - Date of evaluation
  - Location of evaluation, including but not limited to the:
    - Type of facility the evaluation is being completed in, and
    - County in which the submitting facility is in.
  - Type of evaluation including but not limited to:
    - Preadmission Screening (PAS),
    - RR,
    - RR for no longer meeting categorical determinations,
    - or Significant Change (improvement or decline).
  - Determination outcome, including, but not limited to:
    - Level II terminated-with rationale,
    - Level II excluded due to primary major neurocognitive disorder,
    - Community Setting,
    - Nursing Facility recommendation,
    - Waiver Program,
    - Services of Lesser Intensity, or
    - Specialized Services as recommended by the OMH Clinical Director.
- Cases referred to the OMH Clinical Director that did not result in a recommendation for Specialized Services
- Names of individuals for which referrals were canceled, with rationale
- Payer Activity – Detail and Summary
- Average monthly turnaround time in days to issue a determination
- Reviews conducted for:
  - Pre-Admission Screening (PAS)
  - Resident Review (RR)
    - RR for Significant Change
      - RR for improvement in condition
      - RR for decline in condition
    - RR for no longer meeting a categorical determination
  - All Conducted Individuals – PASRR Level II
- List every case that the contractor referred to the Office for People with Developmental Disabilities (OPWDD)
- Fair hearing activities:
  - The names of the individuals who requested a fair hearing
  - The assigned fair hearing numbers issued to the individuals
  - The date of the initial fair hearing requests
  - The reason the individuals are requesting a fair hearing
  - The outcome of any reconsiderations
  - The outcome of any adjudicated hearings

## 4.3.2 Quarterly Reports

*4.3.2.1 Quality Assurance Report:* The Contractor will be responsible for providing a 10% quarterly quality assurance random sample of completed Level II evaluations to the OMH Clinical Director for his/her review and concurrence;

*4.3.2.2 Services of Lesser Intensity (SLI) Determinations Report:* The Contractor will be responsible for providing a report identifying evaluations resulting in a recommendation for a NF with a specialty unit, such as a neurobehavioral unit;

*4.3.2.3 Money Follows the Person (MFP) Funded Nursing Home Transition Assistance Program Recommendation Report:* The Contractor will be responsible for providing a report of all evaluations recommending a referral to the MFP funded Nursing Home Transition Assistance Program; and,

*4.3.2.4 Community Placement Activity Report:* The Contractor will be responsible for providing a report of all residents recommended for community placement to determine if the resident was discharged and the discharge location.

## 4.3.3 Annual Reports

*4.3.3.1 Annual Expenditure Summary:* The Contractor will be responsible for reporting the total number of annual Preadmission Screening and Resident Review (PASRR) evaluations and determinations completed, and the total cost;

*4.3.3.2 Annual Specialized Services Summary:* The Contractor will be responsible for reporting the total number of annual determinations resulting in a recommendation for Specialized Services; and, the total number of cases referred to the OMH Clinical Director that did not result in a recommendation for Specialized Services;

*4.3.3.3 Annual Canceled Assessments:* The Contractor will be responsible for reporting the total number of annual assessments that were canceled;

*4.3.3.4 OPWDD Annual Summary:* The Contractor will be responsible for reporting the total number of annual determinations resulting in a recommendation for referral to OPWDD;

*4.3.3.5 Fair Hearing Activities:* The Contractor will be responsible for preparing a report that lists each fair hearing request. This report must include the individual's name, assigned fair hearing number, the date of initial fair hearing request, the reason the individual is requesting a fair hearing, and the outcome of the fair hearing, including any reconsiderations; and,

*4.3.3.6 Annual Report:* The Contractor will be responsible for preparing a report detailing the average time it takes to complete determinations [proposed 42 CFR 483.130(j)(1)], and from the Social Security Act, § 1919 (e)(7)(c)(iv), the number and disposition of residents who:

- Do not require NF services, but require Specialized Services; and,
- Do not require NF services and do not require Specialized Services.

## 4.4 Quarterly Quality Assurance Review

The Contractor is required to conduct a quarterly quality assurance review to assure that the recommendations made by the PASRR Contractor are appropriate and conform to federal and state requirements. The random sample must represent at least 10% of NF residents who have had a Level II evaluation performed, who have been determined to need mental health SLI rather than Specialized Services and must include a random sample of the Contractor's evaluations.

## 4.5 Hearing and Appeal System

Each State must provide a hearing and appeal system for any individual who wants to appeal their Level II PASRR determination [483.204(a)(2)]. The Contractor must ensure that a notice of determination includes notice of the individual's right to appeal the determination. In addition, the Contractor is responsible to furnish copies of all relevant material necessary for the hearing to both the Court and to the appellant at no additional cost to the appellant. The Contractor must make staff available to participate, either telephonically or in person for each scheduled hearing. In the last five years, there have not been any formal hearings.

