



**STATE OF CONNECTICUT  
OFFICE OF HEALTH STRATEGY  
STATE INNOVATION MODEL**

**REQUEST FOR PROPOSALS (RFP)  
COMMUNITY & CLINICAL INTEGRATION PROGRAM  
HEALTH EQUITY IMPROVEMENT VENDOR**

The Office of Health Strategy (OHS) seeks a Health Equity Improvement Vendor to support the State Innovation Model (SIM) initiative. The Health Equity Improvement vendor will provide technical assistance in support of the Community & Clinical Integration Program (CCIP) Health Equity Improvement standard. CCIP is comprised of evidence-based care delivery standards that participating Advanced Networks and Federally Qualified Health Centers receive support to achieve. There are several Connecticut FQHCs participating in a federally funded program called the Practice Transformation Network. These FQHCs, though not CCIP participants, are required to achieve the Health Equity Improvement standard as a condition of their participation in the Medicaid Shared Savings Program, Person Centered Medical Home Plus (PCMH+). This Request for Proposals seeks a vendor to assist those eight FQHCs in achieving the Standard.

The Vendor selected through this RFP should have a thorough understanding of the Health Equity Improvement Standard, including strategies for the collection of granular race and ethnicity data, data analysis techniques to identify gaps in health outcomes for subpopulations, and strategies to implement a Community Health Worker-led intervention to address those gaps. The Vendor should also be expert in working with FQHCs to achieve care delivery policy and process change.

This is a competitive solicitation. Interested parties are required to submit a proposal per the terms, conditions, requirements, and specifications of this Request for Proposals (RFP). The State anticipates awarding a 14-month contract for a maximum of \$250,000. **Responses to this Request for Proposals must be submitted electronically on or before September 12, 2018 at 3pm to [jenna.lupi@ct.gov](mailto:jenna.lupi@ct.gov).**

The State may modify the RFP prior to the deadline for submittals by issuance of an electronic addendum on the following website: <https://biznet.ct.gov/AccountMaint/Login.aspx>.

**Applicable Dates**

**RFP Release Date: 8/8/18**

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**Letter of Intent to Apply (requested, not required): 8/20/18**

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**Application Due Date: 9/12/18 3pm Eastern Time**

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**Anticipated Issuance of Notice of Award:**

**9/21/18**

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**Anticipated Period of Performance:**

**10/1/18 – 12/31/19**

# 1. Introduction

The Connecticut Office of Health Strategy's State Innovation Model (SIM) initiative is funded through a \$45 million grant from the Center for Medicare & Medicaid Innovation (CMMI) to test innovative payment and care delivery reforms that promote healthier people, better care and smarter spending. SIM makes investments in programs designed to improve how care is delivered, including medical home capabilities and the integration of new care team members, such as Community Health Workers (CHWs) and pharmacists, comprehensive assessments of patients with complex health needs including personal goals and social determinant risks, linkage to community resources, integration of behavioral health and strategies to improve health equity. More information is available at [www.healthreform.ct.gov/](http://www.healthreform.ct.gov/).

## Purpose of CCIP

The purpose of the SIM Community & Clinical Integration Program (CCIP) is to transform health care delivery in Connecticut by helping accountable healthcare organizations meet evidence-based standards across their network of primary care practices. CCIP is focused on accountable healthcare organizations selected to participate in the Connecticut Medicaid shared savings program, Person Centered Medical Home Plus (PCMH+). Although CCIP targets healthcare organizations participating in PCMH+, the program is designed to support performance in all shared savings programs, whether Medicaid, Medicare or commercial. CCIP focuses on capabilities that could lead to improvements in performance for all attributed patients, regardless of payer.

## CCIP Core Standards

PCMH+ participating entities that are not participating in the Practice Transformation Network grant (See below) are required to meet three Core Standards as a condition of participation in PCMH+. Each standard is comprised of elements and criteria that detail the expectations associated with the target capabilities. The Core Standards focus on the following capabilities:

1. Comprehensive care management
2. **Health equity improvement (focus of this RFP)**
3. Behavioral health integration

## Practice Transformation Network

In addition to SIM, the Center for Medicare and Medicaid Innovation (CMMI) launched the Practice Transformation Networks (PTN) opportunity to help clinicians achieve health transformation. Community Health Center Association of Connecticut (CHCACT) and its member FQHCs received a PTN award.

## CCIP Requirements for PTN Participants

**FQHCs participating in both PCMH+ and PTN are required to achieve the CCIP health equity improvement standard. These FQHCs are eligible to receive CCIP technical assistance support, which is the purpose of this RFP, because they are not otherwise receiving funding to achieve this Standard. Due to the similarity between PTN and CCIP, practices and FQHCs that participate in PTN are not eligible to participate in CCIP technical assistance support in the areas of complex care management and behavioral health integration.**

## CCIP Health Equity Improvement Standard

The Health Equity Improvement Standard, originally developed by the multi-stakeholder SIM Practice Transformation Task Force, can be viewed through the link below (Standard 2):

[http://www.healthreform.ct.gov/ohri/lib/ohri/work\\_groups/practice\\_transformation/ccip\\_standards/ccip\\_report\\_4-13-16\\_final\\_approved\\_3\\_30\\_16.pdf](http://www.healthreform.ct.gov/ohri/lib/ohri/work_groups/practice_transformation/ccip_standards/ccip_report_4-13-16_final_approved_3_30_16.pdf)

The Core Standards, including Health Equity Improvement, were streamlined in May, 2018. Bidders are encouraged to review the Standard (Standard 2) through the link below:

[http://www.healthreform.ct.gov/ohri/lib/ohri/work\\_groups/practice\\_transformation/ccip\\_standards\\_streamlined\\_core\\_20180411.pdf](http://www.healthreform.ct.gov/ohri/lib/ohri/work_groups/practice_transformation/ccip_standards_streamlined_core_20180411.pdf)

## Participating Entities that will be served through this RFP

The State implemented the CCIP program in early 2017, aligned with the launch of the first wave of PCMH+. At that time, there were six FQHCs participating in PCMH+ and PTN. However, at that time, the FQHCs were not required to complete the CCIP Health Equity Improvement standard. When their contracts were amended and extended in 2018, the requirement was added.

