

**New York State Department of Health
Division of Family Health, Bureau of Administration**

**New York State Maternal Mortality Reviews RFP
RFP # C041762
Questions and Responses
August 4, 2025**

CALENDAR OF EVENTS

1. **Question:** Can the Department confirm that the anticipated contract start date is October 1, 2026 (not 2025), and if a 2026 start date, can the Department explain why there is an extended amount of time between the proposal due date and contract start date?

Response: The anticipated contract start date is October 1, 2026. This contract and corresponding services were transferred from the Department's Office of Health Insurance Programs (OHIP) and this will allow for the competitive process aligning with review schedule.

QUALIFICATIONS

2. **Question:** The RFP clearly states that "The bidder cannot be a NYS health care facility, an association of health care facilities conducting business in NYS, or an affiliate of a NYS health care Facility". Beyond the listed minimum and preferred qualifications, could the Department provide examples of the types of organizations or entities that are considered eligible to submit a bid for this RFP?

Response: Eligible bidders must provide assurance that it has no conflict of interest with respect to conducting the duties and responsibilities in this RFP and meet all requirements as detailed under Minimum Qualifications section of the RFP.

3. **Question:** To meet the Minimum Qualifications for this bid, please confirm that the bidder's experience must be from within the last three years.

Response: The bidder's experience regarding the minimum qualifications is not required to be from within the last three years.

4. **Question:** Please confirm that subcontractor experience cannot be used to meet the Preferred Qualifications requirement.

Response: Subcontractor experience cannot be used to meet the minimum qualifications.

5. **Question:** Please confirm that the term "current" used in the second Preferred Qualification means "as of the date of proposal submission."

Response: Yes, the preferred qualification is that the bidder currently employs NYS licensed physicians and nurses as of the date of their proposal submission.

6. **Question:** This section references "Section 3.1"; however, there is no Section 3.1 in the RFP. Please confirm reference should be either "Section 3.0" or "Section 6.2.3.1."

Response: See Amendment 1

7. **Question:** This section references “Section 3.2”; however, there is no Section 3.2 in the RFP. Please confirm reference should be either “Section 3.0” or “Section 6.2.3.2.”

Response: See Amendment 1

SCOPE OF WORK

8. **Question:** This section states, “The contractor will perform case abstractions for up to 100 potential maternal deaths and select cases of maternal morbidity.” Please provide the approximate number of cases of maternal morbidity.

Response: The Department anticipates fewer than 10 reviews of morbidity cases per year.

9. **Question:** This section states, “The contractor will perform case abstractions for up to 100 potential maternal deaths and select cases of maternal morbidity.” Please confirm the stated amount of “up to 100” comprises both potential maternal deaths and select cases of maternal morbidity.

Response: The anticipated number of case abstractions stated in the RFP is inclusive of both potential maternal deaths and select cases of maternal morbidity.

10. **Question:** Can the Department clarify what elements of the scope of work can be done remotely and which are required to be done onsite/in-person?

Response: The Department anticipates that all elements of the scope of work can be done remotely, except for the required annual multiday conference required by the CDC. The contractor will be required to attend the conference in person. In the event Board meetings are held in person, the abstractor and case presenter will be required to attend in person.

11. **Question:** Can the Department provide the average/anticipated time between a case fatality and review?

Response: The Department is required to identify deaths of NYS residents that occur during pregnancy or within a year of the end of pregnancy on a routine basis no later than 1 year from the date of death, abstract and enter information within 18 months of death in preparation for Board review within 24 months of death.

Once the case is given to the contractor, we anticipate the review to be completed within a timely fashion, in consultation with the Department.

12. **Question:** Are cases reviewed at the county level before being reviewed by the state? If so, are the county-level review documents shared with the state/contractor?

Response: Reviews are not conducted at the county level.

13. Question: Does the Department have an epidemiologist who has time assigned to work on the MMRB and liaise with the contractor?

Response: Multiple staff will be serving as liaisons with the contractor.

RECORD REQUEST

14. Question: Could the Department describe what the review of the pass-through request records involves (e.g., provide an example of a pass-through request), and any work product to be developed as a result of the review?

Response: See RFP 4.1.2 (B) for a description of the purpose of reviewing pass-through records.

15. Question: Will the Department be able to provide authority under which the contractor can request records and, if so, which authority will that be (e.g., Medical Examiner's Office?)

