



# Department of Health

## Request for Proposals

RFP # 20017

### Training Services for NY State of Health Application Assistors and Local Departments of Social Services

**Issued: January 30, 2019**

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## 1.0 CALENDAR OF EVENTS

<b>RFP 20017 - TRAINING SERVICES FOR NY STATE OF HEALTH APPLICATION ASSISTORS AND LOCAL DEPARTMENTS OF SOCIAL SERVICES</b>	
<u>EVENT</u>	<u>DATE</u>
Issuance of Request for Proposals	January 30, 2019
Deadline for Submission of Written Questions	February 13, 2019 <b>4:00 p.m. ET</b>
Responses to Written Questions Posted by DOH	<b>On or About</b> <del>March 1, 2019</del> <u>March 12, 2019</u>
Deadline for Submission of Proposals	<del>March 22, 2019</del> <del>April 10, 2019</del> <b>April 17, 2019</b> <b>4:00 p.m. ET</b>
<u>Anticipated</u> Contract Start Date	January 1, 2020

## 2.0 OVERVIEW

Through this Request for Proposals (“RFP”), the New York State (“State”) Department of Health (“DOH”) is seeking competitive proposals from training entities to provide training services, and revision services and administrative maintenance of the Medicaid Resource Guide (MRG) as further detailed in [Section 4.0](#) (Scope of Work). The resulting Contractor will be required to develop, deliver, and provide technical assistance and training for New York (NY) State of Health Application Assistors, Local Departments of Social Services (LDSS), Facilitated Enrollment Organizations, Qualified Providers and other entities that assist individuals in enrolling in health insurance coverage or performing health insurance eligibility determinations. It is the Department’s intent to award one (1) contract from this procurement.

### 2.1 Introductory Background

#### 1. NY State of Health

NY State of Health (the Marketplace) is an organized online marketplace where individuals and small businesses may compare health insurance options, calculate costs and select coverage. NY State of Health became operational on October 1, 2013. The Marketplace uses a single application to determine the eligibility of NY State consumers for health care programs and financial assistance and helps consumers enroll in coverage through the Marketplace. Today, over 4 million individuals are enrolled in health insurance coverage through NY State of Health.

Consumers may receive assistance from Navigators, Certified Application Counselors (CACs) and Health Plan Facilitated Enrollers when applying for health insurance coverage through the online application in the NY State of Health. There are currently over 5,500 application assistors (not including Insurance Brokers) throughout NY State. Upon completion of the online application, the consumer receives an eligibility determination and may choose to have the application assistor help them enroll in a Qualified Health Plan (QHP) or one of the Public Health Insurance Programs including Medicaid, Essential Plan (EP) and Child Health Plus (CHPlus) and/or any successor programs to those supported by the Patient Protection and Affordable Care Act (ACA) subject to federal or state legislation that may be created before or during the length of this contract.

#### 2. Local Departments of Social Services, and Facilitated Enrollers for the Aged, Blind and Disabled

Local Departments of Social Services (LDSS) are responsible for performing eligibility determinations for certain populations not currently served by the NY State of Health. For example, the LDSS is responsible for making

eligibility determinations for the aged, blind and disabled populations. The LDSS also performs renewal determinations for Medicaid enrollees originally enrolled through the LDSS who have not been transitioned to NY State of Health.

Facilitated Enrollers for the Aged, Blind and Disabled provide application assistance in applying for health insurance services through the LDSS. They also provide outreach and application assistance to individuals enrolled in Medicaid who appear eligible for Medicare.

### 3. Qualified Providers

Qualified providers (Providers) are authorized under State and Federal law to make presumptive eligibility (PE) Medicaid determinations for children or pregnant women. Designated family planning benefit providers are authorized to assist individuals who apply for the Family Planning Benefit Program (FPBP).

## 2.2 Important Information

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

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

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

Any qualifications or exceptions proposed by a bidder to this RFP should be submitted in writing using the process set forth in [Section 5.2](#) (Questions) prior to the deadline for submission of written questions indicated in [Section 1.0](#) (Calendar of Events). Any amendments DOH makes to the RFP as a result of questions and answers will be publicized on the DOH web site.

## 2.3 Term of the Agreement

This contract term is expected to be for a period of five (5) years commencing on the date shown on the Calendar of Events in [Section 1.0](#), subject to the availability of sufficient funding, successful contractor performance, and approvals from the New York State Attorney General (AG) and the Office of the State Comptroller (OSC).

## 3.0 BIDDERS QUALIFICATIONS TO PROPOSE

### 3.1 Minimum Qualifications

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

- Bidder must have at least three (3) years of combined experience providing the development, coordination, and delivery of in-person classroom style training initiatives; and
- Bidder must have at least three (3) years of combined experience with the development, coordination and delivery of online training program(s).

Experience acquired concurrently is considered acceptable.

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

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

### 3.2 Preferred Qualifications

Bidders that demonstrate experience with the following are preferred:

- Bidder has at least three (3) years of combined experience delivering both in-person and online trainings, that concern state or federal regulations.
- Bidder has at least three (3) years of combined experience in the development, management, and delivery of training services to local or county departments of social services; grantees and health plans participating in the Facilitated Enrollment (FE) and Navigator program; and agency staff (Certified Application Counselors) that assist individuals in enrolling for public health insurance.

Experience acquired concurrently is considered acceptable.

## 4.0 SCOPE OF WORK

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

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

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

The Contractor will be required to develop and revise curriculum, coordinate, and deliver topic-specific curriculum, training, and training materials for NY State of Health Application Assistors, LDSS, FE organizations, Providers, and other entities that assist individuals in enrolling in health insurance or performing health insurance eligibility determinations. All training, evaluations, and materials generated under this contract will be the sole property of the Department. Additionally, the Contractor will perform revision services and administrative maintenance for the Department’s Medicaid Resource Guide (MRG), which is referenced by LDSS and others to perform eligibility determinations.

All estimated quantities within this RFP are based on current and future projected needs for NY State of Health, LDSS, Facilitated Enrollers, Providers and other entities who assist individuals in applying for public health insurance programs or determine eligibility for such programs. The Contractor must be able to provide the type and number of trainings estimated, however, the Department reserves the right to revise the number and length of deliveries within each training component depending on the demand and curricula requirements. For example, currently the New Worker LDSS training described in this section is a seven (7) day training. However, changes in policy or functions transitioned to NY State of Health or the Department may require that this training be shortened or expanded in duration. The contract budget will allow for the flexibility to alter the number and length of sessions in any category to meet training demand. The Contractor must accommodate any requested revision to the training schedule based on the needs of the Department. See Attachment E, Current Training and Modality Summary and Attachment B, Cost Proposal for estimated trainings.

The Contractor must be able to meet the Department’s highly specialized needs for the Scope of Work as detailed in this RFP and must remain current on all related policies pertaining to the Marketplace and the public health

insurance programs. The Contractor must work with the Department to evaluate evolving training needs and provide recommendations to the Department for updating and developing new curricula. All training content, whether live classroom, or online format must be approved by the Department at least two (2) weeks prior to delivery or posting. Additionally, the Department reserves the right to attend any training for content monitoring and quality assurance purposes. The Contractor must also permit Department staff access to records relating to such Contractor staff trainings.

#### **4.1 Tasks/Deliverables**

##### **1. TRAINING MODALITIES**

Depending on the specific training component, training shall be delivered using the traditional classroom format; online computer-based training (self-paced learning courses); and online webinars. The Contractor will be required to develop and revise curriculum, and coordinate and deliver topic specific curriculum training including, but not limited to, the modalities defined below.

The Department will consider the conversion of trainings from one modality to another, if applicable at any time throughout the length of the contract. However, it is up to the Department to make the final determination on the most appropriate delivery method for each training.

A listing of current trainings is outlined, with modalities currently offered, in Attachment E, Current Training and Modality Summary. The Current Training and Modality Summary reflects current course offerings and modalities at the time of this RFP only. Future course offerings may differ based on the training needs of the Department and any changes in legislation, regulations, policies and guidelines.

##### **A. Classroom Training**

The Contractor will provide in person Classroom Trainings, defined as face-to-face events in a room, with instructor(s) teaching specified curricula to groups of trainees in a participant-centered manner. Classroom training includes Assistor Certification Training and specific LDSSs trainings. These trainings may take place at any location statewide based on demand. [See Attachment H for a sample Assistor Certification Classroom Training.](#)

##### **B. Online Self-Paced Computer-based Training**

Online Self- Paced Computer-based Training is defined as trainings delivered via the internet with participants logging into a website to complete self-paced course material. [See Attachment G for a sample of the landing page, the Course Roadmap and Module 1 of an Online Self-Paced Computer-based Training.](#) Trainings must have interactive capability, have navigation limits applied, be able to utilize static, video, and recorded content. The training interface must also be able to administer assessments, determine successful completion of learning (based on assessment scores), direct unsuccessful learners to review weak areas (based on assessment scores), provide re-assessments, and issue and maintain certificates of completion to learners that successfully pass the course requirements. [All posted on-line training materials must be Section 508 compliant.](#) See Section 4.1.4.A.i for additional website and Learning Management System (LMS) requirements.

##### **C. Webinar Training**

Webinar Trainings are defined as trainings delivered through the internet with participants watching a live visual presentation on a computer monitor and listening to the instructor(s) speak live by way of an audio stream or telephone. A live webinar is a lecture style online presentation with features for interaction with the audience. Participants must be able to access Webinars via any private or public computer, tablet or mobile device that they may have access to. Participants should have the ability to ask questions through open live conversation or via an online question and answer format. The Contractor may be required to develop new or utilize existing curricula, which will be provided to the Contractor upon contract approval, in developing

Webinar trainings. [See Attachment I for a sample Webinar Training.](#)

#### **D. Archived Webinars**

All Webinar trainings developed and delivered live under this contract will be recorded and posted to the designated Learning Management System (LMS) website. All recorded Webinars must be submitted to the Department for approval within one (1) day of the completion of the training and the Department approved training must be posted as an archived webinar within five (5) business days of the completion of the training. The archived webinars must be maintained by the Contractor for viewing by those training recipients identified under this RFP. Existing webinars must also be posted to the LMS training website maintained by the Contractor for those authorized under this RFP for viewing as directed by the Department. Access to the archived and existing webinars will be at no charge to the learner or the Department and will be through the LMS account that is provided by the Contractor. See Section 4.1.4.A.i for additional website and Learning Management System (LMS) requirements. [Trainees must have access to online content after completion of training, for as long as their role remains appropriate to the learning situation.](#)

## **2. TRANSITION OF EXISTING MATERIAL**

The Department will assist in providing training material for previously developed ongoing trainings and training programs in development. It is expected that the Department shall provide the most current training materials electronically, outlined below, for the following trainings:

- A.** NY State of Health Assistor Certification;
  - i. Three (3) day in-person Assistor Certification;
  - ii. Online Self-Paced Assistor Certification.
  
- B.** Facilitated Enrollment Training for the Aged, Blind and Disabled;
  - i. Three (3) day in-person FE Training;
  - ii. Archived Webinars;
    - a. Medicare as a Condition of Medicaid Eligibility;
    - b. Operating Protocols for Outreach to Potential Medicare Eligible.
  
- C.** Medicaid Training and Technical Assistance;
  - i. LDSS New Worker;
  - ii. LDSS Chronic Care Worker (Introductory and Advanced);
  - iii. LDSS Technical Assistance (TA) topics;
  - iv. Qualified Provider Presumptive Eligibility (for Pregnant Women, and Children Under Age 19) and Family Planning Benefit Program Training.
  
- D.** Any training programs in development for NY State of Health Assistors, LDSS, Facilitated Enrollers for the Aged, Blind and Disabled, Agencies and Providers.
  
- E.** Additionally, the Department will assist in providing materials relevant to the Contractor's function for revision services and provide administrative maintenance to the Medicaid Resource Guide (MRG).

## **3. DELIVERY OF TRAINING COMPONENTS**

The Contractor will be required to develop, revise curriculum, coordinate and deliver topic-specific curriculum and produce training materials for NY State of Health Assistors, LDSS, Facilitated Enrollers for the Aged, Blind and Disabled, agencies and Providers, and other entities, as determined by the Department and legislation, regulations, policies and guidelines that assist individuals in enrolling in health insurance or performing health insurance eligibility determinations as stipulated in the RFP.



Registration management and travel reimbursement (as applicable) will be the responsibility of the Contractor. Registration is to be done through the LMS system. More information on the LMS system and registration can be found in Section 4.1.4.A.i. Travel reimbursement is discussed in Section 4.1.4.E and Section 5.4 Payment.

Training components will include, but not be limited to, the following in-person classroom, online self-paced computer-based, and live and archived webinar trainings:

## **A. Classroom Training**

### **i. NY State of Health Assistor Certification Training**

NY State of Health Assistor Certification training is intended to provide the program information necessary for an Assistor to help individuals and families applying for New York's health insurance programs through NY State of Health, The Official Health Plan Marketplace. This is currently a three (3)-day in-person training curriculum delivered as needed for NY State of Health Application Assistors and other staff as identified by the Department. All new Application Assistors are required to attend either this three (3)-day in-person training or an online version of the training (see Section 4.1.3.B.i) to become certified on NY State of Health. In 2017, 540 Application Assistors were trained via this modality. The in-person training course, includes, but is not limited to the following training modules:

- Introduction to the Affordable Care Act (ACA);
- Privacy and Security Standards;
- Roles and Responsibilities of the Application Assistor;
- NY State of Health Marketplace Terms and Program Information;
- NY State of Health Application;
- Selecting a Health Plan;
- Resources available to the Application Assistors; and
- Information on Complaints and Appeals.

The in-person training sessions are held statewide, regionally. The specific locations of the training deliveries are based on demand. Primary locations in New York State have included Albany, New York City (NYC), Syracuse and Buffalo. NYC sessions will be offered monthly and upstate sessions will be offered monthly on a rotating location basis. See Attachment F for recommended class sizes per modality.