PCMH+ Wave 2 launched in April, 2018, introducing an additional two FQHCs to the program, for a total of eight FQHCs that are now required to complete the CCIP Health Equity Improvement Standard. These eight organizations are summarized below:

Participating Entities	Estimated # of Sites/Practices	Requirement	Target Completion Date
Charter Oak Health Center	2	Core Standard 2	December 2019
First Choice Health Centers	6	Core Standard 2	December 2019
United Community & Family Services	5	Core Standard 2	December 2019
OPTIMUS Healthcare	22	Core Standard 2	December 2019
Generations Family Health Center	4	Core Standard 2	December 2019
Southwest Community Health Center	4	Core Standard 2	December 2019
Fair Haven Community Health Center	7	Core Standard 2	December 2019
Cornell Scott Hill Health Center	11	Core Standard 2	December 2019

## Revised Implementation Strategy

The State is modifying its overall implementation strategy for CCIP. The components of the new strategy that are applicable to this RFP are as follows:

- 1. The State is procuring a vendor to provide technical assistance support to the FQHCs participating in PCMH+ and PTN to achieve Core Standard 2, Health Equity Improvement. The selection of this vendor is the purpose of this RFP.**

2. The State is in the process of procuring an independent vendor to conduct compliance reviews and validation surveys. The vendor will assess each PE's baseline capabilities related to the Health Equity Improvement Standard, and conduct two additional assessments to confirm achievement.
3. The State is in the process of procuring subject matter experts which it will make available free of charge to PEs, as needed and requested by the PEs or recommended by the State. The Subject Matter Experts relevant to the Health Equity Improvement Standard will be available to both the PEs and the Health Equity Improvement Vendor selected through this RFP.

## 2. Scope of Work and Qualifications

### 2.1 Scope of Work

Through this solicitation, the State is seeking a vendor that can support the eight FQHCs participating in PCMH+ and PTN to achieve the CCIP Health Equity Improvement Standard, which centers on three key elements:

1. Collection of granular race and ethnicity data, sexual orientation and gender identity data, and preferred language data document in the Electronic Health Record.
2. Analysis of the above collected data to identify gaps and healthcare outcomes for particular subpopulations and prioritize one disparity for which to pilot an intervention.
3. Implementation of a CHW intervention to address the identified health disparity.

The selected vendor will provide support to the Participating Entities (PEs) through individual consultations, peer-to-peer learning opportunities, and the provision of tools and resources. The State is seeking a vendor to complete the following activities:

#### 2.1.1 General Approach

- A. Meet regularly with the SIM leadership team on a mutually determined interval to discuss progress and strategies to overcome identified challenges;
- B. Align technical assistance strategy with existing practice transformation efforts including those undertaken through PCMH+ and PTN participation;
- C. Ensure that technical assistance provided is strictly focused on the Health Equity Improvement standard.

#### 2.1.2 Initial Planning

- A. Conduct an initial, in-person consultation with the leadership of each CCIP Participating Entity (PE) to assess current capabilities and identify gaps in performance relative to the Standard;
- B. Provide support to each PE to document the current capabilities and gaps related to achievement of the Standard;
- C. Provide support to each PE to develop a transformation plan that details the activities the PE will undertake to achieve the Standard, including a timeline, accountable personnel, and needed tools and resources. The plan should include strategies to:
  - a. Engage the EHR vendor(s)
  - b. Implement new data collection workflows
  - c. Analyze and prioritize data
  - d. Develop a CHW-led intervention
  - e. Launch a CHW-led intervention
  - f. Evaluate the intervention
- D. Assess the results of the baseline compliance review that will be conducted by the SIM-funded Validation Vendor and use these results to inform adjustments to the each PE's transformation plan;

#### 2.1.3 One-on-One Technical Assistance

- A. Lead regular, individual check-in calls or meetings with each PE to assess progress on the Transformation Plan, discuss challenges, and identify solutions;
- B. Provide hands-on support within practices to implement strategies identified in each PE's Transformation Plan;

- C. Provide direct assistance to each PE to achieve the activities described in the Transformation Plan. This may include participating in calls with the EHR vendor, providing guidance on data analysis techniques, or assisting in the development of the CHW intervention.
- D. Assess the results of the mid-point compliance reviews that will be conducted by the SIM-funded Validation Vendor and use these results to inform adjustments to the each PE's transformation plan;
- E. Consult with SIM-funded Subject Matter Experts, as needed or recommended by the State, to inform the technical assistance strategy for each PE;

#### 2.1.4 Group Technical Assistance

- A. Plan and host peer-to-peer learning opportunities in-person or via webinar that provide the PEs a platform to share best practices, as needed;
- B. Provide tools and resources to support the PEs in achieving the Standards. These may include, for example, workflow guides, scripts for the collection of granular race and ethnicity data, or toolkits to guide the development of a CHW-led intervention;

## 2.2 Qualifications

The State is seeking a vendor with expertise as follows:

### 2.2.1 Content Expertise

- A. Demonstrated understanding of the clinical value associated with the collection of granular race and ethnicity, language, and sexual orientation and gender identify data for the purpose of identifying gaps in health outcomes for subpopulations;
- B. Deep understanding of and familiarity with the unique strengths and challenges facing FQHCs- special consideration will be given to applicants with specific knowledge of Connecticut's FQHCs;
- C. Knowledge of effective strategies for requesting sensitive demographic information from patients;
- D. Familiarity with a range of Electronic Health Records and Care Management software, and a deep understanding of the processes to implement system-wide changes that would enable collection of new data in these systems;
- E. Knowledge of data analytics and stratification techniques to identify health outcome gaps by subpopulation
- F. Experience with and understanding of the roles CHWs serve to improve health care outcomes, particularly for specific subpopulations

