



**State of Rhode Island
Department of Administration / Division of Purchases
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**Solicitation Information
March 11, 2020**

ADDENDUM #1

RFP # 7602796

TITLE: Behavioral Health System Review Technical Assistance

Bid Closing Date & Time: **March 23, 2020 @ 11:30 AM Eastern Time (ET)**

Notice to Vendors

Attached are vendor questions with State responses. No further questions will be answered.

**Dawn Vittorioso
Buyer II**

Interested parties should monitor this website, on a regular basis, for any additional information that may be posted.

Vendor Questions with State Responses for RFP 7602796 – Behavioral Health System Review Technical Assistance

Question 1: Does the State have an estimated level of effort for this effort or total dollar amount?

Answer to question 1: The dollar amount range for this contract is between \$270,000 and \$330,000.

Question 2: The qualifications for the Lead staff person require a background in Information Technology however, this does not appear to align to the requirements set forth by the State. Would the Government consider expanding or modifying the qualifications to include at least 10 years of behavioral health care policy evaluation and technical assistance experience?

Answer to question 2: The State will expand the qualifications to include at least 10 years of behavioral health care policy evaluation and technical assistance expertise.

Question 3: Task 1d requires that the contractor conduct additional policy research to develop specific, actionable, and strategic recommendations that focus on (but are not limited to) Medicaid benefit structure and financing as well as promising payment and delivery models. Is the State also requiring specific expertise in SUD rate-setting or rate-modeling?

Answer to question 3: The State is not explicitly requiring specific expertise in SUD rate-setting or rate-modeling, but any expertise in that field will be helpful for this work.

Question 4: Would being awarded the contract resulting from this RFP, or participating in the said contract as a subcontractor, prohibit the contractor or subcontractor from bidding on and being awarded any future RFPs that may result from any of the short, intermediate, or long-term recommendations of this RFP?

Answer to question 4: Barring inherent conflicts of interest or the potential for an unfair advantage, participants in this project generally would not be prohibited from participation in procurement processes for projects resulting from these recommendations.

Question 5: **Scope of Work and Requirements, p. 6:** In addition to the Truven study provided, please provide the State's most recent historical information including membership, utilization by level of care, and paid claims information. Please provide this information for the past two fiscal periods if available. Additionally, if utilization can be broken out by the codes provided in the 2014 Truven study, this would be helpful.

Answer to question 5: The successfully awarded vendor will receive this information. You may want to review the following:

- [Statewide Health Inventory \(2015\)](#)
- [RI State Innovation Model Test Grant Health Assessment Report](#)
- [HealthFacts RI](#)

Question 6: **Specific Requirements/Tasks – Staffing Allocation, p. 8:** Please indicate the total number of productive annual hours that should be assumed in order to calculate the percentage of time each employee/staff's time is allocated to the contract.

Answer to question 6: Prospective vendors should reply with the number of hours necessary to carry out the requested work.

Question 7: **Task 1, b, p. 8:** Will the RI All-Payer Claims Database data be available to support the work resulting from this RFP award?

Answer to question 7: Subject to the execution of a Business Associate Agreement, successful vendors will have no-cost access to Rhode Island's All-Payer Claims Database (HealthFacts RI) as well as the State Data Ecosystem (pending the approval of state agencies and data owners, based on specific requests). The State Data Ecosystem is an integrated data environment that provides operational analytic solutions to state agencies and self-service analytics for staff across the state. (Please note: per Rhode Island law, the HealthFacts RI data is non-identifiable.) The State Data Ecosystem includes state agency-specific datasets, such as Medicaid claims, vital statistics, DLT wages, SNAP, TANF, etc.

Question 8: **Task 1, e, p. 9:** Will the State make personnel available to make introductions to or facilitate connection to key stakeholders with whom the contractor may not have a pre-existing relationship?

Answer to question 8: The State will ensure that the successful vendor is introduced to appropriate stakeholders to carry out the required work.

Question 9: **Task 1, e.1, p. 9:** Does the State have expectations for the number of one-on-one, large group, or focus group meetings that are expected to occur?

Answer to question 9: The vendor should determine, in conjunction with the state, the appropriate meeting cadence. This should be a part of the successful vendor's means and methods to accomplish the requirements under the contract. The makeup of types of meetings can be determined in coordination with the State.

Question 10: **Administrative Tasks, 6, p. 12:** Can the State further define the frequency of “regular basis” meetings with the state team, should this be interpreted as weekly, bi-weekly, etc.?

Answer to question 10: The chosen vendor and the state will collaborate to determine the necessary frequency of team meetings.

Question 11: **Section 4, A. Technical Proposal, 2, p. 12:** We note that the staffing plan will include key staff who will be involved in the project. However, could you please confirm if the State is interested in the staff’s experience in Health Information Technology (HIT)?

Answer to question 11: HIT is not a core component of this project, but HIT experience is welcomed and relevant.

