



**Solicitation Information
June 20, 2018**

RFP# 7594609

TITLE: Actuarial and Financial Analysis Support

Submission Deadline: July 18, 2018 at 10:00 AM Eastern Time(ET)

PRE-BID/ PROPOSAL CONFERENCE: No

Questions concerning this solicitation must be received by the Division of Purchases at david.francis@purchasing.ri.gov no later than **June 29, 2018 at 10:00 AM (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 Division of Purchases' website as an addendum to this solicitation. It is the responsibility of all interested parties to download this information.

BID SURETY BOND REQUIRED: No

PAYMENT AND PERFORMANCE BOND REQUIRED: No

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Interdepartmental Project Manager

Note to Applicants:

1. Applicants must register on-line at the State Purchasing Website at www.purchasing.ri.gov
2. Proposals received without a completed RIVIP Bidder Certification Cover Form attached may result in disqualification.

THIS PAGE IS NOT A BIDDER CERTIFICATION COVER FORM

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SECTION 1. INTRODUCTION

The Rhode Island Department of Administration/Division of Purchases, on behalf of the Rhode Island Executive Office of Health and Human Services is soliciting proposals from qualified firms to provide actuarial and financial analytics services, in accordance with the terms of this Request for Proposals (“RFP”) and the State’s General Conditions of Purchase, which may be obtained at the Division of Purchases’ website at www.purchasing.ri.gov.

The initial contract period will begin approximately January 1, 2019 for one year. Contracts may be renewed for up to four additional 12-month periods based on vendor performance and the availability of funds.

This is a Request for Proposals, not a Request for Quotes. Responses will be evaluated on the basis of the relative merits of the proposal, in addition to cost; there will be no public opening and reading of responses received by the Division of Purchases pursuant to this solicitation, 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 RFP are solicited. However, proposals which depart from or materially alter the terms, requirements, or scope of work defined by this RFP may be rejected as being non-responsive.
3. All costs associated with developing or submitting a proposal in response to this RFP or for providing oral or written clarification of its content, shall be borne by the vendor. The State assumes no responsibility for these costs even if the RFP is cancelled or continued.
4. Proposals are considered to be irrevocable for a period of not less than 180 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 in the proposal.
6. 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. 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.
7. The purchase of goods and/or services under an award made pursuant to this RFP will be contingent on the availability of appropriated funds.

8. Vendors are advised that all materials submitted to the Division of Purchases for consideration in response to this RFP may be considered to be public records as defined in R. I. Gen. Laws § 38-2-1, *et seq.* and may be released for inspection upon request once an award has been made.

Any information submitted in response to this RFP that a vendor believes are trade secrets or commercial or financial information which is of a privileged or confidential nature should be clearly marked as such. The vendor should provide a brief explanation as to why each portion of information that is marked should be withheld from public disclosure. Vendors are advised that the Division of Purchases may release records marked confidential by a vendor upon a public records request if the State determines the marked information does not fall within the category of trade secrets or commercial or financial information which is of a privileged or confidential nature.

9. 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.
10. By submission of proposals in response to this RFP vendors agree to comply with R. I. General Laws § 28-5.1-10 which mandates that contractors/subcontractors doing business with the State of Rhode Island exercise the same commitment to equal opportunity as prevails under Federal contracts controlled by Federal Executive Orders 11246, 11625 and 11375.

Vendors are required to ensure that they, and any subcontractors awarded a subcontract under this RFP, undertake or continue programs to ensure that minority group members, women, and persons with disabilities are afforded equal employment opportunities without discrimination on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, national origin, or disability.

Vendors and subcontractors who do more than \$10,000 in government business in one year are prohibited from engaging in employment discrimination on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, national origin, or disability, and are required to submit an “Affirmative Action Policy Statement.”

Vendors with 50 or more employees and \$50,000 or more in government contracts must prepare a written “Affirmative Action Plan” prior to issuance of a purchase order.