### **ii. Facilitated Enrollment Training for the Aged, Blind and Disabled**

The FE Training for the Aged, Blind and Disabled is intended to provide the program information necessary for a Facilitated Enroller to be competent in all aspects of eligibility screening and application assistance to assist the Aged, Blind and Disabled population in applying for Medicaid. The facilitated enrollment training is currently a three (3)-day training program. The three (3)-day course includes, but is not limited to the following components:

- Overview of the Medicaid Programs for the Aged, Blind and Disabled;
- Role of the Facilitated Enroller;
- Screening the Applicant for Program Eligibility;
- Rights and Responsibilities of the Applicant;
- Documentation Requirements;
- Confidentiality and Health Insurance Portability and Accountability (HIPAA) Requirements;
- Submission of the Access NY Health Care Application and Supplement A; and
- Education and Assistance for Potential Medicare Enrollees on the Medicare Application Process.

All Facilitated Enrollers are required to attend the FE Training Program in order to assist individuals who are Aged, Blind or Disabled in applying for Medicaid. The recommended class sizes for the FE training for the Aged, Blind and Disabled training sessions are listed in Attachment F. The class size for the NYC

sessions may be higher than the average and at times may require multiple sessions in a month.

### **iii. LDSS Medicaid Training and Technical Assistance**

The in-person classroom style LDSS Medicaid Training and Technical Assistance is currently comprised of three (3) components: 1) LDSS New Worker, 2) LDSS Chronic Care Worker (Introductory and Advanced), and 3) Technical Assistance Topics.

#### **a. LDSS New Worker**

The LDSS New Worker training is intended for LDSS Medicaid eligibility staff who have limited experience with a Medicaid caseload. The curriculum provides an introduction to the Medicaid program with a focus on eligibility for individuals who want community-based medical care. This is currently a seven (7)-day training curriculum, see Attachment F. The training session includes, but is not limited to the following topic areas:

- Overview of the Medicaid program;
- Program eligibility categories and respective budgeting methodologies;
- Immigration criteria for Medicaid eligibility;
- The application process and required documentation (financial and non-financial for each Medicaid category);
- Presumptive eligibility for pregnant women and children;
- Description of situations resulting in continuous coverage;
- Excess Income program and spenddown of income;
- Managed Care;
- Notice requirements for applicants/recipients, including Client Notice System (CNS) notices;
- Introduction to the Medicare Savings, Family Planning Benefit and Consolidated Omnibus Budget Reconciliation Act (COBRA) Continuation Coverage programs; and
- Third Party Health Insurance coverage.

These Classroom training sessions are held statewide. The specific locations of the training deliveries are based on LDSS demand. In 2017, this seven (7)-day training session was delivered five (5) times statewide at locations in Rochester, Uniondale, Hudson, Binghamton and Fort Edward.

#### **b. Training for LDSS Chronic Care Workers**

The Contractor will be required to deliver LDSS Chronic Care trainings, offered as an Introductory level session for LDSS staff and an Advanced session for experienced staff. The Introductory and Advanced Chronic Care trainings are each currently four (4)-day sessions. The Introductory Chronic Care session is for staff with minimal experience and the Advanced level is training for experienced staff managing Chronic Care caseloads.

##### **1. LDSS Introductory Chronic Care Worker**

This four (4)-day classroom training session will be delivered statewide on an as needed basis for LDSS eligibility staff, and other staff as identified by the Department who have minimum experience with a Chronic Care caseload. The primary focus of this training is on determining eligibility for institutionalized individuals and individuals who receive services from home and community-based programs. The four (4)-day training session includes, but is not limited to the following areas:

- Chronic Care budgeting;
- Spousal impoverishment budgeting;
- Procedures involved in processing cases from community Medicaid to Chronic Care status;
- Treatment of real property (including the homestead);
- Look-back period for transfer of assets and transfer penalty calculation;

- Treatment of trusts and annuities;
- Liens and recoveries;
- Resources and the Excess Resource program; and
- New York Partnership for Long-Term Care.

The specific locations of the training deliveries are based on LDSS demand. See Attachment B for estimated annual quantity.

## **2. LDSS Advanced Chronic Care Worker**

The advanced Chronic Care training will address content as in the LDSS Introductory Chronic Care Worker training but at a higher level. The training approach is to review content through the introduction of five (5) case studies and follow an individual applicant through all possible scenarios of program eligibility. See Attachment B for estimated annual quantity.

### **c. Technical Assistance Training**

Technical Assistance (TA) training days are half or full-day classroom sessions that focus on many different Medicaid eligibility topics. In the event a half-day training session is requested, the Department encourages the Contractor to coordinate and schedule two (2) half-day TA sessions to provide one (1) full-day of training.

The TA days will be split between Regional Medicaid Consortia requests and the individual training needs of LDSS statewide. There are eight (8) Regional Medicaid Consortia (See Attachment C) in the State which typically meet via conference call bi-monthly to discuss new Medicaid policies, directives, implementation issues and best practices. The Department's local district liaisons facilitate the Consortia meetings which include in each Consortium, Medicaid representatives from the LDSS in that region. In certain instances, the Contractor may be required to attend the Consortia meeting. Consortium members determine the TA training topics for the Consortium. If a LDSS is unable to meet their training needs through the Consortium, the district may request on-site agency training days for their staff. It is recommended that the Contractor attend Regional Consortia meetings where appropriate, as determined by the Department. The contractor may attend meetings via conference call. The Contractor is required to survey the LDSS Staff Development Coordinators and County Medicaid Directors to determine individual LDSS training needs for TA, New Worker and Chronic Care Worker training sessions. Surveys are to be conducted, at a minimum, within ~~60~~ 30 days from the beginning of the contract, and annually thereafter. Surveys may be conducted electronically. Travel reimbursement to the Contractor will not be provided if attending any Consortia meetings in person.

The topics for the Medicaid Consortia and LDSS generally cover more in-depth information than is included in the LDSS New Worker or LDSS Chronic Care Worker curricula, but can include other related Medicaid eligibility policies and guidelines. As a result, ongoing curricula development will be required of the contractor to meet the needs of the Department and the LDSS. Any curricula change must be approved by the Department at least two (2) weeks prior to training delivery.

TA topics have included: Documentation, HIPP/MIPP, Excess Income, Immigration, Medicaid Continuations for SSI, Medicare Savings Program, Real Property, Resource Analysis, Resource Attestation, Retirement Income and Annuities, Self-Employment, Spousal Impoverishment, Supplemental Security Income Related Budgeting, Transfer of Assets, and Trusts. In addition, TA days may be allocated to host regional workshops, conducted by Department staff with the LDSS, to discuss policy changes or may be allocated to additional training days as identified by the Department.

The class size is 10-30 participants, as specified in Attachment F. If a LDSS requests training and does not have the minimum recommended number of registrants, they are responsible for inviting a neighboring LDSS to participate in the training. If the minimum class size is still not attained, the

Contractor should proceed following guidance in Section 4.1.4.F. for cancellation policies.

The TA training is primarily delivered in a classroom setting, however, some TA sessions are also delivered as webinars. Online self-paced computer-based trainings and webinars may be an alternative to the classroom setting for certain other TA curricula. The classroom sessions will be delivered on site at a LDSS where the LDSS provides the training space, and equipment, if available to host the TA sessions. The Contractor is responsible for coordinating a LDSS to host TA sessions. If a LDSS does not have equipment available, the Contractor is responsible to provide equipment for the session.

## **B. Online Self-Paced Trainings and Webinars**

### **i. NY State of Health Assistor Certification Training**

The NY State of Health Online Assistor Certification training is an alternative to the three (3)-day in-person certification program (referenced in Section 4.1.3.A.i “Classroom Training, NY State of Health Assistor Certification Training”), and covers the same content as the in-person training. The current length of the online training program is approximately fifteen (15) hours of online learning. This online training contains 23 self-paced modules, which vary in length from approximately 20 to 80 minutes. Each module has an approximate running time listed next to the module title. Module run times may also be viewed in the Course Menu at the start of the online training. An individual must complete these modules within 30 days to receive certification. If an individual is not able to complete the course within the 30-day timeframe, approval by the Department is required to allow the individual to continue the course.

### **ii. Facilitated Enrollment Training for the Aged, Blind, and Disabled: Medicare as a Condition of Medicaid Eligibility Webinar, and Operating Protocols for Outreach to Potential Medicare Eligibles Webinar**

Section 366 (2)(b)(1) of the NYS Social Services Law requires individuals who are eligible for, or reasonably appear eligible for, Medicare must apply for Medicare as a condition of maintaining their Medicaid eligibility. Facilitated Enrollers for the Aged, Blind and Disabled will be assisting individuals in this process. This program began in the summer of 2018.

Training for this program will be delivered via two (2) existing archived webinars (listed in Section 4.1.2.B.ii.), each approximately two (2) hours long. Topics include the various types of Medicare, the benefits of each, how to apply and the role of the Facilitated Enroller in the application and outreach process. Updates to these webinar trainings as necessary are to be completed by the Contractor per Section 4.1.4.C.

### **iii. LDSS Technical Assistance**

#### **a. LDSS Technical Assistance (TA) Webinars**

At time of the release of this RFP, TA sessions are delivered both in a classroom setting and via webinar. Due to demand, the Contractor must develop and deliver sessions, mutually agreed upon with the Department and LDSS, in either format. The webinar format is conducive to some of the half-day and full-day topics where there is demand by individual counties separated by geography who are in need of such training and cannot meet the minimum threshold for holding an in-person session. Examples of sessions converted to webinars include:

- Self-Employment; and
- Medicaid Continuations for SSI.

#### **b. LDSS Technical Assistance (TA) Immigration Training**

The primary focus of the LDSS TA Immigration online, self-paced training program is to educate LDSS staff on how to process Medicaid applications received by the districts in accordance with immigrant eligibility guidelines.

By the end of this online Immigration training, participants will be able to:

- Interpret immigrant eligibility guidelines for government funded health insurance programs;
- Identify the different immigration statuses;
- Recognize immigrants' concerns;
- Review acceptable forms of documentation; and
- Understand Welfare Management System (WMS) coding for each immigration category.

This training is comprised of six (6) Modules including ungraded quizzes and "checks for understanding" throughout the modules. Each of the modules has an approximate run time of 45 minutes each and covers NYS Eligibility Requirements for Non-Citizens, Immigrant Categories, Emergency Medicaid eligibility, Immigrant Concerns, Required Documentation and WMS Coding. An updated version of this training is in development and may need to be completed by the contractor. In 2017, approximately 48 LDSS staff viewed the existing online Immigration training. It is expected that this number will increase when a new, updated training program is released.

#### **iv. Qualified Provider Training**

Computer-based online training is a requirement for designated staff of Qualified Medicaid Presumptive Eligibility (PE) Providers and for designated staff of family planning benefit Providers who offer application assistance for the Family Planning Benefit Program (FPBP) services and benefits covered under Medicaid.

Designated staff of Providers for Medicaid PE for children or pregnant woman must complete online training in order to make PE determinations. Designated staff of Providers offering application assistance for the FPBP must also complete online training in order to be qualified to provide assistance. Upon completion of the training modules, the contractor will provide the trainee a certificate of completion. This certificate must be retained by the Provider to show proof of meeting this training requirement. To ensure compliance, the Department will monitor the extent to which designated staff completes the required online training. The Contractor must provide the Department with monthly lists of staff completing the training and their provider affiliation (see Section 4.3.).

##### **a. Presumptive Eligibility (PE) Training**

The online training for Presumptive Eligibility (PE) is comprised of two (2) topics; 1. PE for Pregnant Women, and 2. PE for Children under Age 19.

##### **1. PE for Pregnant Women**

The Contractor is responsible for the development and provision of an online self-paced training course and supporting training materials, (available to be printed as part of the online training) for PE for Pregnant Women. This training is comprised of four (4) modules covering: an overview of the PE process; comprehensive information on the services and benefits provided; step by step guide with explanation of the application process (including a copy of the PE screening checklist, case processing checklist, PE determination letter and the ANY application); instructions on filling out the ANY application; practice scenarios; documentation requirements; policies regarding special populations (e.g., pregnant women who are homeless, under age 21, or undocumented); expanded eligibility coverage for pregnant women; instructions on choosing a health plan and processing the application with the LDSS.

##### **2. PE for Children under Age 19**

The Contractor is responsible for the development and provision of an online self-paced training

course and supporting training materials, (available to be printed as part of the online training) for PE for Children Under 19. This training is comprised of four (4) modules covering: an overview of the PE process; comprehensive information on the services and benefits provided; explanation of the application process (including a copy of the PE screening form, PE determination letter and the ANY application; instructions on filling out the ANY application, practice scenarios; documentation requirements; policies regarding special populations; expanded eligibility and coverage for infants and other family members; advanced family size scenarios; and processing of the application with the LDSS.

#### **b. Family Planning and Benefit Program**

The Contractor is responsible for the development and provision of an online self-paced FPBP training course, and supporting materials (available to be printed as part of the online training), This training is comprised of five (5) modules covering: an overview of FPBP services; comprehensive information on the services and benefits provided; explanation of the application process; documentation requirements; a copy of the FPBP and ANY applications, practice scenarios; and processing the ANY application with NY Health Options.

### **4. DEVELOPMENT, ADMINISTRATION AND APPROVAL OF TRAINING COMPONENTS**

The following identifies activities which the Contractor is responsible for each training:

#### **A. Training Development**

The Contractor will develop training curricula for in-person, online self-paced and webinar training sessions and shall also utilize state-of-the-art training modalities as referenced in this RFP. For a summary of the recommended class size per training modality, see Attachment F.

##### **i. Dedicated Website and Learning Management System**

The contractor will provide and maintain the website housing the training, registration procedures, and course completion certificates at the conclusion of training. Registrants must be able to access and complete self-paced on-line trainings remotely at any time.

The Contractor will be required to deliver within 60 days of notification of OSC contract approval, access, for learners and the Department, to a Learning Management System (LMS) website identified under this RFP/contract. The Contractor must also have a website in place to transfer files between the Department and the Contractor within 60 days of notification of OSC contract approval. This file transfer website can be the LMS or another website. The dedicated LMS website, subject to the Department's approval, is for managing and delivering educational training programs for the NY State of Health Application Assistor Certification Program, the various LDSS training programs, the Facilitated Enrollers for the Aged, Blind and Disabled Program, the various training programs for Providers and any other entities that assist individuals and families applying for health insurance or performing health insurance eligibility determination. The educational content will include, but will not be limited to: applying for health insurance in the Marketplace and at the LDSS, and enrollment policy for Medicaid, Essential Plan (EP), Child Health Plus (CHPlus), and Qualified Health Plans (QHP).