Prior to participating in a formal fair hearing, the Contractor should consider ways to resolve the appeal. This can include, but is not limited to:

- A reconsideration at the request of the individual or his/her legal representative.

## 4.6 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>.

## 4.7 Security

4.7.1 The Contractor is required to maintain data confidentiality plans and procedures as well as a plan for meeting Health Insurance Portability and Accountability Act (HIPAA) requirements as they relate to the units within each component.

4.7.2 Within the first 60 days of the contract start date, the Contractor must provide to the Department for approval a security plan that describes their security and compliance with all applicable New York State Information Technology Services (ITS) security policies and standards (<http://its.ny.gov/eiso/policies/security>), including, but not limited to:

- NYS-P10-006 – Identity Assurance Policy
- NYS-S13-001 – Secure System Development Life Cycle Standard
- NYS-S13-002 – Secure Coding Standard (if applicable)
- NYS-S13-004 – Identity Assurance Standard
- NYS-S14-003 – Information Security Controls Standard
- NYS-S14-005 – Security Logging Standard
- NYS-S14-007 – Encryption Standard
- NYS-S14-013 – Account Management / Access Control Standard
- NYS-S15-001 – Patch Management Standard (if applicable)
- NYS-S15-002 – Vulnerability Scanning Standard

4.7.3 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 the 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)

The Contractor is expected to provide secure and confidential backup, storage and transmission for hard copy and electronically stored information. Under no circumstances will any records be released to any person, agency, or organization without specific written permission of the DOH. The Contractor is obligated to ensure any Subcontractor hired by Contractor who stores, processes, analyzes or transmits Medicaid Confidential Data (MCD) on behalf of Contractor has the appropriate security requirements in place. Contractor is required to include in all subcontracts and Business Associate Agreements with their Subcontractors language surrounding the security and privacy requirements as well as the language contained in the Confidentiality

Language for Third Parties section of the DUA. If any breach or suspected breach of the data or confidentiality occurs, whether the breach occurred with the Contractor or Subcontractor, DOH must be notified immediately.

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.

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 the Contract.

#### **4.8 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 Term.

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 Level II evaluation and determination 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 appropriate number of staff 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 twelve (12) months before the last day of its Contract with the Department of Health or upon request of the Department.

#### **4.9 Payment**

Payment of invoices and/or vouchers submitted by the successful Bidder pursuant to the terms of the Contract entered into pursuant to this RFP by the Department shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be:

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

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

Subject: <<Unit ID: 3450467>> <<Contract #>>

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

**NYS Department of Health  
Unit ID 3450467  
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](http://www.osc.state.ny.us/epay/index.htm), by email at [epayments@osc.state.ny.us](mailto: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 or enrollment can be found at <http://www.osc.state.ny.us/epay>.

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

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

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

Payment will be made monthly, upon receipt of voucher and supporting documentation of completion of Level II evaluations and determinations and any applicable reports (see Section 4.3 Reporting Requirements), as required by the State.

#### **4.10 Subcontracting**

Bidder's may propose the use of a subcontractor. The Contractor shall obtain prior written approval from NYSDOH before entering into an agreement for services to be provided by a subcontractor. The Contractor is solely responsible for assuring that all the requirements of this RFP is 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 Contract.

NOTE: 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.

## **4.11 Contract Insurance Requirements**

Prior to the start of work under the Contract, the Contractor shall procure, at its sole cost and expense, and shall maintain in force at all times during the term of the 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.

### ***4.11.1 Data Breach and Privacy Liability Insurance (Cyber Insurance):***

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 DOH's 21 Authorized Users' systems due to the actions of the Contractor with results in the unauthorized access to the DOH's data.

Contractors are required to maintain during the term of the contract, Data Breach and Privacy Liability Insurance (Cyber Insurance), including coverage for the failure to protect confidential information and failure of the security of the Contractor's computer systems or Agency's systems due to the actions of the Contractor which results in unauthorized access to the Agency or its data. Said Insurance shall provide coverage for damages arising from, but not limited to the following:

- Breach of duty to protect the security and confidentiality of nonpublic proprietary corporate information;
- Personally identifiable information (PII) (e.g., medical, financial, or personal in nature in electronic or non-electronic form);
- Privacy notification costs;
- Regulatory defense and penalties;
- Website media liability; and,
- Cyber theft of customer's property, including but not limited to money and securities.

If the policy is written on a Claims-Made basis, the Contractor must submit to the Agency an Endorsement providing proof that the policy provides the option to purchase Tail Coverage providing coverage for no less than one (1) year after work is completed in the event that coverage is canceled or not renewed. This requirement applies to both primary and Excess Liability Policies, as applicable.