### 2.2.2 Implementation Expertise

- G. Experience providing support to FQHCs to implement changes in care delivery, particularly clinical workflow redesign and program implementation, for the purpose of improving quality and reduce unnecessary costs;
- H. Extensive project management experience;
- I. Experience analyzing healthcare data extracted from EHRs;
- J. Experience negotiating changes in EHR functionality;
- K. Experience implementing CHW programs, integrating CHWs into care teams, and/or providing technical assistance/support in establishing CHW interventions

### 2.2.3 Preferred Expertise

- L. Strategic, creative, flexible, and adept at problem-solving, particularly in challenging healthcare environments

M. Direct experience implementing a CHW program in a clinical setting

### 2.3 Key Outputs and Timeline

The following table lists high-level outputs associated with the required scope of work for this project. The Respondent will also be responsible for the milestones and timelines they submit as part of their proposal. The Respondent should assess the below timeline and propose modifications based on their own subject-matter expertise.

**EXHIBIT 1: KEY OUTPUTS AND TIMELINE GRID**

Component	Key Milestones	Timeline
Initial Planning	Initial In-Person Consultation with Each PE	October 2018
	Documentation of each PE’s capabilities and gaps in achieving the Health Equity Improvement Standard, incorporating feedback from the compliance review	October 2018
	Complete Transformation Plan for each PE	November 2018
One-on-One Technical Assistance	Regular Check-In Meetings with each PE	November 2018- December 2019
	Hands-on practice-level support	
	Direct Assistance on Transformation Plan Activities	
	Consultations with SIM-funded Subject Matter Experts, as needed	
	Assess Feedback from compliance review and adjust Transformation Plan accordingly	June 2019
	Data Collection Strategy for each PE implemented	May 2019
	Initial Data Analysis Conducted and Priority Population Identified	August 2019
	CHW Pilot Launched	December 2019
Group Technical Assistance	Draft Peer-to-Peer Learning Opportunity Calendar for the project period	November 2018
	Assess needed topics for Peer-to-Peer Learning	Ongoing, Discuss with OHS on a monthly basis
	Identify and collect needed tools to support PEs in achieving the Standards	December 2018
	Reassess needed tools and resources to support PEs	Ongoing, Discuss with OHS on a monthly basis



## 3. Award Information

### 3.1 AWARD AMOUNT

The State expects to award multiple respondents the right to negotiate a contract in response to this RFP. The anticipated award maximum is \$250,000. The duration is listed in the Executive Summary of this document. The resulting contract will be subject to availability of funds.

### 3.2 ELIGIBILITY INFORMATION

The State is receptive to applications from individuals and teams, and from local, regional, or national organizations. To be eligible, the applicant must be recognized as a single legal entity by the state where it is incorporated, and must have a unique Taxpayer Identification Number (TIN) designated to receive payment. Applications will be screened to determine eligibility for further review using criteria detailed in this RFP and in applicable law.

### 3.3 PERIOD OF PERFORMANCE

The anticipated Period of Performance is listed on the Cover Page. The State will evaluate the contractor's success in achieving the objectives and milestones contained in the resulting contract. The contractor may have future opportunities for expanded scope and duration of the contract.

### 3.4 TERMINATION OF AWARD

Continued funding is dependent on satisfactory performance against the scope of work and outputs and a decision that continued funding is in the best interest of the State. Proposals will be funded subject to meeting terms and conditions specified in the resulting Contract. Awards may be terminated if these terms and conditions are not met.

### 3.5 ISSUING OFFICE AND CONTRACT ADMINISTRATION

The Office of Health Strategy is issuing this Request for Proposal (RFP) and is the only contact for this competitive bidding process. The address of the issuing office is as follows:

Name: Jenna Lupi  
Address: P.O. Box 1543  
Hartford, CT 06144  
E-Mail: [jenna.lupi@ct.gov](mailto:jenna.lupi@ct.gov)

OHS is responsible for administering the Connecticut State Innovation Model (SIM) Test Grant including the conduct of meetings, managing contracted transformation support, overseeing evaluation efforts, and communicating with stakeholders and state government. The SIM Test Grant is the primary source of funds for the agreement that results from this solicitation.

### 3.6 OFFICIAL CONTACT

For the purposes of this RFP, the State has designated that all communication must be in writing and submitted to [jenna.lupi@ct.gov](mailto:jenna.lupi@ct.gov).

Respondents, Prospective Respondents, and other interested parties are advised that any communication with the following about this RFP is strictly prohibited:

1. Any State employee(s),

2. Personnel of our state agency partners (including Department of Social Services, Department of Public Health and the Office of the State Comptroller) directly engaged in SIM related activities, and
3. Personnel under contract with the State or our state agency partners

Respondents or Prospective Respondents who violate this instruction risk disqualification from further consideration. If you are uncertain as to whether communication is permitted with an individual or entity, please submit your question to the [jenna.lupi@ct.gov](mailto:jenna.lupi@ct.gov).

# 4. Application Details

## 4.1 SUBMISSION INSTRUCTIONS

This Request for Proposals serves as the application package and contains all the instructions to enable a potential applicant to apply.

### 4.1.1 Letter of Intent to Apply

Respondents are strongly encouraged to submit non-binding, optional, Letters of Intent to Apply (LOI). Please refer to the Executive Summary related to the Letter of Intent due date.