The LMS is for the administration and management of the classroom, online computer-based, webinar, and archived webinar trainings as described in this RFP. The LMS functionality will include, but not be limited to: in-person and online training announcements and trainee self-service registration; registration confirmation and/or waitlist management; the provision of online learning (e.g., Computer Based Training (CBT) and webinars) including synchronous and asynchronous; pre-and/or post-tests (if required), evaluation tools and the processing of certificates of completion. The LMS shall also provide a reference library of all current training materials for each component including, but not limited to: course outlines and agendas; PowerPoint presentations; desk aids; case studies; and other resource tools as developed.

This website will require user accounts be created for training participants. It will be the Contractor's responsibility to develop account registration procedures, manage account creation requests, and troubleshoot any account access issues. All trainee user accounts should be password protected. It is the Department's expectation that requests for new user accounts through the LMS be processed within three (3) business days.

In addition, the LMS must have the capability for LDSS staff registering for classroom trainings to communicate the need for hotel accommodations and to submit requests for travel (mileage) reimbursement as needed.

The Contractor will be required to develop online registration instructions for all in-person and online and webinar programs within 60 days of notification of OSC contract approval. The registration system will include, but not be limited to: separate registration instructions and functionality for NY State of Health Assistor and LDSS trainings which includes demographic and data required. The registration system for the LDSS trainings must include functionality for the LDSS Staff Development Coordinators to register multiple staff at one time for each training and include the data required to provide each county with a history of sessions completed by each staff in an excel or access format compatible with the county reporting database. The Contractor shall send all trainees and their supervisors' immediate notice of registration and send confirmation notice with specific session details and logistical information within two (2) weeks prior to the trainings. The Contractor shall also, within 30 days of notification of OSC contract approval, establish a waitlist policy, subject to Department approval, for ensuring follow-up to trainees who are registered and subsequently closed out of a training session due to full enrollment or cancellation, as well as a policy to limit registrants to one (1)-time attendance at any one session in a given contract year.

Training evaluations completed by trainees should also be uploaded to the file transfer website within three (3) business days of training completion. All materials must be downloadable for the Department's review and approval.

The Contractor is required to have a designated contact for technical assistance **and support** available to the Department, LDSS and other registrants navigating these websites, Monday through Friday, 8:30am to 5:00pm ET (excluding NY State holidays).

The Contractor must implement necessary security measures to ensure any sensitive data submitted by the registrants (e.g., Social Security Number) will not be available to outside entities. The Contractor may be required to sign and adhere to the New York State Department of Health Data Use Agreement (DUA).

## **B. Developing the Training Schedule**

The Contractor is required to develop an initial training schedule for all training modalities for the first contract year, in collaboration with the Department, within a maximum of 45 days of notification of OSC contract approval. The training schedule must include both Application Assistor training, and LDSS training. LDSS scheduling will be determined based on information collected by the Contractor through initial (and thereafter, bi-annual) needs assessment surveys of the LDSS, attendance at Medicaid Consortia meetings and input from the Department. A sample LDSS needs assessment survey will be provided to the Contractor by the Department upon notification of OSC contract approval.

Monthly final training schedules will be submitted to the Department for approval at least four (4) weeks prior to training delivery and may later be adjusted, if appropriate and approved by the Department. For approval, the final monthly training schedule must include the date and location of the training, names of the trainers, and confirmed hotels, (see Section 4.1.4.E), if applicable. The Contractor will provide the Department with an updated training calendar with each monthly voucher submission.

The Contractor must commence training for the specified number of deliveries, per the training schedule developed with and approved by the Department, within 90 days of notification of OSC contract approval. The initial needs assessment survey may need to be completed in parallel to updating the existing

curriculum, (if needed and as determined by the Department), establishing the training calendar, and commencement of required training within the 90 days.

### **C. Development/Revision of Training Content/Curricula**

The Department has currently approved training curricula for each training component. Based on changes in legislation, regulations, policies, guidance or training evaluation data, the Contractor will be responsible for developing new or making curriculum updates or revisions to the existing curricula. This includes making updates to all related ancillary training materials such as training outlines and agendas, trainer/trainee manuals, PowerPoint presentations, handouts, desk aids, case examples, web-based programs assessments, pre-and/or post-tests, course evaluation surveys, and reference materials prior to each delivery. Most curricula currently exist in classroom format; however, the Contractor may be required to convert classroom trainings to online computer-based trainings (CBT) at Department's request. The Contractor will also develop new online CBT at the Department's request. The Contractor shall be responsible for meeting the training requests from the Department.

Topic areas will be identified through feedback from all trainings, evaluations and assessments, changes to legislation, regulations, policies and guidance. All new and existing curricula must be available in electronic format and housed on the training website for Department review. Additionally, paper copies of all materials must be provided to the Department when requested.

All necessary materials that the trainers and trainees need in support of each training component are to be developed and supplied by the Contractor. Additional materials created by the Department, such as policy documents, reference materials, desk aids and standardized program forms, will be made available to the Contractor for duplication and dissemination, as appropriate, to the trainees.

Training curricula and ancillary training materials are to be updated, if appropriate, before each delivery to ensure compliance with the most current Marketplace policies and procedures, and Medicaid, EP, CHPlus and Program policies. All curricula revisions must receive the Department's approval at least two (2) weeks prior to delivery of training.

In-person and online training components shall be updated to reflect program policy changes within 30 days of receipt or notice of said change from the Department or within a reasonable time frame mutually agreed upon between the Contractor and Department. It is anticipated that ongoing updates will occur throughout the contract period as well as full quarterly updates of certain in-person and online modules in compliance with periodic policy updates. Longer time frames may be required based on the extent of the required revision(s), as agreed upon between the Department and the Contractor. A detailed timetable and reporting of ongoing progress and status on each training program under revision must be reported weekly to the Department as noted in Section 4.3. of this RFP.

Training curricula, courses, electronic or online material, and all ancillary training materials developed under this Contract will become the property of the Department. Copies of all approved training curricula/ancillary training materials developed by the Contractor must be submitted electronically and in hard copy to the Department in final format at least two (2) weeks prior to delivery of in-person classroom training. In addition, ongoing curricula must be maintained electronically for the Department to download using either the LMS or another Contractor-maintained website.

The contractor is NOT required to provide training materials to the Department that have already been approved and the material has not changed. Only new or amended training must be submitted for approval.

In the event the Department directs the Contractor to develop new curriculum, the following curriculum development steps will be implemented by the contractor:

- i. Participate in an initial meeting, either in-person or by teleconference, with Department staff, to discuss goals, objectives, key content areas of the training, communication methods, and timelines.



- ii. Develop a preliminary training outline that includes the following:
  - a. Outlining of content areas;
  - b. Defining clear and measurable goals and objectives;
  - c. Describing teaching methodologies and modalities;
  - d. Listing and description of all trainer and trainee manuals as well as all trainee materials for in-person classroom and/or online CBT trainings to be used as part of the training delivery;
  - e. Designing pre-and/or post-testing measurements, if required; and
  - f. Developing a timeline for completion of curriculum.
- iii. Present preliminary training outline within the agreed to timeline to Department staff for review and approval and revise the outline in accordance with feedback per Section 4.0 Scope of Work and as agreed upon during the initial meeting. This presentation may be in-person, via phone conference, or by email review of materials, as mutually agreed upon by the Contract and the Department, at the initial meeting described in (i) above.
- iv. Proceed with development of a draft curriculum including a detailed timeline, PowerPoint presentation or storyboard with speaker notes/narration, related resources, a trainer and trainee manual, if applicable, once the deliverables cited above have been approved.
  - a. The detailed timeline of development must provide specific information on deliverables, assigned staff for each task and the expected due date of each deliverable. This document must also be used to provide ongoing development status and function as a progress report and tracking of future edits and updates as required.
  - b. The trainer manual for in-person sessions, storyboard for online programs and all other training developments shall, at a minimum, contain:
    - 1. A training agenda, goals and trainee outcomes and competencies;
    - 2. Speaker notes, materials needed and course activities (if required);
    - 3. Methodologies, pre-and/or post-tests (if required), trainee evaluation tool, handouts and PowerPoint presentations/overheads; and
    - 4. A trainer manual that is self-contained with PowerPoint presentations, speaker notes, handouts and training activities;
  - c. The trainee manual and online session resource shall, at a minimum, contain:
    - 1. Title page;
    - 2. Agenda;
    - 3. Table of contents (paginated content areas noted);
    - 4. Introduction to the manual clearly outlining the overall goals and objectives of the training;
    - 5. Content sections presented in narrative form for the online and any other web-based material or expanded outlines with major points addressed for the in-person materials;
    - 6. Copies of handouts, PowerPoint presentations/overheads, case studies and any other training resource materials;
    - 7. Pre-and/or post-tests (if required) and trainee evaluation tool; and
    - 8. Travel and accommodation policies, where appropriate.
- v. The training outline and both trainer and trainee manuals, if applicable, including any ancillary training materials for in-person classroom, online computer-based trainings, and webinars, shall then be submitted to the Department electronically, and the Contractor will host a walk-through presentation to Department staff of the new curriculum, for review and final approval prior to use.
- vi. The Contractor will deliver the first offering of live curriculum as a pilot class, with Department staff attending, to provide feedback on the content and method of delivery. Revisions based upon feedback and evaluation of the pilot class shall be incorporated by the Contractor in the finalized training curriculum, trainer/trainee manuals and any ancillary training materials, which shall be provided to the Department electronically with one (1) version in an editable format (Microsoft Office or other original program) and one (1) in a searchable PDF file, as well as two hard copies for approval.

Reasonable timeframes, as approved by Department staff during initial and subsequent planning, will be established for new curricula development. The Department reserves the right to assess a 5% penalty on payment of the deliverable for a given month if mutually agreed upon timelines for curricula development or revision are unmet. This 5% penalty will continue to be enacted until timelines are met. The penalty does not apply to delays caused by the Department. See Section 4.1.5 Compensation of Contract Deliverables and Section 5.4 Payment.

#### **D. Arranging for and/or Providing Venues for Training**

With the exception of LDSS training, the successful Contractor is expected to arrange for and provide training venues. LDSS training venues are arranged by the successful Contractor and provided by the LDSS.

The Contractor must arrange for required training venues within six (6) weeks of the scheduled training, as appropriate to the specific attendee volume, in a comfortable environment free of dangers that could cause harm to attendees and which is conveniently located and easily accessible to public transportation. Each site is to be evaluated for proximity to public transportation and/or major roadways, availability of technology to support training deliveries, and cost. All facilities selected must comply with requirements under the Americans with Disabilities Act (ADA). The Department reserves the right to reject proposed training sites and require the Contractor to identify an alternative site acceptable to the Department within two (2) weeks prior to the start of the scheduled training. These costs will be borne by the Contractor.

The Contractor shall provide a plan that identifies and describes the scheduling and payment of training sites including venue selection and travel reimbursement in accordance with the not to exceed rates established and used by OSC at <http://www.osc.state.ny.us/agencies/travel/travel.htm>. In order for a Contractor to avoid paying cancellation fees, it is recommended the venue selection process include locations that have flexible cancellation policies required in consideration of the two (2) week notification policy for low enrollment referenced in Section 4.1.4.F.

#### **E. Reserving Hotel Rooms and Mileage Reimbursement for Training Participants**

The Contractor is expected to identify, reserve and pay for hotel accommodations for LDSS attendees for the New LDSS Workers, LDSS Chronic Care Workers, and NY State of Health in-person Assistor training sessions. Travel expenses include round-trip transportation, and hotel accommodations for up to six (6) nights, based on the length of training. Mileage reimbursement is also to be provided by the Contractor for the LDSS staff attending these sessions. Mileage reimbursement round-trip transportation and hotel accommodations for attendees must be provided in accordance with and at the not to exceed approved rates established and used at: <http://www.osc.state.ny.us/agencies/travel/travel.htm>. See Section 5.4 Payments.

The Contractor must not charge or collect fees from trainees for food or beverages, if provided. Food and beverages are not reimbursable as part of this RFP. The Department will not reimburse per-diem allowances for breakfast, lunch, dinner or childcare expenses. No expenses in these categories are to be submitted to the Department for reimbursement.

Trainees will be eligible for overnight hotel stays on the night(s) before training if the following conditions are met: the training will begin at 9:00 AM ET or earlier the following day; AND the trainee must travel 50 miles or 1 and ½ hours or more from their office location to the training site.

For hotel accommodations, the Contractor must obtain NYS overnight accommodation rates. The Contractor will cover the cost of double room accommodations. Trainees must pay the Contractor the difference between single room rates and one-half the cost of a double room if the trainee desires to stay in a single room. The Contractor will cover the cost of single room accommodations in "odd man out" situations (e.g., 13 males, 12 females). All facilities must be able to guarantee New York State travel rates (not to exceed state travel rates allowed for state employee travel as outlined by the NYS Office for the State Comptroller).

Additional information is available at: <http://www.osc.state.ny.us/agencies/travel/travel.htm>. DOH will not reimburse hotel charges that are over the state rates.

The hotel selected must be in an area that is free of dangers that could cause harm to attendees and which is conveniently located to the training site and easily accessible to public transportation.

In the instances where travel is designated as reimbursable within the RFP, travel will be reimbursed directly to the Contractor for actual expenses in accordance with and cannot exceed the amount allowed for state employee travel as outlined by the NYS Office for the State Comptroller. Additional information is available at: <http://www.osc.state.ny.us/agencies/travel/travel.htm>.

All reimbursable expenses are to be fully documented per Section 4.3.6 and submitted for payment per Section 5.4.

As part of this contract, the Department will not be reimbursing separately for any travel expenses incurred by the Contractor. All Contractor travel expenses should be accounted for within the bid price for services being provided.

