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**PROCUREMENT NOTICE**

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**LEGAL NOTICE**

Request for Proposal # 2020-0902  
For  
Connecticut Quitline Services

The State of Connecticut, Department of Public Health is seeking proposals to implement and maintain the Connecticut Quitline, a comprehensive telephone- and web-based tobacco use cessation coaching service that will assist Connecticut's residents in their efforts to quit tobacco use through the provision of individualized counseling, information, and self-help materials.

This Request for Proposals is available in electronic format on the State Contracting Portal at [https://biznet.ct.gov/SCP\\_Search/Default.aspx?Acclast=2](https://biznet.ct.gov/SCP_Search/Default.aspx?Acclast=2) or from the Department's Official Contact:

Name: Barbara Metcalf Walsh  
Address: 410 Capitol Avenue, MS#11 HLS, Hartford CT, 06134  
Phone: 860-509-8251  
Fax: 860-509-7854  
E-Mail: DPHTobacco@ct.gov

The RFP is also available on the Department's website at [www.ct.gov/dph/rfp](http://www.ct.gov/dph/rfp). A printed copy of the RFP can be obtained from the Official Contact upon request. Deadline for submission of proposals is December 20, 2018, 2:00 P.M. Eastern Standard time.

*This document is configured for 2-sided printing.*

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## I. GENERAL INFORMATION

### ■ A. INTRODUCTION

#### 1. RFP Name or Number.

Connecticut Quitline Services, DPH RFP # 2020-0902

#### 2. Summary.

The State of Connecticut, Department of Public Health (hereafter the Department) is seeking proposals to implement and maintain the Connecticut Quitline, a comprehensive telephone- and web- based tobacco use cessation coaching service that will assist Connecticut's residents in their efforts to quit tobacco use through the provision of individualized counseling, information, and self-help materials.

#### 3. Synopsis.

The Department of Public Health is seeking applicants to implement and maintain the Connecticut telephone Quitline for Connecticut residents who are trying to quit using tobacco.

#### 4. Commodity Codes.

The services that the Department wishes to procure through this RFP are as follows:

0098: Medical Services or Medical Testing Services  
 0600: Services (Professional, Support, Consulting and Misc. Services)  
 1000: Healthcare Services

### ■ B. ABBREVIATIONS / ACRONYMS / DEFINITIONS

BFO	Best and Final Offer
C.G.S.	Connecticut General Statutes
CHRO	Commission on Human Rights and Opportunity (CT)
CT	Connecticut
DAS	Department of Administrative Services (CT)
DPH	Department of Public Health (CT)
FOIA	Freedom of Information Act (CT)
IRS	Internal Revenue Service (US)
LOI	Letter of Intent
OAG	Office of the Attorney General
OPM	Office of Policy and Management (CT)
OSC	Office of the State Comptroller (CT)
POS	Purchase of Service
P.A.	Public Act (CT)
RFP	Request for Proposal
SEEC	State Elections Enforcement Commission (CT)
U.S.	United States

- *contractor*: a private provider organization, CT State agency, or municipality that enters into a POS contract with the Department as a result of this RFP
- *proposer*: a private provider organization, CT State agency, or municipality that has submitted a proposal to the Department in response to this RFP
- *prospective proposer*: a private provider organization, CT State agency, or municipality that may submit a proposal to the Department in response to this RFP, but has not yet done so
- *subcontractor*: an individual (other than an employee of the contractor) or business entity hired by a contractor to provide a specific health or human service as part of a POS contract with the Department as a result of this RFP

## ■ C. INSTRUCTIONS

### 1. Official Contact.

The Department has designated the individual below as the Official Contact for purposes of this RFP. The Official Contact is the **only authorized contact** for this procurement and, as such, handles all related communications on behalf of the Department. Proposers, prospective proposers, and other interested parties are advised that any communication with any other Department employee(s) (including appointed officials) or personnel under contract to the Department about this RFP is strictly prohibited. Proposers or prospective proposers who violate this instruction may risk disqualification from further consideration.

Name: Barbara Metcalf Walsh  
 Address: 410 Capitol Avenue, MS#11 HLS, Hartford, CT 06134-0308  
 Phone: 860-509-8251  
 Fax: 860-509-7854  
 E-Mail: DPHtobacco@ct.gov

Please ensure that e-mail screening software (if used) recognizes and accepts e-mails from the Official Contact.

### 2. RFP Information.

The RFP, amendments to the RFP, and other information associated with this procurement are available in electronic format from the Official Contact or from the Internet at the following locations:

- Department's RFP Web Page  
[www.ct.gov/dph/rfp](http://www.ct.gov/dph/rfp)
- State Contracting Portal  
[https://biznet.ct.gov/SCP\\_Search/Default.aspx?AccLast=2](https://biznet.ct.gov/SCP_Search/Default.aspx?AccLast=2)

It is strongly recommended that any proposer or prospective proposer interested in this procurement subscribe to receive e-mail alerts from the State Contracting Portal. Subscribers will receive a daily e-mail announcing procurements and addendums that are posted on the portal. This service is provided as a courtesy to assist in monitoring activities associated with State procurements, including this RFP.

Printed copies of all documents are also available from the Official Contact upon request.

### 3. Contract Awards.

The award of any contract pursuant to this RFP is dependent upon the availability of funding to the Department. The Department anticipates the following:

- Total Funding Available: \$225,000 each year is anticipated.  
Funding from sources such as the Tobacco and Health Trust Fund may be received from time to time such as \$1,600,000 that was received during FY 2013 by the Department specifically to support Quitline services.
- Number of Awards: 1
- Contract Cost: \$1,200,000
- Contract Term: August 1, 2019 to July 31, 2024

### 4. Eligibility.

Private provider organizations (defined as nonstate entities that are either nonprofit or proprietary corporations or partnerships), State agencies, and municipalities are eligible to submit proposals in response to this RFP.

Individuals who are not a duly formed business entity are ineligible to participate in this procurement.

### 5. Minimum Qualifications of Proposers.

To qualify for a contract award, a proposer must have the following minimum qualifications:

- Be a private for profit, non-profit or government agency;
- At least three years' experience providing tobacco use cessation Quitline services;
- Ensure confidentiality consistent with Health Insurance Portability and Accountability Act (HIPAA) regulations.

### 6. Procurement Schedule. See below.

Dates after the due date for proposals ("Proposals Due") are target dates only (\*). The Department may amend the schedule, as needed. Any change will be made by means of an amendment to this RFP and will be posted on the State Contracting Portal and, if available, the Department's RFP Web Page.

- RFP Planning Start Date: March 26, 2018
- RFP Released: October 25, 2018
- Deadline for Questions: November 15, 2018
- Answers Released: November 21, 2018
- Letter of Intent Due: December 6, 2018
- Proposals Due: December 20, 2018
- (\*) Proposer Selection: January 31, 2019
- (\*) Start of Contract Negotiations: February 15, 2019
- (\*) Start of Contract: August 1, 2019

**7. Letter of Intent.**

A Letter of Intent (LOI) is required by this RFP. The LOI is non-binding and does not obligate the sender to submit a proposal. The LOI must be submitted to the Official Contact by US mail, fax, or e-mail by the deadline established in the Procurement Schedule. The LOI must clearly identify the sender, including name, postal address, telephone number, fax number, and e-mail address. It is the sender's responsibility to confirm the Department's receipt of the LOI. Failure to submit the required LOI in accordance with the requirements set forth herein shall result in disqualification from further consideration.

**8. Inquiry Procedures.**

All questions regarding this RFP or the Department's procurement process must be directed, in writing, to the Official Contact before the deadline specified in the Procurement Schedule. The early submission of questions is encouraged. Questions will not be accepted or answered verbally – neither in person nor over the telephone. All questions received before the deadline(s) will be answered. However, the Department will not answer questions when the source is unknown (i.e., nuisance or anonymous questions). Questions deemed unrelated to the RFP or the procurement process will not be answered. At its discretion, the Department may or may not respond to questions received after the deadline. If this RFP requires a Letter of Intent, the Department reserves the right to answer questions only from those who have submitted such a letter. The Department may combine similar questions and give only one answer. All questions and answers will be compiled into a written amendment to this RFP. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such. The agency will release the answers to questions on the date(s) established in the Procurement Schedule. The Department will publish any and all amendments to this RFP on the State Contracting Portal and, if available, on the Department's RFP Web Page. At its discretion, the Department may distribute any amendments to this RFP to prospective proposers who submitted a Letter of Intent.

**9. RFP Conference.**

An RFP conference will not be held to answer questions from prospective proposers; however, the Department will accept questions in writing regarding the RFP. All questions submitted will be answered in a written amendment to this RFP, which will serve as the Department's official response to questions. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such. The agency will release the amendment on the date established in the Procurement Schedule. The Department will publish any and all amendments to this RFP on the State Contracting Portal and, if available, on the Department's RFP Web Page.

**10. Proposal Due Date and Time.**

The Official Contact is the **only authorized recipient** of proposals submitted in response to this RFP. Proposals must be received by the Official Contact on or before the due date and time:

- Due Date: December 20, 2018
- Time: 2:00 P.M. Eastern Standard time

Faxed or e-mailed proposals will not be evaluated. When hand-delivering proposals by courier or in person, allow extra time due to building security procedures. The Department will not accept a postmark date as the basis for meeting the submission

due date and time. Proposals received after the due date and time may be accepted by the Department as a clerical function, but late proposals will not be evaluated. At the discretion of the Department, late proposals may be destroyed or retained for pick up by the submitters.

An acceptable submission must include the following:

- o one (1) original proposal;
- o six (6) conforming copies of the original proposal; and
- o one (1) electronic copy of the original proposal.

The original proposal must carry original signatures and be clearly marked on the cover as "Original." Unsigned proposals will not be evaluated. The original proposal and each conforming copy of the proposal must be complete, properly formatted and outlined, and ready for evaluation by the Screening Committee.

The electronic copy of the proposal may be submitted via email to the email address DPHtobacco@ct.gov. The entire proposal should be scanned and submitted in Portable Document Format (PDF).

### **11. Multiple Proposals.**

The submission of multiple proposals is not an option with this procurement.

### **12. Declaration of Confidential Information.**

Proposers are advised that all materials associated with this procurement are subject to the terms of the Freedom of Information Act (FOIA), the Privacy Act, and all rules, regulations and interpretations resulting from them. If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL. In Section C of the proposal submission, the proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the proposer that would result if the identified information were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).

### **13. Conflict of Interest - Disclosure Statement.**

Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. The Department will determine whether any disclosed conflict of interest poses a substantial advantage to the proposer over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State. In the absence of any conflict of interest, a proposer must affirm such in the disclosure statement.

*Example: "[name of proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

## ■ D. PROPOSAL FORMAT

### 1. Required Outline.

All proposals must follow the required outline presented in Section IV – Proposal Outline. Proposals that fail to follow the required outline will be deemed non-responsive and will not be evaluated.

### 2. Cover Sheet.

The Cover Sheet is Page 1 of the proposal. Proposers must complete and use the Cover Sheet form provided by the Department in Section VI. Attachments–Forms.

### 3. Table of Contents.

All proposals must include a Table of Contents that conforms to the required proposal outline. (See Section IV.)

### 4. Executive Summary.

Proposals must include a high-level summary, not exceeding two (2) pages, of the main proposal and cost proposal.

### 5. Attachments.

Attachments other than the required Appendices or Forms identified in Section IV may not be evaluated. Further, the required Appendices or Forms must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions may result in disqualification.

### 6. Style Requirements.

Submitted proposals must conform to the following specifications:

- Binding Type: Use a single binding clip; do not use staples or other more permanent binding.
- Dividers: None specified
- Paper Size: 8 ½ x 11
- Page Limit: 25 pages [includes proposal narrative; does not include the work plan, cost proposal and application forms]
- Print Style: 2-sided
- Font Size: 12 Font
- Font Type: Times New Roman
- Margins: 1 inch
- Line Spacing: 1 ½ minimum spacing

### 7. Pagination.

The proposer's name must be displayed in the header of each page. All pages, including the required Appendices and Forms, must be numbered in the footer.

### 8. Packaging and Labeling Requirements.

All proposals must be submitted in sealed envelopes or packages and be addressed to the Official Contact. The Legal Name and Address of the proposer must appear in the upper left corner of the envelope or package. The RFP Name or Number must be clearly displayed on the envelope or package. Any received proposal that does not conform to these packaging or labeling instructions will be opened as general mail. Such a proposal may be accepted by the Department as a clerical function, but it may not be evaluated. At the discretion of the Department, such a proposal may be destroyed or retained for pick up by the submitters.