- a. 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.
- b. Vendors further agree, where applicable, to complete the “Contract Compliance Report” (<http://odeo.ri.gov/documents/odeo-eco-contract-compliance-report.pdf>), as well as the “Certificate of Compliance” (<http://odeo.ri.gov/documents/odeo-eco-certificate-of-compliance.pdf>), and submit both documents, along with their Affirmative Action Plan or an Affirmative Action Policy Statement, prior to issuance of a purchase order. For public works projects vendors and all subcontractors must submit a “Monthly Utilization Report” (<http://odeo.ri.gov/documents/monthly-employment->

[utilization-report-form.xlsx](#)) to the ODEO/State Equal Opportunity Office, which identifies the workforce actually utilized on the project.

For further information, contact Vilma Peguero at the Rhode Island Equal Employment Opportunity Office, at 222-3090 or via e-mail at ODEO.EOO@doa.ri.gov.

11. In accordance with R. I. Gen. Laws § 7-1.2-1401 no foreign corporation has the right to transact business in Rhode Island until it has procured a certificate of authority so to do from the Secretary of State. This is a requirement only of the successful vendor(s). For further information, contact the Secretary of State at (401-222-3040).
12. In accordance with R. I. Gen. Laws §§ 37-14.1-1 and 37-2.2-1 it is the policy of the State to support the fullest possible participation of firms owned and controlled by minorities (MBEs) and women (WBEs) and to support the fullest possible participation of small disadvantaged businesses owned and controlled by persons with disabilities (Disability Business Enterprises a/k/a “DisBE”)(collectively, MBEs, WBEs, and DisBEs are referred to herein as ISBEs) in the performance of State procurements and projects. As part of the evaluation process, vendors will be scored and receive points based upon their proposed ISBE utilization rate in accordance with 150-RICR-90-10-1, “Regulations Governing Participation by Small Business Enterprises in State Purchases of Goods and Services and Public Works Projects”. As a condition of contract award vendors shall agree to meet or exceed their proposed ISBE utilization rate and that the rate shall apply to the total contract price, inclusive of all modifications and amendments. Vendors shall submit their ISBE participation rate on the enclosed form entitled “MBE, WBE and/or DisBE Plan Form”, which shall be submitted in a separate, sealed envelope as part of the proposal. ISBE participation credit will only be granted for ISBEs that are duly certified as MBEs or WBEs by the State of Rhode Island, Department of Administration, Office of Diversity, Equity and Opportunity or firms certified as DisBEs by the Governor’s Commission on Disabilities. The current directory of firms certified as MBEs or WBEs may be accessed at <http://odeo.ri.gov/offices/mbeco/mbe-wbe.php>. Information regarding DisBEs may be accessed at www.gcd.ri.gov.

For further information, visit the Office of Diversity, Equity & Opportunity’s website, at <http://odeo.ri.gov/> and *see* R.I. Gen. Laws Ch. 37-14.1, R.I. Gen. Laws Ch. 37-2.2, and 150-RICR-90-10-1. The Office of Diversity, Equity & Opportunity may be contacted at, (401) 574-8670 or via email Dorinda.Keene@doa.ri.gov

13. HIPAA - 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

14. Eligible Entity - 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

Health and Human Service Delivery in Rhode Island

Under state law, the Executive Office of Health and Human Services (EOHHS) serves as “the principal agency of the executive branch of state government” (R.I.G.L. §42-7.2-2) responsible for managing the departments of: Health (HEALTH); Human Services (DHS); Children, Youth and Families (DCYF); and Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH) and the Medicaid Program.

RI EOHHS serves as the single state agency for Medicaid, serving over 1/3rd of all Rhode Islanders. Over ninety percent of these Medicaid beneficiaries are enrolled in one of three participating managed care organizations with the remainder receiving benefits through Fee-For-Service programs. RIGL 40-8-1 outlines the core purpose of the Medicaid Agency is to provide medical assistance for those persons in this state who possess the characteristics of persons receiving public assistance under the provisions of § 40-5.1-9 or § 40-6-27, and who do not have the income and resources to provide it for themselves or who can do so only at great financial sacrifice. On average, Rhode Island Medicaid provided services to nearly 306,000 Rhode Islanders with an annual budget of over \$2.6 billion. For all beneficiaries, regardless of the delivery method, the Medicaid Program remains focused on operating within the framework articulated in the 2015 Report of the Working Group to Reinvent Medicaid which articulated: pay for value, not volume; coordinate physical, behavioral, and long-term health care; rebalance the delivery system away from high-cost settings; and promote efficiency, transparency, and flexibility.