#### **F. Cancellation of Scheduled Sessions with Resultant Costs Incurred by Contractor**

The following notification policies will be in effect:

If, two (2) weeks prior to a scheduled classroom session, the registration for the session is less than the recommended minimum or more than the recommendation maximum class size as specified in Attachment F, the Contractor shall contact the Department to determine if the training should be conducted. Factors that the Department will consider that could result in a class being conducted outside the recommended class size include, but are not limited to, timely availability of future sessions, and availability of alternate delivery methods. It is the Contractor's responsibility to secure training space, materials and equipment and provide reimbursement to qualified class participants for any sessions held outside the recommended class size.

The Contractor must establish within 60 days of notification of OSC contract approval, cancellation policies and procedures acceptable to the Department to account for circumstances such as inclement weather, natural disaster, or low enrollment. If a training is canceled, the Contractor will be responsible for notifying the enrolled participants. These events should be considered and factored into the bid price. There will be no payment to the Contractor for canceled courses or for any incurred expenses.

#### **G. Publicizing Scheduled Trainings**

The Contractor shall disseminate scheduling and content information every six (6) months on the dedicated LMS website and via email to the Department. Additionally, the Contractor will email the LDSS training schedule, to the LDSS Staff Development Coordinators (list provided by the Department), and Medicaid Directors.

#### **H. Providing Online Registration**

The online registration capability for all training modalities is to be established within 60 days of notification of OSC contract approval to simplify the process and provide information on anticipated attendee volume prior to curriculum delivery. The functionality of the registration system and information required for registration of each type of in-person and online training program for reporting purposes will be determined by the Department. For more information regarding the specific capabilities required for the LMS, see Section 4.1.4.A.i.

#### **I. Disseminating All Training Materials**

It is the Contractor's responsibility to provide and disseminate all training materials. This includes the

delivery of hard-copy materials to the training site prior to sessions and the dissemination of the materials to attendees at each in-person session. For all online programs, training materials must be available for download by the attendees when the attendees access the training, including Navigational Guidance, Agenda, Training Modules, PowerPoints and resources. Policy or training content identified as needing further clarification or explanation from a training session, which cannot be addressed during the training, is also to be disseminated to attendees, and may be provided electronically.

Classroom training materials may consist of student workbooks and guides, printed, tabbed, divided for organization, and placed in binders or pocket folders, as appropriate. Estimated volume of printed pages per attendee:

- NY State of Health Assistor training: approx. 800 pages
- LDSS New Worker training: approx. 1100 pages
- LDSS Chronic Care Introductory training: approx. 550 pages
- LDSS Chronic Care Advanced training: approx. Approx. 550 pages
- LDSS TA training: approx. 100 to 300 pages

## **J. Documenting and Evaluating Training Sessions**

For all online trainings (self-paced, and webinar trainings), the Contractor is responsible for submitting to the Department attendance and completion reports as required and referenced in Section 4.3: Reporting. Attendance of participants must be documented for an entire in-person training session. For all in-person trainings, the Contractor shall maintain a written record of attendees at each in-person training session via use of a sign-in log. Attendees will be required to sign-in for each day of a multi-day curriculum, or each partial day session. For each full-day of a training session, attendees must sign in upon arrival in the morning and at the start of the afternoon session. Should more than one training course be delivered in a day, separate original sign-in sheets and pre/post-test (if required) must be maintained by the Contractor for each training course.

If a trainee fails to sign-in on a day of a training course, the Contractor will, within (2) business days, contact the trainee, their supervisor and the Department via email to request an explanation for the absence, giving them five (5) business days to respond. If there is no response within five (5) business days, the Contractor will send a certified letter requesting an explanation for the absence. The Contractor will report the outcome to the Department per Section 4.3: Reporting.

The Contractor must develop and administer assessments, and pre-and/or post-tests (if required) to attendees of each applicable training delivery to evaluate each attendee's knowledge of the topics covered. Following completion of a training delivery, the session shall be evaluated by attendees' completion of an Evaluation Survey. For a trainee to receive credit and a certificate of completion, they must attend all days of the session and complete all required assessments and pre- and/or post-tests, where applicable, and complete an evaluation of the course. If an assessment or post-test is required and was not completed by the trainee during the training session due to the trainee's absence, the Contractor must pursue completion of the post-test by the trainee. The assessment or post-test and end of course evaluation shall be sent electronically, by the Contractor, to the trainee and the trainee's supervisor. The trainee must complete the post-test and end of course evaluation, and return to the Contractor within five (5) business days of the completion of the training session. A certificate of completion will be issued upon a passing grade of no less than seventy (70) percent. Trainees are allowed to retake an assessment up to three (3) times.

If a trainee misses the last day of training when an assessment or post-test is required and administered, the Contractor will, within two (2) business days, email the assessment or post-test to the trainee, their supervisor, and the Department, requesting an explanation of absence and completion of the post-test, giving them five (5) business days to respond.

If there is no response within five (5) business days, the Contractor will send a certified letter requesting an

explanation for the absence and the completion of the missed assessment or post-test. The contractor will report the outcome to the Department per Section 4.3 Reports.

Upon participant's successful completion of each course, the Contractor is required to provide the participants a certificate of completion according to criteria specified by the Department.

In order to receive a certificate of completion, learners are expected to fully attend the entire training session. In the event of a learner absence or early departure due to unforeseen circumstances (such as illness etc.), the Contractor will notify the Department to discuss options for the learner to complete missed content, if necessary.

Additionally, the Contractor will incorporate post-training Evaluation Surveys into the completion of all training courses.

The Contractor shall make available, for inspection by the Department, via the LMS or other Contractor-maintained website, training and trainer evaluation forms submitted by the trainees. The Contractor shall also maintain and make available pre-and/or post-test instruments, where applicable, to be used to determine trainees' assimilation of the training session content and/or for audit purposes.

## **5. COMPENSATION OF CONTRACT DELIVERABLES**

Compensation of contract deliverables will be in accordance with Section 4.0 Scope of Work, Section 5.4 Payment, and Attachment B Cost Proposal and the following:

### **A. Multi-Day Classroom Training Sessions**

- i. Payment for all in-person training sessions will be based on the Contractor's proposed Training Day Unit Cost included in its Attachment B: Cost Proposal.
- ii. Unit costs are all inclusive and must include costs associated with obtaining training space, Contractor travel costs, providing participant manuals, reference materials, course certificates and all other fixed and variable expenses of Contractor in delivering the service.
- iii. A classroom training session is defined as the delivery of any one of the training components described by content and number of days as outlined in Section 4.1.3.A.
- iv. Attendance of participants must be documented in order to receive payment for an entire in-person training session as described in Section 4.1.4.J.
- v. If the Department allows a class to commence with attendance outside the recommended class size the Department must notify the Contractor in writing of the decision at least two (2) weeks in advance. There will be no payment to the contractor for canceled courses or any incurred expenses.
- vi. Each trainee (and all applicable costs) for an in-person training session is allowed to attend the specific training session only once. If there is a need to retrain a trainee for any in-person training session, the Contractor must contact the Department for approval. If an individual requests to attend an in-person NY State of Health Assistor certification training more than once, they should be provided the option to complete the online course or the Contractor must request approval from the Department to attend an additional in-person session.

### **B. Technical Assistance - Half-Day or One-Day Training**

- i. Payment for Technical Assistance half-day or one-day trainings will be paid on a per class basis, as detailed in the Attachment B: Cost Proposal. In the event a half-day training session is requested, the Department encourages the Contractor to coordinate and schedule two (2) half-day sessions to

provide one (1) full-day of training. All other requirements detailed in this RFP will remain in effect for these training sessions.

### **C. Webinars and Self-Paced Online Training**

- i. Webinars - Payment for webinars will be paid based on a one-time flat fee for each webinar delivered. Delivery is considered complete when the training is fully accessible to users statewide, the webinar is delivered and it is archived on the LMS website. Maintenance includes the recording and posting of the webinar to the training website resource library and providing course certificates. The cost for the initial posting of current Webinars provided to the Contractor by the Department are to be included under the Training Website Development (Year 1 only).
- ii. Self-Paced Online Training - Payment for Computer-based online trainings will be for costs to develop each training program and will include course certificates and all required registration and reporting requirements. The cost for the initial posting of current online computer-based training components are to be included under the Training Website Development (Year 1 only).

### **D. New Curriculum Development**

Compensation for the development of new curricula will be made based on a fee to be charged per curriculum, including in-person and online programs. The fees, as detailed in the Attachment B: Cost Proposal, will be based on the length of time of the training component, as defined by the Department. Payment will be made based on the following deliverables:

- i. At the time the Department informs the Contractor of the need for new curriculum development, the Contractor will develop a preliminary outline, including the amount of time needed to develop the curriculum. Upon approval of the preliminary outline, 25% of the price will be released, to be paid in the voucher submitted for the monthly claim for payment in which the approval was given;
- ii. Upon approval of the draft curriculum, 25% of the price will be released, to be paid in the voucher for the month in which the approval was given;
- iii. Upon approval of the final curriculum, the final 50% of the price will be released, to be paid in the voucher for the month in which final Department approval was given. For new online (CBT) courses, the final 50% will be released when the course is posted to the website and available to users statewide to be paid in the voucher for the month in which it was available.
- iv. Payment for the delivery of any new in-person curriculum cited in the Bid Form will be based on the number of training days for the complete session. Payment for costs associated with hosting new online curriculum developed to the LMS site is part of Website Maintenance.

The Department reserves the right to assess a 5% penalty on payment of outstanding deliverables, if mutually agreed upon timelines for curricula development or revision are unmet.

### **E. Revision of Existing Curricula**

- i. Payment for the revision of existing in-person, online or web-based curricula will be based on an hourly rate for the revision, as submitted on the Cost Proposal.
- ii. The Contractor is required to view all training webinars delivered by the Department to the Application Assistors and the LDSS and provide the corresponding updates for approval to add to any of the in-person or online trainings reflecting this information. The Contractor will present a timeline to the Department for approval with the number of hours expected to be needed for the revision to be completed. The timeline will also detail the date of submission of the revised curriculum for Department approval.

- iii. When curriculum revision is required, the Department will provide the Contractor with policy information regarding the needed revision.
- iv. Upon Department approval of the timeline, the Contractor will undertake the revisions. Included in each monthly claim for payment in which revisions are made, the Contractor will submit detailed timesheets for each staff person working on the revisions. The timesheets will include but not be limited to: the training revised, dates of work, trainer/consultant performing the revisions and the number of hours worked on each date. If deliverables expected during the month are not met, the Department reserves the right to withhold any or all payment until the deliverables are completed.

#### **F. Website Development**

- i. The Contractor is responsible for having a dedicated, functional training website within sixty (60) days of notification of OSC contract approval. Payment for website development will be a one-time fee, to be paid in the voucher for the period in which the website is deemed acceptable by the Department.

#### **G. Website Maintenance**

- i. Payment for ongoing website maintenance will be based on a yearly fee and paid in equal monthly amounts throughout the term of the contract upon submission of the voucher.
- ii. Website maintenance fees include general administration, oversight and maintenance of the site that may be required by the Contractor as well as administrative and course management for any current or developed in-person or online training components and webinars. This includes but is not limited to the required registration and reporting processes for all training sessions.
- iii. New curricula development or revisions to existing curricula for online training components and webinars will be based on the curriculum development and curricula revision rates as submitted in the Cost Proposal.

#### **H. Travel Expenses**

- i. Contractor is responsible for all applicable travel expenses for the trainees. More information on the coordination and reimbursement of travel expenses is provided in Section 4.1.4.E and Section 5.4 Payment.

### **4.2 Staffing**

1. The Contractor shall ensure that they are staffed with experienced and knowledgeable personnel to meet the responsibilities and timeframes outlined in Section 4.0 Scope of Work, Attachment D and this RFP throughout the duration of the resulting contract.
2. The Contractor's project staff shall, at all times, be knowledgeable and fully informed about the requirements, deliverables and status of the various projects required under this RFP, as well as changes in NY State of Health eligibility policies and procedures for Medicaid, CHPlus, EP and QHPs. The Contractor is required to train and ensure that project staff is capable of completing the tasks required by this RFP as outlined in Attachment D. At a minimum, the project staff must include the following staff levels who meet the qualifications identified in Attachment D: Summary of Staff Qualifications:
  - Project Director;
  - Senior Training Staff;
  - Training Staff; and
  - IT and LMS Technical Staff.

The Contractor must assign a full-time Project Director dedicated to the management of this contract and the Project Director is expected to oversee the development, revision, and implementation of all trainings and all aspects of this RFP.

3. The Department reserves the right to review project staff resumes prior to the start of work, and to reject project staff and any proposed personnel or subcontractors. In addition, the Department may require changes in staff based on performance and require replacement staff with equal or stronger qualifications.
4. The Department has the right to review and approve all subcontracts prior to commencing work under the contract. Subcontracts need to include language that indicates the Department has the right to request that the subcontract be terminated at any time for performance issues.

The Department will work directly with the Contractor, not through subcontractors.

Subcontractors/consultants should not be contacting Department support staff or Subject Matter Experts (SME) directly unless authorized to do so by the Department Contract Manager. All communication must flow through the Contractor's Project Director to the Department Contract Manager unless specified.

5. The Department must be notified in writing, in advance, if the Contractor proposes a change in project staff [identified in Attachment D](#) (including subcontractors). All replacement personnel (subcontractors) must be fully qualified for the position. The notice must include the name of the individual (subcontractor) being replaced, an explanation for the change, the name and credentials of the proposed replacement and current resumes. If a subcontractor is being utilized, the Contractor must assume responsibility for subcontractor staff performance and guarantee the subcontractor's ability to meet adequate staffing and deliverable timelines as required. Any changes or additions in project staff, once the contract has begun, must also be reported and resumes submitted to the Department for prior approval (See Attachment D: Summary of Staff Qualifications).
6. All staff assigned to the contract should have experience utilizing state-of-the-art training methods (for example, delivering live presentations through WebEx or Go-To-Meeting) and multiple training modalities to develop and conduct training and technical assistance training statewide to large numbers of staff on a variety of topics as specified in this RFP.

