



Department of Health

Request for Proposals

RFP # 20187

Person-Centered Planning Comprehensive System Transformation Statewide Training Initiative

Issued: October 6, 2022

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

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1.0 CALENDAR OF EVENTS

RFP# 20187 – PERSON-CENTERED PLANNING COMPREHENSIVE SYSTEM TRANSFORMATION STATEWIDE TRAINING INITIATIVE	
<u>EVENT</u>	<u>DATE</u>
Issuance of Request for Proposals	October 6, 2022
Deadline for Submission of Written Questions	Questions Due By October 20, 2022 at 4:00 p.m. ET
Responses to Written Questions Posted by DOH	Responses Posted On or About November 3, 2022
Deadline for Submission of Proposals	Proposals Due On OR Before November 30, 2022 at 4:00 p.m. ET
<i>Anticipated</i> Contract Start Date	August 1, 2023

2.0 OVERVIEW

Through this Request for Proposals (“RFP”), the New York State (“State”) Department of Health (“DOH” or “the Department”) is seeking competitive proposals from qualified bidders to provide training services as further detailed in Section 4.0: Scope of Work. It is the Department’s intent to award one (1) contract from this procurement.

2.1 Introductory Background

Enhancing Person-Centered (PC) practice, or an individualized approach to supporting people with disabling conditions, aligns with an increasing number of regulatory requirements, such as the Home and Community-Based Services (HCBS) Final Rule. It also stands to help New York State (NYS) meet the Triple Aim goal of Medicaid Redesign; improving population health outcomes, patient experience of satisfaction and quality of care, and efficiency in the use of NYS’s health resources. In addition, the Money Follows the Person (MFP) federal demonstration relies on the health care services system’s responsiveness to the expressed preferences of the frail elderly and individuals with disabilities to drive the rebalancing of the long-term care system away from institutional placements and towards HCBS delivered in community settings.

Home and Community-Based Services are important services for the frail elderly and people with disabilities that may help prevent the need for costlier institutional services that are provided in more regimented and restrictive residential and non-residential service settings. The HCBS field has faced significant changes since the Centers for Medicare & Medicaid Services (CMS) published the HCBS Final Rule, which is commonly referred to as “The Community Rule.” The rule, effective March 17, 2014, established new standards for the provision of Medicaid-funded HCBS, and set requirements for the planning of recipients’ services and supports. In NYS, this rule applies to those HCBS services provided through the waiver authorities 1915(c), 1915(k), and the 1115 Demonstration Waiver, which is where the clear majority of HCBS fall.

Person-Centered planning and practice standards are also included within several new federal regulations pertaining to both institutional services and HCBS. Most notable of these is the Medicaid and Children’s Health Insurance Program (CHIP) Managed Care Final Rule, published May 6, 2016. This far-reaching rule’s PC planning standard is stated in 441.301(c)(3), which is the same PC planning standard contained within the HCBS Final Rule. The Department believes that wide-spread PC practice enhancement can be achieved through statewide trainings and increased standardization of PC planning processes and tools, across provider types and populations.

A definition of terms relevant to the discussion of person-centeredness can assist to describe the context for the deliverables sought through this RFP. These terms are outlined below:

A. Person-Centered Practice

Person-Centered practice is the arrangement of services and supports that give individuals the ability to access all the benefits of community living while receiving those services in a manner that can help them reach their individual goals. PC practice is used as an umbrella term under which a variety of different person-centered models can fall, and it differs significantly from the more traditional models, such as institutional care and managed care.

New York State's health and human service system has been moving towards PC practice for decades through the promotion of models such as, Patient-Centered Practice, Resident-Centered Care, Person-Centered Care, etc. This evolution has been challenging for a large and complex system as it involves a dramatic shift in thinking for those organizations and systems more embedded in the traditional models, and a shift in the roles and relationships support persons have with the individuals they serve. This shift in thinking involves listening to the individuals served without firm opinions and judgments. This can be difficult because of the protective perspectives that professionals and paraprofessionals may have towards the individuals they serve and the roles the frail elderly and individuals with disabilities have in our society. Given the number of studies which indicate PC practice and planning improves quality of care, health outcomes and reduces health care costs, there are ample reasons to promote its use beyond the regulatory requirements.

B. Person-Centered Planning

Person-Centered Planning includes Recovery Planning, Individualized Service Planning, and Resident-Centered Service Planning and is part of the larger realm of PC practice. The overarching intent of PC planning is to develop a collaborative, individualized, goal-oriented program of care delivery that also involves the individuals served having community presence and participation. Furthermore, the PC planning standards within the HCBS Final Rule state the provider must support the individual along with their circle of support (family, friends, advocates), to develop and implement an individualized PC plan focused on the goals and preferences of the individual, which also demonstrates their options and choices for services and residential settings.

C. Person-Centered Thinking

Person-Centered thinking is a set of tools a person uses in PC planning, taking the different ways providers do the work and breaking them down into parts, in order to have discrete tools to support the individual(s) being served. Research suggests that to develop an effective PC practice curriculum it must teach both what to do and how to think.

Person-Centered thinking involves accepting a degree of 'inherited risk'. Supporting people to try out new skills (such as those required to get out into the community with limited mobility), without use of one-on-one staffing or other labor-intensive approaches, requires creativity and innovation in today's risk-adverse environment. This kind of risk can seem untenable given the increased oversight by agencies, and in times when growing staff time is devoted to incident reporting and risk avoidance, but it remains critically important.

D. Person-Centered Learning Organizations

"Person-Centered Learning Organizations" are defined for the purposes of this RFP as provider organizations that facilitate the learning of their members/staff to continuously transform themselves in support of the utilization of PC best practices.

Having good PC practice and PC thinking generally leads to good PC planning. However, good PC planning does not necessarily lead to good PC practice. Training initiatives often fail to address PC thinking, planning, and practice

in a coordinated fashion, nor do they provide support or training for the lengthy follow-up coaching needed from leadership trained to ensure that staff implementing plans can sustain PC practice.

The Department believes that wide-spread PC practice enhancement can be achieved through statewide trainings and increased standardization of PC planning processes and tools, across provider types and populations.

2.2 Important Information

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

It should be noted that Appendix A of [Attachment 8](#), "Standard Clauses for New York State Contracts", contains important information related to the contract to be entered into as a result of this RFP and will be incorporated, without change or amendment, into the contract entered into between DOH and the successful Bidder. By submitting a response to the RFP, the Bidder agrees to comply with all the provisions of Appendix A.

Note, [Attachment 7](#), the Bidder's Certifications/Acknowledgements, should be submitted and includes a statement that the bidder accepts, without any added conditions, qualifications or exceptions, the contract terms and conditions contained in this RFP including any exhibits and attachments. It also includes a statement that the bidder acknowledges that, should any alternative proposals or extraneous terms be submitted with the proposal, such alternate proposals or extraneous terms will not be evaluated by the DOH.

Any qualifications or exceptions proposed by a bidder to this RFP should be submitted in writing using the process set forth in [Section 5.2 \(Questions\)](#) prior to the deadline for submission of written questions indicated in [Section 1.0 \(Calendar of Events\)](#). Any such qualifications or exceptions that are not proposed prior to the deadline for submission of written questions may not be considered by DOH after contract award. Any amendments DOH makes to the RFP as a result of questions and answers will be publicized on the DOH web site.

2.3 Term of the Agreement

This contract term is expected to be for a period of three (3) years, with an option for a single two-year renewal as determined by the Department, commencing on the date shown on the Calendar of Events in Section 1.0, subject to the availability of sufficient federal funding, successful contractor performance, and approvals from the New York State Attorney General (AG) and the Office of the State Comptroller (OSC).