## ■ E. EVALUATION OF PROPOSALS

### 1. Evaluation Process.

It is the intent of the Department to conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this RFP. When evaluating proposals, negotiating with successful proposers, and awarding contracts, the Department will conform with its written procedures for POS procurements (pursuant to C.G.S. § 4-217) and the State's Code of Ethics (pursuant to C.G.S. §§ 1-84 and 1-85).

### 2. Screening Committee.

The Department will designate a Screening Committee to evaluate proposals submitted in response to this RFP. The contents of all submitted proposals, including any confidential information, will be shared with the Screening Committee. Only proposals found to be responsive (that is, complying with all instructions and requirements described herein) will be reviewed, rated, and scored. Proposals that fail to comply with all instructions will be rejected without further consideration. Attempts by any proposer (or representative of any proposer) to contact or influence any member of the Screening Committee may result in disqualification of the proposer.

### 3. Minimum Submission Requirements.

All proposals must comply with the requirements specified in this RFP. To be eligible for evaluation, proposals must (1) be received on or before the due date and time; (2) meet the Proposal Format requirements; (3) follow the required Proposal Outline; and (4) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements will not be reviewed further. The Department will reject any proposal that deviates significantly from the requirements of this RFP.

### 4. Evaluation Criteria (and Weights).

Proposals meeting the Minimum Submission Requirements will be evaluated according to the established criteria. The criteria are the objective standards that the Screening Committee will use to evaluate the technical merits of the proposals. Only the criteria listed below will be used to evaluate proposals. The criteria are weighted according to their relative importance. The weights are disclosed below.

- Organizational Profile 10%
- Scope of Services 20%
- Staffing Plan including Subcontractors 10% *see note*
- Data and Technology 15%
- Work Plan 25%
- Budget and Budget Narrative 20%

*Note:*

As part of its evaluation of the Staffing Plan, the Screening Committee will consider the proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).

### 5. Proposer Selection.

Upon completing its evaluation of proposals, the Screening Committee will submit the rankings of all proposals to the Department head. The final selection of a successful proposer is at the discretion of the Department head. Any proposer selected will be so notified and awarded an opportunity to negotiate a contract with

the Department. Such negotiations may, but will not automatically, result in a contract. Pursuant to Governor M. Jodi Rell's Executive Order No. 3, any resulting contract will be posted on the State Contracting Portal. All unsuccessful proposers will be notified by e-mail or U.S. mail, at the Department's discretion, about the outcome of the evaluation and proposer selection process.

**6. Debriefing.**

Within ten (10) days of receiving notification from the Department, unsuccessful proposers may contact the Official Contact and request information about the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the ten (10) days. If unsuccessful proposers still have questions after receiving this information, they may contact the Official Contact and request a meeting with the Department to discuss the evaluation process and their proposals. If held, the debriefing meeting will not include any comparisons of unsuccessful proposals with other proposals. The Department will schedule and hold the debriefing meeting within fifteen (15) days of the request. The Department will not change, alter, or modify the outcome of the evaluation or selection process as a result of any debriefing meeting.

**7. Appeal Process.**

Proposers may appeal any aspect the Department's competitive procurement, including the evaluation and proposer selection process. Any such appeal must be submitted to the Department head. A proposer may file an appeal at any time after the proposal due date, but not later than thirty (30) days after an agency notifies unsuccessful proposers about the outcome of the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the thirty (30) days. The filing of an appeal shall not be deemed sufficient reason for the Department to delay, suspend, cancel, or terminate the procurement process or execution of a contract. More detailed information about filing an appeal may be obtained from the Official Contact.

**8. Contract Execution.**

Any contract developed and executed as a result of this RFP is subject to the Department's contracting procedures, which may include approval by the Office of the Attorney General.

## II. MANDATORY PROVISIONS

### ■ A. POS STANDARD CONTRACT, PARTS I AND II

*By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with the provisions of Parts I and II of the State's "standard contract" for POS:*

Part I of the standard contract is maintained by the Department and will include the scope of services, contract performance, quality assurance, reports, terms of payment, budget, and other program-specific provisions of any resulting POS contract. A sample of Part I is available from the Department's Official Contact upon request.

Part II of the standard contract is maintained by OPM and includes the mandatory terms and conditions of the POS contract. Part II is available on OPM's website at: [http://www.ct.gov/opm/fin/standard\\_contract](http://www.ct.gov/opm/fin/standard_contract)

Note:

Included in Part II of the standard contract is the State Elections Enforcement Commission's notice (pursuant to C.G.S. § 9-612(g)(2)) advising executive branch State contractors and prospective State contractors of the ban on campaign contributions and solicitations. If a proposer is awarded an opportunity to negotiate a contract with the Department and the resulting contract has an anticipated value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts has an anticipated value of \$100,000 or more, the proposer must inform the proposer's principals of the contents of the SEEC notice.

Part I of the standard contract may be amended by means of a written instrument signed by the Department, the selected proposer (contractor), and, if required, the Attorney General's Office. Part II of the standard contract may be amended only in consultation with, and with the approval of, the Office of Policy and Management and the Attorney General's Office.

### ■ B. ASSURANCES

*By submitting a proposal in response to this RFP, a proposer implicitly gives the following assurances:*

#### 1. Collusion.

The proposer represents and warrants that the proposer did not participate in any part of the RFP development process and had no knowledge of the specific contents of the RFP prior to its issuance. The proposer further represents and warrants that no agent, representative, or employee of the State participated directly in the preparation of the proposer's proposal. The proposer also represents and warrants that the submitted proposal is in all respects fair and is made without collusion or fraud.

#### 2. State Officials and Employees.

The proposer certifies that no elected or appointed official or employee of the State has or will benefit financially or materially from any contract resulting from this RFP. The Department may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned officials or employees from the proposer, contractor, or its agents or employees.

**3. Competitors.**

The proposer assures that the submitted proposal is not made in connection with any competing organization or competitor submitting a separate proposal in response to this RFP. No attempt has been made, or will be made, by the proposer to induce any other organization or competitor to submit, or not submit, a proposal for the purpose of restricting competition. The proposer further assures that the proposed costs have been arrived at independently, without consultation, communication, or agreement with any other organization or competitor for the purpose of restricting competition. Nor has the proposer knowingly disclosed the proposed costs on a prior basis, either directly or indirectly, to any other organization or competitor.

**4. Validity of Proposal.**

The proposer certifies that the proposal represents a valid and binding offer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto. The proposal shall remain valid for a period of 180 days after the submission due date and may be extended beyond that time by mutual agreement. At its sole discretion, the Department may include the proposal, by reference or otherwise, into any contract with the successful proposer.

**5. Press Releases.**

The proposer agrees to obtain prior written consent and approval of the Department for press releases that relate in any manner to this RFP or any resultant contract.

**■ C. TERMS AND CONDITIONS**

*By submitting a proposal in response to this RFP, a proposer implicitly agrees to comply with the following terms and conditions:*

**1. Equal Opportunity and Affirmative Action.**

The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment, or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate on the basis of disability in admission to, access to, or operation of its programs, services, or activities.

**2. Preparation Expenses.**

Neither the State nor the Department shall assume any liability for expenses incurred by a proposer in preparing, submitting, or clarifying any proposal submitted in response to this RFP.

**3. Exclusion of Taxes.**

The Department is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Proposers are liable for any other applicable taxes.

**4. Proposed Costs.**

No cost submissions that are contingent upon a State action will be accepted. All proposed costs must be fixed through the entire term of the contract.

**5. Changes to Proposal.**

No additions or changes to the original proposal will be allowed after submission. While changes are not permitted, the Department may request and authorize

proposers to submit written clarification of their proposals, in a manner or format prescribed by the Department, and at the proposer's expense.

**6. Supplemental Information.**

Supplemental information will not be considered after the deadline submission of proposals, unless specifically requested by the Department. The Department may ask a proposer to give demonstrations, interviews, oral presentations or further explanations to clarify information contained in a proposal. Any such demonstration, interview, or oral presentation will be at a time selected and in a place provided by the Department. At its sole discretion, the Department may limit the number of proposers invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per proposer.

**7. Presentation of Supporting Evidence.**

If requested by the Department, a proposer must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFP. The Department may make onsite visits to an operational facility or facilities of a proposer to evaluate further the proposer's capability to perform the duties required by this RFP.

At its discretion, the Department may also check or contact any reference provided by the proposer. Proposers must include at least three references [with their contact information] from entities for which they currently provide Quitline services.

**8. RFP Is Not An Offer.**

Neither this RFP nor any subsequent discussions shall give rise to any commitment on the part of the State or the Department or confer any rights on any proposer unless and until a contract is fully executed by the necessary parties. The contract document will represent the entire agreement between the proposer and the Department and will supersede all prior negotiations, representations or agreements, alleged or made, between the parties. The State shall assume no liability for costs incurred by the proposer or for payment of services under the terms of the contract until the successful proposer is notified that the contract has been accepted and approved by the Department and, if required, by the Attorney General's Office.

■ **D. RIGHTS RESERVED TO THE STATE**

*By submitting a proposal in response to this RFP, a proposer implicitly accepts that the following rights are reserved to the State:*

**1. Timing Sequence.**

The timing and sequence of events associated with this RFP shall ultimately be determined by the Department.

**2. Amending or Canceling RFP.**

The Department reserves the right to amend or cancel this RFP on any date and at any time, if the Department deems it to be necessary, appropriate, or otherwise in the best interests of the State.

**3. No Acceptable Proposals.**

In the event that no acceptable proposals are submitted in response to this RFP, the Department may reopen the procurement process, if it is determined to be in the best interests of the State.

**4. Award and Rejection of Proposals.**

The Department reserves the right to award in part, to reject any and all proposals in whole or in part, for misrepresentation or if the proposal limits or modifies any of the terms, conditions, or specifications of this RFP. The Department may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State will be served. The Department reserves the right to reject the proposal of any proposer who submits a proposal after the submission date and time.

**5. Sole Property of the State.**

All proposals submitted in response to this RFP are to be the sole property of the State. Any product, whether acceptable or unacceptable, developed under a contract awarded as a result of this RFP shall be the sole property of the State, unless stated otherwise in this RFP or subsequent contract. The right to publish, distribute, or disseminate any and all information or reports, or part thereof, shall accrue to the State without recourse.

**6. Contract Negotiation.**

The Department reserves the right to negotiate or contract for all or any portion of the services contained in this RFP. The Department further reserves the right to contract with one or more proposer for such services. After reviewing the scored criteria, the Department may seek Best and Final Offers (BFO) on cost from proposers. The Department may set parameters on any BFOs received.

**7. Clerical Errors in Award.**

The Department reserves the right to correct inaccurate awards resulting from its clerical errors. This may include, in extreme circumstances, revoking the awarding of a contract already made to a proposer and subsequently awarding the contract to another proposer. Such action on the part of the State shall not constitute a breach of contract on the part of the State since the contract with the initial proposer is deemed to be void *ab initio* and of no effect as if no contract ever existed between the State and the proposer.

**8. Key Personnel.**

When the Department is the sole funder of a purchased service, the Department 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 Department 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 Department.

■ **E. 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).**

The Freedom of Information Act (FOIA) generally 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. § 1-210(b). Proposers are generally advised not to include in their proposals any confidential information. If the proposer indicates that certain documentation, as required by this RFP, is submitted in confidence, the State will endeavor to keep said information confidential to the extent permitted by law. 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. 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. 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 included with the Application Forms with this RFP and is also available on OPM's website at [http://www.ct.gov/opm/fin/ethics\\_forms](http://www.ct.gov/opm/fin/ethics_forms)

IMPORTANT NOTE: A proposer must complete and submit OPM Ethics Form 5 to the Department with the proposal.

**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)

IMPORTANT NOTE: The successful proposer must complete and submit OPM Ethics Form 1 to the Department prior to contract execution.

**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)

IMPORTANT NOTE: The successful proposer must complete and submit the appropriate nondiscrimination certification form to the awarding Department prior to contract execution.



