



Chris Traylor, Executive Commissioner

**Request for Proposals (RFP)
for
*Healthy Texas Women***

RFP No. 529-16-0094

Date of Release: 3/22/2016

NIGP Class/Item Codes: 948-00, 948-47, 948-48, 948-55, 948-74

Table of Contents

1. General Information	4
1.1. Scope	4
1.2. HHSC Point of Contact	4
1.3. Tentative Procurement Schedule	4
1.4. General Definitions	5
1.5. Eligible Respondents	7
1.6. Background	7
1.7. Strategic Elements	8
1.8. External Factors	9
1.9. Legal and Regulatory Constraints	9
1.10. HHSC Amendments and Announcements Regarding this RFP	10
1.11. RFP Cancellation/Partial Award/Non-Award	10
1.12. Right to Reject Proposals or Portions of Proposals	10
1.13. Costs Incurred	10
1.14. Protest Procedures	10
1.15. Interpretive Conventions	10
2. Scope of Work	11
2.1. Project Scope	11
2.2. Assessment Narrative	13
2.3. Clinic Site Readiness	13
2.4. Staff Development Plan	14
2.5. Community Education/Program Promotion Plan	14
2.7. Budget Requirements and Monthly Cost Reimbursement Process	16
2.8. Funding Request and Clients Served	17
3. General Instructions and Proposal Requirements	17
3.1. Vendor Conference	17
3.2. Modification or Withdrawal of Proposal	18
3.3. Multiple Responses	18
3.4. No Joint Proposals	18
3.5. Use of Subcontractors	18
3.6. Texas Public Information Act	18
3.7. Instructions for Submitting Proposals	19
3.8. Format and Content	20
3.9. News Releases	22
3.10. Incomplete Proposals	22
3.11. State Use of Ideas	22
3.12. Property of HHSC	22
3.13. Copyright Restriction	22
3.14. Additional Information	22
4. Historically Underutilized Business Participation	22
4.1. Introduction	23
4.2. HHSC's Administrative Rules	23
4.3. Statewide Annual HUB Utilization Goal	23
4.4. Required HUB Subcontracting Plan	24
4.5. CPA Centralized Master Bidders List	24
4.6. HUB Subcontracting Procedures – If a Respondent Intends to Subcontract	24
4.7. Method 5: Respondent Does Not Intend to Subcontract	26

4.8	Post-award HSP Requirements	27
5.	Proposal Evaluation	27
5.1	Evaluation Criteria	28
5.2	Initial Compliance Screening	28
5.3	Competitive Range Determinations	28
5.4	Oral Presentations and Site Visits	28
	PROGRAM FORMS.....	29
	FORM A: PROPOSAL TABLE OF CONTENTS AND CHECKLIST.....	30
	FORM B: TEXAS COUNTIES AND REGIONS LIST SERVED BY PROJECT	31
	FORM C: CONTACT PERSON INFORMATION	32
	FORM D: Healthy Texas Women Certification.....	33
	FORM E-1: GOVERNMENTAL ENTITY	37
	FORM E-2: NON-PROFIT OR FOR-PROFIT ENTITY	38
	FORMS F & F-1 THROUGH F-7: BUDGET SUMMARY AND DETAILS.....	39
	FORM G: RESPONDENT BACKGROUND GUIDELINES	40
	FORM G: RESPONDENT BACKGROUND	41
	FORM H: FUNDING REQUEST AND CLIENTS SERVED.....	42
	FORM I: WORK PLAN GUIDELINES	43
	FORM I: WORK PLAN.....	45
	FORM I: WORK PLAN.....	46
	FORM J: ASSESSMENT NARRATIVE GUIDELINES	51
	FORM J: ASSESSMENT NARRATIVE	52
	FORM K: HEALTHY TEXAS WOMEN CLINIC SITE READINESS	54
	FORM K-1: HEALTHY TEXAS WOMEN CLINIC SITES	55
	FORM L: STAFF DEVELOPMENT PLAN.....	57
	FORM L-1: STAFF DEVELOPMENT TRAINING CALENDAR	58
	FORM M: COMMUNITY EDUCATION/PROGRAM PROMOTION PLAN	59
	APPENDICIES.....	60
	Appendix A: Healthy Texas Women Program Reimbursable Procedure Codes.....	61
	Appendix B: HHSC Uniform Terms and Conditions Version 2.12.....	69
	Appendix C: HHSC Special Conditions Version 1.0	88
	Appendix D: Certifications and Other Required Forms.....	16