#### **4.3 Reporting**

1. The Contractor's Project Director and other assigned staff will meet weekly, via conference call or in person, with the Department staff with a set agenda and status report that the Contractor will send two (2) days prior to the scheduled meeting. These meetings will be held to discuss all aspects of the training contract including development and delivery of all training components and ideas for curricula development, vouchers status, reports any other relevant issues. The weekly status report is a brief written report about the activities, planned classroom and online training activities, identification of areas requiring further training or clarification and a status of revised or new curriculum development. The Contractor is also responsible for sending the meeting notes/action items to the group no later than two (2) business days after the weekly meeting.
2. The Contractor shall provide the Department with a general Weekly Registration Report to be provided two (2) business days before each weekly meeting. This report will list all in-person trainings being held prospectively and general registration data. For the in-person Assistor training, the report must include the session date and location and the number of individuals registered as of the date of the report. For the LDSS in-person sessions, the report must include the session date and location, the type of training, the number of attendees by county, who requested the training and the name of the proposed trainer.
3. The Contractor shall provide a written report of the pre/post-test results for each LDSS New Worker and LDSS Chronic Care Worker training attendee and his/her supervisor. The format of the report will be developed in conjunction with the Department and LDSS data requirements.
4. The Contractor shall provide the following reports for NY State of Health Assistor Certification in-person



three (3) day and online training:

- A. Registration Report – this weekly report must include a listing of the individuals registered for the in-person training weekly and must also be sent to the Department electronically 24 hours prior to a scheduled training delivery. This list will also include individuals that are waitlisted, if applicable. For the online training, a bi-weekly cumulative report is required detailing the number registered, the number in-process of completing the training and the number that completed the training. The reports will include, but not be limited to the following data fields: Contract ID, First Name, Last Name, If this is the first time attending training and if not Assistor certification number, Assistor Agency, Agency Type, Assistor Email, Individual Qualified, Assistor Type, Agency Address, City, State, Zip, Test Scores (Day 1,2,3), Retake Test Scores, where applicable, Overall percentage, Pass/Fail status, Training Modality, Training Location, Start and Ending Dates, Trainer Name and Trainer Notes. The data fields must be designed in accordance with Department requirements for adherence to Marketplace data collection procedures.
  - B. Daily Debriefing – must be provided to the Department at the end of each day during the three (3)-day in-person training. This will include a summary of each class including the number registered and in attendance (to include if anyone was late, canceled or a no-show), participation status, assessment failures, questions that need to be sent to policy staff for clarification and any items that the trainer feels needs to be escalated.
  - C. Score Sheets – must be provided to the Department within one (1) business day of the end of a three (3) day in-person training. For the online Assistor Certification, completion score sheets must be submitted on a bi-weekly basis. The Score Sheet provided must be in a spreadsheet format and must include specific information regarding each assistor that attended training. This report will include but not be limited to the data fields described in 4.A. above. For the online Assistor training session, the report will also include the number of days spent to complete the training. The data fields collected will include the items needed to establish an assistor’s account on NY State of Health.
5. The Contractor shall submit to the Department a monthly cumulative training report of all training deliveries which will include, but not be limited to: list of each type of training that was held, the date it was held, how many registered, how many attended, where the training was held, who requested the training and the names of the training instructors. This report should also list cancelled trainings and the reason(s) for the cancellations. The report must be submitted electronically. The format of the report must be submitted to the Department for prior approval.
  6. The Contractor must complete monthly reports, as prescribed by the Department, to be received by the Department with each monthly claim for payment. To support these reports, the Contractor must present the following information by training component:
    - A. Narrative and summary charts of all training deliverables which will include the individual type of delivery, number of sessions, days and trainees in attendance at each delivery reported by the specific month and cumulatively. This must also include the pre/post-test score results and summary analysis of the attendees' mastery of this material for New LDSS Worker and LDSS Chronic Care Worker trainings, Assistor Certification training (in-person and online) and for certain TA modules. The narrative summary must include the location, dates and number of participants registered for each delivery, and the number of registrants who canceled, left prior to completion or completed the training. Training registration rosters must be maintained on file for each session delivered and participant data shall be reflected on both a monthly and cumulative basis. The report shall include a narrative and summary listing of the Assistor, LDSS and Provider staff (including provider affiliation) completing each of the online trainings;
    - B. A summary or graphic representation of the trainee evaluations of the deliveries by type, session and trainer(s);
    - C. A detailed listing of Medicaid Consortia and individual General TA training days by date, Regional Consortium, LDSS, location, topic and trainer;

- D. Detail and summary of curriculum development including status of new or revised curriculum for all approved training components and modalities including updated status timetable for each;
  - E. Detail and summary of curriculum development and revision hours by individual consultant by date and topic,
  - F. Travel detail report and supporting documentation for hotel accommodations, round-trip transportation and mileage reimbursement for LDSS attendees by individual; and
  - G. Monthly listing of project staff by job title, start date, amount of time on each project, and detailed explanation for any changes in project staff.
7. The Contractor shall complete annual reports, based on the contract year, as prescribed by the Department to be received by the Department by close of business at the end of the month following the end of the contract year being reported on. If that day falls on a weekend or State holiday, the report will be due on the next business day. To support these reports, the Contractor must present the following information (which must include but, not be limited to) for the project and by training component:
- A. Annual summary including narrative and cumulative year end data. The data report with the cumulative year end data will also include all monthly data as requested above;
  - B. Summary of curricula development including status of new and revised curricula for all approved training modalities;
  - C. Year-end summary listing project staff by job title, employment start date and detailed explanation for any changes in project staff; and
  - D. Recommendations for improvements and development of new training curricula and identification of areas requiring further training or clarification.
8. The Contractor must produce a list of training attendees for any trainings conducted by the Contractor, including sign-in sheets completed by each attendee. A standard sign-in sheet for each day of a training session shall include printed name and original signature of each attendee, the training course name and number, the training location and start and end times and pre/post-tests, if applicable. The trainee must sign-in at the start of class, returning from lunch and at the end of the session entering the time for each entry. The Contractor must maintain this information and submit to the Department upon request.

#### **4.4 Information Technology**

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

#### **4.5 Security**

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

- All policies and standards defined in the New York State ITS security policies and standards (<https://its.ny.gov/eiso/policies/security>), including, but not limited to:
  - NYS-P03-002 – Information Security Policy,
  - NYS-P10-006 – Identity Assurance Policy,

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

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

#### **4.6 Transition**

The transition represents a period when the training services, provided by the Contractor resulting from this RFP, must be transitioned to the Department, another Departmental agency, or successor Contractor during or at the end of the contract.

The Contractor shall ensure that any transition to another Contractor be done in a way that provides the Department with uninterrupted training services. This includes a complete and total transfer of all training files, reports, materials, and records necessary to perform such services.

The Contractor will develop an organized work plan and timeline to ensure all current and future training services during the transition period are addressed and completed. All relationships between participants, the Department staff, and all other parties involved should be notified of the transition and all changes required to ensure a seamless transition of services between Contractors.

The Contractor shall manage and maintain the appropriate number of staff to meet all requirements listed in the RFP during transition. All reporting and record requirements, security standards, and performance standards are still in effect during the transition period. Three (3) months prior to the end of the contract period, the Contractor will work with the Department and incumbent to ensure a complete, efficient, and successful transition.

### **5.0 ADMINISTRATIVE INFORMATION**

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

#### **5.1 Restricted Period**

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

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

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

## 5.2 Questions

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

## 5.3 Right to Modify RFP

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

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

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

If, prior to the Deadline for Submission of Proposals, a bidder fails to notify DOH of a known error or an error that reasonably should have been known, the bidder shall assume the risk of proposing. If awarded the contract, the bidder shall not be entitled to additional compensation by reason of the error or its correction.

## 5.4 Payment

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

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

Subject: <<Unit ID: 345XXX>> <<Contract #>>

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

**NYS Department of Health**  
**Unit ID 345<<xxxx>>**  
**c/o NYS OGS BSC Accounts Payable**  
**Building 5, 5th Floor**  
**1220 Washington Ave.**  
**Albany, NY 12226-1900**

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

this Contract if it does not comply with the State Comptroller's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

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

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

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

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

Payment of such invoices and/or vouchers by the State (NYS Department of Health) shall be made monthly, in accordance with Article XI-A of the New York State Finance Law, Section 4.0 Scope of Work and Attachment B.

Contractor payment will be made upon completion of the deliverables to the Department's satisfaction outlined in the Section 4.0: Scope of Work and Attachment B: Cost Proposal, based upon the Contractor's provided Unit Price. Unit Prices are to be all-inclusive to cover the cost of furnishing all of the said services, including but not limited to materials, reporting, equipment, location rentals, profit and labor to the satisfaction of the Department and the performance of all work set forth in said specifications in Section 4.0 Scope of Work. Aside from reimbursable travel expenses outlined in Section 4.1.4.E., the Contractor will not be reimbursed for any costs incurred outside of the prices provided in its Attachment B: Cost Proposal. Failure of the Contractor to meet the deliverables outlined in this RFP will result in payments not being processed until they are met.

There will be no payment to the Contractor for canceled courses or for any incurred expenses.

The contractor will provide invoices and/or receipts that enumerate expenditures sought for reimbursement per Section 4.1.4.E, Section 4.1.5, and Section 4.3.6. In the instances where travel is designated as reimbursable within the RFP, travel will be reimbursed directly to the contractor for actual expenses **in accordance with** and cannot exceed the amount allowed for state employee travel as outlined by the NYS Office for the State Comptroller. Additional information is available at: <http://www.osc.state.ny.us/agencies/travel/travel.htm>.

Payment will be based on the receipt of an acceptable monthly status and training report and any other applicable reports, as described in Section 4.3.6. Templates for the monthly status and expenditure reports will be provided to the Contractor by the Department notification of OSC contract approval.

Reasonable timeframes, as approved by Department staff during initial and subsequent planning, will be established for new curricula development. The Department reserves the right to assess a 5% penalty on payment of the deliverable for a given month if mutually agreed upon timelines for curricula development or revision are unmet. This 5% penalty will continue to be enacted until timelines are met. See Section 4.0 Scope of Work.

The State acknowledges that the actual damages likely to result from a breach of this Section 4.0 Scope of Work and Section 5.4 Payment are difficult to estimate on the date of this agreement and may be difficult for the State to prove. The parties intend that [CONTRACTOR'S] payment of the Liquidated Damages Amount would serve to compensate the State for breach by [CONTRACTOR] of its obligations, and is not intended to serve as punishment for any such breach by [CONTRACTOR].

## **5.5 Minority & Woman-Owned Business Enterprise Requirements**

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

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

#### Business Participation Opportunities for MWBEs

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

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

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

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

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

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



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

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

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

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

## **5.6 Equal Employment Opportunity (EEO) Reporting**

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

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

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

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

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

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

is made, and with respect to any affiliates and subcontractors whose sales delivered into New York State exceeded \$300,000 for the four quarterly periods immediately preceding the quarterly period in which the certification is made.

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

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

Forms are available through these links:

- ST-220 CA: [http://www.tax.ny.gov/pdf/current\\_forms/st/st220ca\\_fill\\_in.pdf](http://www.tax.ny.gov/pdf/current_forms/st/st220ca_fill_in.pdf)
- ST-220 TD: [http://www.tax.ny.gov/pdf/current\\_forms/st/st220td\\_fill\\_in.pdf](http://www.tax.ny.gov/pdf/current_forms/st/st220td_fill_in.pdf)

## **5.8 Contract Insurance Requirements**

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

### **1. Professional Liability**

The Contractor and any subcontractor retained by the Contractor to work on the contract shall procure and maintain during and for a period of three (3) years after completion of this contract, Professional Liability Insurance in the amount of \$2,000,000 issued to and covering damage for liability imposed on the Contractor by this contract or law arising out of any negligent act, error, or omission in the rendering of or failure to render professional services required by this contract. The professional liability insurance may be issued on a claims-made policy form, in which case the Contractor shall purchase, at its sole expense, extended Discovery Clause coverage of up to three (3) years after work is completed if coverage is cancelled or not renewed.

### **2. Data Breach and Privacy/Cyber Liability**

The Contractor and any subcontractor retained by the Contractor shall carry and maintain applicable coverage during and for a period of one (1) years after completion of this contract, Data Breach and Privacy/Cyber Liability Insurance, including coverage for failure to protect confidential information and failure of the security of the Contractor's computer systems or the Department's Authorized Users' systems due to the actions of the Contractor with results in the unauthorized access to the Department's data.

The Contractor shall maintain said insurance at the limit of \$5,000,000 to provide coverage for damages arising from, but not limited to the following:

- Breach of duty to protect the security and confidentiality of nonpublic proprietary corporate information;
- Personally identifiable nonpublic information (e.g., medical, financial, or personal in nature in electronic or non-electronic form);
- Privacy notification costs;
- Regulatory defense and penalties;
- Website media liability; and
- Cyber theft of customer's property, including but not limited to money and securities.

If the policy is written on a claims made basis, Contractor must submit to DOH an Endorsement providing proof that the policy provides the option to purchase an Extended Reporting Period ("tail coverage") providing coverage



for no less than three (3) year after work is completed in the event that coverage is cancelled or not renewed. This requirement applies to both primary and excess liability policies, as applicable.

### 3. Technology Errors & Omissions Coverage

The Contractor and any subcontractor retained by the Contractor shall carry and maintain applicable coverage during and for a period of one (1) years after completion of this contract, Technology Errors & Omissions Coverage Insurance.

The insurance shall be maintained at the limit of \$5,000,000 provide coverage for damages arising from computer related services including but not limited to the following:

- Consulting;
- Data processing;
- Programming;
- System integration;
- Hardware or software development;
- Installation;
- Distribution or maintenance;
- Systems analysis or design;
- Training;
- Staffing or other support services; and
- Manufactured, distributed, licensed, marketed or sold cloud computing services.

The policy shall include coverage for third party fidelity including cyber theft.

If the policy is written on a claims made basis, Contractor must submit to DOH an Endorsement providing proof that the policy provides the option to purchase an Extended Reporting Period (“tail coverage”) providing coverage for no less than one (1) year after work is completed in the event that coverage is cancelled or not renewed. This requirement applies to both primary and excess liability policies, as applicable.