**Please submit your Letter of Intent by email to: Jenna Lupi, [jenna.lupi@ct.gov](mailto:jenna.lupi@ct.gov).**

The LOI should provide a brief description of the individual or organization applying. The LOI must clearly identify the sender, including name, mailing address, telephone number, and email address. There are no format requirements for the LOI.

### 4.1.2 Respondents' Questions

The State encourages Respondents to submit questions by email to [jenna.lupi@ct.gov](mailto:jenna.lupi@ct.gov) seeking clarification of the RFP requirements. Questions will be reviewed on an ongoing basis and responses will be posted within 5 business days of receipt. The State will respond to all questions in one or more official addenda that will be posted to the Department of Administrative Services (DAS) website ([http://www.biznet.ct.gov/SCP\\_Search/BidResults.aspx](http://www.biznet.ct.gov/SCP_Search/BidResults.aspx)).

### 4.1.3 Submission Requirements

The proposal must be submitted to [jenna.lupi@ct.gov](mailto:jenna.lupi@ct.gov) no later than the established deadline listed in the Executive Summary. All documents should be submitted as PDFs, with the exception of the budget (Attachment D), which should be submitted as an Excel spreadsheet.

### 4.1.4 Format Requirements

In order to ensure readability by reviewers, fairness in the review process, and consistency among applications, each application must follow the below specifications to be reviewed:

- Use 8.5" x 11" letter-size pages with 1" margins (top, bottom, and sides).
- All pages of the Response must be paginated in a single sequence.
- Font size must be no smaller than 12-point
- Follow the page limits as detailed in the next section.

## 4.2 APPLICATION CONTENT

The application should be written primarily as a narrative with detailed specific actions highlighted to emphasize the proposed activity of the applicant. The applicant should organize their response based on the sections detailed below.

**I. PROPOSAL FACE SHEET**

See Attachment B

**II. TRANSMITTAL LETTER**

**(No more than 2 pages)**

Written statement that addresses:

- That the Respondent accepts without qualification:
  - Assurances and Acceptance (RFP Section 5.2.9);
  - all Mandatory Terms and Conditions;
- Brief statement outlining experience and qualifications to undertake this project;
- A statement that any submitted response and cost shall remain valid for one hundred twenty (120) days after the proposed due date or until the contract is approved, whichever comes first;
- Evidence of Qualified Entity: The Respondent shall provide written assurance to the State from its legal counsel that it is qualified to conduct business in Connecticut and is not prohibited by its articles of incorporation, bylaws, or the law under which it is incorporated from performing the services required under any resultant contract.
- Sanction – Disclosure: The Respondent shall provide a statement that attests that no sanction, penalty or compliance action has been imposed on the Respondent within three years immediately preceding the date of this RFP. If the Respondent proposes the use of a subcontractor, each proposed subcontractor must provide the same statement.
- Small, Minority or Women's Business Enterprise: Section 32-9e of the Connecticut General Statutes, superseded by Section 4a-60g sets forth the requirements of each executive branch agency relative to the Connecticut Small Business Set-Aside program. Pursuant to that statute, twenty-five (25%) of the average total of all contracts let for each of the three previous fiscal years must be set aside. The Respondent shall provide a statement that they intend to make a "good-faith effort" to set aside a portion of this contract for a small, minority or women's business enterprise as a subcontractor. Prospective Respondents may obtain a list of firms certified to participate in the Set-Aside program by contacting the Department of Administrative Services at the DAS website.

**IV. PROJECT NARRATIVE**

**(4 pages, single-spaced)**

The Project Narrative should address how the Respondent will carry out the required service components identified in Section 2.1. The Respondent should organize the narrative in the following bolded sections:

**1. Overall Approach**

- a. Describe the Respondent's overall model and approach to the work envisioned in this RFP.
- b. Describe how the work will be organized and managed.

**2. Initial Planning**

- a. Describe how the Respondent will undertake the Initial Planning activities described in section 2.1.2.
- b. Describe anticipated challenges to the Initial Planning process and the Respondent's approach to mitigate those challenges.

**3. One-on-One Technical Assistance**

- a. Describe how the Respondent will undertake the One-on-One Technical Assistance activities described in section 2.1.3.
- b. Describe anticipated challenges to the One-on-One Technical Assistance and the Respondent's approach to mitigate those challenges.

**4. Group Support**

- a. Describe how the Respondent will undertake the Group Technical Assistance activities described in section 2.1.4.
- b. Describe anticipated challenges to the Group Technical Assistance and the Respondent's approach to mitigate those challenges.

**V. QUALIFICATIONS AND PROJECT MANAGEMENT**

**(3 pages, single-spaced)**

**1. Qualifications and Experience**

This section should describe the background and experience of the Respondent as necessary to provide the subject matter expertise discussed in Section 2.1.

- a. Describe the Respondent's overall qualifications and background to carry out a project of this nature and scope.
- b. Describe the Respondent's content, implementation, and preferred expertise (outlined in Section 2.2) as applicable.
- c. Describe relevant contracts held or projects completed within the past five years with a scope similar to this one. What did you learn from your successes and failures that you would apply here?

**2. References**

Provide information for at least three references. Must include brief description of work done, the organization's name, specific contact person name, address, phone number, and e-mail.

**3. Organizational and Project Structure**

- a. Provide an organizational structure of the company indicating lines of authority and detail how this proposed project structure fits within the larger structure of the organization.
- b. Describe how the project structure will enable effective implementation.

**4. Project Management**

- a. Explain the staffing and management model of the organization as well as for the specific team who would be working on this project.
- b. Detail the names of proposed personnel, their proposed role, expertise, functions and time commitments.
- c. Include the name of a Project Manager who will serve as a single point of contact for the implementation of the project and who will be available to provide status updates and attend all project meetings at the request of the OHS.
- d. Provide assurance of the capacity to deploy the required staff and resources to complete the scope of work, including identifying any other current or planned contractual obligations that might have an influence on the Respondent's capacity.