### ***4.11.2 Technology Errors and Omissions Liability Insurance:***

The Contractor shall maintain, during the term of the contract, Technology Errors and Omissions Liability Insurance for Claims for damages arising from computer related services including, but not limited to, the following: consulting, data processing, programming, system integration, hardware or software development, installation, distribution or maintenance, systems analysis or design, training, staffing or other support services, any electronic equipment, and computer software developed, manufactured, distributed, licensed, marketed or sold.

The policy shall include coverage for third-party fidelity including cyber theft.

If the policy is written on a Claims-Made basis, the Contractor must provide to the Agency proof that the policy provides the option to purchase Tail Coverage providing coverage for no less than one (1) year after work is completed in the event that coverage is canceled or not renewed. This requirement applies to both primary and Excess Liability Policies, as applicable.

### ***4.11.3 Professional Liability***

The Contractor, and any subcontractor retained by the Contractor to work on the Contract to which such insurance coverage may be applicable, shall procure and maintain during and for a period of three (3) years after completion of the Contract, Professional Liability Insurance/Errors and Omissions Liability Insurance in the amount of \$2,000,000 issued to, and covering damage for liability imposed on, the Contractor (or applicable subcontractor) by the Contract or law arising out of any negligent act, error, or omission in the rendering of or failure to render professional services required by the Contract. The Professional Liability



Insurance/Errors and Omissions Liability Insurance may be issued on a Claims-Made Policy form, in which case the Contractor (or applicable subcontractor) shall purchase, at its sole expense, Tail Coverage of up to three (3) years after work is completed if coverage is cancelled or not renewed.

#### **4.12 Minority & Women-Owned Business Enterprise (M/WBE) Requirements**

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

##### **Business Participation Opportunities for M/WBEs**

For purposes of this RFP, DOH hereby establishes an overall goal of 30% for M/WBE participation, 15% for Minority-Owned Business Enterprises (“MBEs”) participation and 15% for Women-Owned Business Enterprises (“WBEs”), based on the current availability of qualified MBEs and WBEs and outreach efforts to certified M/WBE firms. The successful Bidder who becomes the Contractor under the Contract entered into with the Department pursuant to this RFP must document good faith efforts to provide meaningful participation by M/WBEs as subcontractors or suppliers in the performance of the Contract consistent with the M/WBE participation goals established for this procurement, and Contractor must agree that DOH may withhold payment pending receipt of the required M/WBE documentation. For guidance on how DOH will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified M/WBEs 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 to establish Contractor’s “good faith efforts”.

By submitting a Bid in response to this RFP, a Bidder agrees to complete an M/WBE Utilization Plan ([Attachment 5](#), Form #1) for this RFP. DOH will review the submitted M/WBE 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 after Bidder’s receipt of such notice. DOH may disqualify a Bidder as being non-responsive to this RFP under the following circumstances:

- a) If a Bidder fails to submit a M/WBE 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 to provide meaningful participation by M/WBEs under the Contract in accordance with the goals for this RFP established by the Department;

The Contractor will be required to attempt to utilize, in good faith, any MBE or WBE identified in its M/WBE 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 M/WBE goals of the Contract.

If (a) the Department determines that the Contractor is not in compliance with the M/WBE requirements of the Contract and the Contractor refuses to comply with such requirements, or (b) the Department finds that the

Contractor has willfully and intentionally failed to comply with the M/WBE participation goals established in the Contract, the Contractor may be required to pay to the Department liquidated damages.

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

A 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 [PASRR\\_RFP24@health.ny.gov](mailto:PASRR_RFP24@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.)**

#### **4.13 Participation Opportunities for NYS Certified Service-Disabled Veteran-Owned Businesses**

Article 17-B of the New York State Executive Law provides for more meaningful participation in public procurement by NYS-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](mailto:VeteransDevelopment@ogs.ny.gov) to discuss methods of maximizing participation by SDVOBs on the Contract.

## **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 ("RFP"), 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.

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

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.

## **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 [PASRR\\_RFP24@health.ny.gov](mailto:PASRR_RFP24@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. Questions and answers, as well as any RFP updates and/or modifications, will be posted on NYSDOH’s website at <http://www.health.ny.gov/funding>, on or around the date listed in [Section 1.0](#) (Calendar of Events).

Potential Bidders may submit written questions and requests for clarification pertaining to this RFP between the issuance of this RFP and the deadline for the submission of written questions specified in [Section 1.0](#) (Calendar of Events). All questions and requests for clarification of this RFP should cite the relevant RFP, including the RFP number and title (RFP # 20482, Preadmission Screening and Resident Review (PASRR) Level II Evaluation and Determination), the section and paragraph number of this RFP or of the Attachment to this RFP to which the question relates, where applicable, and must be submitted via email to [PASRR\\_RFP24@health.ny.gov](mailto:PASRR_RFP24@health.ny.gov) no later than the Deadline for Submission of Written Questions specified in [Section 1.0](#) (Calendar of Events). Questions received after the deadline **may not** be answered.