3.0 BIDDERS QUALIFICATIONS TO PROPOSE

3.1 Minimum Qualifications

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

- Bidder must have at least three (3) years' experience with delivering a state or federal level training program to professionals/professional organizations;
- Bidder must have at least one (1) year experience with delivering a state or federal level training program to participants/consumers and individuals in their circles of support;
- Bidder must have at least three (3) years' experience with outcome monitoring, reporting, and quality assurance of a state or federal level training program;
- Bidder must have at least two (2) years' experience with design/development and operation of a state or federal level training initiative;

- Bidder must have at least two (2) years' experience in the area of PC practice, PC planning, and PC thinking; and
- Bidder must have at least one (1) year experience providing training, technical assistance, and policy development in at least one (1) of the following three (3) disability service systems:
 - o aging/cognitive/physical disabilities,
 - o mental/behavioral disabilities, or
 - o developmental disabilities.

Experience acquired concurrently is considered acceptable.

For the purposes of this RFP, a prime contractor is defined as one who has the contract with the owner of a project or job and has full responsibility for its completion. A prime contractor undertakes to perform a complete contract and may employ (and manage) one or more subcontractors to carry out specific parts of the contract.

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

3.2 Preferred Qualifications

Bidders that demonstrate the following experience are preferred:

- At least three (3) years' experience delivering learning institutes (training mechanisms that promote change needed at the systems level) and supporting the development of learning organizations, or organizations that operate in a manner that embraces critical thinking and reflection in search of creative solutions;
- At least two (2) years' experience providing state or federal level training services related to Person-Centered (PC) practice, PC planning, and PC thinking to professionals/professional organizations;
- At least one (1) year experience providing state or federal level training services related to Person-Centered (PC) practice, PC planning, and PC thinking to participants/consumers and individuals in their circles of support; and
- At least one (1) year experience developing Person-Centered (PC) Planning templates for any impacted populations' service systems.

4.0 SCOPE OF WORK

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

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

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

4.1 Tasks/Deliverables

To achieve wide-spread PC practice enhancement, the Contractor is anticipated to conduct the following deliverables as part of a comprehensive statewide and system-wide training initiative based upon the schedule and deliverables listed below:

A. Deliverable Summary/Schedule:

Deliverable	Expected Due Date/Schedule
B. Person-Centered Planning and Practice Resource Library	
Revision of the PC Planning and Practice Resource Library	Four (4) anticipated per contract year
Maintenance of the Resource Library	Linkages to be reviewed/corrected every 30 days
C. Leadership Meetings	
Virtual Presentation/Meetings with the HCBS Rule Interagency Person-Centered Planning Workgroup	First presentation due within 30 days after contract approval and up to four (4) per contract year
D. Learning Institutes	
Revision of the Department's Existing Learning Institute Curriculum	Within 60 days of contract approval
Additional Modifications and Delivery of Learning Institute Curriculum	Within 30 days of the requested modification. The Department anticipates up to three (3) modifications per contract year
Delivery of Learning Institutes	Anticipated six (6) per contract year
E. Regional/Virtual Trainings	
Delivery of Regional/Virtual Trainings Curricula	Within 60 days of requested curriculum development. The Department anticipates up to three (3) new curricula developed each contract year
Modification and Delivery of Regional/Virtual Trainings Curricula	Within 30 days of the requested modification. The Department anticipates up to twelve (12) total modifications per contract year
Delivery of Regional/Virtual Trainings	Anticipated 100 training sessions per year with an anticipated 80% of training sessions being conducted virtually and an anticipated 20% of training sessions held in-person
F. Program Evaluation	
Development and delivery of the Independent Evaluation Study Proposal	Within 90 days of the Contract start date.
Development and delivery of the Independent Evaluation Results.	Within 30 days of the end of each contract year.
Reporting	
Resource Library Revision/Update Report	Due at the end of each month with the submission of each monthly report and voucher
Learning Institute Reports	Due within 45 days of the completion of each Learning Institute with the submission of the monthly report and voucher
Report on Attendance for the Regional Trainings	Due at the end of each month with the submission of each monthly report and voucher
Quarterly Evaluation Reports including results of training evaluations, participant demographics, successes and barriers with strategies for improvement	Due at the end of each quarter for the duration of the contract period
Monthly Progress Reports	Due at the end of each month, with the submission of each monthly report and voucher

B. Person-Centered Planning and Practice Resource Library:

The Department currently possesses a Person-Centered Planning and Practice Resource Library (Resource Library), which serves as a repository for HCBS-compliant PC practice guidance and related resources. Although this has already been developed, the Contractor will be required to revise and maintain the Resource Library during the resulting contract period.

1. Currently, the Resource Library contains the following components:
 - a. Sample PC planning template(s), which are HCBS Rule compliant;
 - b. Resources to support the use of assistive technology to promote independence and autonomy in residential and non-residential settings, including, but not limited to, innovative uses of both high and low technology items;
 - c. Other publicly available resources or documents including, but not limited to, electronic links to other public domains, articles, recommended policies, best practice examples, checklists, templates, and planning and practice tools, etc. that are relevant to PC Practice; and
 - d. Previously conducted Regional/Virtual Training Webinars, as outlined in Section 4.1.D and 4.1.E;
2. The Department anticipates the need to revise the Resource Library four (4) times per contract year. This number may vary based on actual need, as determined by the Department. All revisions to the Resource Library are subject to the review and approval of the Department.
3. Any added or revised resources to be included in the Resource Library must:
 - a. Be made accessible for those with disabilities, such as potential age-related visual impairments or limited literacy skills;
 - b. Follow or improve on the current organization of the resources;
 - c. Be designed for and organized based on the following intended audiences who are interested in PC Practice and/or involved in overseeing, providing, receiving, or supporting someone who receives HCBS:
 - i. HCBS recipients, their families, circles of support, and advocates;
 - ii. HCBS providers (both residential and non-residential) including service planners, direct service staff, professional and paraprofessional service providers, and provider agency management;
 - iii. Managed Care Organizations, including care managers and other staff;
 - iv. State and local officials and staff; and
 - v. Individuals from all HCBS service sectors.
4. The Contractor must obtain approval from the Department, in writing, of the content and format/layout of added or revised resources to be included in the Resource Library. The Department may request revisions, in whole or in part, prior to providing its approval of such added or revised resources;
5. The Contractor will be required to check the status of the linkages included in the resource library to ensure all links are accurately pointing to the correct resources, at a minimum, monthly or every 30 days;
6. The Contractor will report monthly to the Department as to all revisions and updates that were made to the Resource Library; and
7. The Department will retain ownership of all resources/materials developed by the Contractor for the Resource Library upon contract expiration.

C. Leadership Meetings:

The Contractor will be required to:

1. Present virtually, to the HCBS Rule Interagency Person-Centered Planning Workgroup (Workgroup) within 30 days after contract approval, a high-level overview of the status of the initiative described in this Scope of Work and best practices around PC practice to strengthen the strategic operation of the initiative (Note - The Workgroup will be comprised of stakeholders as determined/directed by the Department);
2. Attend virtual meetings with the Workgroup, up to four (4) times per contract year at the request of the Department, to present updates related to the operation of this initiative; and
3. Develop PowerPoint presentations, to be approved by the Department prior to delivery, describing the status of the project; demographic and evaluation data related to the project, accomplishments, barriers, and resolutions to barriers; and seeking input and suggestions from the workgroup.

D. Learning Institutes:

To support the development and expansion of "Person-Centered Learning Organizations" throughout the State, the Contractor will be required to implement Learning Institutes (intensive training mechanisms that promote change needed at the systems level), as further described below:

1. Learning Institutes will be designed for and delivered to individuals who are involved in overseeing, providing, and/or receiving HCBS, including the following intended audiences:
 - a. HCBS recipients, their families, and their circles of support;
 - b. HCBS providers (both residential and non-residential) including service planners, direct service staff, professional and paraprofessional service providers, and provider agency management;
 - c. Managed Care Organizations, including care managers and other staff;
 - d. State and local officials and staff; and
 - e. Individuals from all HCBS service sectors.