- e. Identify and describe the role of any and all subcontractors and subject matter experts. Provide the following for each proposed subcontractor:
  - Legal Name of Agency, Address, FEIN
  - Contact Person, Title, Phone, Fax, E-mail
  - Services To Be Provided Under Subcontract

**Note:** The resultant contractor must receive written approval from the OHS for staff changes. These changes must not adversely affect the ability of the Contractor to meet any requirement or deliverable set forth in this RFP and/or the resultant contract.

**5. Resumes (limit 2 pages per resume)**

Provide resumes for each proposed personnel and subcontractor. The resume shall include contract-related experience, credentials, education, training, and work experience.

**6. Project Plan and Timeline**

Provide a project plan and timeline for completing proposed deliverables. Provide key activities and outputs, beginning and end dates for each, and the accountable person. Refer to Section 2.3 for Project Milestones.

**7. Work Samples**

The Respondent may, but is not required to, provide two work samples related to this project. Work samples do not count towards the page limit.

**VI. COST PROPOSAL**

**(3 pages, single-spaced)**

Identify all proposed personnel with a corresponding all-inclusive hourly rate of compensation and an estimate of hours to be expended by each individual in support of the project, broken down by the following categories:

- a. Initial Planning (Section 2.1.2)
- b. One-on-One Technical Assistance Support (Section 2.1.3)
- c. Group Technical Assistance Support (Section 2.1.4)

Identify travel costs separately. Provide a narrative explanation to support the proposed budget based on the template in **Attachment C**.

**I. STANDARD FORMS**

The Respondent shall submit the following standard forms:

- o [Procurement Agreement Signatory Acceptance](#): Proposal must include a Statement of Acceptance, without qualification of all terms and conditions within this RFP and the [Mandatory Terms and Conditions](#) for a PSA contract (with proposal, see Attachment B)
- o [Consulting Agreement Affidavit](#) (with proposal, OPM Ethics Form 5)
- o [Affirmation of Receipt of State Ethics Laws Summary](#) (with proposal, OPM Ethics Form 6)
- o [Iran Certification](#) (with proposal, OPM Ethics Form 7)
- o [Gift and Campaign Contributions](#) (prior to contract, OPM Ethics Form 1)
- o [Nondiscrimination Certification Form](#) (prior to contract)

# 5. Evaluation and Selection

## 5.1 REVIEW AND SELECTION PROCESS

It is the intent of the State to conduct a comprehensive, fair and impartial evaluation of the Responses received to this competitive procurement. Only those submissions that the State deems responsive to the RFP requirements will be evaluated and scored.

A team consisting of qualified experts will review the applications to assess the degree of responsiveness, and clarity in their plan to meet the project goals and milestones. The review process will include the following:

- To be considered for review, applications will first be screened for completeness and adherence to eligibility.
- The review panel will assess each application to determine the merits of the proposal. The State reserves the right to request that Respondents revise or otherwise modify their proposals and budget based on State recommendations.
- The State may elect to conduct interviews with the finalists prior to awarding the right to negotiate a contract. Any expenses incurred by the Respondent to participate in such interview shall be the responsibility of the Respondent.
- The results of the review of the applications will be used to advise the State approving official. Final award decisions will be made by the designated approving official. In making these decisions, the approving official will take into consideration: recommendations of the review panel; the readiness of the applicant to complete the scope of work and objectives; and the reasonableness of the estimated cost to the government and anticipated results.
- The SIM State reserves the right to conduct negotiations with applicants upon receipt of their proposals

## 5.2 Procurement Process

### 5.2.1 Contract Execution

The contract developed as a result of this RFP is subject to State contracting procedures for executing a contract, which includes approval by the Connecticut Office of the Attorney General. Contracts become executed upon the signature of the Office of the Attorney General and no financial commitments can be made until and unless the contracts have been approved by the Office of the Attorney General. The Office of the Attorney General reviews the contract only after the Program Director and the Contractor have agreed to the provisions.

### 5.2.2 Acceptance of Content

If acquisition action ensues, the contents of this RFP and the Response of the successful Respondent will form the basis of contractual obligations in the final contract. The resulting contract will be a Personal Service Agreement (PSA) contract between the successful Respondent and the State. The State is solely responsible for rendering decisions in matters of interpretation on all terms and conditions.

### 5.2.4 Appeal Process

The Respondent may appeal any aspect of the competitive procurement; however, such appeal must be in writing and must set forth facts or evidence in sufficient and convincing detail for the State to determine whether – during any aspect of the competitive procurement – there was a failure to comply with the State’s

statutes, regulations, or standards concerning competitive procurement or the provisions of the Procurement Document. Appeals must be submitted by the Respondent to Shiu-Yu Schiller (Shiu-Yu.Schiller@ct.gov), with a copy to the Contract Administrator.

Respondents may submit an Appeal to the State any time after the submission due date, but not later than thirty (30) days after the State notifies Respondents about the outcome of a competitive procurement. The e-mail sent date or the postmark date on the notification envelope will be considered “day one” of the thirty (30) days.

Following the review process of the documentation submitted, but not later than thirty (30) days after receipt of any such Appeal, a written decision will be issued and delivered to the Respondent who filed the Appeal and any other interested party. The decision will summarize the State’s process for the procurement in question; and indicate the Agency Head's finding(s) as to the merits of the Respondent's Appeal.

Any additional information regarding the Debriefing and/or the Appeal processes may be requested from the Official Contact for this RFP.

#### 5.2.5 Contest of Solicitation of Award

Pursuant to Section 4e-36 of the Connecticut General Statutes, “Any Respondent or RESPONDENT on a state contract may contest the solicitation or award of a contract to a subcommittee of the State Contracting Standards Board...” Refer to the State Contracting Standards Board website at [www.ct.gov/scsb](http://www.ct.gov/scsb).