If a potential Bidder discovers any ambiguity, conflict, discrepancy, omission, or other apparent error in this RFP, the Bidder shall immediately notify DOH of such error in writing at [PASRR\\_RFP24@health.ny.gov](mailto:PASRR_RFP24@health.ny.gov) and request that DOH clarify or modify the Terms of this RFP. If, prior to the deadline for the Submission of Bids, 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 bidding notwithstanding such apparent ambiguity, conflict, discrepancy, omission or other error. If awarded the Contract pursuant to the terms of this RFP, the Bidder shall not be entitled to an amendment to the terms of the Contract to correct or clarify any such ambiguity, conflict, discrepancy, omission or other error nor to any additional compensation by reason of the error or its correction.

## **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 specified 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 a prospective 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 [PASRR\\_RFP24@health.ny.gov](mailto:PASRR_RFP24@health.ny.gov) and request clarification or modification of the RFP.

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 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 Department'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 Department'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 bid is subject to withdrawal communicated in a writing signed by the bidder; 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 a bidder's proposal and/or to determine a bidder's compliance with the requirements of the solicitation.

#### **5.5 Debriefing**

Once an award has been made, a Bidder may request a debriefing of their Bid. The debriefing will be limited solely to the Bidder's own Bid and will not include any discussion of other bids. A Bidder's request for a debriefing must be received by the Department no later than fifteen (15) business days after the date of the award notification to the successful Bidder or non-award announcement to the unsuccessful Bidder, depending upon whether the Bidder requesting the debriefing is the successful Bidder or an unsuccessful Bidder.

#### **5.6 Protest Procedures**

In the event an unsuccessful Bidder wishes to protest the award resulting from this RFP, the protesting Bidder must 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 OSC's Guide to Financial Operations, which is available on-line at: <http://www.osc.state.ny.us/agencies/guide/MyWebHelp/>

## 5.7 Freedom of Information Law (“FOIL”)

All Bids may be disclosed or used by the Department to the extent permitted by law. The Department may disclose a Bid to any person for the purpose of assisting in evaluating the Bid or for any other lawful purpose. All Bids will become State agency records, which will be available to the public in accordance with the New York State Freedom of Information Law. **Any portion of the Bid 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 Bid as specified in Section 6.1.2. of this RFP.** If the Department agrees with the proprietary claim, the designated portion of the Bidder’s Bid 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.

## 5.8 Piggybacking

New York State Finance Law section 163(10)(e) (see also <https://ogs.ny.gov/procurement/piggybacking-using-other-existing-contracts-0>) allows the Commissioner of the NYS Office of General Services to consent to the use of the Contract entered into pursuant to this RFP by other New York State Agencies, and other authorized purchasers, subject to conditions and the Contractor’s consent.

## 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. An Administrative 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.

#### 6.1.1 Bidder’s Disclosure of Prior Non-Responsibility Determinations

Submit a completed and signed [Attachment 1](#), “Prior Non-Responsibility Determinations.”

#### 6.1.2 Freedom of Information Law – Proposal Redactions

Bidders must clearly and specifically identify any portion of their proposal that a Bidder believes constitutes proprietary information entitled to confidential handling as an exception to the Freedom of Information Law. See [Section 5.7](#), (Freedom of Information Law)

### **6.1.3 Vendor Responsibility Questionnaire**

Complete, certify, and file a New York State Vendor Responsibility Questionnaire. DOH recommends that bidders 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 [www.osc.state.ny.us/vendrep](http://www.osc.state.ny.us/vendrep).

Bidders 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](mailto:ciohelpdesk@osc.state.ny.us).

Bidders opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, [www.osc.state.ny.us/vendrep](http://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. Bidders should complete and submit the Vendor Responsibility Attestation, [Attachment 3](#).

### **6.1.4 Vendor Assurance of No Conflict of Interest or Detrimental Effect**

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

### **6.1.5 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."

### **6.1.6 Encouraging Use of New York Businesses in Contract Performance**

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

### **6.1.7 Bidder's Certified Statements**

Complete, sign and submit [Attachment 7](#), "Bidder's Certified Statements", which includes information regarding the Bidder. [Attachment 7](#) must be signed by an individual authorized to bind the Bidder contractually. Please indicate the title or position that the signer holds with the Bidder.

### **6.1.8 References**

Provide references using [Attachment 9](#), (References) for three (3) engagements specifically related to the scope of work. Include a full description of the engagement including duration, number of staff assigned and the products delivered as a result of the engagement. Provide firm names, addresses, contact names, telephone numbers, and email addresses.

### **6.1.9 Diversity Practices Questionnaire**

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

### **6.1.10 Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination**

Bidder should complete and 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.

### **6.1.11 Executive Order 16 Prohibiting Contracting with Businesses Conducting Business in Russia**

Bidder should complete and submit [Attachment 12](#) certifying the status of their business operations in Russia, if any, pursuant to Executive Order 16.

