



**Solicitation Information
December 4, 2015**

RFP# 7550103

TITLE: Technical Assistance for State Youth Treatment Planning

Submission Deadline: January 4, 2016 at 2:00 PM (ET)

PRE-BID/ PROPOSAL CONFERENCE: NO

Questions concerning this solicitation must be received by the Division of Purchases at gail.walsh@purchasing.ri.gov no later than **Thursday, December 17, 2015 at 5:00 PM (ET)**. Questions should be submitted in a *Microsoft Word attachment*. Please reference the RFP# on all correspondence. Questions received, if any, will be posted on the Internet as an addendum to this solicitation. It is the responsibility of all interested parties to download this information.

SURETY REQUIRED: NO

BOND REQUIRED: NO

**GAIL WALSH
CHIEF BUYER**

Applicants must register on-line at the State Purchasing Website at www.purchasing.ri.gov

Note to Applicants:

Offers received without the entire completed three-page RIVIP Generated Bidder Certification Form attached may result in disqualification.

THIS PAGE IS NOT A BIDDER CERTIFICATION FORM

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SECTION 1: INTRODUCTION

The Rhode Island Department of Administration/Division of Purchases, on behalf of the Rhode Island Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH), is soliciting proposals from qualified firms to provide technical assistance services related to development of a comprehensive strategic plan in order to improve treatment for adolescents (ages 12-18) and transitional aged youth (ages 16-25) with substance use disorders and/or co-occurring substance use and mental disorders as described elsewhere herein in accordance with the terms of this Request for Proposals and the State's General Conditions of Purchase, which may be obtained at the Rhode Island Division of Purchases Home Page by Internet at www.purchasing.ri.gov. The initial contract period will begin approximately February 1, 2016 for one year. Contracts may be renewed for up to one additional 12-month period based on vendor performance and the availability of funds.

This is a Request for Proposals, not an Invitation for Bid. Responses will be evaluated on the basis of the relative merits of the proposal, in addition to price; there will be no public opening and reading of responses received by the Division of Purchases pursuant to this Request, other than to name those offerors who have submitted proposals.

INSTRUCTIONS AND NOTIFICATIONS TO OFFERORS:

1. Potential vendors are advised to review all sections of this RFP carefully and to follow instructions completely, as failure to make a complete submission as described elsewhere herein may result in rejection of the proposal.
2. Alternative approaches and/or methodologies to accomplish the desired or intended results of this procurement are solicited. However, proposals which depart from or materially alter the terms, requirements, or scope of work defined by this RFP will be rejected as being non-responsive.
3. All costs associated with developing or submitting a proposal in response to this RFP, or to provide oral or written clarification of its content shall be borne by the vendor. The State assumes no responsibility for these costs.
4. Proposals are considered to be irrevocable for a period of not less than 120 days following the opening date, and may not be withdrawn, except with the express written permission of the State Purchasing Agent.
5. All pricing submitted will be considered to be firm and fixed unless otherwise indicated herein.
6. Proposals misdirected to other state locations, or which are otherwise not present in the Division at the time of opening for any cause will be determined to be late and will not be considered. For the purposes of this requirement, the official time and date shall be that of the time clock in the reception area of the Division.

7. It is intended that an award pursuant to this RFP will be made to a prime vendor, or prime vendors in the various categories, who will assume responsibility for all aspects of the work. Joint venture and cooperative proposals will not be considered. Subcontracts are permitted, provided that their use is clearly indicated in the vendor's proposal and the subcontractor(s) to be used is identified in the proposal.
8. All proposals should include the vendor's FEIN or Social Security number as evidenced by a W9, downloadable from the Division's website at www.purchasing.ri.gov.
9. The purchase of services under an award made pursuant to this RFP will be contingent on the availability of funds.
10. Vendors are advised that all materials submitted to the State for consideration in response to this RFP will be considered to be Public Records as defined in Title 38, Chapter 2 of the General Laws of Rhode Island, without exception, and will be released for inspection immediately upon request once an award has been made.
11. Interested parties are instructed to peruse the Division of Purchases website on a regular basis, as additional information relating to this solicitation may be released in the form of an addendum to this RFP.
12. Equal Employment Opportunity (G.L. 1956 § 28-5.1-1, et seq.) – § 28-5.1-1 Declaration of policy – (a) Equal opportunity and affirmative action toward its achievement is the policy of all units of Rhode Island state government, including all public and quasi-public agencies, commissions, boards and authorities, and in the classified, unclassified, and non-classified services of state employment. This policy applies to all areas where State dollars are spent, in employment, public services, grants and financial assistance, and in state licensing and regulation. For further information, contact the Rhode Island Equal Employment Opportunity Office at (401) 222-3090 or via e-mail at Raymond.lambert@doa.ri.gov.
13. In accordance with Title 7, Chapter 1.2 of the General Laws of Rhode Island, no foreign corporation, a corporation without a Rhode Island business address, shall have the right to transact business in the State until it shall have procured a Certificate of Authority to do so from the Rhode Island Secretary of State (401-222-3040). This is a requirement only of the successful vendor(s).
14. The vendor should be aware of the State's Minority Business Enterprise (MBE) requirements, which address the State's goal of ten percent (10%) participation by MBE's in all State procurements. For further information visit the website www.mbe.ri.gov or contact a Compliance Officer at (401) 574-8253 or Dorinda.keene@doa.ri.gov.