#### 5.2.6 Disposition of Responses- Rights Reserved

Upon determination that its best interests would be served, the State shall have the right to the following:

1. **Cancellation:** Cancel this procurement at any time prior to contract award.
2. **Amend procurement:** Amend this procurement at any time prior to contract award.
3. **Refuse to accept:** Refuse to accept, or return accepted Responses that do not comply with procurement requirements.
4. **Incomplete Business Section:** Reject any Response in which the Business Section is incomplete or in which there are significant inconsistencies or inaccuracies. The State reserves the right to reject all Responses.
5. **Prior contract default:** Reject the submission of any Respondent in default of any prior contract or for misrepresentation of material presented.
6. **Received after due date:** Reject any Response that is received after the deadline.
7. **Written clarification:** Require Respondents, at their own expense, to submit written clarification of their Response in a manner or format that the State may require.
8. **Oral clarification:** Require Respondents, at their own expense, to make oral presentations at a time selected and in a place provided by the State. Invite Respondents, but not necessarily all, to make an oral presentation to assist the State in their determination of award. The State further reserves the right to limit the number of Respondents invited to make such a presentation. The oral presentation shall only be permitted for clarification purposes and not to allow changes to be made to the submission.
9. **No changes:** Allow no additions or changes to the original Response after the due date specified herein, except as may be authorized by the State.



10. **Property of the State:** Own all Responses submitted in response to this procurement upon receipt by the State.
11. **Separate service negotiation:** Negotiate separately any service in any manner necessary to serve the best interest of the State.
12. **All or any portion:** Contract for all or any portion of the scope of work or tasks contained within this RFP.
13. **Most advantageous Response:** Consider cost and all factors in determining the most advantageous Response for the State when awarding the right to negotiate a contract.
14. **Technical defects:** Waive technical defects, irregularities and omissions, if in its judgment the best interests of the State will be served.
15. **Privileged and confidential communication:** Share the contents of any Response with any of its designees for purposes of evaluating the Response to make an award. The contents of all meetings, including the first, second and any subsequent meetings and all communications in the course of negotiating and arriving at the terms of the Contract shall be privileged and confidential.
16. **Best and Final Offers:** Seek Best and Final Offers (BFO) on price from Respondents upon review of the scored criteria. In addition, the State reserves the right to set parameters on any BFOs it receives.
17. **Unacceptable Responses:** Reopen the bidding process if the State determines that all Responses are unacceptable.

#### 5.2.7 Qualification Preparation Expenses

The State assumes no liability for payment of expenses incurred by Respondents in preparing and submitting Responses to this procurement.

#### 5.2.8 Response Date and Time

To be considered for selection a Response must be received by the State by the date and time stated in the Cover Page of this RFP. Respondents should not interpret or otherwise construe receipt of a Response after the closing date and time as acceptance of the Response, since the actual receipt of the document is a clerical function. The State suggests the Respondent e-mail the proposal with receipt confirmation. Respondents must address all RFP communications to the State.

#### 5.2.9 Assurances and Acceptances

1. **Independent Price Determination:** By submission of a Response and through assurances given in its Transmittal Letter, the Respondent certifies that in connection with this procurement the following requirements have been met.
  - a. **Costs:** The costs proposed have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such process with any other organization or with any competitor;
  - b. **Disclosure:** Unless otherwise required by law, the costs quoted have not been knowingly disclosed by the Respondent on a prior basis directly or indirectly to any other organization or to any competitor;
  - c. **Competition:** No attempt has been made or will be made by the Respondent to induce any other person or firm to submit or not to submit a Response for the purpose of restricting competition;
  - d. **Prior Knowledge:** The Respondent had no prior knowledge of the RFP contents prior to actual receipt of the RFP and had no part in the RFP development; and

- e. **Offer of Gratuities:** The Respondent certifies that no elected or appointed official or employee of the State of Connecticut has or will benefit financially or materially from this procurement. Any contract arising from this procurement may be terminated by the State if it is determined that gratuities of any kind were either offered to or received by any of the aforementioned officials or employees from the contractor, the contractor's agent or the contractor's employee(s).
- 2. **Valid and Binding Offer:** Each Response represents a valid and binding offer to the State to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto.
- 3. **Press Releases:** The Respondent agrees to obtain prior written consent and approval from the State for press releases that relate in any manner to this RFP or any resulting contract.
- 4. **Restrictions on Communications with State Staff:** The Respondent agrees that from the date of release of this RFP until the State makes an award that it shall not communicate with State staff on matters relating to this RFP except as provided herein through the State. Any other communication concerning this RFP with any of the State's staff may, at the discretion of the State, result in the disqualification of that Respondent's Submission.
- 5. **Acceptance of the State's Rights Reserved:** The Respondent accepts the rights reserved by the State.
- 6. **Experience:** The Respondent has sufficient project design and management experience to perform the tasks identified in this RFP. The Respondent also acknowledges and allows the State to examine the Respondent's claim with regard to experience by allowing the State to review the related contracts or to interview contracting entities for the related contracts.

#### 5.2.10 Incurring Costs

The State is not liable for any cost incurred by the Respondent prior to the effective date of a contract.