### **6.1.12 State Finance Law Consultant Disclosure Provisions**

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

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

The successful 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, the Office of the State Comptroller, and Department of Civil Service.

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

### **6.1.13 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 contractor's 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 <sup>^</sup> 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>.

Submit these Forms, available through these links:

- ST-220 CA: [http://www.tax.ny.gov/pdf/current\\_forms/st/st220ca\\_fill\\_in.pdf](http://www.tax.ny.gov/pdf/current_forms/st/st220ca_fill_in.pdf)
- ST-220 TD: [http://www.tax.ny.gov/pdf/current\\_forms/st/st220td\\_fill\\_in.pdf](http://www.tax.ny.gov/pdf/current_forms/st/st220td_fill_in.pdf)

## **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.

### **6.2.1 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.

### **6.2.2 Table of Contents**

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

### **6.2.3 Documentation of Bidder's Eligibility Responsive to Section 3.0 of RFP**

Bidders must be able to meet all the requirements stated in Section 3.0 of the RFP. The bidder must submit documentation that provides sufficient evidence of meeting the criterion/criteria set forth in Section 3.0. This documentation may be in any format needed to demonstrate how the Bidder meets the minimum qualifications to propose.

- A minimum of three (3) years' experience providing PASRR evaluations to the behavioral health population; and,
- A minimum of three (3) years' experience completing PASRR determinations to the behavioral health population.

### **6.2.4 Technical Proposal Narrative**

The Technical Proposal should provide satisfactory evidence of the Bidder's ability to meet, and expressly respond to, each element listed below.

Elements of the Technical Proposal are as follows:

#### **6.2.4.1 Experience Performing PASRR Level II Evaluations and Determinations:**

1. Bidders should describe their experience with Level II comprehensive psychiatric evaluations and similar MI examinations.



2. Bidders should specify any experience they possess with the mental health and intellectual disability populations, related to the long-term care system.
3. Bidders should describe their proposed plan for program development and delivery of services, targeting the mental health population.
4. Bidders should describe their governmental experience pertaining to the mental health population.
5. Bidders should detail any special techniques, skills and abilities they consider necessary to accomplish the RFP requirements.

#### **6.2.4.2 Approach to Performing Tasks:**

1. Bidder should describe how they plan to evaluate all NF applicants or residents with a MI, or suspected to have a MI, who are referred to the Contractor, regardless of whether the applicant or resident is eligible for Medicaid as the source of payment for the NF services.

Note: The average number of reviews for 2023 was 180 per month.<sup>2</sup>

2. Bidder should submit a proposed plan describing how they would respond to an incomplete referral.

Note: A referral is incomplete should it not include the minimum required information, which is shown below:

- a. Physician request for services which may be a written order or supporting documentation for Residential Healthcare Facility (RHCF) placement/stay;
  - b. Hospital/Community Patient Review Instrument (PRI) including the Resource Utilization Group (RUGs) calculation score;
  - c. A copy of the SCREEN form that triggered this requested Level II referral;
  - d. Complete medical history and physical including last two (2) years of inpatient history and treatment;
  - e. Current drug history;
  - f. Neurological evaluation including motor function and sensory function;
  - g. Psychosocial evaluation;
  - h. A detailed psychiatric evaluation. If this person has had a psychiatric hospitalization within the past 2 years, the applicable discharge summary is needed.
3. Bidder should describe their plan to incorporate a person-centered approach to conduct their PASRR evaluation, which may include obtaining additional information, as needed for each individual unique case.
  4. Bidder should describe their plan to evaluate the applicant or resident via a face-to-face, in-person evaluation in the hospital, NF, other setting in which the NF applicant or resident is receiving care, or in the NF applicant's home, if they are residing in the community.

Note: If the resident is a beneficiary of NYS Medicaid and residing in a facility outside NYS, the Contractor must make reasonable effort to complete such evaluation face-to-face, in-person.

5. Bidder should describe their plan to evaluate a NF applicant or resident upon request. This description should also detail their plan for out-of-state residents who are the fiscal responsibility of NYS Medicaid and who experience a significant change in condition and will require an evaluation.

Note: The anticipated number of reviews conducted for out of state NYS Medicaid recipients is approximately thirty-five (35) per year.

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<sup>2</sup> The New York Level I identification function is subject to change in the future, which could cause an increase in the amount of Level II referrals submitted to the Contractor.