### 4. Limitation of Liability. This subsection shall read:

#### LIMITATION OF LIABILITY

Except as otherwise set forth in Sections IX J. and K., the Indemnification Provisions of the New York State Health Department Contract, the limit of liability shall be as follows:

A. Contractor’s liability for any claim, loss or liability arising out of, or connected with the Products and services provided, and whether based upon default, or other liability such as breach of contract, warranty, negligence, misrepresentation or otherwise, shall in no case exceed direct damages in: (i) an amount equal to two (2) times the original contract value exclusive of renewals, for the Products and services, or parts thereof forming the basis of the Department’s claim, or (ii) two million dollars (\$2,000,000), whichever is greater.

B. The Department may retain such monies from any amount due Contractor as may be necessary to satisfy any claim for damages, costs and the like asserted against the Department unless Contractor at the time of the presentation of claim shall demonstrate to the Department’s satisfaction that sufficient monies are set aside by the Contractor in the form of a bond or through insurance coverage to cover associated damages and other costs.

C. Notwithstanding the above, neither the Contractor nor the Department shall be liable for any consequential, indirect or special damages of any kind which may result directly or indirectly from such performance, including, without limitation, damages resulting from loss of use or loss of profit by the Department, the Contractor, or by others.

## 5.9 Subcontracting

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

## 5.10 DOH's Reserved Rights

The Department of Health reserves the right to:

1. Reject any or all proposals received in response to the RFP;
2. Withdraw the RFP at any time, at the agency's sole discretion;
3. Make an award under the RFP in whole or in part;
4. Disqualify any bidder whose conduct and/or proposal fails to conform to the requirements of the RFP;
5. Seek clarifications and revisions of proposals;
6. Use proposal information obtained through site visits, management interviews and the state's investigation of a bidder's qualifications, experience, ability or financial standing, and any material or information submitted by the bidder in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFP;
7. Prior to the bid opening, amend the RFP specifications to correct errors or oversights, or to supply additional information, as it becomes available;
8. Prior to the bid opening, direct bidders to submit proposal modifications addressing subsequent RFP amendments;
9. Change any of the scheduled dates;
10. Eliminate any mandatory, non-material specifications that cannot be complied with by all of the prospective bidders;
11. Waive any requirements that are not material;
12. Negotiate with the successful bidder within the scope of the RFP in the best interests of the state;
13. Conduct contract negotiations with the next responsible bidder, should the Department be unsuccessful in negotiating with the selected bidder;
14. Utilize any and all ideas submitted in the proposals received;
15. Every offer shall be firm and not revocable for a period of three hundred and sixty-five days from the bid opening, to the extent not inconsistent with section 2-205 of the uniform commercial code. Subsequent to such three hundred and sixty-five days, any offer is subject to withdrawal communicated in a writing signed by the offerer; and,
16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's proposal and/or to determine an offerer's compliance with the requirements of the solicitation.

## 5.11 Freedom of Information Law ("FOIL")

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

may be deemed a waiver of any right to confidential handling of such material.

## **5.12 Lobbying**

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

- a) made the lobbying law applicable to attempts to influence procurement contracts once the procurement process has been commenced by a state agency, unified court system, state legislature, public authority, certain industrial development agencies and local benefit corporations;
- b) required the above mentioned governmental entities to record all contacts made by lobbyists and contractors about a governmental procurement so that the public knows who is contacting governmental entities about procurements;
- c) required governmental entities to designate persons who generally may be the only staff contacted relative to the governmental procurement by that entity in a restricted period;
- d) authorized the New York State Commission on Public Integrity, (now New York State Joint Commission on Public Ethics), to impose fines and penalties against persons/organizations engaging in impermissible contacts about a governmental procurement and provides for the debarment of repeat violators;
- e) directed the Office of General Services to disclose and maintain a list of non-responsible bidders pursuant to this new law and those who have been debarred and publish such list on its website;
- f) required the timely disclosure of accurate and complete information from offerers with respect to determinations of non-responsibility and debarment; (Bidders responding to this RFP should submit a completed and signed [Attachment 1](#), "Prior Non-Responsibility Determination".)
- g) increased the monetary threshold which triggers a lobbyist's obligations under the Lobbying Act from \$2,000 to \$5,000; and
- h) established the Advisory Council on Procurement Lobbying.

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

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

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

## **5.13 State Finance Law Consultant Disclosure Provisions**

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

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

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

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

#### **5.14 Debriefing**

Once an award has been made, bidders may request a debriefing of their proposal. Please note the debriefing will be limited only to the bidder's proposal, and will not include any discussion of other proposals. Requests must be received no later than fifteen (15) calendar days from date of award or non-award announcement.

#### **5.15 Protest Procedures**

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

#### **5.16 Iran Divestment Act**

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

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

#### **5.17 Piggybacking**

New York State Finance Law section 163(10)(e) (see also <http://www.ogs.ny.gov/purchase/snt/sflxi.asp>) allows the Commissioner of the NYS Office of General Services to consent to the use of this contract by other New York State Agencies, and other authorized purchasers, subject to conditions and the Contractor's consent.

#### **5.18 Encouraging Use of New York Businesses in Contract Performance**

Public procurements can drive and improve the State's economic engine through promotion of the use of New York businesses by its contractors. New York State businesses have a substantial presence in State contracts and strongly contribute to the economies of the state and the nation. In recognition of their economic activity and leadership in doing business in New York State, bidders/proposers for this contract for commodities, services or technology are strongly encouraged and expected to consider New York State businesses in the fulfillment of the

requirements of the contract. Such partnering may be as subcontractors, suppliers, protégés or other supporting roles. All bidders should complete [Attachment 6](#), Encouraging Use of New York Businesses in Contract Performance, to indicate their intent to use/not use New York Businesses in the performance of this contract.

### **5.19 Diversity Practices Questionnaire**

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

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

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

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

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

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

### **5.21 Intellectual Property**

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

### **5.22 Vendor Assurance of No Conflict of Interest or Detrimental Effect**

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

### **5.23 Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination**

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

## 6.0 PROPOSAL CONTENT

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

To expedite review of the proposals, Bidders are requested to submit proposals in separate Administrative, Technical, and Cost packages inclusive of all materials as summarized in Attachment A, Proposal Documents. This separation of information will facilitate the review of the material requested. No information beyond that specifically requested is required, and Bidders are requested to keep their submissions to the shortest length consistent with making a complete presentation of qualifications. Evaluations of the Administrative, Technical, and Cost Proposals received in response to this RFP will be conducted separately. Bidders are therefore cautioned not to include any Cost Proposal information in the Technical Proposal documents.

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

### 6.1 Administrative Proposal

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

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

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

2. Freedom of Information Law – Proposal Redactions

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

3. Vendor Responsibility Questionnaire

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

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the OSC Help Desk at 866-370-4672 or 518-408-4672 or by email at [ciohelpdesk@osc.state.ny.us](mailto:ciohelpdesk@osc.state.ny.us).

Vendors opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, [www.osc.state.ny.us/vendrep](http://www.osc.state.ny.us/vendrep), or may contact the Office of the State Comptroller's Help Desk for a copy of the paper form. Bidder's should complete and submit the Vendor Responsibility Attestation, [Attachment 3](#).

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

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

5. M/WBE Forms

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

6. Encouraging Use of New York Businesses in Contract Performance

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

7. Bidder's Certified Statements

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

8. References

Provide references using [Attachment 9](#), (References) for three similar projects. Provide firm names, addresses, contact names, telephone numbers, email addresses and a brief description of the services provided and the number of years bidder provided services to this entity.

9. Diversity Practices Questionnaire

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

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

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

## 6.2 Technical Proposal

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

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



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

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

### **1. Title Page**

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

### **2. Table of Contents**

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

### **3. Documentation of Bidder's Qualifications Responsive to Section 3.0 of RFP**

#### **A. Minimum Qualifications**

Bidders must be able to meet all the requirements stated in Section 3.1 of the RFP. The bidder must submit documentation that provides sufficient evidence of meeting the criterion. The documentation should clearly identify timeframes and related projects and may be in any format needed to demonstrate how they meet the minimum qualifications to propose.

- Bidder must have at least three (3) years of combined experience providing the development, coordination, and delivery of in-person classroom style training initiatives; and
- Bidder must have at least three (3) years of combined experience with the development, coordination and delivery of online training program(s).

Experience acquired concurrently is considered acceptable.

#### **B. Preferred Qualifications**

Bidders should submit documentation demonstrating their experience with the following outlined in Section 3.2, Preferred Qualifications:

- Bidder has at least three (3) years of combined experience delivering both in-person and online trainings, that concern state or federal regulations; and
- Bidder has at least three (3) years of combined experience in the development, management, and delivery of training services to local or county departments of social services; grantees and health plans participating in the Facilitated Enrollment (FE) and Navigator program; and agency staff (Certified Application Counselors) that assist individuals in enrolling for public health insurance.

Experience acquired concurrently is considered acceptable.

### **4. Technical Proposal Narrative**

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



## **A. Organizational Background and Experience**

- i. Describe the Bidder's organization's training experience, including:
  - a. Familiarity with conducting and/or managing training initiatives;
  - b. Expertise in working with multiple training sites and in multiple modalities; and
  - c. Working with diverse trainee populations with varying levels of expertise and experience, inclusive of, but not limited to, not-for-profit community-based organizations (CBOs), governmental agency staff and health plan facilitated enrollers; and
- ii. Describe the Bidder's experience with, developing and providing trainings related to health plan marketplaces, MAGI and non-MAGI Medicaid, Children's Health Insurance programs, basic health insurance programs, and Qualified Health Plans.

## **B. Implementation Plan**

Bidder's should provide an implementation plan which provides information relevant to the bidder's ability to successfully administer the services of a statewide training program as outlined in this RFP. The plan should address, in detail, the specifications of each of the following sections in the RFP. Each section of the plan should include the section and page reference in the RFP.

- i. Identify the Bidder's approach in delivering training for in-person, online and all web-based training requirements as identified in Section 4.1.1: Tasks/Deliverables, Training Methods and Modalities of this RFP. Methods described should include, but not be limited to:
  - a. In-Person Classroom Training;
  - b. Online Self-Paced Computer-Based Training;
  - c. Webinars and;
  - d. Archived Webinars.
- ii. Detail the Bidder's ability to provide each of the training components and satisfy each of the deliverables identified in Section 4.1.3: Development and Delivery of Training Components. Specifically, the Bidder should address each of the current training programs at the time of this RFP defined in Section 4.1.3 including:
  - a. Classroom Training
    - 1. NY State of Health Assistor Certification Training;
    - 2. Facilitated Enrollment Training for the Aged, Blind and Disabled In-person Training;
    - 3. LDSS Medicaid Training and Technical Assistance;
      - i. LDSS New Worker
      - ii. LDSS Chronic Care Worker (Introductory and Advanced)
      - iii. Technical Assistance (TA) Training

- b. Computer-Based Online Trainings: Self-Paced and Webinars;
  - 1. NY State of Health Assistor Certification Training (Self-paced);
  - 2. FE: Medicare as a Condition of Medicaid Eligibility; and Operating Protocols for Outreach to Potential Medicare Eligibles (Webinars);
  - 3. LDSS Technical Assistance;
    - i. Medicaid LDSS Technical Assistance (TA) Webinars;
    - ii. LDSS Self-Paced Immigration Training;
  - 4. Provider Training (Self-Paced);
    - i. Presumptive Eligibility (PE) Training;
      - a. PE for Pregnant Women;
      - b. PE for Children under Age 19;
    - ii. Family Planning and Benefit Program Training;
- iii. Describe the Bidder's ability to manage the Administration of Training Components as defined in Section 4.1.4: Delivery, Administration and Approval of Training Components. Specifically, bidders should describe their approach to the following:
  - a. Delivery of the dedicated LMS training website, including each of the functional specifications required, and the process to have the LMS functional and operating in a live environment within sixty (60) days of notification of OSC contract approval. Bidder's should include a description of the website and provide sample images showing how the website appears;
  - b. Developing the training schedule for NY State of Health Application Assistor, LDSS, Facilitated Enrollers for the Aged, Blind and Disabled and Providers, within 45 days of notification of OSC contract approval;
  - c. Development of new curricula, and the revision of existing curricula, for in-person and online training programs in response to a Department identified need throughout the contract period;
  - d. How existing classroom curricula may, upon request, be converted to online computer-based training, including types of electronic options and delivery timetable. If applicable, identify current procedures utilized to provide this service for other training programs;
  - e. Describe ability to arrange and plan for training space and to make hotel accommodations;
  - f. The method of reserving hotel accommodations, [round-trip transportation](#) and mileage reimbursement for eligible participants identified in Section 4.1.4.E. The plan for hotel accommodations should include room cancellation policies, procedures for circumstances such as inclement weather, potential resultant costs to Contractor and adherence to OSC guidelines;
  - g. Publishing training schedules and online registration procedures for all training programs in accordance with LMS functional requirements; and

- h. Process for disseminating training materials and resources to all site locations in advance of all in-person classroom training and hosting of all training materials and resources for both in-person and online sessions on the LMS;
  - i. Process for housing and providing access to archived NY State of Health and LDSS webinars;
  - j. The ability to maintain, and perform revisions and updates to the Medicaid Resource Guide (MRG)
- iv. The Bidder should provide information related to its staffing plan for implementation of the tasks/deliverables outlined in the RFP. Resumes are not required to be submitted with this proposal and will not be evaluated. Specifically, Bidders should describe their approach to the following (identified in Section 4.2: Staffing of the RFP):
- a. Bidders' should provide an organizational chart depicting:
    - 1. Titles of management personnel;
    - 2. The relationship/reporting structure of staff;
    - 3. Number and types of staff for each functional component;
    - 4. The lines of authority governing the interaction of staff; and
    - 5. Relationships with subcontractors, if applicable.
  - b. Describe the proposed Project Director's qualifications, how they meet or exceed the qualifications identified in Attachment D: Summary of Staff Qualifications, describe their responsibilities related to this RFP, how they intend to meet them, and how they intend to be accessible to the Department Monday through Friday 8:30am to 5:00pm (ET), excepting State holidays;
  - c. Provide information demonstrating the Bidder's staff qualifications to provide services as defined by the RFP, and how they meet or exceed the qualifications identified in Attachment D: Summary of Staff Qualifications; specifically:
    - 1. Senior Training Staff.
    - 2. Training Staff.
    - 3. IT and LMS Technical Staff.
  - d. Provide a proposed training strategy for educating and re-educating new and existing staff working on this project;
  - e. Describe the Bidder's recruitment plan for ensuring ideal staffing levels throughout the term of the contract and how they plan to retain staff and avoid turnover;
  - f. Describe the Bidder's ability to dedicate the necessary staffing resources required to provide the requested services throughout the term of the contract. In this section, the bidder should identify its approach to adjusting project workflow in a timely manner as well as termination procedures in the event of a non-performing staff member or subcontractor;
  - g. Describe the bidder's plans to allow for training and project staff availability for statewide in-person trainings, and be available to the Department during normal Department working hours of 8:30am to 5:00pm ET; and