15. Under HIPAA, a “business associate” is a person or entity, other than a member of the workforce of a HIPAA covered entity, who performs functions or activities on behalf of, or provides certain services to, a HIPAA covered entity that involves access by the business associate to HIPAA protected health information. A “business associate” also is a subcontractor that creates, receives, maintains, or transmits HIPAA protected health information on behalf of another business associate. The HIPAA rules generally require that HIPAA covered entities and business associates enter into contracts with their business associates to ensure that the business associates will appropriately safeguard HIPAA protected health information. Therefore, if a Contractor qualifies as a business associate, it will be required to sign a HIPAA business associate agreement.

16. In order to perform the contemplated services related to the Rhode Island Health Benefits Exchange (HealthSourceRI) , the vendor hereby certifies that it is an “eligible entity,” as defined by 45 C.F.R. § 155.110, in order to carry out one or more of the responsibilities of a health insurance exchange. The vendor agrees to indemnify and hold the State of Rhode Island harmless for all expenses that are deemed to be unallowable by the Federal government because it is determined that the vendor is not an “eligible entity,” as defined by 45 C.F.R. § 155.110.

SECTION 2: BACKGROUND AND PURPOSE

It is the vision of the BHDDH Division of Behavioral Healthcare (DBH) that all Rhode Islanders have the opportunity to achieve the best possible behavioral healthcare and well-being within communities that promote empowerment, belonging, shared responsibilities and recovery. In alignment with this vision, DBH’s strategic goals include the creation of innovative strategies and recovery supports to address the behavioral healthcare needs among a variety of populations to strengthen internal and external capacities to create a pool of expertise to serve these populations including the population of youth and transition aged youth.

BHDDH was recently awarded a State Youth Treatment- Planning (SYT-P) cooperative agreement from the Substance Abuse and Mental Health Services Administration (SAMHSA) for the development of a comprehensive strategic plan in order to improve treatment for adolescents (ages 12-18) and transitional aged youth (ages 16-25) with substance use disorders (SUD) and/or co-occurring substance use and mental disorders. To accomplish the purpose of the SYT-P cooperative agreement, the state must use grant funds to develop a foundation to support future efforts to increase access to and improve the quality of treatment for the population of focus and their families/primary caregivers through:

- Involving families, adolescents, and transitional aged youth at the state levels to inform policy, program, and effective practice.
- Increasing screening for youth in diverse provider settings.
- Expanding the qualified SUD and/or co-occurring substance use and mental disorders treatment workforce.
- Developing funding and payment strategies, which support EBPs and are practical and doable in the state given the current funding environment.
- Improving interagency collaboration.

- Developing and/or expanding an existing provider collaborative.
- Adopting and/or enhancing an existing data infrastructure/management information system.

The key feature to our plan is re-invigorating the Children’s Cabinet. The Children’s Cabinet is an interagency council that is comprised of the State Department Directors and chaired by the Secretary of Health and Human Services. It will be essential to implementing the project goals and objectives.

The current behavioral healthcare system is fragmented and operates in siloes. The project proposes to address the system’s breakdown at the highest level of State Government and develop policies (from programmatic reform to health insurance parity), fiscal supports, and the workforce capacity necessary to carry out the goals and objectives. The strategies will allow the State departments to leverage collective resources and ensure inclusion of the voice of individuals served and their families in the development of policies and practices.