#### 5.2.11 Statutory and Regulatory Compliance

By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, the following:

- 1. Freedom of Information, C.G.S. § 1-210(b). This Contract is subject to C.G.S. § 1-1210(b). The Freedom of Information Act (FOIA) requires the disclosure of documents in the possession of the State upon request of any citizen, unless the content of the document falls within certain categories of exemption, as defined by C.G.S. § 1-1210(b). The proposer shall indicate if it believes that certain documents or a portion(s) of documents, as required by this RFP is confidential, proprietary or trade secret by clearly marking such in its response to this RFP. The State will make an independent determination as to the validity under FOIA of the proposer's marking of documents or portions of documents it believes should be exempt from disclosure. While a proposer may claim an exemption to the State's FOIA, the final administrative authority to release or exempt any or all material so identified rests with the State. The State has no obligation to initiate, prosecute, or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information pursuant to a FOIA request. The proposer has the burden of establishing the availability of any FOIA exemption in any proceeding where it is an issue. In no event shall the State or any of its employees have any liability for disclosure of documents or information in the possession of the State and which the State or its employees believe(s) to be required pursuant to the FOIA or other requirements of law.
- 2. Contract Compliance, C.G.S. § 4a-60 and Regulations of CT State Agencies § 46a-68j-21 thru 43, inclusive. CT statute and regulations impose certain obligations on State agencies (as well as

contractors and subcontractors doing business with the State) to insure that State agencies do not enter into contracts with organizations or businesses that discriminate against protected class persons.

3. Consulting Agreements, C.G.S. § 4a-81. Proposals for State contracts with a value of \$50,000 or more in a calendar or fiscal year, excluding leases and licensing agreements of any value, shall include a consulting agreement affidavit attesting to whether any consulting agreement has been entered into in connection with the proposal. As used herein "consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (a) Providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (b) Contacting, whether in writing or orally, any executive, judicial, or administrative office of the State, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction, requests for information or (c) Any other similar activity related to such contract. Consulting agreement does not include any agreements entered into with a consultant who is registered under the provisions of C.G.S. Chapter 10 as of the date such affidavit is submitted in accordance with the provisions of C.G.S. § 4a-81. The Consulting Agreement Affidavit (OPM Ethics Form 5) is available on OPM's website at [http://www.ct.gov/opm/fin/ethics\\_forms](http://www.ct.gov/opm/fin/ethics_forms)
4. Gift and Campaign Contributions, C.G.S. §§ 4-250 and 4-252(c); Governor M. Jodi Rell's Executive Orders No. 1, Para. 8 and No. 7C, Para. 10; C.G.S. § 9-612(g)(2). If a proposer is awarded an opportunity to negotiate a contract with an anticipated value of \$50,000 or more in a calendar or fiscal year, the proposer must fully disclose any gifts or lawful contributions made to campaigns of candidates for statewide public office or the General Assembly. Municipalities and CT State agencies are exempt from this requirement. The gift and campaign contributions certification (OPM Ethics Form 1) is available on OPM's website at [http://www.ct.gov/opm/fin/ethics\\_forms](http://www.ct.gov/opm/fin/ethics_forms)
5. Nondiscrimination Certification, C.G.S. §§ 4a-60(a)(1) and 4a-60a(a)(1). If a proposer is awarded an opportunity to negotiate a contract, the proposer must provide the Department with written representation or documentation that certifies the proposer complies with the State's nondiscrimination agreements and warranties. A nondiscrimination certification is required for all State contracts—regardless of type, term, cost, or value. Municipalities and CT State agencies are exempt from this requirement. The nondiscrimination certification forms are available on OPM's website at [http://www.ct.gov/opm/fin/nondiscrim\\_forms](http://www.ct.gov/opm/fin/nondiscrim_forms).

#### 5.2.12 Key Personnel

The State reserves the right to approve any additions, deletions, or changes in key personnel, with the exception of key personnel who have terminated employment. The department also reserves the right to approve replacements for key personnel who have terminated employment. The State further reserves the right to require the removal and replacement of any of the proposer's key personnel who do not perform adequately, regardless of whether they were previously approved by the State.

#### 5.2.13 Other

Bidding on and/or being awarded this contract shall not automatically preclude the Respondent from bidding on any future contracts related to the SIM. Continued funding is contingent upon the ongoing availability of funds, satisfactory program performance, and demonstrated need for these services.

# 6. DEFINITIONS AND ACRONYMS

## DEFINITIONS

**Advanced Network:** An independent practice association, large medical group, clinically integrated network, or integrated delivery system organization that has entered into a shared savings program (SSP) arrangement with at least one payer.

**Contract:** The contract awarded to the successful Respondents pursuant to this RFP.

**Community & Clinical Integration Program (CCIP):** The initiative established by the State Innovation Model to provide support to healthcare organizations participating in the Medicaid Shared Savings Program (PCMH+) in order to improve primary care delivery capabilities that may result in improved performance on PCMH+ measures.

**Federally Qualified Health Center:** An entity that meets the definition of an FQHC in section 1905(l)(2)(B) of the Social Security Act and meets all requirements of the HRSA Health Center Program, including both organizations receiving grants under Section 330 of the Public Health Service Act and also FQHC Look-Alikes, which are organizations that meet all of the requirements of an FQHC but do not receive funding from the HRSA Health Center Program.

**Person Centered Medical Home Plus (PCMH+):** The Medicaid Shared Savings Program that launched in 2017 as part of the State Innovation Model.

**Participating Entity (PE):** An Advanced Network or FQHC participating in the Community & Clinical Integration Program.

**Respondent:** An organization that has submitted a proposal to the SIM State in response to this RFP.

**Subcontractor:** An individual (other than an employee of the Contractor) or business entity hired by a Contractor to provide a specific service as part of a Contract with the SIM State as a result of this RFP.