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### III. PROGRAM INFORMATION

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#### ■ A. DEPARTMENT OVERVIEW

The Connecticut Department of Public Health (DPH) is the state's leader in public health policy and advocacy. The agency is the center of a comprehensive network of public health services, and is a partner to local health departments for which it provides advocacy, training and certification, technical assistance and consultation, and specialty services such as risk assessment that are not available at the local level. The agency is a source of accurate, up-to-date health information to the Governor, the Legislature, the federal government and local communities. This information is used to monitor the health status of Connecticut's residents, set health priorities and evaluate the effectiveness of health initiatives. The agency is a regulator focused on health outcomes, maintaining a balance between assuring quality and administrative burden on the personnel, facilities and programs regulated.

This RFP is being issued by the Tobacco Control Program of the Community, Family Health and Prevention Section of the Public Health Initiatives Branch.

The Program has the following goals:

- 1) To prevent the initiation of tobacco use.
- 2) To promote quitting among young people and adults.
- 3) To eliminate nonsmokers' exposure to secondhand smoke.
- 4) To identify and eliminate the disparities related to tobacco use and its effects on diverse population groups.

#### ■ B. PROGRAM OVERVIEW

The Tobacco Control Program is working to enhance the well-being of Connecticut's residents by promoting tobacco-free lifestyles and by educating communities about the economic and health costs and consequences of tobacco use.

Tobacco use is the single most avoidable cause of death in our society and one of the most important public health issues of our time.

In Connecticut, 19.1% of adults use some form of tobacco. Men (24.0%) are more likely to use tobacco than females (14.5%) [2016 BRFSS Data]. Among the different age groups, the highest rate of tobacco use is among the 18-24 year olds, where 27.8% report using tobacco in the past 30 days. Nearly 5,000 tobacco-related deaths occur in Connecticut annually, more than alcohol, AIDS, car crashes, illegal drugs, murders, and suicides combined. In addition to premature deaths, tobacco use causes illness, disability and productivity loss, and is also responsible for high economic costs. The most recent estimate of annual medical expenditures in Connecticut that are attributable to the consequences of tobacco use is \$2.03 billion. State Medicaid payments directly related to tobacco use are \$520.8 million each year. (Campaign for Tobacco-Free Kids, 2018.)

Once smoking is initiated, the addictive nature of tobacco makes it very difficult to quit. Estimates are that nearly 70% of smokers want to quit, but each year, fewer than 3% of those who want to quit are successful. Although Connecticut's smoking rate is lower than the national average, there is still a need for cessation services, especially among particular groups within the state population.

Successful tobacco use cessation programming is the quickest and most cost-effective means of reducing the public health impact of tobacco use. Brief advice by health care providers to quit smoking can increase cessation rates by 30% according to the Agency for Healthcare Research and Quality. More intensive interventions (including individual, group, or telephone counseling services) that provide social support and training in problem-solving skills are even more effective, increasing cessation rates by 40-100%. FDA-approved medications (e.g., nicotine patch, gum, varenicline and bupropion SR) are effective, especially when out-of-pocket costs are minimized and combined with counseling and other interventions. Availability of no or low cost cessation services increase an individual's motivation and readiness to quit.

Under the direction of the Tobacco Control Program, this request for proposals seeks to identify organizations possessing the capacity to develop and implement Quitline services in order to reduce and/or eliminate tobacco use by Connecticut residents.

## ■ C. MAIN PROPOSAL COMPONENTS

### 1. Cover Sheet, Contractor Information, Notification to Bidders

The proposal must contain a completed Cover Sheet, Contractor Information Form, and a signed Notification to Bidders Form, which are included in the attached Application Forms.

### 2. Organizational Requirements,

Applications will be accepted from public and private organizations. The proposal must describe the organization, including its purpose, services provided, and length of time in operation. The proposal must also describe the organization's experience with providing tobacco use cessation Quitline services and ensuring confidentiality consistent with Health Insurance Portability and Accountability Act (HIPAA) regulations.

The applicant should provide references from three entities who can document the applicant's ability to provide the services specified in this RFP and for which they are currently providing Quitline services.

### 3. Services to be Provided

Protocols used for all tobacco use cessation services provided by the contractor must be based on research showing effectiveness in changing behavior and in line with 1) the Centers for Disease Control and Prevention's *Telephone Quitlines: A Resource for Development, Implementation and Evaluation*; 2) the Community Preventive Services Task Force Recommendations, <https://www.thecommunityguide.org/topic/tobacco>; 3) the North American Quitline Consortium (NAQC) Recommendations as updated from time to time; and 4) the U.S Public Health Service's Clinical Practice Guideline: *Treating Tobacco Use and Dependence* PHS Guideline (<http://www.ncbi.nlm.nih.gov/books/NBK63952>)

The selected contractor must be able to provide the following services and the applicant must address their approach in the proposal:

#### Screening and Registration

The selected applicant shall provide screening and registration for all participants to determine the services desired. Screening and registration of tobacco users must include the minimum data set questions as recommended by the NAQC

(<http://www.naquitline.org>) and any additional questions requested by DPH. The applicant shall also obtain permission of the participant if they are willing to participate in follow-up services and evaluation.

#### Quitline Telephone Service

The selected contractor will be responsible for establishing and maintaining a comprehensive, proactive, statewide toll free tobacco use cessation telephone counseling Quitline available to all Connecticut residents. A pro-active Quitline responds to incoming calls with immediate "reactive" assistance and follows-up initial contact with more comprehensive services through outbound ("pro-active") calls.

Telephone counseling services including intake, assessment, disposition, treatment and follow-up must be culturally competent, and follow evidence-based practices, principles of motivational interviewing for encouraging behavior change and a cognitive-behavioral approach to treating tobacco use dependence. Services must assist participants with quitting all forms of tobacco products including electronic nicotine delivery systems, vapor, and smokeless products.

Core telephone Quitline services must follow a consistent and systematic protocol that should be described in your proposal. At a minimum, services include the ability to receive incoming calls, assess the caller's readiness to quit, provide counseling including assisting the participant with development of a personalized quit plan, provide nicotine replacement therapy, refer to appropriate services including local community based cessation programs, and include self-help educational materials.

One-on-one cessation counseling will include the initial assessment as well as follow-up calls to ensure the most favorable outcome. The number of follow-up calls may be determined based on the methodology chosen, which must be included in your proposal. Follow-up calls will be made at established times that are convenient to the participant. The selected applicant will document multiple attempts to reach participants within their established appointment times. All multiple call participants shall receive a time-sensitive call within 48 hours of the date they have chosen to quit tobacco.

Services are to be accessible to Connecticut residents 13 years and older. 24-hour service for inbound and outbound calls should be provided Monday-Sunday. Recorded information with call back capacity for one-on-one telephone cessation counselors can be used when all phone lines are busy. Any recorded messages to be used with Connecticut participants must be approved by DPH prior to implementation.

The telephone numbers to be used and maintained are 1-800-QUIT NOW and 1-855.DEJELLO.YA, the national Quitline access numbers. The Spanish language telephone number will be staffed by the contractor with Spanish speakers to eliminate the language barrier for callers.

Services must be provided free of charge to program participants, be available in a minimum of Spanish and English languages, and accommodations for people speaking other languages must be made. Callers who speak Mandarin, Cantonese, Korean, or Vietnamese will be transferred to the national Asian Smokers' Quitline [Mandarin & Cantonese, 1-800-838-8917, [www.asq-chinese.org](http://www.asq-chinese.org)]; [Korean, 1-800-556-5564, [www.asq-korean.org](http://www.asq-korean.org)]; [Vietnamese, 1-800-778-8440, [www.asq-viet.org](http://www.asq-viet.org)], and video relay capability should be used in addition to a TTY line for those with hearing impairments.

Culturally competent services and materials should be provided to subpopulations that include but are not limited to Hispanic/Latino, African American, men, young adults ages 18-24, persons with behavioral health conditions and lesbian, gay, bi-sexual and transgender residents.

The applicant must describe the protocols for assessing each participant's readiness to quit, determining the appropriate treatment option, and the rationale for that selection. A comprehensive description of the treatment options: telephone counseling, referral to local community cessation services and programs and/or receipt of self-help educational mailings must also be provided. Protocols must be based on principles of motivational interviewing and a cognitive behavioral approach to treating tobacco use and dependence.

Services should be arranged to avoid long call wait times, busy signals, abandoned calls and voicemail usage requiring call backs. Discuss methods and protocols to limit these types of issues.

The applicant shall implement a protocol to make outbound calls to previous participants who were not ready to quit at the time of the original call, reassess their readiness to quit and re-enroll them in Quitline services.

A comprehensive database listing local community cessation programs and services must be created, maintained, regularly updated and made available to participants who want local programming. The information on referrals made to these community programs should be included in the monthly reporting.

#### Self-help and educational materials

The applicant should develop and provide up-to-date evidence-based materials for tobacco users and non-users including materials targeted to Connecticut's disparate populations. Materials should include information for dealing with co-occurring medical conditions such as asthma, diabetes, heart disease, pregnancy, and chronic obstructive pulmonary disease as well as mental illnesses and substance use disorders. Materials should be available that address other tobacco product use including electronic nicotine delivery systems, vapor and smokeless products.

Materials should be mailed to participants within two (2) business days of registration. Mailed materials should meet low literacy guidelines, be available in a minimum of English and Spanish and help move participants along a continuum from contemplation towards readiness to quit. Samples of educational materials should be provided with the applicant's proposal in the appendices. DPH approval of all educational materials to be provided to CT participants is required prior to distribution.

#### Satisfied Caller Program

The applicant should develop a process that allows CT Quitline participants who have been successful in their quit to share their stories with staff of the Department's Tobacco Control Program.

#### Fax Referral System

The applicant should establish and implement a health care provider fax referral mechanism. This mechanism will allow health care providers to fax to the Quitline the name and contact information of their patients who are tobacco users that want to quit

*and* have agreed to have their information sent to the Quitline. The Quitline, in turn, shall make pro-active calls to the referred tobacco users to discuss available Quitline services and enroll those patients into the Quitline program. These referrals shall be included as a monthly reporting activity. Feedback regarding the participant's activity and outcome will be provided to the referring provider within 4 to 6 weeks of the participant's referral to the program.

#### Electronic Referral System

The applicant should establish and implement a health care provider electronic referral mechanism. The applicant shall be able to receive electronic referrals through Electronic Health Records/Electronic Medical Records (EHR/EMR) systems and provide feedback electronically through the EHR/EMR system as well as by secure e-mail.

At a minimum the applicant should follow and implement the NAQC Guide for Implementing eReferrals Using Certified EHRs found at <https://c.ymcdn.com/sites/www.naquitline.org/resource/resmgr/eRef/GuideforImpeRefFeb2016.pdf>.

This mechanism will allow health care providers to electronically send to the Quitline the name and contact information of their patients who are tobacco users that want to quit *and* have agreed to have their information sent to the Quitline. The Quitline shall make pro-active calls to the referred tobacco users to discuss available Quitline services and enroll those patients into the Quitline program. These referrals should be included as a monthly reporting activity. Feedback regarding the participant's activity and outcome will be provided to the referring provider within 4 to 6 weeks of the participant's referral to the program.

The applicant should describe their process for and experience with implementation of electronic referral systems.

#### Online Registration/Enrollment

The applicant should develop and maintain a Quitline website allowing for simple user-friendly online registration into all Quitline services.

#### Website Access

The applicant should develop and maintain an interactive website to assist the program participant in their quit attempt that will be a companion aid to the telephone counseling. Each registered tobacco user will be given access to the website. This website should be maintained in both English and Spanish Languages, and the activity level should be tracked for inclusion in monthly reporting.

#### Stand-alone website cessation program

The applicant should develop and maintain an interactive web-based tobacco cessation program to assist program participants in their quit attempt. This web program will be in lieu of telephone counseling. Protocols must follow evidence-based practices and be based on principles of motivational interviewing for encouraging behavior change and a cognitive behavioral approach to treating tobacco use and dependence. The Stand-alone web program shall include but not be limited to the development of a quit plan, monitoring progress of the participant's quit attempt, tips and strategies to help with quitting, information about quit medications and the ability to seek support from other

participants and tobacco cessation specialists on-line. The web program shall also allow the participant to request self-help and educational materials and provide information on local community based cessation programs.

Registered stand-alone web users should be able to order nicotine replacement therapy through the website.

The stand-alone web program shall be maintained in both English and Spanish languages. The activity level for this web program shall be tracked for inclusion in monthly reporting.