Response: The Department will supply 'Request Letters' for all cases, authorizing the requests that are specific to the hospital, facility, or provider and patient in question.

16. Question: Are records grouped in any way (e.g., by time period, cause of death)?

Response: The Department prioritizes reviews based on the date of death.

CASE ABSTRACTION AND DATA ENTRY

17. Question: This section states, "Depending on the circumstances of the review, it may be necessary to request additional information." On which row in Attachment B shall we account for additional information requests for OB/MFM?

Response: Pass-through requests generated by this process are already included in the pass-through request total outlined in the RFP. Requests for other information from the Department should be accounted for under OB/MFM, but the effort involved would be no more than an email or phone call indicating which information is being requested.

18. Question: Is there a requirement that chart abstraction be done in-person/onsite?

Response: No, there is no requirement that chart abstraction be performed in-person/onsite.

19. Question: Can the Department clarify whether the OB/MFM review happens before or after the Case Abstraction (e.g., are the 250 records reviewed by the OB/MFM the same as the 250 pass-through requests, and are the 100 cases identified for abstraction a subset of the 250 cases reviewed by the OB/MFM?)

Response: OB/MFM review and case abstraction are parallel processes.

1. Most of the 100 cases identified for abstraction do not undergo an initial OB/MFM review.

2. A small proportion of the 250 cases reviewed by the OB/MFM will be advanced for case abstraction, but these are included in the 100 cases identified for abstraction.

20. Question: Is the contractor responsible for entering data into the CDC's Maternal Mortality Review Information Application (MMRIA)?

Response: Yes, the contractor will be responsible for data entry.

INFORMANT INTERVIEWS

21. Question: On page 9, the RFP states, "At this time, the Department anticipates 100 informant interviews will be performed in one year." Attachment B states, "Informant Interviews, 100." However, on page 22, the RFP states, "At this time, the Department anticipates 60 informant interviews will be performed in one year." Which is correct?

Response: At this time, the Department anticipates 100 informant interviews will be performed in one year.

22. Question: Could the Department clarify whether they anticipate 100 informant interviews in year 1 (as referenced on page 9 of the RFP) or 60 (as referenced on page 22 of the RFP)?

Response: At this time, the Department anticipates 100 informant interviews will be performed in one year.

23. Question: Could the Department clarify whether an existing informant interview guide and/or questions will be used by the contractor to conduct informant interviews, or will this be co-designed by the contractor and MMRB?

Response: The Department has developed and will provide a facilitation guide and additional guidance documents to be used by the contractor when conducting Informant Interviews.

24. Question: The link to Attachment 1 informant interview Tracking Template in the RFP is not working.

Response: The link to Attachment 1 informant interview Tracking Template can be found here: [Attachment 1- Informant Interview Tracking Template](#)

MEETING PARTICIPATION

25. Question: Can the Department clarify what costs are included in the statement "contractor is responsible for all costs associated with the meetings described above"? Should the contractor budget for space, AV, and costs associated with bringing the MMRB together (e.g., travel, food)?

Response: The contractor is responsible for travel costs for their staff to attend the annual CDC meeting, and any travel costs for their staff to attend in-person Board meetings, if they occur.

26. Question: What responsibilities, if any, does the contractor have regarding the MMRB e.g., recruiting members, planning the meetings, communicating with members, distributing case narratives to the members, etc., in advance of the meeting?

Response: The contractor will not be responsible for recruiting members, planning meetings, or distributing case narratives to members in advance of meetings. The contractor may be required to communicate with members about cases prior to meetings, as directed by the Department.

27. Question: What responsibilities, beyond case presentation, does the contractor have during MMRB meetings? For example, is the contractor expected to facilitate, take meeting notes, etc.?

Response: The contractor will be required to respond to questions posed by the MMRB members. If the case presenter does not know the answer, the abstractor will make their best effort to find the information in the records while the discussion/presentation continues. The findings will be communicated to the Board, if found.

28. Question: Will the contractor be included in discussions related to developing recommendations based on the analysis of the case presentations?

Response: The case presenter and abstractor will be able to listen to the discussions, but the MMRB members will be responsible for developing the recommendations. It would be appropriate for the presenter and abstractor to make clarifying comments regarding the facts of the case if there appears to be misunderstanding or confusion on the part of the MMRB members.