Neighborhood Health Plan, United Healthcare, and Tufts Health Plan were all awarded contracts in 2017 to manage a broad range of Medicaid covered services serving over 91% of the state’s Medicaid beneficiaries. Under Rhode Island’s managed care contracts, MCO’s are paid an actuarially certified capitation rate for covered benefits. Actual medical expenses during the contract period may be less than or exceed the medical expense portion of the capitation, constituting the basis for financial gain or loss for the plan. The State shares in the experience of the MCOs through the Risk/Gain Share component of the contract. Determination of gain share opportunities or risk share obligations is based on review of reported plan experience.

Stop Loss claiming is based on the calendar year. The Stop Loss arrangements mitigate risk to the MCOs for specific high cost events. There are three types of expenses for which an MCO can be reimbursed by the State under the Stop Loss provision of the contract:

- Organ transplants
- Individual stays in nursing homes that exceed 30 consecutive days

- Expenses incurred for Early Intervention services provided to any individual member in excess of the state mandated coverage limit within a calendar year.
- Hepatitis C

The Rhode Island operates the Medicaid program under a Section 1115 waiver constituting the legal authority granted to the State by the Secretary of the U.S. Department of Health and Human Services to carry out the Rhode Island Comprehensive section 1115 demonstration. The Section 1115 waiver provides the State with the flexibility to pursue innovations that improve health care access, quality and outcomes and further the goals of the Medicaid and CHIP programs. Rhode Island is currently in the process of submitting a request to extend the waiver and has relied on the current technical services vendor for waiver development and budget neutrality submissions. The submission and approval process is expected to be completed by December 31, 2018. Work on the subsequent waiver extension will potentially commence in 2021 based on current waiver provisions that require the state to submit a request for extension not later than December 2022.

Critical Initiatives

In late 2015, EOHHS began pursuing federal Medicaid financing to support the implementation of some of the health care transformation activities that were recommended by the Governor’s “Working Group to Reinvent Medicaid”. Rhode Island submitted an application to the Center for Medicare and Medicaid (CMS) in March 2016. In October 2016 CMS approved this request as a “DSRIP-like” amendment to the state’s existing Global Medicaid 1115 Waiver, and is officially declared the Rhode Island Designated State Health program or DSHP. This approval brings an estimated match of \$129 million to RI for the time frame November 2016 through December 2020.

With this approval, Rhode Island joins a select group of states leveraging new federal authority authorized by the Affordable Care Act (ACA) to test cutting edge ways to improve how care is paid for and delivered. This pool of funding is governed by Special Terms and Conditions (STC’s) which limit its use to providing financing to support development of health system transformation initiatives for an interim five-year start-up period.

The STCs specify that the funding shall be used for the following:

- 1) The establishment of **a unique partnership with the state’s three public institutions of higher education (IHEs)**, such that, a deliberate and focused attempt to transforming the state’s healthcare workforce and IHEs participation in the overall HSTP shall be inherent in this partnership which is detailed via Inter Department Service Agreements with each IHE.
- 2) The establishment of a **Healthcare Workforce Transformation project** that touches upon RI’s Medicaid reinvention Triple Aim concepts of providing better care, smarter spending and healthier people. Preparing the current workforce and the students aspiring to become healthcare professionals (see above) are the primary targets for this strategy. Since October 2016, EOHHS has led a Healthcare Workforce Transformation planning process that has engaged over 250 healthcare providers, educators, policy-makers, insurers, labor and community organizations to identify RI’s healthcare workforce needs and develop strategies to prepare the current and future healthcare workforce to support RI’s health system transformation goals. The planning process includes examining all of Rhode Island’s workforce needs, with particular focus on the needs of the Medicaid-eligible populations.

3) The establishment of **Accountable Entities**. Accountable Entities (AE's) are Rhode Island's version of what is known in other states as Accountable Care Organizations (ACO's). The Accountable Entity Initiative is a key part of Reinventing Medicaid. The AE is integrated provider organization which will be responsible for the total cost of care and health care quality and outcomes of an attributed population. The AE model in RI will represent an interdisciplinary partnership of providers with a strong foundation in primary care and inclusive of other services, including behavioral health and social support services. Rhode Island initiated a pilot AE Program in early 2016. By July 2016 more than a third of total Medicaid lives were attributed to participating pilot AE's. The state is now moving beyond the Pilot Phase to develop full certification standards for participating Accountable Entities. Rhode Island has submitted final AE Certification Standards to the Center for Medicare and Medicaid Services (CMS) for final approval.