ATTENTION INTERESTED RESPONDENTS

This RFP requires a respondent to submit a number of signed documents with its proposal. Please use [Form A](#) to ensure that respondent is submitting all required **signed** documents with its proposal. **Failure to do so will result in automatic disqualification of respondent's proposal.**

1. General Information

1.1. Scope

On July 1, 2016, HHSC will consolidate the Texas Women's Health Program (TWHP) and the Expanded Primary Healthcare Program (EPHC) into the new Healthy Texas Women Program (HTW Program). The HTW Program includes both a fee-for-service component (HTW Fee-for-Service Program) and a cost reimbursement component.

In this RFP, the State of Texas, by and through the Texas Health and Human Services Commission (HHSC), seeks qualified entities that provide, or will provide, services through the HTW Fee-for-Service Program to enter into cost reimbursement contracts to conduct additional activities that will enhance the clinical outcomes for clients seen through the HTW Fee-for-Service Program.

NOTE: A client will have an HTW identification card.

1.2. HHSC Point of Contact

The sole point of contact for inquiries concerning this RFP is:

Mahsa Azadi, CTPM

Procurement Project Manager

Ref: RFP# **529-16-0094**

Procurement and Contracting Services Division

Health and Human Services Commission

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All communications relating to this RFP must be directed to the HHSC contact person named above. All communications between respondents and other HHSC staff members concerning this RFP are strictly prohibited. **Failure to comply with these requirements will result in proposal disqualification.**

1.3. Tentative Procurement Schedule

The following table documents the pre-award events for this procurement. All dates are subject to change at HHSC's discretion.

Tentative Procurement Schedule	
RFP Release Date	3/22/2016
Vendor Conference	4/1/2016
Vendor Questions Due	4/4/2016
HHSC Posts Responses to Vendor Questions	4/11/2016
Proposals Due	4/21/2016
Anticipated Contract Start Date	7/1/2016

1.4. General Definitions

Affiliate: An individual or entity that has a legal relationship with another entity, which relationship is created or governed by at least one written instrument that demonstrates a common ownership, management, control, franchise, or the granting or extension of a license or other agreement that authorizes the entity to use the other entity's brand name, trademark, service mark, or other registered identification mark.

Department of State Health Services (DSHS): The agency responsible for administering physical and mental health-related prevention, treatment, and regulatory programs for the State of Texas.

Elective Abortion: The intentional termination of a pregnancy by an attending physician who knows that the female is pregnant, using any means that is reasonably likely to cause the death of the fetus. The term does not include the use of any such means to terminate a pregnancy that resulted from an act of rape or incest; in a case in which a female suffers from a physical disorder, physical disability, or physical illness, including a life-endangering physical condition caused by or arising from the pregnancy, that would, as certified by a physician, place the female in danger of death or risk of substantial impairment of a major bodily function unless an abortion is performed; or in a case in which a fetus has a life-threatening physical condition that, in reasonable medical judgment, regardless of the provision of life-saving treatment, is incompatible with life outside the womb.

Expanded Primary Health Care program (EPHC): A state-funded health care program that provides primary, preventive, and screening services to women age 18 and older, that are at or below 200 percent of the Federal Poverty Level and are unable to access the same care through other programs.