- v. The Bidder's should provide information related to its ability to comply with the reporting as detailed in Section 4.3: Reporting Requirements of this RFP. Specifically, the bidder should:
  - a. Describe the Bidder's ability to participate in a weekly meeting with the Department and provide the weekly status report per Section 4.3.1;
  - b. Describe the Bidder's ability to track and provide a Weekly Registration Report to the Department per Section 4.3.2;
  - c. Describe the Bidder's ability to provide a written report of the pre/post-test results for each LDSS New Worker and LDSS Chronic Care Worker training attendee and his/her supervisor per Section 4.3.3;
  - d. Describe how the Bidder plans to develop and submit the reports with the requirements outlined in Section 4.3.4. regarding NY State of Health Assistor Certification in-person training; and
  - e. Describe the Bidder's plan for developing and submitting the monthly and annual reports as described in Sections 4.3.5. through Section 4.3.7.
- vi. Bidder should describe how it plans to comply with all NYS security policies and standards described in Section 4.4 Information Technology.
- vii. Bidder should describe how it plans to be in compliance with all applicable New York State security policies as identified in Section 4.5: Security.
- viii. Bidder should provide an overview of its transition plan that ensures a complete and total transfer of all training files, reports, materials and records necessary to perform the services, as well as making sure that all current and future requests during the transition period are addressed and completed.

### 6.3 Cost Proposal

Submit a completed and signed **FINAL REVISED Attachment B – Cost Proposal dated March 27, 2019**. The Cost Proposal shall comply with the format and content requirements as detailed in this document and in Attachment B. Failure to comply with the format and content requirements may result in disqualification.

The bid price is to be all-inclusive to cover Section 4.0 Scope of Work and the cost of furnishing all of the said services, including but not limited to travel (not including reimbursable travel per Section 4.1.4.E), materials, equipment, overhead, location rentals, reporting, profit and labor and any other expenses incurred to the satisfaction of the Department of Health and the performance of all work set forth in said specifications, Section 4.0 Scope of Work and this RFP.

### 7.0 PROPOSAL SUBMISSION

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

	<b>Electronic Submission</b>	<b>Paper Submission</b>
<b>Administrative Proposal</b>	2 dedicated flash drives or CDs labeled "Administrative Proposal" containing a standard searchable PDF file with copy/read permissions only.	4 Originals 6 Copies

	<b>Electronic Submission</b>	<b>Paper Submission</b>
<b>Technical Proposal</b>	2 dedicated flash drives or CDs labeled "Technical Proposal" containing a standard searchable PDF file with copy/read permissions only.	4 Originals 6 Copies
<b>Cost Proposal</b>	2 dedicated flash drives or CDs labeled "Cost Proposal" containing standard searchable PDF file(s) with copy/read permissions only.	4 Originals 6 Copies

1. All hard copy proposal materials should be printed on 8.5" x 11" white paper (single-sided) and **be clearly page numbered on the bottom of each page with appropriate header and footer information.** A font size of eleven (11) points or larger should be used. The Technical Proposal materials should be presented separate from the sealed Cost Proposal. The sealed Cost Proposal should also be presented in separate three-ring binder(s);
2. Where signatures are required, the proposals designated as originals should have a handwritten signature and be signed in blue ink.
3. The NYSDOH discourages overly lengthy proposals. Therefore, marketing brochures, user manuals or other materials, beyond that sufficient to present a complete and effective proposal, are not desired. Elaborate artwork or expensive paper is not necessary or desired. In order for the NYSDOH to evaluate proposals fairly and completely, proposals should follow the format described in this RFP to provide all requested information. The Bidder should not repeat information in more than one section of the proposal. If information in one section of the proposal is relevant to a discussion in another section, the Bidder should make specific reference to the other section rather than repeating the information;
4. Audio and/or videotapes are not allowed. Any submitted audio or videotapes will be ignored by the evaluation team; and
5. In the event that a discrepancy is found between the electronic and hardcopy proposal, the original hardcopy will prevail.

**The proposal must be received by the NYSDOH, no later than the Deadline for Submission of Proposals specified in [Section 1.0](#), (Calendar of Events). Late bids will not be considered.**

Proposals should be submitted in three (3) separate, clearly labeled packages: (1) Administrative Proposal, (2) Technical Proposal and (3) Cost Proposal, prepared in accordance with the requirements stated in this RFP. Mark the outside envelope of each proposal as "RFP#20017 (Training Services for NY State of Health Application Assistors and Local Departments of Social Services) – (Administrative) (Technical) or (Cost) Proposal submitted by (Bidder's name)". The three (3) sealed proposals may be combined into one (1) mailing, if desired.

Proposals must be submitted, by U.S. Mail, by courier/delivery service (e.g., FedEx, UPS, etc.) or by hand as noted below, in a sealed package to:

Department of Health (RFP # 20017)  
Attention: Michael Lewandowski, Health Program Administrator I  
One Commerce Plaza  
Room 1450  
Albany, NY 12237

NOTE: You should request a receipt containing the time and date received and the signature of the receiver for all hand-deliveries and ask that this information also be written on the package(s).

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

## 7.1 No Bid Form

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

## 8.0 METHOD OF AWARD

### 8.1 General Information

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

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

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

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

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

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

### 8.2 Submission Review

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

### 8.3 Technical Evaluation

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

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

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

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

#### **8.4 Cost Evaluation**

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

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

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

A is Total price of lowest cost proposal;  
B is Total price of cost proposal being scored; and  
C is the Cost score.

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

#### **8.5 Composite Score**

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

#### **8.6 Reference Checks**

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

#### **8.7 Best and Final Offers**

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

#### **8.8 Award Recommendation**

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

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

## ATTACHMENTS

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

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

The following attachments are included in this RFP and can be found at: <https://www.health.ny.gov/funding/rfp/20017/index.htm>

- B. ~~Revised Cost Proposal \*\*\*~~
- B. **FINAL Revised Cost Proposal dated March 27, 2019\*\*\*\***
- E. ~~Revised Current Training and Modality Summary\*\*~~
- G. ~~Assistor Online Certification Training Sample~~
- H. ~~Classroom LDSS Training Sample~~
- I. ~~Webinar Training Sample~~

The following attachments are attached and included in this RFP:

- A. **Proposal Document Checklist**
- B. ~~Cost Proposal~~
- C. Regional Medicaid Consortia: New York State County Listing
- D. **Summary of Staff Qualifications**
- D. ~~Current Training and Modality Summary~~
- E. Recommended Class Size Per Training Modality

### **\*\*\*Attachment B – Revised Cost Proposal**

**The attachment has been removed and replaced with \*\*\*\*FINAL Revised Attachment B Cost Proposal dated March 27, 2019 to be found at: <https://www.health.ny.gov/funding/rfp/20017/index.htm>**

**Bidders must submit the FINAL REVISED Attachment B- Cost Proposal dated March 27, 2019 as their Cost Proposal.**

### **\*Attachment B – Cost Proposal**

**The attachment has been removed and replaced with Revised Attachment B Cost Proposal to be found at: <https://www.health.ny.gov/funding/rfp/20017/index.htm>**

**Bidders must submit the REVISED Attachment B as their Cost Proposal.**

### **\*\* Attachment E – Current Training and Modality Summary**



The attachment has been removed and replaced with Revised Attachment E – Current Training and Modality Summary to be found at: <https://www.health.ny.gov/funding/rfp/20017/index.htm>

**ATTACHMENT A  
PROPOSAL DOCUMENT CHECKLIST**

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

RFP#20017 TRAINING SERVICES FOR NY STATE OF HEALTH APPLICATION ASSISTORS AND LOCAL DEPARTMENTS OF SOCIAL SERVICES		
FOR THE ADMINISTRATIVE PROPOSAL		
RFP §	SUBMISSION	INCLUDED
§ 6.1.1	Attachment 1 – Bidder’s Disclosure of Prior Non-Responsibility Determinations, completed and signed.	<input type="checkbox"/>
§ 6.1.2	Freedom of Information Law – Proposal Redactions (If Applicable)	<input type="checkbox"/>
§ 6.1.3	Attachment 3- Vendor Responsibility Attestation	<input type="checkbox"/>
§ 6.1.4	Attachment 4 - Vendor Assurance of No Conflict of Interest or Detrimental Effect	<input type="checkbox"/>
§ 6.1.5	M/WBE Participation Requirements:	<input type="checkbox"/>
	Attachment 5 Form 1	<input type="checkbox"/>
	Attachment 5 Form 2 (If Applicable)	<input type="checkbox"/>
§ 6.1.6	Attachment 6- Encouraging Use of New York Businesses	<input type="checkbox"/>
§ 6.1.7	Attachment 7 - Bidder’s Certified Statements, completed & signed.	<input type="checkbox"/>
§ 6.1.8	Attachment 9 – References	<input type="checkbox"/>
§ 6.1.9	Attachment 10 - Diversity Practices Questionnaire	<input type="checkbox"/>
§ 6.1.10	Attachment 11 - Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination	<input type="checkbox"/>
FOR THE TECHNICAL PROPOSAL		
RFP §	SUBMISSION	INCLUDED
§ 6.2.1	Title Page	<input type="checkbox"/>
§ 6.2.2	Table of Contents	<input type="checkbox"/>
§ 6.2.3.a	Documentation of Minimum Qualifications to Propose (Requirement)	<input type="checkbox"/>
§ 6.2.3.b	Documentation of Preferred Qualifications, if applicable.	<input type="checkbox"/>
§ 6.2.4	Technical Proposal Narrative	<input type="checkbox"/>
FOR THE COST PROPOSAL REQUIREMENT		
RFP §	REQUIREMENT	INCLUDED
§ 6.3	<b>FINAL Revised</b> Attachment B- Cost Proposal <b>dated March 27, 2019</b>	<input type="checkbox"/>

**Attachment B – Revised Cost Proposal**

**The attachment has been removed and replaced with FINAL Revised Attachment B Cost Proposal dated March 27, 2019 to be found at: <https://www.health.ny.gov/funding/rfp/20017/index.htm>**

**Bidders must submit the FINAL REVISED Attachment B- Cost Proposal dated March 27, 2019 as their Cost Proposal.**

**Attachment B Cost Proposal**

**The attachment has been removed and replaced with Revised Attachment B Cost Proposal to be found at: <https://www.health.ny.gov/funding/rfp/20017/index.htm>**

**Bidders must submit the Revised Attachment B as their Cost Proposal.**

**ATTACHMENT B  
COST PROPOSAL  
RFP #20017**

BIDDERS NAME: \_\_\_\_\_

To complete the Cost Proposal, Bidders must provide a Unit Price for each deliverable for Year 1 and Years 2-5, as outlined in Attachment B: Cost Proposal. Unit Prices are to be all-inclusive to cover Section 4.0 Scope of Work and the cost of furnishing all of the said services, including but not limited to travel (not including reimbursable travel per Section 4.1.4.E), materials, equipment, overhead, location rentals, reporting, profit and labor and any other expenses incurred to the satisfaction of the Department of Health and the performance of all work set forth in said specifications, Section 4.0 Scope of Work and this RFP.

\*Estimates are based on current and projected training needs. Actuals may be higher or lower. Payment will be based on completed actuals to the satisfaction of the Department.

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**Attachment B  
Cost Proposal  
RFP # 20017**

1. Training by Modality (a)	Unit (b)	Year 1		Years 2-5	
		*Estimated Annual Quantity (c)	Unit Price (d)	*Estimated Annual Quantity (e)	Unit Price (f)
<b>A. Classroom Training</b>					
1. NY State of Health Assistor Certification and Facilitated Enrollment Training for the Aged, Blind and Disabled	Training Day	182		182	-
-					
2. LDSS Medicaid Training and Technical Assistance (at LDSS Site)					-
Half Day	Per Half Day	12		12	-
Full Day	Per Full Day	66		66	-
-					
<b>B. Online Self-Paced Trainings and Webinar Training</b>					
Live Webinar (up to 2 hours)	Per Webinar	8		5	-
Live Webinar (2-4 hours)	Per Webinar	7		4	-
-					

2. New Curriculum Development by Modality (a)	Unit (b)	Year 1		Years 2-5	
		Estimated Annual Quantity (c)	Unit Price (d)	Estimated Annual Quantity (e)	Unit Price (f)
<b>A. In-Person Training New Development</b>					-
—— Half Day Training	Per Curriculum	4		2	-
—— 1 Day of Training	Per Curriculum	2		2	-
—— 2-3 Days of Training Session	Per Curriculum	4		4	-
—— 4-5 Days of Training	Per Curriculum	4		4	-
-					-
<b>B. Webinar New Development</b>					-
Webinar					-
2 Hours (120 minutes) or Less	Per Curriculum	5		4	-
2+ to 4 Hour Training	Per Curriculum	4		4	-
-					-
<b>C. Online Self-Paced New Development</b>					-
—— Online Self-Paced	Per Curriculum	8		8	