This goals of this project include:

- 1) Building and funding an integrated service continuum (screening, referral, assessment and evidence-based interventions and supports) guided by principles and practices that are recovery focused, person-centered, culturally competent, trauma and evidence informed;
- 2) Building the knowledge, skills and abilities of a coordinated, culturally competent, trauma informed, recovery oriented workforce;
- 3) Raising awareness through social marketing to change parental and societal norms that are favorable toward substance use.

The project will also include the following activities: 1) creating a plan to expand the current provider collaborative; 2) creating a three year plan to bring together a Family and Youth Coalition; 3) incorporating the Department of Children, Youth and Families Comprehensive Community Mental Health Services for Children and their Families (CMHI) program to leverage resources, collaborative structures and lessons learned and 4) developing policies to support service system and workforce goals.

Through thoughtful planning and identification of strategies related to the above goals the State will be able to address barriers to accessing treatment and insure that evidence based treatment practices are age and culturally relevant and appropriate in response to our State’s changing demographics. All planning efforts will be directly coordinated with the staff and Transition Team for another BHDDH grant funded project: Healthy Transitions: Improving Life Trajectories for Youth and Young Adults with, or at Risk for, Serious Mental Health Conditions. Toward this end, BHDDH will engage in the following activities:

A. Workforce Planning

1. Development of a Workforce Plan that will address:
 - Promoting coordination and collaboration with family support organizations to strengthen services for the population of focus
 - Preparing faculty in appropriate college and education settings to deliver curricula that

focus on adolescent and/or transitional aged youth-specific SUD evidence-based practices.

- Developing and making accessible continuing education events throughout the state, to enhance the knowledge and skills of program directors, supervisors, direct treatment staff, and allied health professionals.
- 2. Selection of evidence-based practices
- 3. Design and implementation of a Workforce Map to identify the composition and expertise of the state/territorial/tribal workforce assessing, treating and delivering recovery support services to the population of focus. With a focus on state workers funded with public resources, the workforce map must include:
 - Knowledge, skills, and abilities of the clinical workforce in providing evidence-based services to the population of focus.
 - Data on relevant positions within treatment and recovery services and supports structure (e.g., supervisor, clinician, case manager, and recovery support worker).
 - An aggregate snapshot of the state workforce including but not limited to gender, ethnicity, years of experience in the field, highest degree, level of state certification, certification in specific evidence-based practice(s), lived experience, current position, type of agency.

B. Finance Planning - Develop a cross-agency state-wide financial map (to be updated at the end of the grant) to identify, link and coordinate financing sources, which include but are not limited to Medicaid and Children's Health Insurance Program (CHIP), Substance Abuse Prevention and Treatment (SAPT) Block grant, private insurance (where possible), criminal/juvenile justice, child welfare, education, labor, housing, and other relevant funding streams. The financial map will identify the full range of a comprehensive continuum of services and supports for the population(s) of focus and the federal and state expenditures for these services within a baseline fiscal year.

- At a minimum, the financial map must consist of tables, which: 1) identify screening, assessment, treatment services and recovery supports needed for a comprehensive continuum of services for the population of focus; 2) identify the federal and state funding sources supporting the provision of these services in a specific fiscal year; 3) identify the federal, state and aggregate amounts spent from each funding source by service in a specific fiscal year; and 4) identify the number of unique users served through the expenditures in a specific fiscal year where possible. The tables must be accompanied by explanatory narrative.
- Grantees must use the financial map in developing the financing section of their strategic plans and tracking the shifts in relevant funding resources
- The financial map must be accompanied by a narrative which uses the findings to: describe the existing state financial structures supporting access to treatment services for the population of focus, report on the strengths and challenges of the existing system, and propose a set of recommendations for financing changes and payment reforms which would increase access and improve service quality.