2. Prior to conducting the Learning Institutes, the Contractor will:
 - a. Develop a preliminary training outline based on a review and revision of the Department's existing Learning Institute structure that includes the following:
 - i. Outline of content areas;
 - ii. Definition of clear and measurable goals and objectives;
 - iii. Description of teaching methodologies and modalities;
 - iv. Listing and description of all training materials to be used as part of training and/or technical assistance;
 - v. Description of pre/post-testing measurements;
 - vi. Expected length of sessions;
 - vii. Proposed instructors for the delivery of the Learning Institutes;
 - viii. The minimum number of breakout rooms for discussion; and the amount of time for each breakout room discussion; and
 - ix. The roles of faculty who will be checking in with the breakout room discussions to ensure conversations are stimulating, engaging, and productive for participants.
 - b. Review and revise the existing Learning Institute curriculum, including all related ancillary materials;
 - c. Submit the preliminary Learning Institute outline and revised curriculum, including trainee and trainer manuals, within 60 days of contract approval;
 - i. The Department reserves the right to request revisions to the outline and/or curriculum;
 - ii. The Contractor must obtain the Department's approval of the outline and curriculum before use;
 - iii. The Department will retain ownership of all materials developed under this contract upon contract expiration;
 - d. Advertise, recruit, and register participants for the Learning Institutes.
 - i. Learning Institutes must recruit a sufficient number of individuals to achieve the attendance specified in section 4.1.D.3.c below, and must employ strategies to maximize participation;
 - ii. Recruitment methods must address and ensure that **individuals from all HCBS service sectors** are included in the Learning Institutes. Additional information on HCBS can be found at: https://www.health.ny.gov/health_care/medicaid/redesign/home_community_based_settings.htm;
 - iii. Individuals must be recruited from across New York State;
 - iv. Recruitment methods must peak individuals' interest and maintain their ongoing participation;
 - v. Registration system must maintain accurate records of training registration and participation.
 - e. Coordinate, reproduce, and distribute all ancillary materials required to effectively deliver Learning Institutes as identified in Section 4.1.D.3;
 - i. All materials are subject to the review and approval of the Department prior to reproduction and distribution;
 - f. Secure locations for in-person session(s), as needed, and software/system for virtual session(s);
 - i. Locations for in-person sessions must be accessible for those with disabilities, including being in compliance with the American Disabilities Act of 1990;
 - ii. Locations secured by the Contractor for in-person sessions must follow State and local health and safety guidelines related to COVID;
 - g. Conduct the 'Learning Institute', virtually or in-person as described in Section 4.1.D.3 below;
 - h. Modify the Learning Institute curriculum;
 - i. During the course of the contract, the Department may require the Learning Institute curriculum to be updated and/or modified;
 - ii. Currently the Department anticipates up to three (3) annual curriculum modifications; the actual number of modifications may vary based on need as determined by the Department;

- iii. Modified Learning Institute curriculum must be submitted to the Department within 30 days of the modification request; and
 - iv. Modifications are subject to the review and approval of the Department;
3. The Contractor will be required to conduct Learning Institutes as follows:
- a. The Department anticipates up to six (6) Learning Institutes per year; the actual number of Learning Institutes may vary based on need and demand as determined by the Department;
 - b. The Learning Institute will begin with a time intensive training period to teach concepts, tools, and best practices. The actual length and number of sessions will be determined by the Contractor's approved Learning Institute curriculum;
 - c. The Learning Institutes will serve an audience of approximately 20-30 people per institute;
 - d. The Learning Institute will conclude with development of an action plan(s) to implement PC best practice within each participant's organization/sphere of influence;
 - i. Learning Institute participants will set a goal and then an action plan to support themselves to further promote true person-centered practice, thinking and planning in their own life and/or within their organization/group/association/etc., first weighing any pros and cons to their proposed goal to adjust it as needed, then identifying any barriers that may get in the way of achieving their goal so that they can craft a measurable action plan that addresses potential barriers;
 - ii. The Learning Institute faculty will provide participants with education on the above and worksheets to do the pros and cons sort, barrier identification and action planning;
 - e. The Learning Institute will include periodic, regular follow-up consultation (mentoring), using the safest and most economic method (in-person, virtual, conference call, webinar, etc.) with the participants to assess and promote progress in accomplishing the goals and tasks outlined in the action plans;
 - f. The Learning Institute will utilize strategies to assure that individuals will maintain their attendance at Learning Institute sessions and be engaged with the group learning process;
 - g. The Learning Institute will promote, through the training and mentoring process described above, the following:
 - i. The development of "Innovation Directors", or leadership within provider organizations who build spaces for innovation in PC practice;
 - ii. The use of assistive technology; and
 - iii. The sustainability of the learning communities through coaching circles and online connection technology.
4. Upon completion of each Learning Institute, the Contractor is required to submit the reporting identified in Section 4.3.A.

E. Regional/Virtual Trainings:

The Contractor will be required to revise existing curricula, develop new curricula, modify curricula developed under this contract, and conduct training sessions, in-person and virtually, on PC Practice topics as identified by the Department, with the input of the Contractor, and as specified in 4.1.E.2, for a variety of audiences, including but not limited to the individuals identified in 4.1.E.1.

1. The Contractor will develop/revise existing curricula and implement regional/virtual training sessions targeted to the following audiences:
- a. Individuals receiving HCBS, their families, and individuals in their circles of support.
 - i. It is anticipated that approximately 20% of the Regional/Virtual Trainings will be targeted directly toward this audience;
 - b. Providers of service including but not limited to provider agency management, staff involved in service planning and service provision (residential and non-residential settings/services), managed care organizations and their staff, direct care staff, agency leadership, State, regional, and local staff, and other organizations supportive of HCBS.
 - i. It is anticipated that approximately 80% of the Regional/Virtual Trainings will be targeted toward this audience;

- c. **Individuals from all HCBS service sectors will be engaged for participation in regional/virtual training sessions.**
2. Prior to conducting the Regional/Virtual trainings, the Contractor will:
- a. Review and revise the Department's existing preliminary training outline for the Regional/Virtual Training topics outlined in Section 4.1.E.2.b, and other topics as may be identified by the Department, that includes the following:
 - i. Outline of content areas;
 - ii. Definition of clear and measurable goals and objectives;
 - iii. Description of teaching methodologies and modalities;
 - iv. Listing and description of all training materials to be used as part of training and/or technical assistance;
 - v. Description of pre/post-testing measurements;
 - vi. Number and qualification of instructors proposed for the delivery of the training;
 - vii. The minimum number of breakout rooms for activity/discussion; and the amount of time for each breakout room discussion; and
 - viii. The number and role of trainers who will be checking in with the breakout room discussions to ensure conversations are stimulating, engaging, and productive for participants;
 - b. Develop new curricula or update the existing training curricula, for each of the Regional/Virtual Training topics identified by the Department, with the input of the Contractor, including all related ancillary training materials for the in-person and virtual trainings, based on information provided in this RFP and the PC Practice expertise of the Contractor;
 - i. Specific training topics may include, but not be limited to:
 - A. Person-Centered Thinking Skills;
 - B. Person-Centered Thinking and the HCBS Rule;
 - C. Person-Centered Planning in Times of Crisis;
 - D. Person-Centered Plan Development;
 - E. Person-Centered Practice for Managers;
 - F. Person-Centered Practice and Cultural Humility; and
 - G. Additional training topics as deemed needed and appropriate by the Department;
 - ii. Training topics will address:
 - A. Development of concepts and skills
 - B. Shifting the perspectives of agency leadership and the practices of agency management towards policies and procedures that promote person-centeredness within an agency;
 - C. Instruction and tools to facilitate the development, implementation and sustainability of policies and procedures that support PC practice within an organization, including procedures for developing and updating PC plans and their utilization;
 - D. The tension in the following dichotomies in service delivery and agency processes:
 - a) 'efficiency' vs. 'individualization';
 - b) 'expert' vs. 'participant as expert'
 - c) 'risk vs. safety'
 - d) 'choice vs. autonomy';
 - e) 'what is important for an individual' vs. 'what is important to an individual'
 - E. Shifting the mindsets of the target audiences towards more person-centered thought processes;
 - iii. The curricula will:
 - A. Offer content that is comprehensive, high quality, interactive, represents best practices in PC practice, and supports the sustainability of best practices;
 - B. Address barriers to PC practice at all levels of the HCBS service systems;
 - C. Include information on the use of assistive technology to promote the autonomy and independence of recipients wherever relevant;
 - D. Utilize effective adult learning principles and methodologies;
 - E. Contain materials which have been tailored to New York State's highly diverse HCBS recipients;
 - F. Be interactive and activity-based; including a minimum of two (2) small group activities/discussions for each training session;