#### Nicotine Replacement Therapy and other Quit Medications

The applicant should make Nicotine Replacement Therapies (NRT) available to registered participants who enroll into either the stand alone web program or the telephone counseling program. Options for NRT shall include patches, gum and lozenges at a minimum. Other medications may also be provided. Describe your protocols for discussion of cessation medications with callers, exemptions for treatment, distribution of product that includes the timeline for shipping to participants, inventory procedures and processes.

Although the CT Quitline does not currently offer prescription quit medications, we may in the future. The applicant should also address protocols for prescription quit medication dispensing.

NRT and other quit medications are to be made available at no cost to eligible callers and web users. Pricing for shipments of two-week supplies of patches, gum and lozenges should be included in the cost proposal as well as costs for shipping combinations of patches and gum or lozenges.

#### Social Networking, Text Messaging and Emerging Communication Technology

The applicant should discuss available options for using current and emerging communications technology with Quitline participants to assist them in a successful quit attempt. This is especially important to attract younger tobacco users and tech savvy people who want a less-than-conventional means to assist when quitting their tobacco use.

#### Quality Assurance Plan

Please describe the quality assurance protocols and measures that will be established and implemented. The applicant should address how they will ensure quality assurance of service provision and data collection. Describe management oversight of calls and web-based services staff training and processes and plans to address unanticipated high call volume situations.

The applicant's system should have the ability to record all calls for quality assurance purposes for five years after the call. The applicant should also discuss protocols for addressing and resolving participant complaints.

#### Transition Plan

Quitline services in Connecticut are currently being offered through contract with Consumer Wellness Solutions, Inc. of Seattle, Washington. That contract is in place

until June 30, 2019 with an extension in process until September 30, 2019. New applicants will need to establish and implement a transition plan for a seamless move for both participants and DPH staff.

Please describe your transition plan, which should include discussion of continuity of all services for participants enrolled prior to transition, including participants enrolled through fax and electronic referrals, call numbers and online services transfer, re-enrollment call back to prior participants, transfer and reporting of all participant and Quitline utilization data and the time schedule for full implementation.

#### Third Party Evaluator

The applicant should explain their capability to work with an evaluator under separate contract with DPH to determine participant quit rates, satisfaction rates and effectiveness of Quitline activities and services.

#### Applicant Capability Chart

To assist in assessing the capability of each applicant, the Applicant Capability Chart is to be completed with data from the applicant's prior experience operating a Quitline. Data should be reported for an average of 12 months of operation and should reflect the most recent experience.

The Chart can be found in the Attachments labeled *Applicant Capability Chart*.

### **4. Staffing Requirements**

The proposal must describe the staff assigned to this project, including the extent to which they have the appropriate training and experience to perform assigned duties. Resumes must be provided with the proposal for the management and professional staff assigned to this project.

The applicant must obtain and maintain sufficient telephone system capacity and ensure adequate staffing to minimize the average length of time callers need to wait for a live response. Average live response should occur within 30 seconds. Staffing levels should accommodate an average of 1,500 calls per month.

Although 24 hour service is preferred, minimum availability on a weekly basis for one-on-one cessation counselors is to receive inbound and place outbound calls for at least 16 hours per day, including evening and weekend hours.

Include the hours that Quitline operations will be provided, as well as any dates that the Quitline will be closed for holidays. Please note that provision of services on New Year's Day is especially desired.

Staffing levels may need to be adjusted to allow for modifications around the scheduling of national and state media events and campaigns that could affect call volume, and a description of how this could occur must be described in your proposal.

The Quitline operation must include a minimum of English- and Spanish-speaking operators and have the ability to accommodate callers who speak other languages or are hearing impaired.

Staff must demonstrate familiarity with science-based research for telephone Quitlines and have the ability to address the needs of adults, youth and special populations such as pregnant women and people with behavioral health issues.

## 5. Data and Technology Requirements

The applicant must develop and maintain a data collection system that is capable of tracking and documenting participant information including but not limited to socioeconomic, demographic, referral source, patterns of tobacco use, stage of readiness, and quit attempt history. The data system should have the ability to collect, store and report data elements included in the proposed minimum data set (MDS) for Quitlines outlined by the North American Quitline Consortium (NAQC) (<http://www.naquitline.org>), as well as data elements to be specified by DPH.

The applicant should describe data base management including quality assurance (e.g. conduct periodic data assessments to evaluate the quality, accuracy and validity of the data; assess, and validate data collection methods across intake staff). Discussion of data management must include plans for quality improvement such as modifications to operations, protocols, data elements, software and/or equipment, staff training, and improved communication methods.

The applicant should also describe their recovery plan that ensures that files and programs can be restored in the event of loss by any cause including plan to safeguard data files.

### Reporting

Weekly, monthly, quarterly and annual reports will be required that demonstrate and document Quitline usage and services provided. Quarterly reports should also be provided which document performance in meeting contract service standards and corrective actions if needed.

Sample reports should be included in the appendices. Participant data must be maintained in a database that will allow for routine and ad hoc analyses to respond to special data requests and requests for special customized reports by DPH on an as-needed basis.

In addition, on a monthly basis, raw data including participant demographics and services provided will be submitted to DPH via a secure method for any further analysis.

The applicant will be expected to provide any necessary data related to Connecticut Quitline operations and services rendered to an independent evaluator for analysis as identified by DPH. The applicant will also be expected to provide any necessary data related to requests from the Centers for Disease Prevention and Control, the North American Quitline Consortium and other entities as requested by DPH.

## 6. Work Plan

The work plan format is provided with the application forms. A work plan is required for each component which includes specific details about the interventions and/or services to be performed, the proposed activities to be performed as part of the intervention or service, the responsible staff position(s), the expected outcome or measure of success for that activity and timeline. Detail should be provided about the relationship and tasks to be performed by each subcontractor.



## D. COST PROPOSAL COMPONENT

### 1. Financial Requirements

Monthly expenditure reports will be required, and must include an invoice documenting the services provided.

### 2. Budget Requirements

The budget must be based on a fee for service basis.

The proposal must contain an itemized budget describing what elements are included in each fee to be charged, using budget forms included in Attachments.

All costs (toll-free telephone line access, web hosting, printing, salaries, travel, NRTs and other quit medications, training, etc.) must be included in the contract prices.

**Competitiveness of the budget will be considered as part of the proposal review process.**

Payments will be provided upon satisfactory completion of services on a monthly basis utilizing a reimbursement method for services rendered as documented through submission of a monthly invoice.

These funds cannot be used for capital purchases or computer equipment.

The State of Connecticut is exempt from the payment of excise, transportation and sales taxes imposed by the Federal and/or state government. Such taxes must not be included in contract prices.

The maximum component amounts of the bid may not be increased after the proposal is submitted. All cost estimates will be considered as "not to exceed" quotations.

The proposed budget may be subject to change during contract award negotiations.

The proposal must identify and provide contact information for all potential subcontractors used to meet the services required for this RFP. The selected Contractor must provide DPH with copies of any subcontracts. All information required of the contractor must be applied to the subcontractor as well. **Copies of state set aside certifications for small and/or minority business must also be provided.**

Although we hope to be able to fund the Quitline at a higher rate to cover enhanced services, funding may not always be available to include all service components of a comprehensive Quitline. At a minimum, Basic Quitline services to include telephone counseling, educational materials and referrals, are expected to be funded on an ongoing basis. In addition to providing a budget and narrative for a comprehensive Quitline that includes all of the requested components from this RFP, the applicant should provide a budget and address the scenario for meeting Basic Quitline services should only basic funding be available. (e.g., \$150,000 each year)

**IV. PROPOSAL OUTLINE**

*This section presents the **required** outline that must be followed when submitting a proposal in response to this RFP. Proposals must include a Table of Contents that exactly conforms with the required proposal outline (below). Proposals must include all the components listed below, in the order specified, using the prescribed lettering and numbering scheme. Incomplete proposals will not be evaluated.*

	Page
<b>A. Cover Sheet-Applicant Information Form..</b>	
<b>B. Table of Contents</b>	
<b>C. Declaration of Confidential Information</b>	
<b>D. Conflict of Interest - Disclosure Statement</b>	
<b>E. Executive Summary (Maximum two pages)</b>	
<b>F. Main Proposal (Narrative: Limit 25 pages)</b>	
<b>1. Organizational Profile</b>	
a. Purpose, Mission, Vision, Values.	
b. Entity Type / Parent Organization / Years of Operation	
c. Location of Offices / Facilities	
d. Functional Organization	
e. Current Range of Services / Clients	
f. Qualifications	
g. Relevant Experience	
h. Accreditation / Certification / Licensure.	
i. Governance System	
j. References	
<b>2. Scope of Services</b>	
a. Community Collaboration and Engagement.	
b. Service Capacity / Delivery Plan / Systems / Processes / Protocols	
c. Client Engagement/Consultation / Evaluation / Treatment Plan	
d. Quality Assurance Protocols	
e. Administrative Support	
f. Special Health or Safety Requirements	
<b>3. Staffing Plan</b>	
a. Key Personnel / Managers	
b. Staffing Levels & Qualifications	
c. Job Descriptions	
d. Personnel Organization Chart	
e. Point of Contact Identified	
f. Recruitment, Hiring & Retention Plan	
g. Staff Training / Education / Development	
h. Hours of Operation & Hours of Service Provision	
<b>4. Data and Technology</b>	
a. E-Mail / Internet Capabilities	
b. IT Infrastructure / Hardware & Software Quality	
c. Data Collection / Storage	

- d. Reporting Capability . . . . .
- e. Methods of Communication . . . . .
- f. Assessment of Client Satisfaction . . . . .
- g. Evaluation / Outcome Measures . . . . .

**5. Subcontractors . . . . .**

- a. Legal Name of Agency, Address, FEIN . . . . .
- b. Contact Person, Title, Phone, Fax, E-mail . . . . .
- c. Services Currently Provided . . . . .
- d. Services To Be Provided Under Subcontract . . . . .
- e. Subcontractor Oversight . . . . .
- f. Subcontract Cost and Term . . . . .

**6. Work Plan . (Does not count toward the 25-page limit) . . . . .**

- a. Start Date . . . . .
- b. Timetable / Schedule . . . . .
- c. Tasks, Deliverables . . . . .
- d. Methodologies . . . . .
- e. Measurable Objectives . . . . .

**G. Cost Proposal . . . . .**

**1. Financial Profile . . . . .**

- a. Annual Budget and Revenues . . . . .
- b. Financial Standing . . . . .
- c. Financial Management Systems . . . . .
- d. Revenue Generation / Billing / Third Party Reimbursement . . . . .

**2. Budget and Budget Narrative . . . . .**

- a. Narrative . . . . .
- b. Line Item Budget Form . . (Fee for Service). . . . .
- c. Subcontractor Costs . . . (Subcontractor Schedule Detail). . . . .
- d. Staffing Profile . . . . .

**H. Appendices . . . . .**

- a. Sample Participant Materials. . . . .
- b. Sample Reports Provided Weekly/Monthly/Quarterly/Annually. . . . .
- c. Call Recordings (3) for intake/registration, initial assessment/counseling and follow-up counseling calls. . . . .
- d. Résumés of Key Personnel . . . . .
- e. Audited Financial Statements . . . . .
- f. Three references with contact information . . . . .
- g. Organizational chart. . . . .

**I. Forms. . . . .**

**1. Department . . . . .**

- a. Applicant Capability Chart . . . . .
- b. Tobacco Industry Funding and Partnership Certification (DPH) . . . . .

**2. Other . . . . .**

- a. Acknowledgment of Contract Compliance / Notification to Bidders (CHRO) . . . . .
- b. Consulting Agreement Affidavit . . . . .
- c. Workforce Analysis . . . . .