Rhode Island is committed to continuing the progress it has made towards reducing the rate of uninsured in the state, and to that end, seeks to competitively procure actuarial services to assist the Medicaid Program with activities described in this document that pertain to the management of the State's Medicaid program, the implementation of the Health System Transformation Program within Medicaid.

SECTION 3. SCOPE OF WORK AND REQUIREMENTS

The Contractor will provide actuarial and advanced financial analytics consulting services for the State of Rhode Island Medicaid Program administered by the State of Rhode Island Executive Office of Health and Human Services. Under the direction of the Deputy Medicaid Program Director, Budget and Finance, the Contractor will provide actuarial and advanced financial analytics consulting services across all aspects of Medicaid budget and finance including but not limited to: budget initiatives, caseload estimating, financial auditing, financial reporting, and rate setting (including fee-for-service and managed care).

Task 1: Actuarial Analysis and Rate Setting

The Contractor will provide actuarial analysis and rate setting services, as well as actuarial certification when required, for the Medicaid Program including but not limited to:

- Alternative payment methodologies development
- Federal and state stakeholder negotiation
- Federally Qualified Health Center rate development and rate reconciliation
- Fee schedule review and revision
- Hospital rate development
- Managed Care Organization rate development
- Non-emergency medical transportation rate development
- Nursing home rate development
- Program of All-Inclusive Care for the Elderly rate development

- Risk adjustment development
- Risk sharing arrangements review and reconciliation
- Stop-loss arrangements review and reconciliation

All actuarial analysis and rate setting services provided will be carried out in compliance with Centers for Medicare and Medicaid Services requirements related to actuarial soundness and all other applicable requirements

Task 2: Financial Analysis

The Contractor will provide financial analysis for the Medicaid Program including but not limited to:

- 1115 waiver budget neutrality
- Budget forecasting and tracking
- Caseload estimating testimony for both the May Caseload Estimating Conference and November Caseload Estimating Conference
- Children’s Health Insurance Program allotment
- Children’s Health Account analysis
- Federal Financial Participation optimization
- Financial auditing support
- Financial compliance oversight support
- Financial reporting support

Task 3: Special Enhancement Activities as Needed

In addition to Tasks 1 and 2, and should additional funding become available, the State reserves the option to direct the Vendor to conduct additional tasks to support the overall scope of this project. It is critical that the state have the flexibility to bring on additional technical assistance and expertise in a timely manner in order to perform activities which require similar expertise and work functions as those in Section 3: Scope of Work- Tasks 1-2.

The decision to utilize services under Task 3 will be solely at the State’s request, and will be for specific enhancement activities not already included under Tasks 1 through 2. These optional activities will be defined and agreed to in writing, by both the State and the vendor, before any enhancement work begins. There is no commitment on the part of the State to utilize any or all special projects/enhancement activities. All bidders must bid on Task 3 using the hourly rates established in the award. Task should be bid and paid on a fully loaded time and materials basis for all personnel and subcontractors to be utilized in completing the optional task(s). This work must support but not duplicate the work described in the technical proposal’s scope of work. This work cannot exceed 10% of the initial award. Should new funding become available the Purchasing Agent would need to authorize payments in excess of 10% of the contract for special enhancements. The awarded vendor shall not perform any special enhancement activities without receipt of a formal change order issued by the Division of Purchases

SECTION 4. PROPOSAL

A. Technical Proposal

Narrative and format: The proposal should address specifically each of the following elements:

1. **Staff Qualifications** – Provide staff resumes/CV and describe qualifications and experience of key staff who will be involved in this project. Bidder’s key or Lead actuarial staff must possess certification by the Academy of Actuaries and the Actuarial Standards Board and each have 5 years of actuarial experience. Bidders must include copies of the required certifications of these standards for each key staff person in their proposal.
2. **Capability, Capacity, and Qualifications of the Offeror** – Bidders should have at least 4 actuaries that fit the description of the Lead Actuary in order to support concurrent projects over the course of the state fiscal year. The Bidder must also include at least three (3) references for projects that are of comparable size and complexity. The references shall include:
 - a. Name of organization
 - b. Relevance to this proposal
 - c. Brief summary of project, deliverables, and outcomes
 - d. Timeframe for the project
 - e. Original contract amount
 - f. Contact name and information
3. **Work Plan** - Please describe in detail, the workplan to accomplish annual rate certification, semi-annual caseload support, and support for the annual Rhode Island Medicaid Expenditure Report submission IAW RIGL 42-7.2-5.
4. **Approach Proposed**– Describe in detail, the framework and approach to each task identified in the scope of work, to include a detailed plan for immediately bringing on qualified staff to commence work in support of the Medicaid Program. For each task, provide a draft project management chart with deliverables and timelines describing support. The approach should include a description of onsite and off-site staff assistance. A more detailed and precise project management chart will be required to be submitted within eight working weeks post award and updated as needed. Describe any and all utilization of subcontractors for the each of the tasks.

B. Cost Proposal

Bidder must provide a proposal of costs for each of the categories below utilizing the form at Appendix B. Sample Budget Worksheet and provide detail on the specific costs included in each category:

- Staff salaries and Staff benefits (health, disability, and life insurances, pension)
- Sub-contracts
- Other Direct Costs (travel, allowances, office expenses, payroll taxes, etc.)
- Indirect Costs (liability insurance, corporate supports, profit)

Contractors will be reimbursed for costs incurred, documented and submitted to the State on a monthly basis. |

C. ISBE Proposal

See Appendix A for information and the MBE, WBE, and/or Disability Business Enterprise Participation Plan form(s). Bidders are required to complete, sign and submit these forms with their overall proposal in a sealed envelope. Please complete separate forms for each MBE, WBE and/or Disability Business Enterprise subcontractor/supplier to be utilized on the solicitation.

SECTION 5. EVALUATION AND SELECTION

Proposals shall be reviewed by a technical evaluation committee (“TEC”) comprised of staff from State agencies. The TEC first shall consider technical proposals.

Technical proposals must receive a minimum of 60 (85.7%) out of a maximum of 70 points to advance to the cost evaluation phase. Any technical proposals scoring less than 60 points shall not have the accompanying cost or ISBE participation proposals opened and evaluated. The proposal will be dropped from further consideration.

Technical proposals scoring 60 points or higher will have the cost proposals evaluated and assigned up to a maximum of 30 points in cost category bringing the total potential evaluation score to 100 points. After total possible evaluation points are determined ISBE proposals shall be evaluated and assigned up to 6 bonus points for ISBE participation.

The Division of Purchases reserves the right to select the vendor(s) or firm(s) (“vendor”) that it deems to be most qualified to provide the goods and/or services as specified herein; and, conversely, reserves the right to cancel the solicitation in its entirety in its sole discretion.

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

Criteria	Possible Points
Staff Qualifications	10 Points
Capability, Capacity, and Qualifications of the Offeror	10 Points
Work Plan	30 Points
Approach Proposed	20 Points
Total Possible Technical Points	70 Points
Cost proposal*	30 Points
Total Possible Evaluation Points	100 Points
ISBE Participation**	6 Bonus Points
Total Possible Points	106 Points

***Cost Proposal Evaluation:**

The vendor with the lowest cost proposal shall receive one hundred percent (100%) of the available points for cost. All other vendors shall be awarded cost points based upon the following formula:

$$(\text{lowest cost proposal} / \text{vendor's cost proposal}) \times \text{available points}$$

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

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

****ISBE Participation Evaluation:**

a. Calculation of ISBE Participation Rate

1. ISBE Participation Rate for Non-ISBE Vendors. The ISBE participation rate for non-ISBE vendors shall be expressed as a percentage and shall be calculated by dividing the amount of non-ISBE vendor's total contract price that will be subcontracted to ISBEs by the non-ISBE vendor's total contract price. For example if the non-ISBE's total contract price is \$100,000.00 and it subcontracts a total of \$12,000.00 to ISBEs, the non-ISBE's ISBE participation rate would be 12%.
2. ISBE Participation Rate for ISBE Vendors. The ISBE participation rate for ISBE vendors shall be expressed as a percentage and shall be calculated by dividing the amount of the ISBE vendor's total contract price that will be subcontracted to ISBEs and the amount that will be self-performed by the ISBE vendor by the ISBE vendor's total contract price. For example if the ISBE vendor's total contract price is \$100,000.00 and it subcontracts a total of \$12,000.00 to ISBEs and will perform a total of \$8,000.00 of the work itself, the ISBE vendor's ISBE participation rate would be 20%.