- G. Conclude each training session with development of an action plan(s) to implement PC best practice within each participant's sphere of influence;
 - a) Training participants will set a goal and an action plan to support themselves to further promote true person-centered practice, thinking and planning in their own life or work life, weighing any pros and cons to their proposed goal to adjust it as needed, then identifying any barriers that may get in the way of achieving their goal so that they can craft a measurable action plan that addresses potential barriers.
 - b) Trainers will provide participants with education on the above and worksheets to do the pros and cons sort, barrier identification and action planning.
- iv. Currently the Department anticipates up to three (3) new curricula will be developed annually; the actual number may vary based on need and demand as determined by the Department.
- v. A polished, edited recording will be made for each new curriculum for posting in the Person-Centered Planning and Practice Resource Library.
- c. Submit the revised training outline and curriculum, including trainee and trainer manuals, in a timely manner (within 60 days);
 - i. The Department reserves the right to request revisions to the outline and/or curriculum;
 - ii. The Contractor must obtain the Department's approval of the outline and curriculum before use;
 - iii. The Department will retain ownership of all materials developed under this contract upon contract expiration;
- d. Advertise, recruit, and register participants for the regional/virtual training events described in 4.1.E.2. The Contractor must develop and utilize recruitment strategies that will:
 - i. Engage individuals from throughout New York State;
 - ii. Generate interest, attention, and engagement among individuals involved in overseeing, providing and receiving HCBS;
 - iii. Ensure the participation of **individuals from all HCBS service sectors**; Additional information on HCBS can be found at: https://www.health.ny.gov/health_care/medicaid/redesign/home_community_based_settings.htm
 - iv. Ensure approximately 40 individuals will be trained in each in-person or virtual training session;
 - v. Minimize the number of 'no-show' participants, i.e., ensure that individuals that register for a training session either participate in that session or cancel their participation;
- e. Coordinate, reproduce, and distribute all training materials required to effectively deliver training programs identified in Section 4.1.E.2;
 - i. All materials are subject to the review and approval of the Department prior to reproduction and distribution; and
- f. Secure locations for in-person training, as needed, and software/system for virtual training;
 - i. Locations for in-person sessions must be accessible for those with disabilities, including being in compliance with the American Disabilities Act of 1990;
 - ii. Locations secured by the Contractor for in-person training must follow State and local health and safety guidelines related to COVID;
- g. Modify training curricula as requested by the Department;
 - i. Currently the Department anticipates twelve (12) annual curriculum modifications total. The number of actual curriculum modifications may vary based on need, as determined by the Department;
 - ii. Modified training curricula must be submitted to the Department within 30 days of the modification request;
 - iii. Modifications are subject to the review and approval of the Department;
- h. Seek approval from accrediting organization to provide continuing education credits for social workers and continuing nursing education credits for nurses:
 - i. All work involved in continuing education development, administration, reporting, and retention of records, including, but not limited to, utilizing online post-test and evaluation systems, providing evaluation post-test weblinks, using approved CE language to promote training events, fulfillment of accreditation requirements and record keeping for accrediting bodies, quarterly evaluation and CE summaries for each training activity, and collection and maintenance of sign-in sheets for each training offered.
- i. Maintain accurate training registration and participation data, as determined by the Department, and make available to the Department with periodic reporting, upon request, and at the conclusion of the

- project; and
- j. Record one copy of each training topic to be posted in the online resource library;

3. Conduct the training as described below;
 - a. The Department anticipates up to 100 total training sessions will be conducted per year; the actual number of training sessions may vary based on need and demand, as determined by the Department;
 - i. The Department anticipates approximately 80% of training sessions will be held virtually; the actual percentage may vary based on need and demand as determined by the Department;
 - ii. The Department anticipates approximately 20% of training sessions will be held in-person; the actual percentage may vary based on need and demand as determined by the Department;
 - b. The anticipated length of the training sessions will be:
 - i. Virtual sessions are anticipated to be two- and one-half (2.5) hours long.
 - ii. In-person sessions are anticipated to be four (4) hours long.
4. The Department will retain ownership of any curriculum materials developed or produced, as well as any related forms, recorded trainings, and other supporting materials involved in the above deliverables. Such materials must be made available for public domain by the Contractor and will not be proprietary.

F. Program Evaluation

- i. The contractor will conduct a formal independent evaluation to determine the effectiveness of the training and learning opportunities conducted through this project on improving outcomes in person-centered planning and practice, and its impact on training attendees.
 - a. Prior to initiating the evaluation, the Contractor will develop a study proposal describing the scope of the evaluation, the specific outcomes to be evaluated, the methodology for evaluating the data, and the specific data to be collected, both qualitative and quantitative. (Due within 90 days of contract start date).
 - b. Upon approval by the Department of the study proposal, the Contractor will conduct all data collection and analysis necessary to fully evaluate the effectiveness and impact of the project.
 - c. The Contractor will report annually on the process and findings of the evaluation (Due within 30 days of the end of each contract year), including:
 - i. An executive summary of the evaluation results;
 - ii. A report of the evaluation results, with a focus on the findings related to the outcomes evaluated; and
 - iii. A slide deck with full study results.

4.2 Staffing

- A. The Contractor must maintain a sufficient number of culturally competent staff who have experience in healthcare, Medicaid, design/development and operation of a state or federal level training program, outcome monitoring/reliability, and who have delivered consistently high-quality training program(s).
- B. The Contractor must maintain a sufficient number of staff to fulfill the tasks of the project, including but not limited to: in-person and webinar training; refresher training; database and data outcome management; assessment and evaluation; travel and meeting coordination; on-going quality assurance; and outcome and quality monitoring.
- C. The Contractor must appoint a Project Director with direct responsibility for the contract deliverables who will serve as a primary point of contact with the Department. This individual should have expertise in the field of person-centered practice and planning and familiarity with the requirements of the HCBS rule.
- D. The Contractor should employ staff with experience in:
 - i. New York State's Healthcare System and Medicaid Home and Community-Based Services (HCBS) regulation and policy;

- ii. Developing and delivering HCBS Rule-compliant person-centered planning and process trainings;
 - iii. Providing training services in at least two (2) of the following disability service systems: aging/cognitive/physical disabilities, mental/behavioral disabilities, and/or intellectual/ developmental disabilities;
 - iv. Providing training services in the area of PC practice, PC planning, and/or PC thinking;
 - v. Conducting focus groups and strategic planning to plan large scale projects involving multiple stakeholder types, including individuals and their circle of support; and
 - vi. Providing education and assistance related to assistive technologies.
- E. The Department reserves the right to approve or deny any of the Contractor's proposed staff members for this project.