**V. APPENDICES**

The following appendices are provided for your further information:

- Review Team Technical Criteria Worksheet. . . . .29

*RFP evaluation and scoring form used by screening committee*

- Connecticut Quitline Usage . . . . .32

*Participant summary for the 2016-2017 and 2017-2018 time periods*

**INFORMATIONAL APPENDICES:**

*The information and forms in this section are for your reference only. The information contained herein will be required of applicants awarded funding and will be requested during the contract development process. Some of the indicated information may be submitted electronically.*

**Do not include any of the forms included here with your proposal, they are provided for your information.**

1. Nondiscrimination Certification Instructions . . . . .	34
2. Nondiscrimination Certification . . . . .	35
3. Gift and Campaign Contribution Certification . . . . .	
4. False Claims Act Compliance Notification . . . . .	36
a. False Claims Act Policy . . . . .	37
b. False Claims Act Procedure . . . . .	40
5. SEEC Form 11 . . . . .	43

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**REVIEW TEAM TECHNICAL CRITERIA WORKSHEET**  
**RFP # 2020-0902: Connecticut Quitline Services**

Applicant

*Proposals must receive a minimum score of 70% in order to be considered for funding*

	Max Points	Comments	Reviewer Score
<b>Organizational Profile and Service Area 10%, 30 Points</b>			
<p>1.) The extent to which the applicant has provided and/or demonstrated:</p> <ul style="list-style-type: none"> <li>➤ Experience providing a telephone tobacco use cessation counseling service.</li> <li>➤ Ability to provide service statewide.</li> <li>➤ References support applicant's success in providing similar services.</li> <li>➤ Complete Cover Sheet and Applicant Information Form.</li> </ul>	30		
<b>Scope of Services 20%, 60 Points</b>			
<p>2.) The rationale provided and solutions appear to be feasible:</p> <p>The extent to which services to be provided are described clearly and cover all requirements outlined in the RFP:</p> <ul style="list-style-type: none"> <li>a. The Applicant has demonstrated experience with and understanding of accessing readiness to quit tobacco use, knowledge of appropriate treatment option and the rationale for the selection</li> <li>b. Services and materials adhere to PHS Guideline and other best practices as required by the RFP</li> </ul> <p>The applicant has demonstrated an effective approach:</p> <ul style="list-style-type: none"> <li>c. To providing Quitline services that are culturally and linguistically appropriate.</li> <li>d. To providing telephone counseling</li> <li>e. To providing web only cessation program</li> <li>f. To providing web access as companion to telephone counseling</li> <li>g. Using Social networking, Text Messaging and Emerging Communication Technology to support counseling</li> <li>h. Developing and maintaining an electronic and fax referral program</li> <li>i. Providing NRT and pharmacotherapy at no charge to participants including their processes, exemptions, protocols, inventory and delivery methods</li> </ul>	60		
<b>Staffing Plan and Subcontractors 10%, 30 Points</b>			
Note: As part of its evaluation of the Staffing Plan, the Screening	30		

<p>Committee will consider the proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).</p> <p>3.) The extent to which adequate time is allocated to manage the services to be provided: the extent to which the profile of staff and subcontractors are clear and adequate to manage the services to be provided.</p> <ol style="list-style-type: none"> <li>a. To what extent has the proposer allocated a sufficient number of qualified staff in the appropriate position classification to perform the full range of services requested?</li> <li>b. Does the proposer have a qualified program administrator responsible for overseeing the overall operation of the program?</li> <li>c. Does the proposer have a qualified coach/counselor responsible for providing services to program participants?</li> <li>d. Does the proposer have qualified data systems staff to oversee the day-to-day data functions; entering data and submitting required reports while ensuring data quality and accuracy?</li> <li>e. To what extent has proposer demonstrated its capability to effectively coordinate, manage, and monitor the efforts of assigned staff, including subcontractors to ensure that work is effectively completed in a timely manner</li> </ol>			
<b>Data and Technology 15%, 45 points</b>			
<p>4.) The extent the applicant can has demonstrated the ability to:</p> <ol style="list-style-type: none"> <li>a. Maintain a data collection system that is capable of tracking and documenting caller information</li> <li>b. Collect, store and report data elements included in the proposed minimum data set as well as data elements to be specified by DPH</li> <li>c. Monitor and maintain data quality assurance including quality improvement modifications, protocols, data elements, software and/or equipment, staff training, and improved communication methods</li> <li>d. Provide required reports and respond to data requests as outlined by DPH</li> </ol>	45		
<b>Work Plan 25%, 75 points</b>			
<p>5.) Work plan must include sufficient narrative description for reviewers to understand how services will be carried out by the applicant. Applicants utilizing repetitive direct quotes from the RFP may have points deducted for responsiveness.</p> <p>The extent to which a thorough work plan is presented with measurable objectives and specific, appropriate timelines:</p> <ol style="list-style-type: none"> <li>a. To what extent are the Proposer's overall approaches and/or methods comprehensive &amp;/or technically sound?</li> <li>b. To what extent did the Proposer offer a rationale for choosing</li> </ol>	75		

<p>a particular approach/method</p> <p>c. To what extent does Proposer describe in detail the specific actions (tasks, activities, functions) they will perform to fulfill program requirements.</p> <p>d. To what extent will Proposer perform the tasks/activities and functions in a logical order?</p> <p>e. To what extent did the proposed performance time lines realistic and feasible?</p> <p>f. To what extent did Proposer adequately demonstrate how it will measure and/or prove the completion of major tasks, functions, or activities (e.g. identification of key events/outcomes/deliverables)</p> <p>g. To what extent can Proposer implement a smooth transition of all activities with little or no disruption to ongoing services</p>			
<b>Budget and Budget Narrative 20%, 60 points</b>			
<p>6.) The extent to which a cost-effective budget is presented which follows eligibility guidelines.</p>	30		
<p>7.) The fiscal competitiveness of the proposal.</p>	30		
<u>Total</u>	300		

### Connecticut Quitline Usage Data

<b>2016-2017</b>							
	Registered Callers	Registered Callers Requesting Intervention	Percent of Registered Callers Requesting Intervention	Web Only Participants	Shipments Made		
					Patch	Gum	Lozenge
July 2016	183	164	90%	29	91	21	25
August 2016	219	184	84	33	86	24	22
September 2016	172	146	85	43	105	18	16
October 2016	152	129	85	18	77	17	15
November 2016	125	109	87	25	54	9	10
December 2016	110	93	85	30	62	8	17
January 2017	307	277	90	52	141	30	22
February 2017	245	217	89	56	121	22	29
March 2017	335	301	90	63	148	22	34
April 2017	340	312	92	55	178	34	34
May 2017	357	312	89	74	155	38	23
June 2017	468	421	90	191	247	50	53
2016-17 Total Registered Callers and Web Participants	3013	2612	88%	669			
Total Shipments					1465	293	300
Total NRT Shipments					2058		
Average Monthly Registered Callers					251		
Average Monthly Registered Callers requesting Intervention					218		
Average Monthly Web Only Participant					56		



### Connecticut Quitline Usage Data

<b>2017-2018</b>							
	Registered Callers	Registered Callers Requesting Intervention	Percent of Registered Callers Requesting Intervention	Web Only Participants	Shipments Made		
					Patch	Gum	Lozenge
July 2017	485	437	90%	211	372	87	66
August 2017	320	287	90	129	233	57	47
September 2017	191	169	88	58	166	24	28
October 2017	178	166	93	48	108	19	15
November 2017	129	122	95	40	80	21	13
December 2017	192	182	95	117	112	29	14
January 2018	230	219	95	166	183	60	17
February 2018	162	155	96	73	112	21	24
March 2018	134	127	95	29	78	12	11
April 2018	267	256	96	78	135	34	17
May 2018	431	406	94	146	260	56	70
June 2018	523	493	94	163	303	82	71
2017-18 Total Registered Callers and Web Participants	3242	3019	93%	1258			
Total Shipments					2092	502	393
Total NRT Shipments					2987		
Average Monthly Registered Callers					270		
Average Monthly Registered Callers requesting Intervention					252		
Average Monthly Web Only Participant					105		

## Nondiscrimination Certification Instructions

The governing body of your **corporation, company, or entity** must adopt policies and/or pass a resolution adopting and supporting nondiscrimination agreements and warranties as indicated in the *attached* Certification form.

If an **individual**, you must certify that you will adhere to the required nondiscrimination agreements and warranties, as indicated in the *attached* Certification form.

<b>Individual</b> Use FORM A	<b>Corporation, Company or Entity</b> <i>Use FORM B (under \$50,000) or FORM C ( \$50,000 or more)</i>
<b>For an individual, enter your full legal name and address of residence.</b>	<b>Enter the legal Name and Title of the Authorized Signatory if not already included on the form. This is the person <u>named</u> in the Secretarial Certification as authorized to sign.</b>  Alternately, the person authorized to certify the authorized signatory may sign this certification. If this option is chosen, the individual signing the secretarial certification and the nondiscrimination certification should be the same individual.
<b>This does not apply for contracts with individuals.</b>	Enter Corporation / Contractor Name with <b>no</b> abbreviations unless it is legally abbreviated in the charter if not already included on the form. Exception: Corp. is a legal abbreviation.
<b>This does not apply for contracts with individuals.</b>	Enter State or Commonwealth of Incorporation where required if not already included on the form
Enter the <u>Day, Month, Year</u> on which the certification is signed. This date <u>must be the same or later</u> than the date the Contract is signed	Enter the <u>Day, Month, Year</u> on which the certification is signed. This date <u>must be the same or later</u> than the date the Contract is signed
Enter the Signer's Signature.	Enter the Signer's Signature.

### IMPORTANT

Name of Signer must be typed **exactly** the same at the beginning of Document as at the end of the Document. Signature must match typed name **exactly**.

It is **not** necessary to have the form notarized unless an area for such appears on the form. Notarization is required, however, if so indicated on the form.

The requirement for notarization exists for contracts including funding in excess of \$50,000 per year.

The enclosed form is an official document approved by the Connecticut Office of Attorney General. Substitute documents are not acceptable.

**Any type of correction fluid or tape is not acceptable! \*\*\***

\*\*\* We can supply additional forms if necessary.

cert.instr. 7/10/09



**STATE OF CONNECTICUT**  
**NONDISCRIMINATION CERTIFICATION – Affidavit**  
**By Entity**  
**For Contracts Valued at \$50,000 or More**

**Form C**  
**7/8/09**

*Documentation in the form of an affidavit signed under penalty of false statement by a chief executive officer, president, chairperson, member, or other corporate officer duly authorized to adopt corporate, company, or partnership policy that certifies the contractor complies with the nondiscrimination agreements and warranties under Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended*

**INSTRUCTIONS:**

For use by an entity (corporation, limited liability company, or partnership) when entering into any contract type with the State of Connecticut valued at \$50,000 or more for any year of the contract. Complete all sections of the form. Sign form in the presence of a Commissioner of Superior Court or Notary Public. Submit to the awarding State agency prior to contract execution.

**AFFIDAVIT:**

I, the undersigned, am over the age of eighteen (18) and understand and appreciate the obligations of an oath.

I am \_\_\_\_\_ of \_\_\_\_\_, an entity  
Signatory's Title Name of Entity

duly formed and existing under the laws of \_\_\_\_\_  
Name of State or Commonwealth

I certify that I am authorized to execute and deliver this affidavit on behalf of

\_\_\_\_\_ and that \_\_\_\_\_  
Name of Entity Name of Entity

has a policy in place that complies with the nondiscrimination agreements and warranties of Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a (a)(1), as amended.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Printed Name

Sworn and subscribed to before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Commissioner of the Superior Court/  
Notary Public

\_\_\_\_\_  
Commission Expiration Date

**FALSE CLAIMS ACT**  
**COMPLIANCE NOTIFICATION**

This Contract requires compliance with The Deficit Reduction Act (“Act”) of 2005, which requires that the contractor or “qualified provider” receiving the contract comply with the Department’s False Claims Act Policy and Procedure as follows:

1. Review, print, and maintain on file the following Department’s False Claims Act Policy and False Claims Act Procedure.
2. Provide appropriate notice of the requirements of the Policy and Procedure by providing copies of the Department’s False Claims Policy and False Claims Procedure to all employees of your organization, including officers and officials as well as subcontractors providing services funded by this Contract, in accordance with the requirements of Section 4.3.3 of the Department’s False Claims Act Procedure.

**Do not return the False Claims Policy or False Claims Procedure to the Department.** Your signature on the executed Contract confirms your receipt and compliance with the Department’s False Claims Act compliance requirement.