Federal Poverty Level (FPL): The set minimum amount of income that a family needs for food, clothing, transportation, shelter, and other necessities. In the United States, this level is determined by the Department of Health and Human Services. FPL varies according to household size. The number is adjusted for inflation and reported annually in the form of poverty guidelines.

Family Planning Services: Educational or comprehensive medical activities that enable individuals to determine freely the number and spacing of their children and to select the means by which this may be achieved. These services include contraceptive services, pregnancy testing and counseling, health screenings, preconception health screenings for obesity, smoking, and mental health, and sexually transmitted infection services and screenings.

Indirect Costs: Costs incurred for a common or joint purpose benefiting more than one project or cost objective of respondent's organization and not readily identified with a particular project or cost objective. Typical examples of Indirect Costs may include general administration and general expenses such as salaries and expenses of executive officers, personnel administration and accounting; depreciation or use allowances on buildings and equipment; and costs of operating and maintaining facilities.

Health Service Region (HSR): Counties grouped within specified geographic areas for administrative purposes.

Healthy Texas Women Program (HTW Program): A state-funded program administered by HHSC to provide eligible Uninsured women with Women's Health Services and Family Planning Services.

Healthy Texas Women Fee-for-Service (HTW Fee-for-Service Program): Women's Health Services and Family Planning Services provided through the HTW Program on a fee-for-service basis through the TMHP system.

In-reach: Activities that are conducted with the purpose of informing and educating women already served by a respondent's organization about services they are not receiving, but may be eligible to receive in the HTW Program.

Medicaid: Title XIX of the Social Security Act; reimburses for health care services delivered to low-income individuals who meet eligibility guidelines.

Outreach: Activities that are conducted with the purpose of informing and educating the community about available HTW Program services and increasing the number of clients served through the HTW Program.

Priority Population: The target population to be served through the HTW Program.

Promote: Advancing, advocating, or popularizing Elective Abortions.

State Fiscal Year: The twelve-month period beginning September 1st and ending August 31st.

Texas Medicaid & Healthcare Partnership (TMHP): The Texas Medicaid Claims and Primary Care Case Management (PCCM) Administrator.

Texas Women's Health Program (TWHP): TWHP is the current state-funded program administered by HHSC to provide eligible Uninsured women with women's health and Family Planning Services that is being replaced with the HTW Program.

Unduplicated Client: An HTW Fee-for-Service Program client who is counted only one time during a State Fiscal Year, regardless of the number of visits, encounters, or services they receive in the HTW Program (e.g., one client seen four times during the State Fiscal Year is counted as one Unduplicated Client).

Uninsured: Not having medical insurance or not enrolled in a medical assistance program, such as Medicaid.

Women's Health Services: Preventative health services that are beneficial to a woman's reproductive health including, but not limited to, vaccines and immunizations, breast cancer screening, cervical cancer screening and treatment, and gynecological services including cancer screening or repair of abnormalities.

Programmatic Acronyms:

EPHC	Expanded Primary Health Care
FFS	Fee for Service
FPL	Federal Poverty Level
HSR	Health Service Region
HTW	Healthy Texas Women
PCCM	Primary Care Case Management
QA	Quality Assurance
QI	Quality Improvement
TMHP	Texas Medicaid & Healthcare Partnership
TWHP	Texas Women's Health Program

1.5. Eligible Respondents

To be eligible to participate in the cost reimbursement component of the HTW Program being procured in this RFP, a respondent must:

- A. not perform or Promote Elective Abortions;
- B. not be an Affiliate of an entity or individual that performs or Promotes Elective Abortions;
- C. meet these requirements throughout the procurement process and throughout the term of the awarded contract;
- D. be a Medicaid provider in accordance with [Title 1, Texas Administrative Code, Part 15, Chapter 352](#), or must have submitted a Texas Medicaid Provider Enrollment Application;

NOTE: To demonstrate eligibility to respond to this RFP, respondent must include the Texas Provider Identifier (TPI) and the National Provider Identifier (NPI) for each clinic site that will provide HTW Program services on [Form K-1](#). If a clinic site does not have a TPI or NPI, the respondent must provide the date the Texas Medicaid Provider Enrollment Application was submitted on Form K-1. Respondents can learn more about the Texas Medicaid Provider Enrollment process by referring to the [TMHP website](#).