4.3 Reporting

- A. The Contractor shall submit the following reporting to the Department within 45 days of the conclusion of each Learning Institute:
1. Learning Institute session dates and participants;
 2. Dates of follow up consultation and participants;
 3. Copies of action plans;
 4. Final resolution of goals and tasks in the action plans;
 5. Examples of plans for sustainability of PC practice as developed with participants during the conclusion of each institute; and
 6. Examples of constructive comments from participants.
- B. The Contractor shall track and report to the Department on attendance at all Regional/Virtual Training sessions;
1. The reports shall be submitted at the end of the month in which the training was concluded, with the submission of each monthly voucher.
 2. The report will include tracking of registration vs. participation data and a plan of action to address any anticipated lack of attendance by registered participants.
- C. The Contractor shall submit monthly progress reports with the submission of their monthly vouchers. The progress reports must consist of the following:
1. Activity conducted in the voucher month, including training and mentoring conducted and participants;
 2. Maintenance activities related to the Resource Library, including testing and correction of links;
 3. A summary and highlight of significant progress areas and significant barriers;
 4. A summary of accomplishments and barriers in each activity area where work was performed;
 5. All counts of meetings attended and participants;
 6. A breakdown of hours by Title for each program deliverable;
 7. A breakdown of work done by subcontractors; and
 8. A summary of any updates or changes.
- D. The Contractor shall submit an evaluation of training methods and content, and report of participant demographics.
1. The report shall be submitted on a quarterly basis for the duration of the contract term;
 2. At a minimum, this report must consist of the following:
 - a. Outline of major question topics and/or areas of concern and requests for assistance;
 - b. Summary of all trainings and Learning Institutes conducted in each New York State region;
 - c. Summary of evaluation and demographic data, including trends over time;
 - d. A report on successes with recommendations on improvements/changes to be implemented for the next quarter; and
 - e. Outline of updates made to the resource library, including resources added.
- E. The Contractor shall develop and submit additional reports, as requested by the Department, for a variety of audiences.

4.4 Information Technology

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

4.5 Security

The contractor must ensure that they are in compliance with all applicable New York State security policies and standards (the list below highlights the most pertinent items):

• All policies and standards defined in the New York State ITS security policies and standards (<http://its.ny.gov/eiso/policies/security>), including, but not limited to:

- NYS-P03-002 – Information Security Policy,
- NYS-P10-006 – Identity Assurance Policy,
- NYS-S13-001 – Secure System Development Life Cycle Standard,
- NYS-S13-002 – Secure Coding Standard (if applicable),
- NYS-S13-004 – Identity Assurance Standard,
- NYS-S14-003 – Information Security Controls Standard,
- NYS-S14-005 – Security Logging Standard,
- NYS-S14-007 – Encryption Standard,
- NYS-S15-008 – Secure Configuration Standard
- NYS-S14-013 – Account Management / Access Control Standard
- NYS-S15-001 – Patch Management Standard (if applicable) and
- NYS-S15-002 – Vulnerability Scanning Standard

The contractor's organization, employees, subcontractors and volunteers will implement and maintain policies, an internal control process for oversight and monitoring and procedures to assure the confidentiality of personal identifiable data and protected health information.

4.6 Transition

- A. The transition represents a period when all services, provided by the Contractor resulting from this RFP, must be turned over to the Department, another Departmental agency, or its designee during or at the end of the contract.
- B. The Contractor shall ensure that any transition to DOH or its designee be done in a way that provides the Department with uninterrupted services. This includes a complete and total transfer of all data, files, reports, and records generated from the inception of the contract through the end of the contract to the Department or another Department agent should that be required during or upon expiration of its contract.
- C. The Contractor will develop an organized work plan and timeline in order to ensure all current and future related services during the transition period are addressed and completed. All relationships between all other parties involved should be notified of the transition and all changes required to ensure a seamless transition of services between Contractors and/or the Department.
- D. The Contractor shall manage and maintain the appropriate number of staff to meet all requirements listed in the RFP during transition. All reporting and record requirements, security standards, and performance standards are still in effect during the transition period. Three (3) months prior to the end of the contract period, the Contractor will work with the Department and its designees to ensure a complete, efficient, and successful transition.

5.0 ADMINISTRATIVE INFORMATION

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

5.1 Restricted Period

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

This prohibition applies to any oral, written, or electronic communication under circumstances where a reasonable person would infer that the communication was intended to influence this procurement. Violation of any of the requirements described in this Section may be grounds for a determination that the bidder is non-responsible and therefore ineligible for this contract award. Two (2) violations within four (4) years of the rules against impermissible contacts during the “restricted period” may result in the violator being debarred from participating in DOH procurements for a period of four (4) years.

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

5.2 Questions

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

Any qualifications or exceptions to Attachment 8 (DOH Agreement) proposed by a bidder to this RFP should be submitted in writing prior to the deadline for submission of written questions indicated in Section 1.0 (Calendar of Events). Any such qualifications or exceptions that are not proposed prior to the deadline for submission of written questions may not be considered by DOH after contract award.

5.3 Right to Modify RFP

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

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

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

If, prior to the Deadline for Submission of Proposals, a bidder fails to notify DOH of a known error or an error that reasonably should have been known, the bidder shall assume the risk of proposing. If awarded the contract, the

bidder shall not be entitled to additional compensation by reason of the error or its correction.

5.4 Payment

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

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

Subject: Unit ID: 3450445 Contract #: TBD

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

**NYS Department of Health
Unit ID 3450445
c/o NYS OGS BSC Accounts Payable
Building 5, 5th Floor
1220 Washington Ave.
Albany, NY 12226-1900**

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

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

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

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

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

The Contractor will be paid monthly, based on their deliverable prices identified in their submitted Attachment B: Cost Proposal. The deliverable prices are to be all-inclusive of costs, including but not limited to: materials, reporting, equipment, travel, location rentals, profit, and labor. The Contractor will not be reimbursed for any cost incurred outside of the pricing provided in their Attachment B: Cost Proposal.

To receive payment, the Contractor(s) must include the following applicable items with their monthly invoices:

- Identification of each deliverable completed within the service dates of the invoice;
- Appropriate supporting documentation for each deliverable completed; and
- Identification of any submitted report to the Department, within the service dates of the invoice.

5.5 Minority & Woman-Owned Business Enterprise Requirements

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

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" (“Disparity Study”). The report found evidence of statistically significant disparities between the level of participation of minority-and women-owned business enterprises in state procurement contracting versus the number of minority-and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that DOH establish goals for maximum feasible participation of New York State Certified minority- and women – owned business enterprises (“MWBE”) and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

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

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

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

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

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

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

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

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

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

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

5.6 Equal Employment Opportunity (EEO) Reporting

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

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

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

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

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

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

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

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

Forms are available through these links:

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

5.8 Contract Insurance Requirements

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

5.9 Subcontracting

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

5.10 DOH's Reserved Rights

The Department of Health reserves the right to:

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

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

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

5.11 Freedom of Information Law ("FOIL")

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

5.12 Lobbying

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

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

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

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

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

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

5.13 State Finance Law Consultant Disclosure Provisions

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

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

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

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

5.14 Debriefing

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

5.15 Protest Procedures

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

5.16 Iran Divestment Act

By submitting a bid in response to this solicitation or by assuming the responsibility of a Contract awarded hereunder, Bidder/Contractor (or any assignee) certifies that it is not on the “Entities Determined To Be Non-Responsive Bidders/Offerers Pursuant to The New York State Iran Divestment Act of 2012” list (“Prohibited Entities List”) posted on the OGS website (currently found at this address: <http://www.ogs.ny.gov/about/regs/docs/ListofEntities.pdf>) and further certifies that it will not utilize on such Contract any subcontractor that is identified on the Prohibited Entities List. Additionally, Bidder/Contractor is advised that should it seek to renew or extend a Contract awarded in response to the solicitation, it must provide the same certification at the time the Contract is renewed or extended.

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

5.17 Piggybacking

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

5.18 Encouraging Use of New York Businesses in Contract Performance

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

5.19 Diversity Practices Questionnaire

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

5.20 Participation Opportunities for NYS Certified Service-Disabled Veteran-Owned Businesses

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

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

For purposes of this procurement, DOH conducted a comprehensive search and determined that the Contract does not offer sufficient opportunities to set specific goals for participation by SDVOBs as subcontractors, service providers, and suppliers to Contractor. Nevertheless, Bidder/Contractor is encouraged to make good faith efforts to promote and assist in the participation of SDVOBs on the Contract for the provision of services and materials. The directory of New York State Certified SDVOBs can be viewed at: <https://ogs.ny.gov/veterans/>

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

5.21 Intellectual Property

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

5.22 Vendor Assurance of No Conflict of Interest or Detrimental Effect

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

5.23 Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination

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

5.24 Executive Order 16 Prohibiting Contracting with Entities Conducting Business Operations in Russia

All Bidders responding to this solicitation should submit [Attachment 12](#) certifying the status of their business operations in Russia, if any, pursuant to Executive Order 16.