	<b>False Claims Act (Policy)</b>	<b>PL-CGMS C-001</b> <b>Revision: 1.0</b> <b>Effective Date:</b> <b>05/21/2010</b>
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APPROVAL SIGNATURES		DATE
J. Robert Galvin, M.D., M.P.H. (original signature on file)	Commissioner of Public Health	05/21/2010

REVISION HISTORY			
Revision	Description of Change	Author	Effective Date
Basic	Initial Release	Bruce Wallen	05/21/2010

REFERENCE DOCUMENTS	
Document	Title
The Deficit Reduction Act ("Act") of 2005	Section 6032
United States Code (U.S.C.)	Sections 3729-3733
Connecticut General Statutes (C.G.S.)	Section 53a-290 Vendor Fraud
Connecticut General Statutes (C.G.S.)	Section 4-61dd Whistleblower
Connecticut General Statutes (C.G.S.)	Section 31-51m Blacklisting
Connecticut General Statutes (C.G.S.)	Section 17b-127 General Assistance

	<h2>False Claims Act (Policy)</h2>	<p><b>PL-CGMS C-001</b>  <b>Revision: 1.0</b>  <b>Effective Date:</b>  <b>05/21/2010</b></p>
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### 1.0 Purpose

The Deficit Reduction Act (“Act”) of 2005 is the federal government’s legislative effort to control spending for entitlement programs, such as Medicaid. The Act seeks to control spending by reducing federal overpayments for prescription drugs and medical services, thereby improving the integrity of federally funded entitlement programs.

### 2.0 Scope

Section 6032 of the Act states that any entity, such as the Department of Public Health (Department), which receives or makes payments under a state plan approved under Title XIX or under a waiver of such plan, totaling at least \$5,000,000 annually, is required to establish written policies providing detailed information about the False Claims Act (“FCA”) and any state false claims laws to all Department employees, contractors and agents. The Department is also required to establish and inform all employees, contractors, qualified providers and agents about the Department’s policies and procedures for the detection and prevention of fraud, waste and abuse, the protection afforded to any person who reports an incident of a false claim to a regulatory body (e.g., Whistleblower Protection) and any civil or criminal penalties for false claims.

### 3.0 Definitions and Acronyms

Specialized acronyms and definitions identified in this contract procedure are defined below.

#### 3.1 Acronyms

“ <u>CGMS</u> ”	The Connecticut Department of Public Health, Contracts & Grants Management Section
“ <u>Department</u> ”	The State of Connecticut Department of Public Health
“ <u>FCA</u> ”	False Claims Act
“ <u>PFCRA</u> ”	Program Fraud Civil Remedies Act

#### 3.2 Definitions

Claim - means any request or demand, whether under a contract or otherwise, for money or property which is made by a contractor, grantee, or other recipient if the United States government provides any portion of the money or property which is requested or demanded or if the government will reimburse such contractor, grantee, or other recipient for any portion of the money or property which is requested or demanded.

Contractor or Agent - means any contractor, subcontractor, agent, qualified vendor, consumer or family member who act as an employer or other person which or who, on behalf of the entity, furnishes, or otherwise authorizes the furnishing of, Medicaid health care items or services, performs billing or coding functions, or is involved in the monitoring of health care provided by the entity.

Employee - means any officer or employee of the entity, contractor, or agent.

Entity - means a governmental agency, organization, unit, corporation, partnership or other business arrangement, including Medicaid managed care organizations, whether for profit or not-for-profit, which receives or makes payments, under a state plan approved under Title XIX or under any waiver of such plan, totaling at least \$5,000,000 annually.

Knowing and Knowingly - means that a person with respect to information 1) has actual knowledge of the information; 2) acts in deliberate ignorance of the truth or falsity of the information; or 3) acts in reckless disregard of the truth or falseness of the information.

	<h2>False Claims Act (Policy)</h2>	<p><b>PL-CGMS C-001</b>  <b>Revision: 1.0</b>  <b>Effective Date:</b>  <b>05/21/2010</b></p>
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#### 4.0 Compliance

##### 4.1 False Claim Act

The FCA prohibits any person, firm, corporation or entity from knowingly presenting, or causing to be presented, a false claim or statement to a federally funded program, including Medicaid, or conspiring to defraud the federal government. Any person, company or entity that acts in deliberate ignorance of or with reckless disregard of the truth of such information is considered to have acted knowingly.

The civil penalty for violating the FCA is a fine of not less than \$5,000 and not more than \$10,000 per violation. The person, company or entity may also be fined an additional three times the amount of damages sustained by the federal government. The PFCRA also provides that any person or company that commits fraud by making a false statement or claim can be assessed a penalty of \$5,000 per false claim or statement in addition to the penalties available under the FCA.

A person may bring a civil action for violating the FCA on behalf of said person and the United States government. If the federal government proceeds with an action brought by such person then that person shall receive at least 15 percent but not more than 25 percent of the proceeds of the action or settlement. If the federal government does not proceed with the action and the person initiating the action proceeds, then the person bringing the action shall receive a reasonable amount, to be determined by the court, but not less than 25% and not more than 30% of the proceeds of the action or settlement.


The FCA prohibits retaliation by an employer against an employee for bringing a false claim action or participating in such action (Whistleblower Protection). Any employee subject to retaliation by an entity, contractor or agent shall be entitled to all relief necessary to make the employee whole, including but not limited to reinstatement, two times the amount of back pay, interest on back pay and special damages.

##### 4.2 State False Claim Related Acts

Under Connecticut's Vendor Fraud statute it is illegal for a person on his own behalf or on the behalf of an entity, with intent, to fraudulently provide goods or services to a beneficiary or recipient under Title XIX or to fraudulently receive goods or services. Connecticut law also prohibits any vendor from fraudulently providing services or goods for any recipient of General Assistance. The State Whistleblower law provides any employee who reports a suspected violation of state or federal law with protection against retaliation by the employer. State law also prohibits any person, corporation, state or political subdivision from blacklisting any employee.

##### 4.3 Compliance Reporting

All DPH employees, contractors and agents, are required to report fraud, waste and abuse to: The Department of Public Health, Contracts & Grants Management Section, 410 Capitol Avenue, MS#13GCT, P.O. Box 340308, Hartford, CT 06134-0308.


	<b>False Claims Act (Procedure)</b>	<b>PR-CGMS C-001</b> <b>Revision: 1.0</b> <b>Effective Date:</b> <b>05/21/2010</b>
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APPROVAL SIGNATURES		DATE
J. Robert Galvin, M.D., M.P.H. (original signature on file)	Commissioner of Public Health	05/21/2010

REVISION HISTORY			
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	<h2>False Claims Act (Procedure)</h2>	<p><b>PR-CGMS C-001</b>  <b>Revision: 1.0</b>  <b>Effective Date:</b>  <b>05/21/2010</b></p>
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### 1.0 Purpose

This procedure provides guidance to the Department of Public Health on informing all employees, contractors and agents about the Department of Public Health False Claims Policy, PL-CGMS C-001.

### 2.0 Scope

This procedure applies to all Department of Public Health staff, and officers and employees of contractors, agents, qualified providers and subcontractors funded by the department.

### 3.0 Definitions and Acronyms

Specialized acronyms and definitions identified in this contract procedure are defined below.

#### 3.1 Acronyms

<u>“CGMS”</u>	The Connecticut Department of Public Health, Contracts & Grants Management Section
<u>“Department”</u>	The State of Connecticut Department of Public Health
<u>“FCA”</u>	False Claims Act
<u>“PFCRA”</u>	Program Fraud Civil Remedies Act
<u>“POS”</u>	Purchase of Service Contract

#### 3.2 Definitions

Claim - means any request or demand, whether under a contract or otherwise, for money or property which is made by a contractor, grantee, or other recipient if the United States government provides any portion of the money or property which is requested or demanded, or if the government will reimburse such contractor, grantee, or other recipient for any portion of the money or property which is requested or demanded.

Contractor or Agent - means any contractor, subcontractor, agent, qualified vendor, consumer or family member who act as an employer or other person which or who, on behalf of the entity, furnishes, or otherwise authorizes the furnishing of, Medicaid health care items or services, performs billing or coding functions, or is involved in the monitoring of health care provided by the entity.


Employee - means any officer or employee of the entity, contractor or agent.

Entity - means a governmental agency, organization, unit, corporation, partnership or other business arrangement, including Medicaid managed care organizations, whether for profit or not-for-profit, which receives or makes payments, under a state plan approved under Title XIX or under any waiver of such plan, totaling at least \$5,000,000 annually.

Knowing and Knowingly - means that a person with respect to information 1) has actual knowledge of the information; 2) acts in deliberate ignorance of the truth or falsity of the information; or 3) acts in reckless disregard of the truth or falseness of the information.

Purchase of Service Contract - Previously Human Service Contract, a contract document used to procure direct client services to populations served by the Department over a defined period and for an agreed upon maximum price.

Subcontractor – See “Contractor or Agent” above.

	<h2>False Claims Act (Procedure)</h2>	<p><b>PR-CGMS C-001</b>  <b>Revision: 1.0</b>  <b>Effective Date:</b>  <b>05/21/2010</b></p>
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#### 4.0 Process

##### 4.1 Dissemination to the Department's New Employees

- 4.1.1** The Department's Human Resources staff shall present and provide all newly hired Department employees with a copy of the False Claims Act Policy and Procedure during the new employee orientation.
- 4.1.2** Each new Department employee must acknowledge receipt of the False Claims Act Policy and Procedure by signing an acknowledgement that they received it. The acknowledgement shall be maintained in their personnel file.

##### 4.2 Dissemination to the Department's Existing Employees

Each existing Department employee shall receive a copy of the Department's False Claims Act Policy and Procedure and must sign an acknowledgement that they have received it. The acknowledgement shall be maintained in their personnel file.

##### 4.3 Dissemination to Contractors and Qualified Providers

- 4.3.1** CGMS shall include the Department's False Claims Act Policy and Procedure in all POS contracts between the Department and its contractors and agents.
- 4.3.2** Contractors and agents shall inform all employees providing services funded by the contract of the policy and procedure and obtain acknowledgement of receipt.
- 4.3.3** Execution of the contract by a contractor or agent, via authorized signature, shall indicate acceptance of and compliance with the Department's False Claims Policy and Procedure in accordance with Part II, Section C.4, (Terms and Conditions, Contractor Obligations, Federal Funds) of the POS Contract.
- 4.3.4** Contractors and agents under contract with the Department shall inform all subcontractors, providing services funded by the contract, of the policy and procedure and obtain acknowledgement of receipt either via inclusion of a contract term/condition in the sub-contractual agreement as in 4.3.3 above, and execution of such subcontract, or via separate acknowledgement.

#### 5.0 Records

- 5.1** The following records shall be maintained, generated, or updated, and filed by the Department in accordance with this procedure and CGMS record retention requirements and schedules. Contractors shall maintain records according to their established record retention schedules.

Record Name	Responsible	Retention Req.	Location
Employee acknowledgement of receipt of False Claims Policy and Procedure	Human Resources Office	Until employee termination	Employee File
Fully Executed Contract Document	CGMS	3 Yrs. From end date of contract(s)	CGMS Contract File

## Notice to Executive Branch State Contractors and Prospective State Contractors of Campaign Contribution and Solicitation Limitations

This notice is provided under the authority of Connecticut General Statutes §9-612(g)(2), as amended by P.A. 10-1, and is for the purpose of informing state contractors and prospective state contractors of the following law (italicized words are defined on the reverse side of this page).

### CAMPAIGN CONTRIBUTION AND SOLICITATION LIMITATIONS

No *state contractor, prospective state contractor, principal of a state contractor or principal of a prospective state contractor*, with regard to a *state contract or state contract solicitation* with or from a state agency in the executive branch or a quasi-public agency or a holder, or principal of a holder of a valid prequalification certificate, shall make a contribution to (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of Governor, Lieutenant Governor, Attorney General, State Comptroller, Secretary of the State or State Treasurer, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee (which includes town committees).

In addition, no holder or principal of a holder of a valid prequalification certificate, shall make a contribution to (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of State senator or State representative, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee.

On and after January 1, 2011, no state contractor, prospective state contractor, principal of a state contractor or principal of a prospective state contractor, with regard to a state contract or state contract solicitation with or from a state agency in the executive branch or a

quasi-public agency or a holder, or principal of a holder of a valid prequalification certificate, shall **knowingly solicit** contributions from the state contractor's or prospective state contractor's employees or from a *subcontractor or principals of the subcontractor* on behalf of (i)

an exploratory committee or candidate committee established by a candidate for nomination or election to the office of Governor, Lieutenant Governor, Attorney General, State Comptroller, Secretary of the State or State Treasurer, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee.

### DUTY TO INFORM

State contractors and prospective state contractors are required to inform their principals of the above prohibitions, as applicable, and the possible penalties and other consequences of any violation thereof.

### PENALTIES FOR VIOLATIONS

Contributions or solicitations of contributions made in violation of the above prohibitions may result in the following civil and criminal penalties:

**Civil penalties**—Up to \$2,000 or twice the amount of the prohibited contribution, whichever is greater, against a principal or a contractor. Any state contractor or prospective state contractor which fails to make reasonable efforts to comply with the provisions requiring notice to its principals of these prohibitions and the possible consequences of their violations may also be subject to civil penalties of up to \$2,000 or twice the amount of the prohibited contributions made by their principals.