6. Bidder should describe their plan to evaluate for, and determine if, the dementia diagnosis is primary [483.102(b)(1)].
7. Bidder should describe their plan to notify and confer with OPWDD prior to finalizing PASRR determinations for individuals known or suspected of also having an ID or RC.
8. Bidder should submit a plan and describe how they will ensure that the person who performs the Level II evaluation assesses whether a NF applicant or a resident with MI requires Specialized Services based on the New York State definition of Specialized Services.
9. Bidder should submit a plan describing how they intend to, for NF applicants who are recommended for Specialized Services, complete Level II evaluations and forward required documents to the OMH Clinical Director within the required timeframes.
10. Bidder should describe their assessment plan and process to determine what services would be recommended to live in the community, including, but not limited to, a Money Follows the Person (MFP) funded Nursing Home Transition Assistance Program Referral.
11. Bidder should describe their plan to submit the PASRR evaluation report and determination notice [483.128(l)] to the relevant, required entities. Bidder should detail which entities/individuals, under which circumstances they would receive them, how they would be explained to them, what timeframes such notices will be sent, including how they will be sent to the required entity, and filed in the individual's medical records.
12. Bidder should describe their plan to conduct determinations within the required timeframes from receipt of Level II referral [483.112(c)(1)].
13. Bidder should describe their Quality Assurance/Process Improvement system; Bidder should elaborate on how their system assures appropriateness of evaluator recommendations, provides for corrective actions and includes such things as individualized and periodic evaluator education and competency reviews.
14. Bidder should describe their implementation and maintenance plan for policies and procedures. Bidder should also describe their internal control process for oversight and monitoring of such policies and procedures to assure the confidentiality of personal identifiable data and information or records pertaining to the patient.

#### **6.2.4.3 Staffing Requirements**

The Bidder should provide a brief description of their organization which includes an organizational chart showing:

- organizational structure;
- all areas of responsibility;
- key individuals; and,

The bidder should also provide a staffing plan. The plan should describe:

- titles of staff being engaged;
- functional responsibilities of each of those titles;
- number and title of staff available and physical location of such staff proposed to be engaged in performance of the Level II comprehensive psychiatric evaluations statewide;
- their methods to recruit and train an adequate number of appropriately credentialed/ licensed, trained and qualified individuals to perform Level II evaluations [483.128(d)(1)(ii)] over the entire term of the contract;

- their process to adjust resources to accommodate fluctuation in evaluations by geographic regions; and,
- their means to provide staff to carry out the projected workload during each contract year and how they will provide staff to meet the scope of work over the entire contract period.

**NOTE: Resumes are not required and will not be evaluated**

#### 6.2.4.4 Reporting

The Bidder should provide examples of reports, prepared for similar purposes, as per Section 4.3 Reporting Requirements with a description of the process to prepare them and timely submit each report to the appropriate entities.

#### 6.2.4.5 Quarterly Quality Assurance Review

The bidder should describe their plan to conduct the quarterly quality assurance review.

#### 6.2.4.6 Hearing and Appeal System

The bidder should describe their plan to provide a hearing and appeal system for individuals who want to appeal their Level II determination [483.204(a)(2)].

### 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 RFP 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 product(s)/ services sought to be procured, including but not limited to travel, materials, equipment, overhead, profit and labor to the satisfaction of the Department 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.

	<b>Electronic Submission</b>	<b>Paper Submission</b>
<b>Administrative Proposal</b>	2 dedicated flash drives labeled “Administrative Proposal” containing a standard searchable PDF file with copy/read permissions only.	1 Originals 2 Copies
<b>Technical Proposal</b>	4 dedicated flash drives labeled “Technical Proposal” containing a standard searchable PDF file with copy/read permissions only.	1 Originals 4 Copies
<b>Cost Proposal</b>	2 dedicated flash drives labeled “Cost Proposal” containing standard searchable PDF file(s) with copy/read permissions only.	1 Originals 2 Copies

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# Preadmission Screening and Resident Review (PASRR) Level II Evaluations and Determinations – (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 # 20482)  
Attention: Karen Meier, Director  
One Commerce Plaza  
99 Washington Avenue  
Albany, New York 12210

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](#). Although not mandatory, such information helps the Department direct solicitations to the correct bidding community.

## **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 offerors" 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 RFP 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. *[e.g., 70% Technical, 30% Cost]*

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) Total Years of experience conducting PASRR evaluations.

## **8.2 Submission Review**

DOH will examine all proposals that are received in a proper and timely manner to determine if they meet the proposal submission requirements, as described in [Section 6.0](#) (Proposal Content) and [Section 7.0](#) (Proposal Submission), 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 Proposal 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 Cost 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 Cost Proposal(s) offered at the lowest final cost, using this formula:

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

A is Total price of lowest Cost Proposal;

B is Total price of Cost Proposal being scored; and

C is the Cost score.

The Cost Proposal 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 Proposal 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's 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 Bidder(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 Contract substantially in accordance with the terms of Attachment 8, DOH Agreement, to provide the required product(s) or 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.