29. Question: Who is responsible for recording and tracking the development of recommendations?

Response: The Department is responsible for recording and tracking the development of recommendations.

CASE PRESENTATION

30. Question: Is there a template for the case narrative/case summary form? If so, does the Department anticipate needing to revise the template?

Response: The Department has developed templates for use, that will be provided to the contractor. The Department may revise the template as necessary throughout the contract period.

M/WBE-RELATED QUESTIONS

31. Question: Can a NYC M/WBE be considered a subcontractor and meet the M/WBE requirements?

Response: The successful Bidder who becomes the Contractor under the Contract entered into with the Department pursuant to this RFP must document good faith efforts to provide meaningful participation by M/WBEs as subcontractors or suppliers in the

performance of the Contract consistent with the M/WBE participation goals established for this procurement.

- 32. Question:** If the contractor does not anticipate any need for competitive procurement under the scope of work (i.e. all work is to be completed in-house and/or with contractors known at the time of budgeting), how should we complete the MWBE utilization plan?

Response: The MWBE Utilization Waiver Request (Form #2) should be filled out by the bidder if the Bidder MWBE Utilization Plan (Form #1) indicates less than the stated participation goal for the procurement.

STAFFING

- 33. Question:** Given that healthcare facilities/clinics in NYS cannot apply, could the Department clarify whether a Revenue Cycle Management (RCM) audit service, which employs Registered Nurses, is eligible to apply for this RFP? The RFP states that "Abstractors need to be clinical staff who at a minimum are Registered Nurses qualified to practice in NYS". We want to ensure that the nature of an RCM audit service does not conflict with the "healthcare facility/clinic" exclusion, provided all other qualifications and staffing requirements are met.

Response: For purposes of this RFP, a health care facility is any facility licensed and regulated by the Department of Health or another New York State agency (e.g. Office of Mental Health) to provide health care services. This includes, but is not limited to, facilities licensed pursuant to Articles 28, 36 or 40 of the Public Health Law or Article 7 of the Social Services Law, such as: hospitals; nursing homes; diagnostic treatment centers; midwifery birth centers; certified home health care agencies; licensed home care services agencies; long term home health care programs; hospices; and adult care facilities. In addition, bidders are responsible for providing assurance that no potential conflict of interest exists with any health care facilities in New York State when conducting the duties and responsibilities of the RFP.

- 34. Question:** "This section states, "The Contractor must provide the Department initially and annually thereafter, with an updated New York project organizational chart, depicting each functional unit of the organization, numbers and types of staff for each function, identified lines of authority governing the interaction of staff, and relationships with major subcontractors." Please confirm that "initially" refers to upon contract award, i.e., Bidders do not have to submit an organizational chart with the proposal."

Response: The contractor must supply the project organizational chart with the proposal and will be required to submit and updated organizational chart periodically as needed throughout the contract period.

BUDGET

- 35. Question:** If the Department has previously funded a contractor for the scope of work, is the Department able to provide the previously funded annual award?

Response: This information may be requested via the FOIL request process.

[Open FOIL NY](#)

36. Question: This section states, "The Cost Proposals will be scored based on a maximum cost score of XX points." Please confirm XX should be 30.

Response: See Amendment 1

37. Question: The RFP mentions that the "maximum cost score will be allocated to the Cost Proposal with the lowest all-inclusive not-to-exceed maximum price". Could the Department provide an estimated budget range or a soft ceiling amount that proposers should consider when developing their cost proposals?

Response: The bidder will need to present a budget based on what they deem appropriate for the scope of work in this RFP. This is referencing the Bidders' not-to-exceed price provided on Attachment B Cost proposal.

REFERENCES

38. Question: Please confirm that a reference for a subcontractor cannot be used to meet the References requirement.

Response: See Amendment 1

Provide references using Attachment 9 for three major clients the prime provided services of comparable scale and scope of work as described in this RFP. Provide firm names, addresses, contact names, telephone numbers, and email addresses.

39. Question: This section states, "Provide references using Attachment 9 (References) for three [insert your information here]." Please confirm that the requirement is to complete Attachment 9 including three references for work conducted by the prime bidder, which is the same or similar to that required in the RFP.

Response: See Amendment 1 and response to question 38. Attachment 9 should include three references for work conducted by the prime bidder.