Question 12: **Section 4, A. Technical Proposal, 2, p. 12:** Exact contract values for similar projects may be confidential and not public record or part of a larger contract agreement and not specifically itemized. For such contracts, can the values be excluded from submission?

Answer to question 12: The contract value assists the State in determining the vendor’s ability to perform at the scale expected under this contract. Where prohibited by confidentiality agreements, prospective vendors may include a general range.

Question 13: **B. Cost Proposal – Detailed Budget and Budget Narrative, p. 13:** Please confirm the State is requesting three separate budgets to be provided by the tasks stated in this section: (1) Data updates of the BH study and creation of final report (2) Implementation plans for priority areas (3) Creation of guidance documents and templates for future.

Also, if individual budgets are required, please confirm if each budget should include a detailed budget with specific costs associated with developing each section and should include each applicable expense broken down in detail by personnel, fringe, travel, and other costs.

If not, is only one individual cost proposal being requested or will there be a formal pricing template that will be provided for the proposal to be submitted?

Answer to question 13: The State requests one cost proposal for the entire scope of work, including the costs for the three components of work referenced above.

Question 14: Does EOHHS have a projected budget or budget range for this project?

Answer to question 14: The dollar amount range for this contract is between \$270,000 and \$330,000.

Question 15: Would it be perceived as a Conflict of Interest for an applicant for this RFP (prime or subcontractor) to respond to a future RFP that might result from the recommendations stemming from this Scope of Work?

Answer to question 15: Barring inherent conflicts of interest or the potential for an unfair advantage, participants in this project generally would not be prohibited from participation in procurement processes for projects resulting from these recommendations.

Question 16: Can you please clarify how this Scope of Work fits into the work of the other initiatives mentioned in the SOW—such as the Provider Capacity Building Initiative (PCBI), Executive Order 18-03, the interagency BH Population Health Planning team and the Substance Use and Mental Health Leadership Council? In particular, is this Scope of Work a subcomponent of, technical support to, overseen by or aligned with the interagency BH Population Health planning team?

Answer to question 16: The Provider Capacity Building Initiative is the name of the State’s project funded by the CMS Demonstration Project to Increase Substance Use Provider Capacity - and this Scope of Work is one component of this project. The State has created a planning team to oversee this Scope of Work that includes members of the interagency BH Population Health Planning Team. The Scope of Work includes stakeholder engagement work, that the State expects will include the Substance Use and Mental Health Leadership Council.

Question 17: Can you please clarify what the required content and expected deliverable are for Task 3 (the Technical Assistance Toolkit)? It is unclear to us if the toolkit is intended to be an Implementation and Monitoring Protocol for the prioritized topics, or a toolkit **to replicate the analytic approach used for the prioritized topics to other topic areas**. See relevant language:

- One description of the toolkit in the RFP refers to helping the state build “needed capacity to achieve implementation of the recommendations and monitor progress.” (Page 7)
- Another description refers to “guidance documents, guiding questions, data sources and analyses, and implementation steps for the state to replicate the approach and analysis for other age/need groups or state identified. This toolkit should include high-priority areas to fill in gaps in data sources or analytical capabilities as identified throughout the course of its development.” (Page 10)

Answer to question 17: The State anticipates that the toolkit will help it to replicate the analytic approach used for the prioritized topics to other topic areas. Having the ability to replicate the analytic approach will build the State’s own capacity to plan in the future.

Question 18: Will the Department accept references from other agencies within Rhode Island?

Answer to question 18: Yes

Question 19: Are you able to share the budget cap for this project?

Answer to question 19: The dollar amount range for this contract is between \$270,000 and \$330,000.

Question 20: Should the findings focus on SUD treatment system, or the broader behavioral health system?

Answer to question 20: Rhode Island desires to have a broad approach to address our SUD treatment system. In general, the State believes that healthcare is defined as including physical health, behavioral health, and oral health across the entire lifespan. Behavioral health is defined as including both mental health and substance use. A review of our behavioral health system should incorporate this definition.

Question 21: Will the vendor have access to APCD data as needed? Will the vendor be required to fund its own access to APCD data?

Answer to question 21: Subject to the execution of a Business Associate Agreement, successful vendors will have no-cost access to Rhode Island's All-Payer Claims Database (HealthFacts RI) as well as the State Data Ecosystem (pending the approval of state agencies and data owners, based on specific requests). The State Data Ecosystem is an integrated data environment that provides operational analytic solutions to state agencies and self-service analytics for staff across the state. (Please note: per Rhode Island law, the HealthFacts RI data is non-identifiable.)

Question 22: Does the state have funding available for this project in addition to the CMS planning and needs assessment award?

Answer to question 22: At this time, the dollar amount range for this contract is between \$270,000 and \$330,000. However, the RFP includes Task Four: Special Enhancement Activities, which would allow the State to amend the contract with the Vendor for activities related to the Scope of Work, if additional dollars do become available.

Question 23: Is there a specific file format the state prefers for the video portion of the submittal?

Answer to question 23: The State prefers either .avi or .mp4 formats.