## 9.0 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 Determinations](#)
2. [No-Bid Form](#)
3. [Vendor Responsibility Attestation](#)
4. [Vendor Assurance of No Conflict of Interest or Detrimental Effect](#)
5. [Guide to New York State DOH M/WBE Required Forms & Forms](#)
6. [Encouraging Use of New York Businesses in Contract Performance](#)
7. [Bidder's Certified Statements](#)
8. [DOH Agreement](#) (Standard Contract)
9. [References](#)
10. [Diversity Practices Questionnaire](#)
11. [Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination](#)
12. [Executive Order 16 Prohibiting Contracting with Business Conducting Business in Russia](#)

The following attachments are attached and included in this RFP:

- A. Proposal Document Checklist
- B. Cost Proposal
- C. Services of Lesser Intensity Definitions
- D. Specialized Services State Plan Amendment

**ATTACHMENT A  
PROPOSAL DOCUMENT CHECKLIST**

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

<b>RFP # 20482 - PREADMISSION SCREENING AND RESIDENT REVIEW LEVEL II EVALUATION AND DETERMINATION</b>		
<b>FOR THE ADMINISTRATIVE PROPOSAL</b>		
<b>RFP §</b>	<b>SUBMISSION</b>	<b>INCLUDED</b>
§ 6.1.1	Attachment 1 - Bidder's Disclosure of Prior Non-Responsibility Determinations	<input type="checkbox"/>
§ 6.1.2	Freedom of Information Law – Proposal Redactions (If Applicable)	<input type="checkbox"/>
§ 6.1.3	Attachment 3 - Vendor Responsibility Attestation	<input type="checkbox"/>
§ 6.1.4	Attachment 4 - Vendor Assurance of No Conflict of Interest or Detrimental Effect	<input type="checkbox"/>
§ 6.1.5	M/WBE Participation Requirements:	<input type="checkbox"/>
	Attachment 5 - Form 1	<input type="checkbox"/>
	Attachment 5 - Form 2 (If Applicable)	<input type="checkbox"/>
	Attachment 5 - Form 4	<input type="checkbox"/>
	Attachment 5 - Form 5 (If Applicable)	<input type="checkbox"/>
§ 6.1.6	Attachment 6 - Encouraging Use of New York Businesses	<input type="checkbox"/>
§ 6.1.7	Attachment 7 - Bidder's Certified Statements	<input type="checkbox"/>
§ 6.1.8	Attachment 9 - References	<input type="checkbox"/>
§ 6.1.9	Attachment 10 - Diversity Practices Questionnaire	<input type="checkbox"/>
§ 6.1.10	Attachment 11 - EO 177 Prohibiting Contracts with Entities that Support Discrimination	<input type="checkbox"/>
§ 6.1.11	Attachment 12 – EO 16 Contracting with Businesses Conducting Business in Russia	<input type="checkbox"/>
§ 6.1.12	State Finance Law Consultant Disclosure	<input type="checkbox"/>
§ 6.1.13	Sales and Compensating Use Tax Certification	<input type="checkbox"/>
<b>FOR THE TECHNICAL PROPOSAL</b>		
<b>RFP §</b>	<b>SUBMISSION</b>	<b>INCLUDED</b>
§ 6.2.1	Title Page	<input type="checkbox"/>
§ 6.2.2	Table of Contents	<input type="checkbox"/>
§ 6.2.3	Documentation of Bidder's Eligibility (Requirement)	<input type="checkbox"/>
§ 6.2.4	Technical Proposal Narrative	<input type="checkbox"/>
<b>FOR THE COST PROPOSAL REQUIREMENT</b>		
<b>RFP §</b>	<b>REQUIREMENT</b>	<b>INCLUDED</b>
§ 6.3	Attachment B- Cost Proposal	<input type="checkbox"/>

**ATTACHMENT B  
COST PROPOSAL  
RFP #20482**

Preadmission Screening and Resident Review (PASRR) Level II Evaluation and Determination

Bidder **must** use this form to detail the total costs of the Price per Level II Evaluation and Determination for each year of the Contract, as described below. Failure to comply with the format and content requirements may result in disqualification.

The Bidder **must** submit one single Price for each Level II Evaluation and Determination conducted for each year of the Contract Term. The bid price is to cover the cost of furnishing all of the product(s)/ services sought to be procured, including but not limited to travel, materials, equipment, overhead, profit and labor to the satisfaction of the Department and the performance of all work set forth in said specifications.

Bidders must propose only one single price for each Level II Evaluation and Determination for years one (1) and two (2) of the contract; then must propose a separate single Price for each Level II Evaluation and Determination for years three (3), four (4) and five (5) of the contract, should the Contract be extended as detailed in Section 2.3, Term of the Agreement. Bidders may not propose a range for the Price for each Level II Evaluation and Determination.

Bidders may propose a different single Price for each Level II Evaluation and Determination for years three (3), four (4) and five (5) then years 1 and 2 of the Contract, but such change may not increase by more than 4% of the single Price for each Level II Evaluation and Determination proposed in years 1 and 2.