C. Policy Planning - Create a plan to work toward the following policy goals:

- To adopt policies and procedures toward establishing formal cooperative agreements with institutions of higher education to improve the collaboration among BHDDH, service providers and students. These policies will result in a training platform and pipeline for future employees that will provide educational and practical real-world experience for participating students. The vision is that participating students could assist with a variety of tasks ranging from conducting assessments to data collection so that BHDDH and provider agencies can reform and evaluate health systems in RI.
- To work toward the standardization of data collection instruments (e.g. screening, assessment) within and across systems and organizations that serve adolescents and youth. Develop policies to ensure that the data systems that support these tools are also compatible.
- Introduce legislation to create and sustain a three tier infrastructure approach for adolescent/young adult treatment, planning

D. Provider Collaborative Planning –expansion of an existing provider collaborative to:

- Provide direct treatment for SUD and/or co-occurring substance use and mental disorders and recovery support services to the population of focus, identify and address common provider-level administrative challenges in providing substance abuse treatment and recovery support services.
- Develop and implement a common continuous quality improvement/quality assurance plan across the providers in the Collaborative for improving the treatment and recovery support services for the population of focus.
- Identify and address common barriers the population of focus encounters in accessing substance use treatment and recovery support services.
- Leverage and integrate resources across the providers in the network.
- Promote coordination and collaboration with family support organizations to assist in the development of peer support services and strengthen services for the population of focus.

E. Family/Youth Coalition Planning - Creation of a three-year plan for the development or expansion of a family and youth state/territorial/tribal-wide structure(s) to promote family and youth involvement in substance use treatment and recovery services for adolescents and/or transitional aged youth. TA contractor will purchase and provide incentives for family and youth involvement in the planning process.

F. Strategic Planning - Development of a comprehensive three-year strategic plan in order to improve treatment for youth and young adults 12-25. The strategic plan will help to assure adolescents and/or transitional aged youth have access to evidence-based assessments and treatments and recovery support services by strengthening the existing state/territorial/tribal infrastructure.

- G. Social Marketing Planning - Development of a culturally and linguistically competent social marketing and communication plan to complement the strategic plan. The social marketing plan should focus on: promoting the importance of providing evidence-based services to the population of focus, developing effective partnerships, using outcome data and personal stories, and fostering the inclusion of services in community-based settings. Families and youth must be involved in the development of this communications plan.

SECTION 3: SCOPE OF WORK

General Scope of Work

The overall scope of work is to provide technical assistance and support to BHDDH staff, the participating Interagency Council and its subcommittees, providers, community-based organizations, youth and family representatives, institutions of higher education and other stakeholders in the development of several planning documents related to the populations of focus. The selected applicant will be expected to deliver technical assistance both in person and off-site including telephone, internet or email.

Specific Activities/Tasks

Mandatory project components include the delivery of 300 technical assistance hours per year and 7 hours of administrative support services per week related to the planning activities associated with the two SAMHSA funded initiatives described in Section 2. Specifically, the successful vendor will:

1. Provide expert consultation to individuals, groups and committees in the areas of:
 - a. Identification, selection and implementation of evidence-based programs, policies and practices
 - b. Workforce development
 - c. Cross-agency finance planning
 - d. Provider collaboration
 - e. Policy planning
 - f. Family and youth involvement
 - g. Social marketing and communications
2. Identify appropriate and effective outreach and engagement strategies to maximize participation and collaboration from the desired providers and stakeholder groups
3. Provide resources such as templates and guidance documents as needed to aid the planning process
4. Lead partners in strategic planning exercises, conduct focus groups, on-line surveys, facilitate group discussion and debriefing activities
5. Develop draft plans, maps, logic models and documents
6. Provide review and edits of plans and documents

7. Provide administrative support including scheduling and convening meetings, arranging logistics and special accommodations, attendance at meetings, recording and transcribing meeting minutes, preparation and dissemination of information, materials, meeting notices and minutes and maintaining participant contact information
8. Purchasing and issuing incentives for family/youth involvement in planning and data collection activities

Deliverables

1. Submit quarterly reports on project progress in a format to be determined by BHDDH.
2. Assist with the development of the following documents in the specified time frames:

Document	1st Draft	2nd Draft
Policy Plan	April 30, 2016	September, 2016
Workforce Map	June 30, 2016	August 30, 2016
Workforce Training Implementation Plan	September, 2016	July 31, 2017
Provider Collaborative Plan	October 31, 2016	April 30, 2017
Family and Youth Involvement Plan	December 31, 2016	June 30, 2017
Social Marketing Plan	January 31, 2017	July 31, 2017
Financial Map	March 31, 2017	August 31, 2017
Strategic Plan	February 28, 2017	August 31, 2017

All documents will become the intellectual property of BHDDH.