6.0 PROPOSAL CONTENT

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

To expedite review of the proposals, Bidders are requested to submit proposals in separate Administrative, Technical, and Cost packages inclusive of all materials as summarized in Attachment A, Proposal Documents. This separation of information will facilitate the review of the material requested. No information beyond that specifically requested is required, and Bidders are requested to keep their submissions to the shortest length consistent with making a complete presentation of qualifications. Evaluations of the Administrative, Technical, and

Cost Proposals received in response to this RFP will be conducted separately. Bidders are therefore cautioned not to include any Cost Proposal information in the Technical Proposal documents.

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

6.1 Administrative Proposal

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

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

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

B. Freedom of Information Law – Proposal Redactions

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

C. Vendor Responsibility Questionnaire

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

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

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

D. Vendors Assurance of No Conflict of Interest or Detrimental Effect

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

E. M/WBE Forms

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

F. Encouraging Use of New York Businesses in Contract Performance

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

G. Bidder's Certified Statements

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

H. References

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

I. Diversity Practices Questionnaire

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

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

Submit [Attachment 11](#) certifying that it does not have institutional policies or practices that fail to address the harassment and discrimination of individuals on the basis of their age, race, creed, color, national origin, sex, sexual orientation, gender identity, disability, marital status, military status, or other protected status under the Human Rights Law.

K. Executive Order 16 Prohibiting Contracting with Entities Conducting Business Operations in Russia

Submit [Attachment 12](#) certifying the status of your business operations in Russia.

6.2 Technical Proposal

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

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

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

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

A. Title Page

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

B. Table of Contents

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

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

1. Bidders must be able to meet all the requirements stated in Section 3.1 of the RFP. The bidder must submit documentation that provides sufficient evidence of meeting the criterion. This documentation may be in any format needed to demonstrate how they meet the minimum qualifications to propose identified below:
 - a. Bidder must have at least three (3) years' experience with delivering a state or federal level training program to professionals/professional organizations;
 - b. Bidder must have at least one (1) year experience with delivering a state or federal level training program to participants/consumers and individuals in their circles of support;
 - c. Bidder must have at least three (3) years' experience with outcome monitoring, reporting, and quality assurance of a state or federal level training program;
 - d. Bidder must have at least two (2) years' experience with design/development and operation of a state or federal level training initiative;
 - e. Bidder must have at least two (2) years' experience in the area of PC practice, PC planning, and PC thinking; and
 - f. Bidder must have at least one (1) year experience providing training, technical assistance, and policy development in at least one (1) of the following three (3) disability service systems:
 - o aging/cognitive/physical disabilities,
 - o mental/behavioral disabilities, or
 - o developmental disabilities.
2. Bidders able to meet the preferred qualifications stated in Section 3.2 of the RFP should submit documentation that provides sufficient evidence of meeting the criterion. This documentation may be in any format needed to demonstrate how they meet the preferred qualifications identified below:
 - a. At least three (3) years' experience delivering learning institutes (training mechanisms that promote change needed at the systems level) and supporting the development of learning organizations, or organizations that operate in a manner that embraces critical thinking and reflection in search of creative solutions;
 - b. At least two (2) years' experience providing state or federal level training services related to Person-Centered (PC) practice, PC planning, and PC thinking to professionals/professional organizations;
 - c. At least one (1) year experience providing state or federal level training services related to Person-Centered (PC) practice, PC planning, and PC thinking to participants/consumers and individuals in their circles of support; and
 - d. At least one (1) year experience developing Person-Centered (PC) Planning templates for any impacted populations' service systems.

D. Technical Proposal Narrative

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

Elements of the technical proposal are as follows:

1. Staffing and Personnel
 - a. Provide a summary of how the bidder's assigned staff will be trained to ensure that all staff assigned to this contract will have the appropriate competencies, including any specialized training and/or protocols that will be utilized;
 - b. Provide a Staffing Plan that includes an organizational chart delineating the titles of the staff

- responsible for fulfilling program requirements, their lines of communications, and location(s) where they will be assigned;
- c. Describe how the bidder plans to recruit and/or maintain a sufficient number of staff to ensure the bidder meets all required timeframes and deliverables as stated in the RFP;
- d. Describe how the bidder plans to recruit and/or maintain staff with experience in:
 - i. New York State's Healthcare System and Medicaid Home and Community-Based Services (HCBS) policy;
 - ii. Developing and delivering HCBS Rule-compliant person-centered planning and process trainings;
 - iii. Providing training services in the following disability service systems: aging/cognitive/physical disabilities, mental/behavioral disabilities, and/or intellectual/developmental disabilities;
 - iv. Providing training services in the area of PC practice, PC planning, and/or PC thinking;
 - v. Conducting focus groups and strategic planning to plan large scale projects involving multiple stakeholder types;
 - vi. Providing education and assistance related to assistive technologies;
 - vii. Providing review and maintenance of an online resource library; and
 - viii. Obtaining approval from accrediting organization(s) to provide continuing education credits for social workers and continuing nursing education credits for nurses and providing continuing education units to trainees in the social work and nursing fields.
 - ix. Describe the proposed Project Director's project management skills, expertise in the field of person-centered practice and planning, and familiarity with the requirements of the HCBS rule.

2. Project Implementation

- a. Person-Centered Planning and Practice Resource Library:

Describe the bidder's plan to identify and deliver additional and/or revised HCBS Rule-compliant materials to be included in a Person-Centered Planning and Practice Resource Library;

 - i. Describe how new materials will be identified and obtained that are relevant for:
 - A. HCBS recipients (under covered HCBS authorities), their families, their circles of support, and advocates;
 - B. HCBS providers (both residential and non-residential) including service plans, direct service staff and service providers, and agency management;
 - C. Managed Care Organizations, including care managers, and insurers; and
 - D. State and local officials and staff; and
 - E. Individuals from all HCBS service sectors.
 - ii. Describe how additional and/or revised materials will be made accessible for those with disabilities, such as potential age-related visual impairments or limited literacy skills;
 - iii. Describe the bidder's planned method for obtaining additional and/or revised samples of PC planning template(s);
 - iv. Describe how the materials will facilitate successful utilization of assistive technology to promote independence and autonomy in residential and non-residential settings, including, but not limited to, innovative uses of both high and low technology items;
 - v. Describe the bidder's process for revising the Resource Library four (4) times per contract year as described in Section 4.1.B.2 of this RFP;
 - vi. Describe the bidder's process for reviewing, correcting, and updating resource library entries on a monthly basis, as described in Section 4.1.B.5 of this RFP.
- b. Leadership Meeting
 - i. Describe the bidder's plan to present to the HCBS Rule Interagency Person-Centered Planning Workgroup (Workgroup) a high-level overview of the initiative described in this RFP and best practices around PC practice to strengthen the strategic operation of the initiative; and
 - ii. Describe how the bidder plans to keep the Workgroup apprised of its progress during the operation of the Initiative.