**Criminal penalties**—Any knowing and willful violation of the prohibition is a Class D felony, which may subject the violator to imprisonment of not more than 5 years, or not more than \$5,000 in fines, or both.

### CONTRACT CONSEQUENCES

In the case of a state contractor, contributions made or solicited in violation of the above prohibitions may resulting the contract being voided.

In the case of a prospective state contractor, contributions made or solicited in violation of the above prohibitions shall result in the contract described in the state contract solicitation not being awarded to the prospective state contractor, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

The State shall not award any other state contract to anyone found in violation of the above prohibitions for a period of one year after the election for which such contribution is made or solicited, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

Additional information may be found on the website of the State Elections Enforcement Commission, [www.ct.gov/seec](http://www.ct.gov/seec). Click on the link to "Lobbyist/Contractor Limitations."

## DEFINITIONS

“State contractor” means a person, business entity or nonprofit organization that enters into a state contract. Such person, business entity or nonprofit organization shall be deemed to be a state contractor until December thirty-first of the year in which such contract terminates. “State contractor” does not include a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person’s capacity as a state or quasi-public agency employee.

“Prospective state contractor” means a person, business entity or nonprofit organization that (i) submits a response to a state contract solicitation by the state, a state agency or a quasi-public agency, or a proposal in response to a request for proposals by the state, a state agency or a quasi-public agency, until the contract has been entered into, or (ii) holds a valid prequalification certificate issued by the Commissioner of Administrative Services under section 4a-100. “Prospective state contractor” does not include a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person’s capacity as a state or quasi-public agency employee.

“Principal of a state contractor or prospective state contractor” means (i) any individual who is a member of the board of directors of, or has an ownership interest of five per cent or more in, a state contractor or prospective state contractor, which is a business entity, except for an individual who is a member of the board of directors of a nonprofit organization, (ii) an individual who is employed by a state contractor or prospective state contractor, which is a business entity, as president, treasurer or executive vice president, (iii) an individual who is the chief executive officer of a state contractor or prospective state contractor, which is not a business entity, or if a state contractor or prospective state contractor has no such officer, then the officer who duly possesses comparable powers and duties, (iv) an officer or an employee of any state contractor or prospective state contractor who has *managerial or discretionary responsibilities with respect to a state contract*, (v) the spouse or a *dependent child* who is eighteen years of age or older of an individual described in this subparagraph, or (vi) a political committee established or controlled by an individual described in this subparagraph or the business entity or nonprofit organization that is the state contractor or prospective state contractor.

“State contract” means an agreement or contract with the state or any state agency or any quasi-public agency, let through a procurement process or otherwise, having a value of fifty thousand dollars or more, or a combination or series of such agreements or contracts having a value of one hundred thousand dollars or more in a calendar year, for (i) the rendition of services, (ii) the furnishing of any goods, material, supplies, equipment or any items of any kind, (iii) the construction, alteration or repair of any public building or public work, (iv) the acquisition, sale or lease of any land or building, (v) a licensing arrangement, or (vi) a grant, loan or loan guarantee. “State contract” does not include any agreement or contract with the state, any state agency or any quasi-public agency that is exclusively federally funded, an education loan, a loan to an individual for other than commercial purposes or any agreement or contract between the state or any state agency and the United States Department of the Navy or the United States Department of Defense.

“State contract solicitation” means a request by a state agency or quasi-public agency, in whatever form issued, including, but not limited to, an invitation to bid, request for proposals, request for information or request for quotes, inviting bids, quotes or other types of submittals, through a competitive procurement process or another process authorized by law waiving competitive procurement.

“Managerial or discretionary responsibilities with respect to a state contract” means having direct, extensive and substantive responsibilities with respect to the negotiation of the state contract and not peripheral, clerical or ministerial responsibilities.

“Dependent child” means a child residing in an individual’s household who may legally be claimed as a dependent on the federal income tax of such individual.

“Solicit” means (A) requesting that a contribution be made, (B) participating in any fund-raising activities for a candidate committee, exploratory committee, political committee or party committee, including, but not limited to, forwarding tickets to potential contributors, receiving contributions for transmission to any such committee or bundling contributions, (C) serving as chairperson, treasurer or deputy treasurer of any such committee, or (D) establishing a political committee for the sole purpose of soliciting or receiving contributions for any committee. Solicit does not include: (i) making a contribution that is otherwise permitted by Chapter 155 of the Connecticut General Statutes; (ii) informing any person of a position taken by a candidate for public office or a public official, (iii) notifying the person of any activities of, or contact information for, any candidate for public office; or (iv) serving as a member in any party committee or as an officer of such committee that is not otherwise prohibited in this section.

“Subcontractor” means any person, business entity or nonprofit organization that contracts to perform part or all of the obligations of a state contractor’s state contract. Such person, business entity or nonprofit organization shall be deemed to be a subcontractor until December thirty first of the year in which the subcontract terminates. “Subcontractor” does not include (i) a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or (ii) an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person’s capacity as a state or quasi-public agency employee.

“Principal of a subcontractor” means (i) any individual who is a member of the board of directors of, or has an ownership interest of five per cent or more in, a subcontractor, which is a business entity, except for an individual who is a member of the board of directors of a nonprofit organization, (ii) an individual who is employed by a subcontractor, which is a business entity, as president, treasurer or executive vice president, (iii) an individual who is the chief executive officer of a subcontractor, which is not a business entity, or if a subcontractor has no such officer, then the officer who duly possesses comparable powers and duties, (iv) an officer or an employee of any subcontractor who has managerial or discretionary responsibilities with respect to a subcontract with a state contractor, (v) the spouse or a dependent child who is eighteen years of age or older of an individual described in this subparagraph, or (vi) a political committee established or controlled by an individual described in this subparagraph or the business entity or nonprofit organization that is the subcontractor.

## VI. ATTACHMENTS: APPLICATION FORMS

### APPLICATION FORMS:

*The information and forms included in this section are required for submission of a proposal. The included forms must be completed and included in the proposal submission as applicable and directed however item numbers 7 and 10 may be submitted to the State of Connecticut Department of Administrative Services (DAS) Document Vault in accordance with existing procedures and within the statutorily required timeframes. If valid forms have been previously submitted they need not be submitted again but the proposal must clearly state that the electronic documents are available for viewing within the DAS Document Vault.*

1. Cover Sheet . . . . .	46
2. Applicant Information Form (continuation) . . . . .	47
3. Budget Summary and Justification . . . . .	50
a. Fee for Service Line Items	
b. Subcontractor Detail	
c. Staffing Profile	
4. Work Plan Form . . . . .	54
5. Applicant Capability Chart . . . . .	55
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**REQUEST FOR PROPOSAL COVER SHEET**  
**State of Connecticut – Department of Public Health**  
**TOBACCO CONTROL PROGRAM**

**RFP DPH LOG # 2020-0902**

**CONNECTICUT QUITLINE SERVICES**

**Applicant Information Form**

\_\_\_\_\_  
 Legal Name

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City/Town

\_\_\_\_\_  
 State

\_\_\_\_\_  
 Zip Code

\_\_\_\_\_  
 Telephone No.

\_\_\_\_\_  
 FAX No.

\_\_\_\_\_  
 E-Mail Address

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone No: \_\_\_\_\_

**TOTAL PROGRAM COST:**    \$ \_\_\_\_\_

I certify that to the best of my knowledge and belief, the information contained in this application is true and correct. The application has been duly authorized by the governing body of the applicant, the applicant has the legal authority to apply for this funding, the applicant will comply with applicable state and federal laws and regulations, and that I am a duly authorized signatory for the applicant.

\_\_\_\_\_  
 Signature of Authorizing Official:

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Typed Name and Title

-----  
 The applicant agency is the agency or organization, which is legally and financially responsible and accountable for the use and disposition of any awarded funds. Please provide the following information:

- Full legal name of the organization or corporation as it appears on the corporate seal and as registered with the Secretary of State
- Mailing address;
- Main telephone number;
- Fax number, and email address, if any
- Principal contact person for the application (person responsible for developing application)
- Total program cost

The funding application and all required submittals must include the signature of an officer of the applicant agency who has the legal authority to bind the organization. The signature, typed name and position of the authorized official of the applicant agency must be included as well as the date on which the application is signed.

**Applicant Information Form (continuation)***PLEASE LIST THE AGENCY CONTACT PERSONS RESPONSIBLE FOR COMPLETION AND SUBMITTAL OF:***Contract and Legal Documents/Forms:**

Name	Title	Tel. No.
Street	Town	Zip Code
Email	Fax No.	

**Program Progress Reports:**

Name	Title	Tel. No.
Street	Town	Zip Code
Email	Fax No.	

**Financial Expenditure Reporting Forms:**

Name	Title	Tel. No.
Street	Town	Zip Code
Email	Fax No.	

Incorporated:  YES  NOAgency Fiscal  
Year:

--

Type of Agency:  Public  Private  Other, Explain: \_\_\_\_\_ Profit  Non-ProfitFederal Employer I.D.  
Number:

--

Town Code No:

--

Medicaid Provider Status:  YES  NO

Medicaid Number:

--

Minority Business Enterprise (MBE):  YES  NOWomen Business Enterprise (WBE):  YES  NO

**OUTLINE for Project Narrative**

Provided as a courtesy to facilitate Table of Contents and clarify proposal organization.

**Organizational Profile**

- Purpose, Mission, Vision, Values
- Entity Type / Parent Organization / Years of Operation
- Location of Offices / Facilities
- Functional Organization
- Current Range of Services /Clients
- Qualifications
- Relevant Experience
- Accreditation / Certification / Licensure
- Governance System
- References

**Scope of Services**

- Community Collaboration and Engagement
- Service Capacity / Delivery Plan/Systems / Processes / Protocols
- Client Engagement/Consultation /Evaluation/Treatment Plan
- Quality Assurance Protocols
- Administrative Support
- Special Health or Safety Requirements

**Staffing Plan**

- Key Personnel / Managers
- Staffing Levels & Qualifications
- Job Descriptions
- Personnel Organization Chart
- Point of Contact Identified
- Recruitment, Hiring & Retention Plan
- Staff Training / Education / Development
- Hours of Operation & Hours of Service Provision

**Data and Technology**

- E-Mail / Internet Capabilities
- IT Infrastructure / Hardware/Software Quality
- Data Collection / Storage
- Reporting Capability
- Methods of Communication
- Assessment of Client Satisfaction
- Evaluation / Outcome Measures

**Subcontractors**

- Legal Name of Agency, Address, FEIN
- Contact Person, Title, Phone, Fax, E-mail
- Services Currently Provided
- Services to Be Provided Under Subcontract
- Subcontractor Oversight
- Subcontract Cost and Term

**Work Plan\***

\*For Project Narrative in the Main Proposal, a summary paragraph of the Work Plan should be included, but the full plan is to be included as an attachment and does not count towards the 25-page limit.

**Cost Proposal****Financial Profile**

- Annual Budget and Revenues
- Financial Standing
- Financial Management Systems
- Revenue Generation
- Billing



Third Party Reimbursement

**Budget and Budget Narrative**

Narrative

Forms: Line Item Budget Form (Fee for Service)  
Subcontractor Costs/Subcontractor Schedule Detail  
Staffing Profile  
Resumes of Key Personnel

**Department Forms**

Applicant Capability Chart  
Tobacco Industry Funding and Partnership Certification (DPH)

**Additional Requested Appendices**

Sample Participant Materials  
Sample Reports provided weekly/monthly/quarterly/annually  
Call recordings (3) for intake/registration, initial assessment/counseling, and follow up counseling calls  
Audited Financial Statements  
Three references with contact information  
Organizational chart

**Other State Forms**

Acknowledgment of Contract Compliance / Notification to Bidders (CHRO)  
Consulting Agreement Affidavit  
Workforce Analysis



**B. Budget Justification – Subcontractor Schedule Instructions**

1. For contractors who have subcontracts, a brief description of the purpose of each subcontract must be provided. All subcontractors used by each program must be included, if it is not known who the subcontractor will be, an estimated amount and whatever budget detail is anticipated should be provided. (Submit the actual detail when it is available). A separate subcontractor schedule must be completed for each program included in the contract.