Performance Measures

It is expected that the selected vendor will assist BHDDH in completing a comprehensive planning process that will support future efforts to increase access to and improve the quality of treatment for adolescents (ages 12-18) and transitional aged youth (ages 16-25) with substance use disorders (SUD) and/or co-occurring substance use and mental disorders and their families/primary caregivers. This contract will be based on the following measures:

Goal	Process Measures	Outcome Measures
Improve involvement of families, adolescents, and transitional aged youth at the state levels to inform policy, program, and effective practice.	<p>The number of youth/family members who are involved in planning activities</p> <p>The percentage of planning work groups and committees that are youth/family members</p> <p>The number of incentives issued</p>	Individuals move from a lower level of involvement/engagement to a higher level as evidenced by a pre/post test
Improve partnerships and collaboration.	<p>The number of organizations collaborating on the project</p> <p>The number of organizations contributing or sharing resources with other organizations</p>	Partners move from a lower level of involvement/engagement to a higher level as evidenced by a pre/post test

	<p>The number and type of provider organizations participating in the provider collaborative</p> <p>The number of organizations that entered into written inter/intra-organizational agreements to improve practices/activities</p>	
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SECTION 4: TECHNICAL PROPOSAL

Narrative and format: The separate technical proposal should address specifically each of the required elements:

1. Capability, Capacity and Qualifications of the Offeror

This section shall include the following information:

- a. A description of the applicant’s experience providing technical assistance in strategic planning.
- b. A description of the applicant’s knowledge of the population of focus, relevant evidence-based treatment practices policies and practices, training and payment sources
- c. A description of the applicant’s partnerships with anticipated stakeholder groups including but not limited to: substance abuse treatment organizations, family/youth organizations, institutions of higher education
- d. A description of the business background of the applicant including a description of their financial position.

2. Work Plan

This section shall describe the applicant’s understanding of the requirements of this request for proposal including the results intended and desired, the systematic approach and/or methodology to providing technical assistance in the area of strategic planning. Describe any on-line products or technological tools to be used to foster collaboration and planning processes. Include an implementation plan and time line for accomplishing the results proposed.

3. Staffing Plan and Qualifications of Staff

This section shall describe the proposed staffing plan including responsibility for coordination and delivery of the scope of work. Include a job description for each position outlining duties, responsibilities and concentration of effort (in number of hours/week) as well as resumes, curricula vitae, or statements of prior experience and qualifications of any known staff and/or consultants. Staff or consultants providing technical assistance services will have skills in areas including but not limited to: facilitation, interviewing, technical writing and technical editing.

4. Document Development

Document your ability and capacity to assist BHDDH in the production of the required plans and maps in the prescribed time frames listed in Section 3. Specify the level of support that you will provide to the development of each document, e.g. compile resources, produce draft outline, produce draft plan, technical writing, technical editing etc.

SECTION 5: COST PROPOSAL

Detailed Budget and Budget Narrative:

The applicant must submit an annualized line item budget using Appendix A: Budget Form, reflecting costs to be charged to any resulting contract. The cost proposal must be accompanied by a budget narrative describing calculations and justification for expenditures. The budget narrative should also describe any anticipated program income, in-kind contributions, or complementary funding resources. Indirect rates should not be equal to more than 10% of the total value of the budget. If indirect rates are greater than 10%, please provide a copy of the federally approved agreement.

The budget should allow for a minimum of 300 hours of technical assistance services. Applicants must propose a range of rates to be paid that are based on the type/level of service provided and the skill set and level of expertise of the individual providing the service. The budget shall also allow for a minimum of 7 hours of administrative support per week. The cost budgeted for incentives shall not exceed \$30 per unit.

SECTION 6: EVALUATION AND SELECTION

Proposals will be reviewed by a Technical Review Committee comprised of staff from state agencies. To advance to the Cost Evaluation phase, the Technical Proposal must receive a minimum of 50 (71.47%) out of a maximum of 70 technical points. Any technical proposals scoring less than 60 points will not have the cost component opened and evaluated. The proposal will be dropped from further consideration.

Proposals scoring 50 technical points or higher will be evaluated for cost and assigned up to a maximum of 30 points in cost category, bringing the potential maximum score to 100 points.

The Department of BHDDH reserves the exclusive right to select the individual(s) or firm (vendor) that it deems to be in its best interest to accomplish the project as specified herein; and conversely, reserves the right not to fund any proposal(s).