b. Points for ISBE Participation Rate:

The vendor with the highest ISBE participation rate shall receive the maximum ISBE participation points. All other vendors shall receive ISBE participation points by applying the following formula:

$$(\text{Vendor's ISBE participation rate} \div \text{Highest ISBE participation rate}) \times \text{Maximum ISBE participation points}$$

For example, assuming the weight given by the RFP to ISBE participation is 6 points, if Vendor A has the highest ISBE participation rate at 20% and Vendor B's ISBE participation rate is 12%, Vendor A will receive the maximum 6 points and Vendor B will receive $(12\% \div 20\%) \times 6$ which equals 3.6 points.

General Evaluation:

Points shall be assigned based on the vendor's clear demonstration of the ability to provide the requested goods and/or services. Vendors may be required to submit

additional written information or be asked to make an oral presentation before the TEC to clarify statements made in the proposal.

SECTION 6. QUESTIONS

Questions concerning this solicitation must be e-mailed to the Division of Purchases at david.francis@purchasing.ri.gov no later than the date and time indicated on page one of this solicitation. No other contact with State parties is permitted. Please reference **RFP # 7594609** on all correspondence. Questions should be submitted in writing in a Microsoft Word attachment in a narrative format with no tables. Answers to questions received, if any, shall be posted on the Division of Purchases' website as an addendum to this solicitation. It is the responsibility of all interested parties to monitor the Division of Purchases website for any procurement related postings such as addenda. If technical assistance is required, call the Help Desk at (401) 574-8100.

SECTION 7. PROPOSAL CONTENTS

- Proposals shall include the following:
 - A. One completed and signed RIVIP Bidder Certification Cover Form (included in the original copy only) downloaded from the Division of Purchases website at www.purchasing.ri.gov. *Do not include any copies in the Technical or Cost proposals.*
 - B. One completed and signed Rhode Island W-9 (included in the original copy only) downloaded from the Division of Purchases website at <http://www.purchasing.ri.gov/rivip/publicdocuments/fw9.pdf>. *Do not include any copies in the Technical or Cost proposals.*
 - C. 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.*
 - D. 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 six (6) pages (this excludes any appendices and as appropriate, resumes of key staff that will provide services covered by this request).
 - a. One (1) Electronic copy on a CD-R, marked "Technical Proposal - Original".
 - a. One (1) printed paper copy, marked "Technical Proposal -Original" and signed.
 - b. Four (4) printed paper copies
 - E. Cost Proposal - 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.
 - a. One (1) Electronic copy on a CD-R, marked "Cost Proposal -Original".
 - One (1) printed paper copy, marked "Cost Proposal -Original" and signed.
 - b. Four (4) printed paper copies

- Formatting of proposal response contents should consist of the following:
 - Formatting of CD-Rs – Separate CD-Rs are required for the technical proposal and cost proposal. All CD-Rs submitted must be labeled with:
 15. Vendor’s name
 16. RFP #
 17. RFP Title
 18. Proposal type (e.g., technical proposal or cost proposal)
 19. If file sizes require more than one CD-R, multiple CD-Rs are acceptable. Each CD-R must include the above labeling and additional labeling of how many CD-Rs should be accounted for (e.g., 3 CD-Rs are submitted for a technical proposal and each CD-R should have additional label of ‘1 of 3’ on first CD-R, ‘2 of 3’ on second CD-R, ‘3 of 3’ on third CD-R).

Vendors are responsible for testing their CD-Rs before submission as the Division of Purchase’s inability to open or read a CD-R may be grounds for rejection of a Vendor’s proposal. All files should be readable and readily accessible on the CD-Rs submitted with no instructions to download files from any external resource(s). If a file is partial, corrupt or unreadable, the Division of Purchases may consider it “non-responsive”. USB Drives or any other electronic media shall not be accepted. Please note that CD-Rs submitted, shall not be returned.