*For example: The contract is providing both a Needle Exchange program and an AIDS Prevention Education Program and Subcontractor "A" is providing services to both program there must be a separate budget for Subcontractor "A" for each.*

2. Detail of Each Subcontractor:

- a. Choose a category below for each subcontract using the basis by which it is paid:

A. Budget Basis       B. Fee for Service       C. Hourly Rate.

- b. Choose whether the subcontractor is a minority or woman owned business:

MBE       WBE       Neither

- c. Provide the detail for each subcontract just as for the primary contract budget referencing the corresponding program of the contract. Detail must be provided for each subcontractor listed in the Summary.

Note: If space allowed is not sufficient for large or complex subcontract budgets, the primary Budget Summary format may be copied and used instead.

**C. Budget Justification – Subcontractor Schedule Detail Form**

**#1**

Subcontractor Name:

Address:

Telephone: (     ) (     -     )

Select One: **A**  Budget Basis    **B**  Fee-for-Service    **C**  Hourly Rate

Indicate One:     MBE     WBE     Neither

Description of Services to be Provided	Total
Line Item(s)	
<b>Total Subcontract Amount:</b>	

**#2**

Subcontractor Name:

Address:

Telephone: (     ) (     -     )

Select One: **A**  Budget Basis    **B**  Fee-for-Service    **C**  Hourly Rate

Indicate One:     MBE     WBE     Neither

Description of Services to be Provided	Total
Line Item(s)	
<b>Total Subcontract Amount:</b>	

**#3**

Subcontractor Name:

Address:

Telephone: (     ) (     -     )

Select One: **A**  Budget Basis    **B**  Fee-for-Service    **C**  Hourly Rate

Indicate One:     MBE     WBE     Neither

Description of Services to be Provided	Total
Line Item(s)	
<b>Total Subcontract Amount:</b>	

<b>D. Budget Justification – Staffing Profile</b>
---

Position Description	Staff Person Assigned	Site/ Location	Assigned to Project # Hours wk./ # wks. per Year
1.Position:	Name:		/
2.Position:	Name:		/
3.Position:	Name:		/
4.Position:	Name:		/
5.Position:	Name:		/
6.Position:	Name:		/
7.Position:	Name:		/
8.Position:	Name:		/
9.Position:	Name:		/
10.Position:	Name:		/
11.Position:	Name:		/
12.Position:	Name:		/
13.Position:	Name:		/
14.Position:	Name:		/
15.Position:	Name:		/

\*Attach resumes and job descriptions for all Professional Staff

**Work Plan**

(Make as many blank pages as needed, and form may be set up in either portrait or landscape mode)

<b>Services to be Provided (Provide specifics)</b>	<b>Activities (Tasks/Deliverables)</b>	<b>Staff Position(s) Responsible</b>	<b>Expected Outcomes, Measures of Success</b>	<b>Timeframe for Completion (Include scheduled start and end dates)</b>

### Applicant Capability Chart

To assist in assessing the capability of the applicant, the following Chart is to be completed with data from the applicant's experience operating a Quitline. If there is no data available put "n/a" into the box.

	English	Spanish	Comments
<b>Call Standards</b>			
% of live answer			
% of abandoned after 30 seconds			
% to voicemail during operation hours			
% of calls answered with 30 seconds			
Average speed to answer (in seconds)			
<b>Other Business Standards</b>			
Time for delivery of NRT to participant			
% of participants who receive NRT within your quality standard			
Time of delivery of education materials to participant			
# of hours Quitline operated by applicant was not fully functional in past 12 months due to weather equipment failure, software failure, etc.			
# of hour online components operated by the applicant was not fully functional in past 12 months			
% of participants receiving more than one pro-active coaching call			
% of participants receiving more than one pro-active coaching call who talked with the same coach at each call			
Conversion rate for registration to coaching (# who completed 1 <sup>st</sup> coaching session/#complete registration)			
% of participants in multiple call programs receiving a time sensitive follow-up call within 48 hours of their quit date			
# of registered Quitline participants in the past 12 months (phone/online)			

State of Connecticut  
Department of Public Health  
Tobacco Control Program

**Tobacco Industry Funding and Partnership Certification**

I, \_\_\_\_\_ certify that \_\_\_\_\_ has not  
(Company/Agency)  
received funding or engaged in partnerships, either formal or informal,  
with any Tobacco Company within the last three (3) years.

The above-mentioned agency will not accept funding nor engage in  
partnerships with any Tobacco Company during the contract period,  
should we be awarded funds from the CT Department of Public Health,  
Tobacco Control Program.

\_\_\_\_\_  
Contractor's Authorized Signature

\_\_\_\_\_  
Date





**STATE OF CONNECTICUT  
CONSULTING AGREEMENT AFFIDAVIT**

*Affidavit to accompany a State contract for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b)*

**INSTRUCTIONS:**

**If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1):** Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. **If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1):** Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if there is any change in the information contained in the most recently filed affidavit not later than (i) thirty days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

**AFFIDAVIT:** [Number of Affidavits Sworn and Subscribed On This Day: \_\_\_\_\_]

I, the undersigned, hereby swear that I am a principal or key personnel of the bidder or contractor awarded a contract, as described in Connecticut General Statutes § 4a-81(b), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, **except for the agreement listed below:**

\_\_\_\_\_  
Consultant's Name and Title

\_\_\_\_\_  
Name of Firm (if applicable)

\_\_\_\_\_  
Start Date

\_\_\_\_\_  
End Date

\_\_\_\_\_  
Cost

Description of Services Provided: \_\_\_\_\_

Is the consultant a former State employee or former public official?  YES  NO

If YES: \_\_\_\_\_  
Name of Former State Agency

\_\_\_\_\_  
Termination Date of Employment

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

\_\_\_\_\_  
Printed Name of Bidder or Vendor

\_\_\_\_\_  
**Signature of Principal or Key Personnel**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
Printed Name (of above)

\_\_\_\_\_  
Dept. of Public Health  
Awarding State Agency

Sworn and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
**Commissioner of the Superior Court  
or Notary Public**

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

Raul Pino, M.D., M.P.H.  
Commissioner



Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

### AFFIRMATIVE ACTION CONTRACT COMPLIANCE POLICY STATEMENT

The Department of Public Health (DPH) is an Affirmative Action/Equal Employment Opportunity employer, in compliance with all state and federal laws and shall comply with the Contract Compliance Regulations *and* CGS 4a-60 Nondiscrimination and affirmative action provisions in contracts of the state and political subdivisions other than municipalities. Consistent with the Contract Compliance Regulations of Connecticut State Agencies, Sections 46a-68j-21 through 46a-68j-43, DPH encourages bidders, contractors, subcontractors, and suppliers to:

- Develop and follow a plan of affirmative action to achieve or exceed parity of employment with the applicable labor market,
- Develop and follow an apprenticeship program complying with Sections 46a-68-1 to 46a-68-17 of the Administrative Regulations of Connecticut State Agencies, inclusive,
- Submit employment statistics contained in the "Employment Information Form," indicating that the composition of its workforce is at or near parity when compared to the race/sex composition of the workforce in the relevant labor market area, and
- Develop and follow a plan to set aside a portion of the contract for legitimate minority business enterprises per Section 46a-68j-30(10)(E) of the Contract Compliance Regulations

DPH considers bidders success in these factors in reviewing the bidder's qualifications under the Contract Compliance requirements. Accordingly, any individual or organization that desires to do business with DPH shall not:

- Discriminate or permit discrimination against any protected class person or protected group in the performance of contracts'
- Engage in discriminatory practices *or* permit discriminatory practices in their workplace;

And shall:

- Cooperate with the Connecticut Commission on Human Rights and Opportunities in all activities
- In all contract solicitations or advertisements state that they are an "affirmative action-equal opportunity employer"
- Sign a Notification to Bidders Form, and complete a workforce analysis questionnaire necessary for the contract award process

DPH notifies bidders, contractors, subcontractors, and suppliers of this policy and will not knowingly do business with any contractor, subcontractor or supplier of materials who unlawfully discriminates against members of any class protected under state or federal law. Contractors whose overall employment statistics are not reflective of the general employment area may be required to show good faith efforts to ensure that their personnel policies and practices do not have a discriminatory impact.



Raul Pino, MD, MPH  
Commissioner, Department of Public Health



DATE

Rev. 7/2017

## NOTIFICATION TO BIDDERS

The contract to be awarded is subject to contract compliance requirements mandated by Section 4-114a of the Connecticut General Statutes; and, when the awarding agency is the state, Section 46a-71(d) of the Connecticut General Statutes. There are Contract Compliance Regulations codified at Section 4-114a et. seq. of the Regulations of Connecticut State Agencies which establish a procedure for the awarding of all contracts covered by Sections 4-114a and 46a-71(d) of the Connecticut General Statutes.

According to Section 4-114a-3(9) of the Contract Compliance Regulations, every agency awarding a contract subject to the contract compliance requirements has an obligation to "aggressively solicit the participation of legitimate minority business enterprises as bidders, contractors, subcontractors and suppliers of materials." "Minority business enterprise" is defined in Section 4-114a of the Connecticut General Statutes as a business wherein fifty-one percent or more of the capital stock, or assets belong to a person or persons: "(1) who are active in the daily affairs of the enterprise; (2) who have the power to direct the management and policies of the enterprise; and (3) who are members of a minority, as such term is defined in subsection (a) of Section 32-9n." "Minority" groups are defined in Section 32-9n of the Connecticut General Statutes as "(1) Black Americans...(2) Hispanic Americans...(3) Women...(4) Asian Pacific Americans and Pacific Islanders; or (5) American Indians..." The above definitions apply to the contract compliance requirements by virtue of Section 4-114a-1 (10) of the Contract Compliance Regulations.

The awarding agency will consider the following factors when reviewing the bidder's qualifications under the contract compliance requirements:

- a) the bidder's success in implementing an affirmative action plan;
- b) the bidder's success in developing an apprenticeship program complying with Sections 46a-68-1 to 46a-68-17 of the Connecticut General Statutes, inclusive;
- c) the bidder's promise to develop and implement a successful affirmative action plan;
- d) the bidder's submission of EEO-1 data indicating the composition of it's work force is at or near parity when compared to the racial and sexual composition of the work force in the relevant labor market area; and
- e) the bidder's promise to set aside a portion of the contract for legitimate minority business enterprises. See Section 4-114a-3 (10) of the Contract Compliance Regulations.

**INSTRUCTION:** Bidder must sign acknowledgment form below and return signed page to Awarding Agency along with bid proposal. Please retain a copy for your files.

The undersigned acknowledged receiving and reading a copy of the "Notification to Bidders" form.

---

Signature

Date

on behalf of:

---

Contract No.: #

---

Letter of Award: \_\_\_\_\_

**I. WORKFORCE ANALYSIS**

Contractor Name:  
Address:

Total Number of CT employees:  
Full Time: Part Time:

Complete the following Workforce Analysis for employees on Connecticut worksites who are:

Job Categories	Overall Totals (sum of all cols. male & female)	White (not of Hispanic Origin)		Black (not of Hispanic Origin)		Hispanic		Asian or Pacific Islander		American Indian or Alaskan Native		People with Disabilities	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Officials & Managers													
Professionals													
Technicians													
Office & Clerical													
Craft Workers (skilled)													
Operatives (semi-skilled)													
Laborers (unskilled)													
Service Workers													
Totals Above													
Totals 1 year Ago													
FORMAL ON-THE-JOB TRAINEES (Enter figures for the same categories as are shown above)													
Apprentices													
Trainees													
EMPLOYMENT FIGURES WERE OBTAINED FROM:							Visual Check:		Employment Records		Other:		

- Have you successfully implemented an Affirmative Action Plan?  YES  NO  
Date of implementation: \_\_\_\_\_ If the answer is "No", explain.
- a) Do you promise to develop and implement a successful Affirmative Action?  
 YES  NO  Not Applicable Explanation:
- Have you successfully developed an apprenticeship program complying with Sec. 46a-68-1 to 46a-68-18 of the Connecticut Department of Labor Regulations, inclusive:  YES  NO  Not Applicable Explanation:
- According to EEO-1 data, is the composition of your work force at or near parity when compared with the racial and sexual composition of the work force in the relevant labor market area?  YES  NO Explanation:
- If you plan to subcontract, will you set aside a portion of the contract for legitimate minority business enterprises?  
 YES  NO Explanation:

\_\_\_\_\_  
Contractor's Authorized Signature

\_\_\_\_\_  
Date