Question 24: For any technology improvements, are there any specific requirements related to the location of data? Can data reside in the cloud, or does data need to remain on premise? If on premise, does the data need to reside in Rhode Island?

Answer to question 24: The state is preparing data use agreements for applicable datasets. Access policies are set by each individual state agency, which owns the data. Accordingly, some data, such as deidentified claims, may be shareable and stored in the cloud, but other datasets, such as clinical substance use treatment data may not be shareable and will remain in Rhode Island. The successful vendor will work with state analysts who will perform necessary analytics on the data that is not shareable.

Question 25: In SECTION 1. INTRODUCTION, Subsection 1. Instructions – 10., page 5, this section requests that the vendor submit the following forms: Contract Compliance, Certificate of Compliance, and the vendor’s Affirmative Action Plan/Policy Statement. Are these to be submitted with the proposal or after the award of the contract?

Answer to question 25: These forms are to be submitted with the proposal.

Question 26: In SECTION 3. SCOPE OF WORK AND REQUIREMENTS, the RFP states the State will supply data sources as available. Will access to an All-Payer Claims Database be provided? If not, please clarify any other available claims-specific data sources.

Answer to question 26: Subject to the execution of a Business Associate Agreement, successful vendors will have no-cost access to Rhode Island’s All-Payer Claims Database (HealthFacts RI) as well as the State Data Ecosystem (pending the approval of state agencies and data owners, based on specific requests). The State Data Ecosystem is an integrated data environment that provides operational analytic solutions to state agencies and self-service analytics for staff across the state. (Please note: per Rhode Island law, the HealthFacts RI data is non-identifiable.)

Question 27: In SECTION 3. SCOPE OF WORK AND REQUIREMENTS, Subsection 3. General Scope of Work, page 7, does EOHHS have a preferred format for the technical assistance toolkit that will be provided by the vendor, or are a variety of media expected and acceptable?

Answer to question 27: The State has no preferred format for the toolkit. The State anticipates collaborating with the awarded vendor on specific requirements for the toolkit.

Question 28: In SECTION 4. PROPOSAL, Subsection 4.A.5. Video Presentation, page 13, the RFP requires a Video Presentation. Please confirm whether a video presentation of PowerPoint slides with the Lead Staff member's voice and picture, would meet this requirement.

Answer to question 28: The State has included the Video Presentation requirement in lieu of having Vendors travel to Rhode Island for an in-person presentation, so that the State can get the best sense of our potential vendor partners as possible. As stated, it will not be scored on production value. Vendors may use any format they wish.

Question 29: In SECTION 7. PROPOSAL CONTENTS, Subsection 1. Instructions – 2., page 16, item 2 states "one completed and signed Rhode Island W-9 (included in the original copy only) downloaded from the Division of Purchase website at..." and provided a hyperlink to the site. This link is incomplete and does not work. Please confirm if the link should instead reference:

<http://www.purchasing.ri.gov/rivip/publicdocuments/fw9.pdf>.

Answer to question 29: <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Question 30: In SECTION 7. PROPOSAL CONTENTS, Subsection 7.A.3., page 16, this section states the proposal shall include "two (2) completed original and copy versions, signed and sealed Appendix A. MBE, WBE, and/or Disability Business Enterprise Participation Plan." Please confirm the vendor is to submit one original and one copy for a total of two Participation Plan forms for each proposed subcontractor.

Answer to question 30: Yes, this is a standard requirement. Two (2) completed original and copy versions, signed and sealed Appendix A. MBE, WBE, and/or Disability Business Enterprise Participation Plan. Please complete separate forms for each MBE/WBE or Disability Business Enterprise subcontractor/supplier to be utilized on the solicitation. Do not include any copies in the Technical or Cost proposals.

Question 31: What data will EOHHS make available for the "Behavioral health expenditures and investment in high-value services" as outlined on page 9 of the RFP (item 1-f-ii)?

Answer to question 31: The Vendor is expected to determine the data that is necessary to carry out the work and the State will work with the Vendor to supply whatever is available. As noted above, the State will make available de-identified All-Payer Claims Database data, as well as de-identified data from the State Data Ecosystem, pending the approval of state agencies and data owners, based on specific requests. It will also make available de-identified, raw encounter data from the Department of Behavioral Health, Developmental Disabilities, and Hospitals, as well as limited analytic support to filter and clean some of the idiosyncrasies of the data.

Question 32: Would the behavioral health system review include re-entry from the criminal justice system?

Answer to question 32: The State will collaborate with the Vendor to confirm the final components of the behavioral health system review.

Question 33: Has EOHHS established an estimated budget for this project and, if so, what is the amount (or range)?

Answer to question 33: The dollar amount range for this contract is between \$270,000 and \$330,000.

Question 34: Is there an incumbent for the scope of work described in the RFP? If so, who performed the work previously?

Answer to question 34: A study with related questions was carried out in 2014 and is referred to in the RFP. You can find the study and information about its Vendor : <https://bhddh.ri.gov/mh/truven.php>.