Proposals will be reviewed and scored based upon the following criteria:

Criteria	Possible Points
Capability, Capacity and Qualifications of the Offeror	20 Points
Quality of Work Plan and Approach	20 Points
Staffing Plan and Qualifications of Staff	15 Points
Document Development	15 Points
Total Possible Technical Points	70 Points

Cost calculated as lowest responsive cost proposal divided by (this cost proposal) times 30 points *	30 Points
Total Possible Points	100 Points

*The Low bidder will receive one hundred percent (100%) of the available points for cost. All other bidders will be awarded cost points based upon the following formula:

$$(\text{Low bid} / \text{venders bid}) * \text{Available points}$$

For example: If the low bidder (Vendor A) bids \$65,000 and Vendor B bids \$100,000 for monthly cost and service fee and the total points available are thirty (30), vendor B's cost points are calculated as follows:

$$\$65,000 / \$100,000 * 30 = 19.5$$

Points will be assigned based on the offeror's clear demonstration of his/her abilities to complete the work, apply appropriate methods to complete the work, create innovative solutions and quality of past performance in similar projects.

Applicants may be required to submit additional written information or be asked to make an oral presentation before the technical review committee to clarify statements made in their proposal.

SECTION 7: PROPOSAL SUBMISSION

Questions concerning this solicitation may be e-mailed to the Division of Purchases at gail.walsh@purchasing.ri.gov no later than the date and time indicated on page one of this solicitations. Please reference **RFP #7550103** on all correspondence. Questions should be submitted in a Microsoft Word attachment. Answers to questions received, if any, will be posted on the Internet as an addendum to this solicitation. It is the responsibility of all interested parties to download this information. If technical assistance is required to download, call the Help Desk at (401) 222-3766 or lynda.moore@doit.ri.gov.

Offerors are encouraged to submit written questions to the Division of Purchases. **No other contact with State parties will be permitted.** Interested offerors may submit proposals to provide the services covered by this Request on or before the date and time listed on the cover page of this solicitation. Responses received after this date and time, as registered by the official time clock in the reception area of the Division of Purchases will not be considered.

Responses (**an original plus five (5) copies**) should be mailed or hand-delivered in a sealed envelope marked "**RFP# 7550103 Technical Assistance for State Youth Treatment Planning**" to:

RI Dept. of Administration
Division of Purchases, 2nd floor
One Capitol Hill
Providence, RI 02908-5855

NOTE: Proposals received after the above-referenced due date and time will not be considered. Proposals misdirected to other State locations or those not presented to the Division of Purchases by the scheduled due date and time will be determined to be late and will not be considered. Proposals faxed, or emailed, to the Division of Purchases will not be considered. The official time clock is in the reception area of the Division of Purchases.

RESPONSE CONTENTS

Responses shall include the following:

1. A completed and signed three-page R.I.V.I.P generated bidder certification cover sheet downloaded from the RI Division of Purchases Internet home page at www.purchasing.ri.gov.
2. A completed and signed W-9 downloaded from the RI Division of Purchases Internet home page at www.purchasing.ri.gov.
3. **A separate Technical Proposal** describing the qualifications and background of the applicant and experience with and for similar projects, and all information described earlier in this solicitation. The Technical Proposal is limited to twenty (20) pages (this excludes any appendices. As appropriate, append resumes of key staff that will provide services covered by this request.
4. **A separate, signed and sealed Cost Proposal** reflecting the hourly rate, or other fee structure, proposed to complete all of the requirements of this project.
5. In addition to the multiple hard copies of proposals required, Respondents are requested to provide their proposal in **electronic format (CD-Rom, disc, or flash drive)**. Microsoft Word / Excel OR PDF format is preferable. Only 1 electronic copy is requested and it should be placed in the proposal marked "original".

CONCLUDING STATEMENTS

Notwithstanding the above, the State reserves the right not to award this contract or to award on the basis of cost alone, to accept or reject any or all proposals, and to award in its best interest. Proposals found to be technically or substantially non-responsive at any point in the evaluation process will be rejected and not considered further.

The State may, at its sole option, elect to require presentation(s) by offerors clearly in consideration for award.

The State's General Conditions of Purchase contain the specific contract terms, stipulations and affirmations to be utilized for the contract awarded to the RFP. The State's General Conditions of Purchases/General Terms and Conditions can be found at the following URL: <https://www.purchasing.ri.gov/RIVIP/publicdocuments/ATTA.pdf>