- c. Learning Institutes
 - i. Describe the effective strategies the bidder will use to recruit the following training audiences as detailed in Section 4.1.D.1 of this RFP for participation in Learning Institutes:
 - A. participants/consumers and their circles of support, and
 - B. professionals/professional organizations.
 - ii. Describe how the bidder will ensure that individuals from all HCBS service sectors will be recruited for participation in Learning Institutes.
 - iii. Describe the bidder's plan to revise and deliver the Learning Institute curriculum, including but not limited to addressing the items referenced in Section 4.1.D.2 of this RFP and creating all related ancillary materials;
 - iv. Describe the adult learning principles and teaching methodologies and modalities that will be proposed to effectively deliver the training content to groups of the diverse audience members described in Section 4.1.D.1 of this RFP;
 - v. Describe how the bidder will effectively address logistical needs of the Learning Institute delivery, including but not limited to participant recruitment and registration, arranging venues and necessary technology, and the coordination, reproduction, and distribution of all ancillary materials to effectively deliver Learning Institutes;
 - vi. Include a description of how the bidder will structure and conduct each Learning Institute, inclusive of all the activities to take place over the Learning Institute period (as outlined in Section 4.1.D.3 of this RFP);
 - vii. Describe the bidder's plan for follow-up consultation/mentoring with the participants of each Learning Institute, including but not limited to frequency, modality, and content, to create meaningful support for the growth and development of participants as "Innovation Directors" and implementation of PC practice throughout the period of the Learning Institute;
 - viii. Describe the bidder's proposed process for the development of action/sustainability plan(s) by training participants, including goals and activities to guide participant implementation and Contractor consultation/mentoring during the period of the Learning Institute;
 - A. Describe how bidder will engage participants in setting a goal and then an action plan to support themselves to further promote true person-centered practice, thinking and planning in their own life and/or within their organization/group/association/etc., first weighing any pros and cons to their proposed goal to adjust it as needed, then identifying any barriers that may get in the way of achieving their goal so that they can craft a measurable action plan that addresses potential barriers. Participants will receive education on the above and receive worksheets to do the pros and cons sort, barrier identification and action planning.
 - ix. Describe the bidder's plan to promote, through the training and mentoring activities, the use of assistive technology to increase independence and autonomy in residential and non-residential settings, including, but not limited to, innovative uses of both high and low technology items;
 - x. Describe how the bidder will ensure that the required number and Statewide availability of Learning Institutes are conducted;
 - xi. Describe the bidder's process for updating the Learning Institute outline, curriculum, and/or ancillary materials, as needed and/or directed by the Department throughout the term of this Initiative.
 - xii. Describe how bidder will measure the attainment of understanding and knowledge of person-centeredness as a result of participation in the Learning Institute.
- d. Regional Trainings
 - i. Describe how bidder will effectively recruit individuals receiving HCBS and their circles of support, and providers/provider organizations as detailed in Section 4.1.E.1 for participation in Regional/Virtual trainings.
 - A. Describe the effective strategies the bidder will use to recruit individuals receiving HCBS and their circles of support

- B. Describe the effective strategies the bidder will use to recruit providers/provider organizations;
 - C. Describe how the bidder will ensure that individuals **from all HCBS service sectors** will be recruited for participation in regional/virtual trainings.
 - D. Describe how the bidder will ensure a sufficient number of individuals who register for training proceed to participate in training.
- ii. Describe the bidder's plan to develop new and/or modify regional/virtual training curricula on the topics listed in Section 4.1.E.2.b, and others as determined by the Department in consultation with the Contractor, including but not limited to addressing the items referenced in Section 4.1.E.2.b of this RFP and creating all related ancillary training materials for in-person and virtual training;
 - A. Include a description of how the bidder will identify additional training topics that may be needed to educate individuals regarding Person-Centeredness;
- iii. Describe the adult learning principles and teaching methodologies and modalities that will be proposed to effectively deliver the training content to diverse groups of audiences, as identified in above sections of the RFP, including:
 - A. individuals receiving HCBS and their circles of support as described in Section 4.1.E.1.a of this RFP, and;
 - B. providers/provider organizations as detailed in Section 4.1.E.1.b of this RFP;
- iv. Describe the bidder's plan to develop content that is comprehensive, high quality, interactive, represents best practices in PC Practice, and supports the sustainability of best practices for the primary target audiences described in Section 4.1.E.1 of this RFP including:
 - A. individuals receiving HCBS and their circles of support, and;
 - B. providers/provider organizations;
 - C. individuals from all HCBS service sectors
- v. Describe how information will be included in the curriculum about the use of assistive technology to increase independence and autonomy, including but not limited to innovative uses of both high and low technology items;
- vi. Identify the number of participants to be trained per Regional/Virtual training and justify how this number is adequate;
- vii. Describe how the bidder will effectively address logistical needs of the training delivery, including but not limited to participant registration, arranging venues and necessary technology, and the coordination, reproduction, and distribution of all training materials to effectively deliver training programs;
- viii. Describe the bidder's plan to conduct the trainings both in-person and virtually, including but not limited to addressing the items referenced in the RFP Sections 4.1.E.2.d-f and 4.1.E.3;
- ix. Describe how the bidder will ensure that the required number and Statewide reach of Regional/Virtual Trainings are conducted;
- x. Describe the bidder's process for updating the Regional training outline(s), curricula, and/or ancillary materials, as needed and/or directed by the Department throughout the term of this Initiative;
- xi. Describe how bidder will measure the attainment of understanding and knowledge of person-centeredness as a result of participation in the regional/virtual trainings.
- xii. Describe how bidder will teach participants to set a goal and action plan to further promote true person-centered practice, thinking and planning in their own and/or work life, first weighing any pros and cons to their proposed goal to adjust it as needed, then identifying any barriers that may get in the way of achieving their goal so that they can craft a measurable action plan that addresses potential barriers.
 - A. Describe how the bidder will educate participants on the above and provide them worksheets to do the pros and cons sort, barrier identification and action planning.
- xiii. Describe how the bidder will ensure that breakout discussions during regional/virtual trainings are interactive and engaging for all participants.
 - A. Describe how bidder will structure the breakout rooms for small discussion,

including determining the number of individuals per room, the amount of time for each breakout room, and how the instructions and breakout activities will be designed to ensure the training sessions are interactive and engaging. Include the bidder's plan for the number and roles of trainers who will facilitate breakout rooms to assure the activities/discussions are stimulating, engaging, and productive;

- xiv. Describe how the bidder will obtain approval from accrediting organization(s) to provide continuing education credits for social workers and continuing nursing education credits for nurses.
 - xv. Describe how bidder will implement the provision of continuing education units to trainees in the social work and nursing fields, including all work involved in continuing education development, administration, reporting, and retention of records, as described in Section 4.1.E.2.h-i.
- e. Program Evaluation
- i. Describe how the bidder will conduct a formal independent evaluation to determine the effectiveness of the training and learning opportunities conducted through this project on improving outcomes in person-centered planning and practice, and its impact on training attendees as described in Section 4.1.F of this RFP.
 - ii. Describe the bidder's plan to determine the scope of the evaluation, the specific outcomes to be evaluated, the methodology for evaluating the data, and the specific data to be collected, both qualitative and quantitative, to be provided to the Department in the form of a study proposal to be reviewed and approved.
 - iii. Describe the bidder's plan to conduct all data collection and analysis necessary to fully evaluate the effectiveness and impact of the project.
 - iv. Describe the bidder's plan to report annually on the process and findings of the evaluation, as described in Section 4.1.F.c, with a focus on findings related to the outcomes evaluated.

3. Project Reporting

- a. Describe the bidder's plan for the development and submission of the required monthly, quarterly, and periodic reports as specified in Section 4.3 of this RFP, and for ensuring the timeliness, accuracy and comprehensiveness of these reports; and
- b. Describe the bidder's capacity for responding to requests by the Department for ad-hoc reporting for a variety of audiences as needed by the Department.

6.3 Cost Proposal

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

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

To complete the Cost Proposal, Bidders must provide a Deliverable Price Per Unit price for each deliverable identified in Attachment B. Deliverable prices are to be all-inclusive to cover the cost of furnishing all of the said services, including but not limited to materials, reporting, equipment, travel, location rentals, profit and labor to the satisfaction of the Department and the performance of all work set forth in said specifications. The Contractor will not be reimbursed for any costs incurred outside of the prices provided in its Attachment B: Cost Proposal.

7.0 PROPOSAL SUBMISSION

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

	Electronic Submission
Administrative Proposal	Email labeled "Administrative Proposal, Bidder's Name, RFP# 20187" containing a standard searchable PDF file with copy/read permissions only.
Technical Proposal	Email labeled "Technical Proposal, Bidder's Name, RFP# 20187" containing a standard searchable PDF file with copy/read permissions only.
Cost Proposal	Email labeled "Cost Proposal, Bidder's Name, RFP# 20187" containing standard searchable PDF file(s) with copy/read permissions only.