Contract Year	Price for each Level II Evaluation and Determination	Annual Estimate of the Number of Level II Evaluations and Determinations
Year 1 and 2	\$	2160
Year 3, 4 and 5	\$	2160

**This number is based on historical numbers and is not a guarantee of the actual quantities expected annually. The actual number of Level II evaluations may be higher or lower. NYS DOH payment will be based on the actual completed quantities only per Section 5.4.**

By signing this Cost Proposal Form, bidder agrees that the prices included above are binding for 365 days from the proposal due date.

Bidder's Name: \_\_\_\_\_

\_\_\_\_\_  
Signature of Bidder's Authorized Representative Date

\_\_\_\_\_  
Printed Name of Bidder's Authorized Representative Title



## **ATTACHMENT C**

SERVICES OF LESSER INTENSITY DOCUMENT  
RFP #20482

### NYS PASRR Level II Mental Health Examples of Services of Lesser Intensity Recommendation for Mental Health Services of Lesser Intensity

#### Level 1:

- Psychiatric and medication evaluation by a psychiatrist or MD, with psychiatric consultation within 1 week after admission.
- Development of a written, person-centered, psychiatric plan of care.
- Ongoing psychiatric consultation and medication management by a psychiatrist or licensed prescriber every 2 weeks to monitor side effects of medication and to attain the highest efficacy with the lowest toxicity.
- Weekly recovery oriented clinical counseling focused on goal achievement by overcoming barriers due to the individual's mental illness.
- Therapeutic group interventions at least twice weekly that will assist in addressing the emotional, cognitive and behavioral symptoms of a mental health disorder.

#### Level 2:

- Psychiatric and medication evaluation by a psychiatrist or MD, with psychiatric consultation within 1 week after admission.
- Development of a written, person-centered, psychiatric plan of care.
- Ongoing psychiatric consultation and medication management by a psychiatrist or licensed prescriber every 4 weeks to monitor side effects of medication and to attain the highest efficacy with the lowest toxicity.
- Bi-monthly recovery oriented clinical counseling focused on goal achievement by overcoming barriers due to the individual's mental illness.
- Therapeutic group interventions at least weekly that will assist in addressing the emotional, cognitive and behavioral symptoms of a mental health disorder.

#### Level 3:

- Psychiatric and medication evaluation by a psychiatrist or MD, with psychiatric consultation within 1 week after admission.
- Development of a written, person-centered, psychiatric plan of care.
- Ongoing psychiatric consultation and medication management by a psychiatrist or licensed prescriber every 8 weeks to monitor side effects of medication and to attain the highest efficacy with the lowest toxicity.
- Bi-monthly recovery oriented clinical counseling focused on goal achievement by overcoming barriers due to the individual's mental illness.
- Therapeutic group interventions at least bi-monthly that will assist in addressing the emotional, cognitive and behavioral symptoms of a mental health disorder.

**ATTACHMENT D**

SPECIALIZED SERVICES STATE PLAN AMENDMENT

RFP #20482

[New York State Medicaid State Plan \(ny.gov\)](http://www.ny.gov)

**Attachment 4.39**

**New York  
1**

**State Plan Under Title XIX of the Social Security Act**

**DEFINITION OF SPECIALIZED SERVICES**

- 1) **For mental illness**, specialized services means the services specified by the State which [combined with services provided by the NF], result[s] in [the continuous and aggressive implementation of] an individualized plan of care that demands hospitalization.

**The care plan must require one or more of the following:**

- a. [Is developed and supervised by an interdisciplinary team, which includes a physician, qualified mental health professionals, and, as appropriate, other professionals.] Hospital level assessment or diagnosis of recent behavioral change;
- b. [Prescribes specific therapies and activities for the treatment of persons experiencing an acute episode of serious mental illness, which necessitates supervision by trained mental health personnel; and] Intensive observation, protection, assistance, or supervision from the professional staff of a hospital;
- c. [Is directed toward diagnosing and reducing the resident’s behavioral symptoms that necessitated institutionalization, improving his or her level of independent functioning, and achieving a functioning level that permits reduction in the intensity of mental health services to below the level of specialized services at the earliest possible time]. Introduction or change in medication or other somatic treatment that needs frequent round the clock monitoring by professional staff.

The plan must be developed and supervised by an interdisciplinary team which includes a physician, qualified mental health professional and, as appropriate, other professionals.

The plan must be directed toward diagnosing and reducing the resident’s behavioral symptoms that necessitated hospitalization, so as to improve his or her independent functioning to a level that permits reduction in the intensity of mental health services to below the level of specialized services at the earliest possible time.

- 2) **For mental retardation**, specialized services means the services specified by the State which, combined with services provided by the NF or other service providers, results in treatment which meets the requirements of Section 483.440(a)(1).

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