- Formatting of written documents and printed copies:
 - For clarity, the technical proposal shall be typed. These documents shall be single-spaced with 1” margins on white 8.5”x 11” paper using a font of 12 point Calibri or 12 point Times New Roman.
 - All pages on the technical proposal are to be sequentially numbered in the footer, starting with number 1 on the first page of the narrative (this does not include the cover page or table of contents) through to the end, including all forms and attachments. The Vendor’s name should appear on every page, including attachments. Each attachment should be referenced appropriately within the proposal section and the attachment title should reference the proposal section it is applicable to.
- a. The cost proposal shall be typed using the formatting provided on the provided template.
 - Printed copies are to be only bound with removable binder clips.

SECTION 8. PROPOSAL SUBMISSION

Interested vendors must submit proposals to provide the goods and/or services covered by this RFP 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, shall not be accepted.

Proposals should be mailed or hand-delivered in a sealed envelope marked “**RFP# 7594609 Actuarial and Financial Analysis Support**” 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 shall not be accepted. Proposals misdirected to other State locations or those not presented to the Division of Purchases by the scheduled due date and time shall be determined to be late and shall not be accepted. Proposals faxed, or emailed, to the Division of Purchases shall not be accepted. The official time clock is in the reception area of the Division of Purchases.

SECTION 9. CONCLUDING STATEMENTS

Notwithstanding the above, the Division of Purchases reserves the right to award on the basis of cost alone, to accept or reject any or all proposals, and to award in the State's 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.

If a Vendor is selected for an award, no work is to commence until a purchase order is issued by the Division of Purchases.

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

APPENDIX A. PROPOSER ISBE RESPONSIBILITIES AND MBE, WBE, AND/OR DISABILITY BUSINESS ENTERPRISE PARTICIPATION FORM

1. Proposer's ISBE Responsibilities (from 150-RICR-90-10-1.7.E)

1. Proposal of ISBE Participation Rate. Unless otherwise indicated in the RFP, a Proposer must submit its proposed ISBE Participation Rate in a sealed envelope or via sealed electronic submission at the time it submits its proposed total contract price. The Proposer shall be responsible for completing and submitting all standard forms adopted pursuant to 105-RICR-90-10-1.9 and submitting all substantiating documentation as reasonably requested by either the Using Agency's MBE/WBE Coordinator, Division, ODEO, or Governor's Commission on Disabilities including but not limited to the names and contact information of all proposed subcontractors and the dollar amounts that correspond with each proposed subcontract.
2. Failure to Submit ISBE Participation Rate. Any Proposer that fails to submit a proposed ISBE Participation Rate or any requested substantiating documentation in a timely manner shall receive zero (0) ISBE participation points.
3. Execution of Proposed ISBE Participation Rate. Proposers shall be evaluated and scored based on the amounts and rates submitted in their proposals. If awarded the contract, Proposers shall be required to achieve their proposed ISBE Participation Rates. During the life of the contract, the Proposer shall be responsible for submitting all substantiating documentation as reasonably requested by the Using Agency's MBE/WBE Coordinator, Division, ODEO, or Governor's Commission on Disabilities including but not limited to copies of purchase orders, subcontracts, and cancelled checks.
4. Change Orders. If during the life of the contract, a change order is issued by the Division, the Proposer shall notify the ODEO of the change as soon as reasonably possible. Proposers are required to achieve their proposed ISBE Participation Rates on any change order amounts.
5. Notice of Change to Proposed ISBE Participation Rate. If during the life of the contract, the Proposer becomes aware that it will be unable to achieve its proposed ISBE Participation Rate, it must notify the Division and ODEO as soon as reasonably possible. The Division, in consultation with ODEO and Governor's Commission on Disabilities, and the Proposer may agree to a modified ISBE Participation Rate provided that the change in circumstances was beyond the control of the Proposer or the direct result of an unanticipated reduction in the overall total project cost.

2. MBE, WBE, AND/OR Disability Business Enterprise Participation Plan Form:

Attached is the MBE, WBE, and/or Disability Business Enterprise Participation Plan form. Bidders are required to complete, sign and submit with their overall proposal in a sealed envelope. Please complete separate forms for each MBE, WBE and/or Disability Business Enterprise subcontractor/supplier to be utilized on the solicitation.