Submit three (3), standard searchable, open and permission password protected, PDF proposals in three (3) separate emails to OHIPcontracts@health.ny.gov with the subject "<Type of Proposal Submission, Bidder Name, RFP# 20187>"

Include, as attachment to each email, the distinct PDF file labeled "Administrative Proposal", "Technical Proposal", or "Cost Proposal". Example: "Technical Proposal Submission, ABC Company, RFP# 20187".

1. All electronic proposal submissions should be clear and include page numbers on the bottom of each page.
2. The body of the email submitted should also include the password to the file and contact information.
3. A font size of eleven (11) points or larger should be used with appropriate header and footer information.
4. In the event an electronic submission cannot be read by the Department, the Department reserves the right to request a hard copy and/or electronic resubmission of any unreadable files. Offeror shall have 2 business days to respond to such requests and must certify the resubmission is identical to the original submission.
5. Where signatures are required, the proposals should have a handwritten signature (wet ink) and be signed in blue ink. A scan of the handwritten (wet ink) signature can be used for electronic submission in the PDF. The Department reserves the right to request hardcopy originals of all signature pages at any time.
6. The NYSDOH discourages overly lengthy proposals. Therefore, marketing brochures, user manuals or other materials, beyond that sufficient to present a complete and effective proposal, are not desired. Elaborate artwork or expensive paper is not necessary or desired. In order for the NYSDOH to evaluate proposals fairly and completely, proposals should follow the format described in this RFP to provide all requested information. The Bidder should not repeat information in more than one section of the proposal. If information in one section of the proposal is relevant to a discussion in another section, the Bidder should make specific reference to the other section rather than repeating the information;
7. Audio and/or videotapes are not allowed. Any submitted audio or videotapes will be ignored by the evaluation team; and
8. In the event that a discrepancy is found between the electronic and hardcopy proposal, the original hardcopy will prevail.

The entire proposal must be received by the NYSDOH, in three separate emails to the email account and format designated above, no later than the Deadline for Submission of Proposals specified in [Section 1.0](#), (Calendar of Events). Late bids will not be considered.

NOTE: You should request a receipt containing the time and date received.

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

7.1 No Bid Form

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

8.0 METHOD OF AWARD

8.1 General Information

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

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

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

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

In the event of a tie, the determining factors for award, in descending order, will be:

- (1) lowest cost and
- (2) proposed percentage of MWBE participation.

8.2 Submission Review

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

8.3 Technical Evaluation

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

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

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

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

8.4 Cost Evaluation

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

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

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

A is Total price of lowest cost proposal;

B is Total price of cost proposal being scored; and

C is the Cost score.

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

8.5 Composite Score

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

8.6 Reference Checks

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

8.7 Best and Final Offers

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

8.8 Award Recommendation

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

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

ATTACHMENTS

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

1. [Bidder's Disclosure of Prior Non-Responsibility Determination](#)
2. [No-Bid Form](#)

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

The following attachments are attached and included in this RFP:

- A. Proposal Document Checklist
- B. Cost Proposal

ATTACHMENT A - PROPOSAL DOCUMENT CHECKLIST

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

RFP #: 20187 – Person-Centered Planning Comprehensive System Transformation Statewide Training Initiative		
FOR THE ADMINISTRATIVE PROPOSAL		
RFP §	SUBMISSION	INCLUDED
§ 6.1.A	Attachment 1 – Bidder’s Disclosure of Prior Non-Responsibility Determinations, completed and signed.	<input type="checkbox"/>
§ 6.1.B	Freedom of Information Law – Proposal Redactions (If Applicable)	<input type="checkbox"/>
§ 6.1.C	Attachment 3 - Vendor Responsibility Attestation	<input type="checkbox"/>
§ 6.1.D	Attachment 4 - Vendor Assurance of No Conflict of Interest or Detrimental Effect	<input type="checkbox"/>
§ 6.1.E	M/WBE Participation Requirements:	<input type="checkbox"/>
	Attachment 5 Form 1	<input type="checkbox"/>
	Attachment 5 Form 2 (If Applicable)	<input type="checkbox"/>
§ 6.1.F	Attachment 6 - Encouraging Use of New York Businesses	<input type="checkbox"/>
§ 6.1.G	Attachment 7 - Bidder’s Certified Statements, completed & signed.	<input type="checkbox"/>
§ 6.1.H	Attachment 9 – References	<input type="checkbox"/>
§ 6.1.I	Attachment 10 - Diversity Practices Questionnaire	<input type="checkbox"/>
§ 6.1.J	Attachment 11 - Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination	<input type="checkbox"/>
§ 6.1.K	Attachment 12 – Executive Order 16 Prohibiting Contracting with Businesses Conducting Business in Russia	<input type="checkbox"/>
FOR THE TECHNICAL PROPOSAL		
RFP §	SUBMISSION	INCLUDED
§ 6.2.A	Title Page	<input type="checkbox"/>
§ 6.2.B	Table of Contents	<input type="checkbox"/>
§ 6.2.C	Documentation of Bidder’s Eligibility (Requirement)	<input type="checkbox"/>
§ 6.2.D	Technical Proposal Narrative	<input type="checkbox"/>
FOR THE COST PROPOSAL REQUIREMENT		
RFP §	REQUIREMENT	INCLUDED
§ 6.3	Attachment B- Cost Proposal	<input type="checkbox"/>

ATTACHMENT B - COST PROPOSAL
RFP# 20187

To complete the Cost Proposal, Bidders must provide a Deliverable Price Per Unit price for each deliverable. Deliverable prices are to be all-inclusive to cover the cost of furnishing all of the said services, including but not limited to materials, reporting, equipment, travel, location rentals, profit and labor to the satisfaction of the Department of Health and the performance of all work set forth in said specifications. The Contractor will not be reimbursed for any costs incurred outside of the prices provided in its Attachment B: Cost Proposal.

For each Deliverable (A), include an all-inclusive Deliverable Price Per Unit price (C).

A. Deliverable	B. Anticipated Deliverables	C. Deliverable Price Per Unit*
Person-Centered Planning and Practice Resource Library**:	-	-
Revision of the PC Planning and Practice Resource Library <i>(Anticipated Four [4] Per Contract Year)</i>	12	
Maintenance of the Resource Library <i>(Every 30 Days)</i>	36	
Leadership Meetings**:	-	-
Virtual Presentation/Meetings with the HCBS Rule Interagency Person-Centered Planning Workgroup <i>(Anticipated Four [4] Per Contract Year)</i>	12	
Learning Institutes**:	-	-
Revision of the Department's Existing Learning Institute Curriculum	1	
Additional Modifications and Delivery of Learning Institute Curriculum <i>(Anticipated Three [3] Per Contract Year)</i>	9	
Delivery of Learning Institutes <i>(Anticipated Six [6] Per Contract Year)</i>	18	
Regional Trainings**:	-	-
Delivery of Regional/Virtual Trainings Curricula <i>(Anticipated three [3] Per Contract Year)</i>	9	
Modification and Delivery of Regional/Virtual Trainings Curricula <i>(up to Twelve [12] Total Per Contract Year)</i>	36	
Delivery of Virtual Trainings <i>(Anticipated 80 Per Contract Year)</i>	240	
Delivery of In-Person Regional Trainings <i>(Anticipated 20 Per Contract Year)</i>	60	
Program Evaluation**:	-	-
Development and Delivery of the Independent Evaluation Study Proposal	1	
Development and Delivery of the Independent Evaluation Results <i>(One [1] per contract year)</i>	3	

*If the Department elects to exercise its single two (2)-year renewal option, the Contractor will be held to the Deliverable Price Per Unit prices provided in their Attachment B: Cost Proposal during the renewal period.

**This is a deliverable heading only. Bidders should not provide a pricing in this row.

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

 Bidder's Authorized Signature

 Date

 Printed Name and Title