## ACRONYMS

**CCIP** Community & Clinical Integration Program

**CMMI** Center for Medicare & Medicaid Innovations

**DPH** Department of Public Health (CT)

**FQHC** Federally Qualified Health Center

**OHS** Office of Health Strategy

**OPM** Office of Policy and Management

**PCMH+** Person-Centered Medical Home Plus

**PE** Participating Entity

**PTN** Practice Transformation Network

**RFP** Request for Proposals

**SIM** State Innovation Model

# Attachment A: Proposal Face Sheet

OFFICE OF HEALTH STRATEGY  
REQUEST FOR PROPOSALS (RFP)  
Health Equity Improvement Vendor  
PROPOSAL FACE SHEET

1	<p><b>RESPONDING AGENCY</b> (Legal name and address of organization as filed with the Secretary of State):</p> <p>Legal Name: _____</p> <p>Street Address: _____</p> <p>Town/City/State/Zip: _____</p> <p>FEIN: _____</p>
2	<p><b>DIRECTOR/CEO</b></p> <p>Name: _____ Title: _____</p> <p>Telephone: _____ FAX: _____</p> <p>Email: _____</p>
3	<p><b>CONTACT PERSON</b></p> <p>Name: _____ Title: _____</p> <p>Telephone: _____ FAX: _____</p> <p>Email: _____</p>

# Attachment B: Procurement And Contractual Agreements Signatory Acceptance

## Statement of Acceptance

The terms and conditions contained in this Request for Proposals constitute a basis for this procurement. These terms and conditions, as well as others so labeled elsewhere in this document are mandatory for the resultant contract. The Office of Health Strategy is solely responsible for rendering decisions in matters of interpretation on all terms and conditions.

On behalf of \_\_\_\_\_

I, \_\_\_\_\_ agree to accept the Mandatory Terms and Conditions and all other terms and conditions as set forth in the Health Equity Improvement Vendor Request for Proposals.

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

# Attachment C: Budget Narrative Guidance

## BUDGET NARRATIVE

The Respondent must provide a budget narrative according to the instructions provided here. Costs must be reasonable and consistent with the proposed scope.

The resultant Contract shall include a maximum cost for the contract period for the proposed services. Payment shall be based on actual costs incurred not to exceed the Contract maximum for each budget category, and for the Contract overall.

### Summary Template Table

Activity	Personnel & Rates			Budget
	Position A	Position B	Position C	
A. Initial Planning	Hours	Hours	Hours	
1. Task	Hours	Hours	Hours	
2. Task	Hours	Hours	Hours	
B. One-on-One Technical Assistance	Hours	Hours	Hours	
1. Task	Hours	Hours	Hours	
2. Task	Hours	Hours	Hours	
C. Group Technical Assistance	Hours	Hours	Hours	
1. Task	Hours	Hours	Hours	
2. Task	Hours	Hours	Hours	
<b>TOTAL HOURS</b>	Total	Total	Total	
<b>PERSONNEL BUDGET</b>	Total	Total	Total	
<b>TRAVEL BUDGET</b>	Total	Total	Total	
<b>TOTAL BUDGET</b>				

### Please include narrative justification as follows:

#### **A. Personnel**

For each requested position, provide the following information: name of staff member, if available; annual salary; percentage of time budgeted for this program; total months of salary budgeted; and total salary requested. Also, provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of program objectives.

<b><i>Position Title and Name</i></b>	<b><i>Total Amount Requested</i></b>
<i>Project Coordinator Susan Taylor</i>	<i>\$52,500</i>
<i>Finance Administrator John Johnson</i>	<i>\$21,375</i>
<i>Outreach Supervisor (Vacant*)</i>	<i>\$40,500</i>
<b>Total Personnel Costs</b>	<b><i>\$114,375</i></b>

**Sample Justification**

*The format may vary, but the description of responsibilities should be directly related to specific program objectives.*

Job Description: Project Coordinator - (Name)

*This position directs the overall operation of the project; responsible for overseeing the implementation of project activities; coordination with other agencies; development of materials, provisions of in service and training; conducting meetings; designs and directs the gathering, tabulating and interpreting of required data; responsible for overall program evaluation and for staff performance evaluation; and is the responsible authority for ensuring necessary reports/documentation are submitted to HHS. This position relates to all program objectives.*

**Note:** The "direct salary and institutional base salary" for contracted staff are limited to the Executive Level II of the Federal Executive Pay scale. FY16 Appropriations law increased the Executive Level II salary to \$185,100.

**B. Travel**

Provide a narrative justification describing the travel staff members will perform and justification. List where travel will be undertaken, number of trips planned, who will be making the trip, and approximate dates. If mileage is to be paid, provide the number of miles and the cost per mile. If travel is by air, provide the estimated cost of airfare. If per diem/lodging is to be paid, indicate the number of days and the amount of daily per diem as well as the number of nights and estimated cost of lodging. Include the cost of ground transportation when applicable.

**Sample**

*In-State Travel:*

<i>1 trip x 2 people x 500 miles r/t x .27/mile</i>	<i>=</i>	<i>\$270</i>
<i>2 days per diem x \$37/day x 2 people</i>	<i>=</i>	<i>\$148</i>
<i>1 nights lodging x \$67/night x 2 people</i>	<i>=</i>	<i>\$134</i>
<i>25 trips x 1 person x 300 miles avg. x .27/mile</i>	<i>=</i>	<i><u>\$2,025</u></i>
<i>Total</i>	<i>=</i>	<i>\$2,577</i>

**Sample Justification**

*The Project Coordinator and the Outreach Supervisor will travel to (location) to attend an eligibility conference. The Project Coordinator will make an estimated 25 trips to local outreach sites to monitor program implementation.*

**Withhold**

The OHS shall withhold a percentage of the total contract value to be paid to the Contractor that shall only be paid to the Contractor upon the Contractor's completion and submission of all deliverables to the OHS and the PMO's acceptance of the same. The amount of the withhold shall be 10% of the total contract value. The contingencies for payment of the withhold shall be agreed to during contract negotiations.



In the Budget Narrative, the Respondent shall acknowledge and agree to a withhold of 10% of the total contract value and to negotiate, in good faith, the terms of the contract including but not limited to the contingencies for release of the withhold.