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DEPARTMENT OF ADMINISTRATION
ONE CAPITOL HILL
PROVIDENCE, RHODE ISLAND 02908**

MBE, WBE, and/or DISABILITY BUSINESS ENTERPRISE PARTICIPATION PLAN

Bidder's Name:

Bidder's Address:

Point of Contact:

Telephone:

Email:

Solicitation No.:

Project Name:

This form is intended to capture commitments between the prime contractor/vendor and MBE/WBE and/or Disability Business Enterprise subcontractors and suppliers, including a description of the work to be performed and the percentage of the work as submitted to the prime contractor/vendor. Please note that all MBE/WBE subcontractors/suppliers must be certified by the Office of Diversity, Equity and Opportunity MBE Compliance Office and all Disability Business Enterprises must be certified by the Governor's Commission on Disabilities at time of bid, and that MBE/WBE and Disability Business Enterprise subcontractors must self-perform 100% of the work or subcontract to another RI certified MBE in order to receive participation credit. Vendors may count 60% of expenditures for materials and supplies obtained from an MBE certified as a regular dealer/supplier, and 100% of such expenditures obtained from an MBE certified as a manufacturer. This form must be completed in its entirety and submitted at time of bid. **Please complete separate forms for each MBE/WBE or Disability Business Enterprise subcontractor/supplier to be utilized on the solicitation.**

Name of Subcontractor/Supplier:

Type of RI Certification: MBE WBE Disability Business Enterprise

Address:

Point of Contact:

Telephone:

Email:

Detailed Description of Work To Be Performed by Subcontractor or Materials to be Supplied by Supplier:

Total Contract Value (\$):

Subcontract Value (\$):

ISBE Participation Rate (%):

Anticipated Date of Performance:

I certify under penalty of perjury that the forgoing statements are true and correct.

Prime Contractor/Vendor Signature

Title

Date

Subcontractor/Supplier Signature

Title

Date

Appendix B: Sample Budget Worksheet
12-Month Budget

Use this format to submit your budget. All items included in this Budget Form must be fully explained in the Budget Narrative.

Category			
Personnel (Name, Title)	Hourly Rate	Total # of Hours	Total
Fringe Benefits (provide breakdown of fringe benefits)	Fringe % Rate		Total
	%		
	%		
	%		
	%		
	%		
Subcontracts (Name and Description of Service, Cost)			\$
Other: (if your expense does not fit into a category above please list and specify below)			\$
			\$
Indirect/Administrative Costs*			
Total Request			

*If including indirect charges in the budget, a copy of your federally approved indirect rate must be attached. If you do not have a federally approved indirect rate, you may charge a 10% de minimus rate.

Appendix B: Sample Budget Worksheet
Budget Narrative

(Please use the following Word document as a guide)

A. Justification of Budget Expenses

PERSONNEL **\$6,534.00**

Janice Doe, Director \$2,132.00

\$24.79 per hour for 86 hours

Ms. Doe will work with community partners to achieve the goals and objectives of this proposal. She will attend monthly trainings/meetings as required by the RFP.

Jackie Jones, Assistant Systems Development \$2,178.00

\$33.76 per hour for 64.50 hours

Ms. Jones will specifically review operating protocols related to systems development, implementation and operation performance.

John Doe, RN, C. MS, Project Coordinator \$2,224.00

\$51.72 per hour for 43 hours

Mr. Doe will assume responsibility for oversight of the project and all project-reporting requirements.

FRINGE BENEFITS **\$1,960.00**

Taxes and fringe @ 30% are calculated as follows: Social Security 6.20%, Medicare 2.45%, Workmen's Comp 4.54%, Unemployment Insurance 4.46%, Dental Insurance 1.00%, Life Insurance .68%, Pension 10.67%.

SUBCONTRACTS **\$4,000.00**

ABC Limited and the XYZ Unlimited will conduct a community assessment on tobacco use.

ABC Limited \$2,000.00

\$25 per hour x 80 hours

XYZ Unlimited \$2,000.00

\$25 per hour x 80 hours

SUB-TOTAL **\$43,694.00**

ADMINISTRATIVE COST **\$4,369.00**

10% of all direct expenses less equipment and subcontracts

TOTAL **\$48,063.00**