<del>3. Curriculum Conversion by Modality (a)</del>	<del>Unit (b)</del>	<del>Year 1</del>		<del>Years 2-5</del>	
		<del>Estimated Annual Quantity (c)</del>	<del>Unit Price (d)</del>	<del>Estimated Annual Quantity (e)</del>	<del>Unit Price (f)</del>
<del>A. Conversion of Classroom Curriculum to Online Self-Paced Computer-Based Training</del>	<del>Per Conversion</del>	<del>4</del>	<del></del>	<del>4</del>	<del>-</del>
<del>B. Conversion of Classroom Curriculum to Webinar Training</del>	<del>Per Conversion</del>	<del>8</del>	<del></del>	<del>8</del>	<del></del>
<del>4. Miscellaneous (a)</del>	<del>Unit (b)</del>	<del>Year 1</del>		<del>Years 2-5</del>	
		<del>Estimated Annual Quantity (c)</del>	<del>Unit Price (d)</del>	<del>Estimated Annual Quantity (e)</del>	<del>Unit Price (f)</del>
<del>A. Training and Medicaid Resource Guide (MRG) Revisions</del>	<del>Per Hour</del>	<del>2,500</del>	<del>-</del>	<del>1250</del>	<del></del>
<del>B. Training Website Development (Year 1 Only)</del>	<del>Training Website</del>	<del>4</del>	<del></del>	<del>N/A</del>	<del>N/A</del>
<del>C. Monthly Fee for Website Maintenance</del>	<del>Month</del>	<del>12</del>	<del>-</del>	<del>12</del>	<del></del>

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

\_\_\_\_\_  
Bidder's Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name and Title

**ATTACHMENT C**  
**REGIONAL MEDICAID CONSORTIA: NEW YORK STATE COUNTY LISTING**

**Region 1**

Niagara  
Erie  
Chautauqua  
Cattaraugus  
Orleans  
Genesee  
Wyoming  
Allegany

**Region 2**

Monroe  
Livingston  
Steuben  
Ontario  
Wayne  
Yates  
Seneca  
Schuyler  
Chemung

**Region 3**

Tompkins  
Tioga  
Broome  
Cortland  
Chenango  
Otsego

**Region 4**

Cayuga  
Onondaga  
Oswego  
Oneida  
Madison  
Herkimer

**Region 5**

Lewis  
Jefferson  
St. Lawrence  
Franklin  
Clinton  
Essex  
Hamilton

**Region 6**

Washington  
Saratoga  
Fulton  
Montgomery  
Schenectady  
Rensselaer  
Albany  
Schoharie  
Delaware  
Warren

**Region 7**

Columbia  
Greene  
Ulster  
Dutchess  
Putnam  
Rockland  
Orange  
Sullivan

**Region 8**

Westchester  
NYC (Five Boroughs)  
Nassau  
Suffolk

**ATTACHMENT D  
SUMMARY OF STAFF QUALIFICATIONS**

<u>Position</u>	<u>Qualifications/Experience</u>	<u>Job Description/Summary of Work Activities</u>
Project Director	<p>Qualifications:</p> <ul style="list-style-type: none"> <li>• Bachelor's degree</li> <li>• At least five years of demonstrated progressive work history, including three years' experience in managing staff and overseeing the creation, development and delivery of educational training in various modalities;</li> <li>• Strong organizational, written and verbal communication skills;</li> <li>• Ability to think creatively and strategically;</li> <li>• Capable of working both independently and as a member of a team;</li> <li>• Proficient in the use of standard office technology and basic Microsoft applications including PowerPoint; and</li> <li>• Ability to travel, including overnight travel.</li> </ul> <p>Preferred Qualifications:</p> <ul style="list-style-type: none"> <li>• Master's degree in public administration, business, training and communication or a field closely related to public health care;</li> <li>• Experience in the creation and delivery of training on public health insurance programs; and</li> <li>• In-depth knowledge of Medicaid, Essential Plan, Child Health Plus and Qualified Health Plan's eligibility policy and coverage policy issues.</li> </ul>	<p>The Project Director must be full time, and will report to and act as the primary liaison to the Department. The Project Director will ensure that all aspects of the project components included in the RFP are successfully and efficiently managed and completed. The knowledge, skills and abilities of the Project Director must effectively complement those of the rest of the team. General work activities may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Ensure that project requirements are identified and effectively communicated to all project staff;</li> <li>• Be available to Department staff Monday through Friday 8:30am - 5:00pm excepting State holidays;</li> <li>• Attend weekly phone conference meetings with the Department, and others as deemed necessary by the Department;</li> <li>• Oversee all of the Contractor's project training requirements to ensure that objectives are being met timely and consistently;</li> <li>• Oversee the development and updating of all program curricula and training materials, ensuring that each specific curriculum and related training materials reflect current Department policy;</li> <li>• Evaluate staff activities and progress to ensure effective management of staff responsible for developing, delivering and updating Medicaid, Essential Plan, Child Health Plus (CHPlus) and Qualified Health Plans (QHP) training and training materials for local departments of social services (LDSS), Facilitated Enrollers, NY State of Health Application Assistors and online training for Providers;</li> <li>• Develop and maintain the schedule of trainings;</li> <li>• Evaluate the training projects and recommend modifications based on that evaluation;</li> <li>• Report potential issues and resolution of those issues to the Department's Contract Manager;</li> <li>• Design, implement, maintain and evaluate quality control and quality assurance procedures;</li> <li>• Provide quarterly and year-end written reports of project activities, including written evaluation of training deliveries;</li> <li>• Establish and maintain effective relationships with Department staff; and</li> <li>• Attend periodic in-person progress and evaluation status meetings with the Department.</li> </ul>
Senior Training Staff	<p>Qualifications:</p> <ul style="list-style-type: none"> <li>• Bachelor's degree;</li> <li>• Experience in the creation, development and delivery of educational training programs and materials for varied training modalities;</li> <li>• Strong organizational, written and verbal communication skills;</li> </ul>	<p>The Senior Training staff will report directly to the Project Director and will develop curricula and training materials (including online training for Providers), oversee and/or conduct trainings for Facilitated Enrollment, New LDSS Worker and LDSS Chronic Care Worker, NY State of Health Assistor and Technical Assistance and supervise the training staff. General work activities may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Creating and updating the training curricula and training materials and deliver and/or oversee the delivery of training for New LDSS Worker and LDSS Chronic Care Worker,</li> </ul>



<b>Position</b>	<b>Qualifications/Experience</b>	<b>Job Description/Summary of Work Activities</b>
	<ul style="list-style-type: none"> <li>• Ability to think creatively and strategically;</li> <li>• Capable of working both independently and as a member of a team;</li> <li>• Proficient in the use of standard office technology and basic Microsoft applications including Power Point; and</li> <li>• Ability to travel, including overnight travel.</li> </ul> <p>Preferred Qualifications:</p> <ul style="list-style-type: none"> <li>• Experience in the delivery of training on public health insurance programs; and</li> <li>• Knowledge of the Medicaid, Essential Plan, Child Health Plus and Qualified Health Plan programs.</li> </ul>	<p>NY State of Health Assistor and Technical Assistance and Introductory, Continuing Education and Special Topics Facilitated Enrollment training sessions statewide;</p> <ul style="list-style-type: none"> <li>• Delivering the New LDSS and LDSS Chronic Care Workers and Technical Assistance training sessions statewide on numerous eligibility topics. Technical Assistance training sessions are half-day or one-day sessions which are requested by LDSS or requested by the Department;</li> <li>• Providing supervision, guidance and direction to the training staff;</li> <li>• Prepare written reports of project activities as defined and required in RFP; and</li> <li>• Report to the Project Director on potential issues and resolution of these issues.</li> </ul>
Training Staff	<p>Qualifications:</p> <ul style="list-style-type: none"> <li>• Bachelor's degree;</li> <li>• Experience in the delivery of educational training programs;</li> <li>• Strong organizational, written and verbal communication skills;</li> <li>• Ability to think creatively and strategically;</li> <li>• Capable of working both independently and as a member of a team;</li> <li>• Proficient in the use of standard office technology, basic Microsoft applications including Power Point; and</li> <li>• Ability to travel, including overnight travel.</li> </ul> <p>Preferred Qualifications:</p> <ul style="list-style-type: none"> <li>• Knowledge of the Medicaid, Family Health Plus and Child Health Plus programs.</li> </ul>	<p>Under the direction of the Project Director and Senior Training staff, training staff will assist in developing training curricula and materials (including online training and webinars for Providers); deliver presentations and trainings for New LDSS and LDSS Chronic Care Workers, Technical Assistance NY State of Health Application Assistors, Facilitated Enrollment (staff on Medicaid, Essential Plan, Child Health Plus and Qualified Health Plan policy). General work activities may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Delivering training for the New LDSS Workers and LDSS Chronic Care Workers, Technical Assistance, NY State of Health Application Assistors and Facilitated Enrollment training sessions statewide.</li> <li>• Conducting Continuing Education and Special Topics FE Training sessions offered statewide which include more in-depth training in policy areas which facilitated enrollers encounter problems when screening applicants. Special Topics FE Training sessions may include such topics as self-employment, immigration issues and other topics identified by the Department. Assisting in developing training curriculum and training materials on special topics identified by the Department.</li> <li>• Assisting in updating the existing training curricula and training materials to ensure that it reflects the most current and correct policies.</li> </ul>
IT and LMS Technical Staff	<p>Qualifications:</p> <ul style="list-style-type: none"> <li>• Minimum of an Associate or Technical degree in a related field;</li> <li>• At least three years of demonstrated progressive work history in specific technical field required to fulfill the requirements of this RFP for the development of training website to include, but not be limited to, an online training registration system and the</li> </ul>	<p>Technical staff will report directly to the Project Director and will provide technical <b>assistance and</b> support to all project staff, <b>Department staff and trainees</b>, and such as developing and updating a training website, an online registration system, online training programs, electronic library of curricula, course evaluation program and all data systems needed to complete the project. It is also expected that activities may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Development and maintenance of training;</li> <li>• Maintaining security provisions to protect program communication, and data from unauthorized access, modification and destruction;</li> <li>• Establishing and maintaining effective relationships with team members; and</li> </ul>

<b>Position</b>	<b>Qualifications/Experience</b>	<b>Job Description/Summary of Work Activities</b>
	<p>development and maintenance of online training modalities and resources;</p> <ul style="list-style-type: none"><li>• Strong written and verbal communication skills; and</li><li>• Capable of working both independently and as a member of a team.</li></ul>	<ul style="list-style-type: none"><li>• Available 8:30am to 5:00pm ET Monday through Friday for technical assistance <b>and support.</b></li></ul>

**Attachment E – Current Training and Modality Summary**

**The attachment has been removed and replaced with Revised Attachment E – Current Training and Modality Summary to be found at: <https://www.health.ny.gov/funding/rfp/20017/index.htm>**

**ATTACHMENT E**

**Current Training and Modality Summary reflects current training offerings and modalities at the time of this RFP only. Future course offerings may differ based on the training needs of the Department.**

Training Type	Training Name	Delivery Method			
		In-Person Classroom	Online-Self Paced	Online-Live Webinar	Archived Webinar
NY State of Health	Assistor Certification	✓	✓	-	-
LDSS-Medicaid	LDSS-New Worker	✓	-	-	-
LDSS-Medicaid	LDSS-Introductory Chronic Care Worker	✓	-	-	-
LDSS-Medicaid	LDSS-Advanced Chronic Care Worker	✓	-	-	-
LDSS-TA	Documentation	✓	-	-	-
LDSS-TA	HIPP/MIPP	✓	-	-	-
LDSS-TA	Excess Income	✓	-	-	-
LDSS-TA	Immigration	-	✓	-	-
LDSS-TA	Medicaid Continuations for SSI	-	-	✓	-
LDSS-TA	Medicare Savings Program	✓	-	-	-
LDSS-TA	Real Property	✓	-	-	-
LDSS-TA	Resource Analysis	✓	-	-	-
LDSS-TA	Resource Attestation	✓	-	-	-
LDSS-TA	Retirement Income and Annuities	✓	-	-	-
LDSS-TA	Self-Employment	-	-	✓	-
LDSS-TA	Spousal Impoverishment	✓	-	-	-
LDSS-TA	Supplemental Security Income-Related Budgeting	✓	-	-	-
LDSS-TA	Transfer of Assets	✓	-	-	-
LDSS-TA	Trusts	✓	-	-	-
FE	Facilitated Enrollment Training for the Aged, Blind, & Disabled	✓	-	-	-
FE	Medicare as a Condition of Medicaid Eligibility	-	-	-	✓
FE	Operating Protocols for Outreach to Potential Medicare Eligible	-	-	-	✓

Qualified Provider	Presumptive Eligibility for Pregnant Women	-	✓	-	-
Qualified Provider	Presumptive Eligibility for Children Under Age 19	-	✓	-	-
Qualified Provider	Family Planning Benefit Program	-	✓	-	-

**ATTACHMENT F**  
**RECOMMENDED CLASS SIZE PER TRAINING MODALITY**

Training Modality	*Recommended number of Participants
<p><b>Classroom</b>            Session days referenced below are the most current complement at publication. This category currently includes:</p> <ul style="list-style-type: none"> <li>• NY State of Health Assistor Certification Training (3-day)</li> <li>• Facilitated Enroller Training for the Aged, Blind and Disabled (3 –day)</li> </ul>	10 - 50 Per class
<ul style="list-style-type: none"> <li>• LDSS New Worker Training (7-day)</li> <li>• LDSS Chronic Care Training (Introduction and Advanced) (4- day)</li> </ul>	10 – 25 Per class
<p><b>In-Person LDSS Technical Assistance (TA) Training</b></p>	10 – 30 Per class
<p><b>Online Self-Paced Training</b>            This category currently includes:</p> <ul style="list-style-type: none"> <li>• NY State of Health Assistor Certification Online Training</li> <li>• LDSS Immigration Training</li> <li>• Provider Trainings:               <ul style="list-style-type: none"> <li>○ Presumptive Eligibility for Women and Children Under Age 19</li> <li>○ Family Planning Benefit Program</li> </ul> </li> </ul>	N/A
<p><b>Webinars</b>            . This category currently includes:</p> <ul style="list-style-type: none"> <li>• Self-Employment</li> <li>• Medicaid Continuations for SSI</li> <li>• Medicare Savings Plan</li> </ul>	30 -1,000 Per webinar
<p><b>Archived Webinar</b></p> <ul style="list-style-type: none"> <li>• Medicare as a Condition of Medicaid Eligibility</li> </ul>	N/A

\*Recommended number of participants are based on historical information.