- E. have completed the HTW certification form, which is contained on [Form D](#);

NOTE: A respondent must complete one Form D for all clinics associated with its NPI. If a respondent does not yet have an NPI, the respondent must complete Form D and indicate the date it submitted its Texas Medicaid Provider Enrollment Application on the form.

- F. be determined to be "Active" by the Texas Comptroller of Public Accounts; and
- G. be located in Texas and have a Texas business address.

FAILURE TO COMPLY WITH THESE REQUIREMENTS WILL RESULT IN A NONRESPONSIVE DETERMINATION AND RESPONDENT WILL BE DISQUALIFIED.

1.6. Background

Overview of the Health and Human Services Commission

Since 1991, HHSC has overseen and coordinated the planning and delivery of health and human service programs in Texas. HHSC is established in accordance with Texas Government Code [Chapter 531](#) and is responsible for the oversight of all Texas health and human service agencies (HHS Agencies). HHSC's chief executive officer is Chris Traylor, Executive Commissioner of Health and Human Services.

As a result of the consolidation due to House Bill (HB) 2292, 78th Regular Session in fiscal year 2003, some of the contracting and procurement activities for the HHS Agencies have been assigned to the Procurement and Contracting Services (PCS) Division of HHSC. As such, PCS will administer the initial stages of the procurement process, prior to the contract award, including RFP announcement and publication, handling of communications from the respondent, as well as managing the receipt and handling of valid responses for final review and evaluation. PCS directs the execution of the contract after the awarded vendor has been selected.

1.6.1. HTW Program Overview

In December 2014, the Sunset Commission issued the recommendation that HHSC consolidate the women's health care programs in order to improve service and efficiency for clients and providers. This included the recommendation to consolidate the existing Texas Women's Health Program (TWHP) at

HHSC and the Expanded Primary Health Care (EPHC) Program at DSHS into one program and division at HHSC. On July 1, 2016, HHSC will consolidate the TWHP and EPHC into the HTW Program. The HTW Program is comprised of two components, one that is within the scope of this RFP and one that is not.

The first component is the HTW Fee-for-Service Program, **which is not within the scope of this RFP**. The HTW Fee-for-Service Program is patterned after the current Texas Women's Health Program. As such, any qualified Medicaid provider in Texas, who has completed the TWHP/HTW certification process, may be reimbursed for services in accordance with the "Healthy Texas Women Program Reimbursable Procedure Codes", which are contained in Appendix A for informational purposes only. In the HTW Fee-for-Service Program, client eligibility is determined by HHSC and fee-for-service claims will be processed by the Texas Medicaid Healthcare Partnership. Services in the HTW Fee-for-Service Program will be preventive health, medical, counseling, and educational services that assist low-income Texan women to manage their fertility and achieve optimal reproductive and general health and include, but are not limited to, the following services: pelvic examinations, contraceptive services (pregnancy prevention and birth spacing), pregnancy testing and counseling, sexually transmitted infection services, breast and cervical cancer screenings and diagnostic services, immunizations, cervical dysplasia treatment, and other preventive services.

The second component of the HTW Program, **which is within the scope of this RFP**, is the cost reimbursement component, which is discussed further in Section 2 of this RFP. The services provided under the cost reimbursement component of the HTW Program do not include direct client care services provided through the HTW Fee-for-Service Program; however, the services being procured in this RFP are directly related, and limited, to the clients served through the HTW Fee-for-Service Program and women that are deemed presumptively eligible for the HTW Fee-for-Service Program.

All HTW Program funds are required to be used to increase access to Women's Health Services and Family Planning Services in order to prevent unintended pregnancies, positively affect the outcome of future pregnancies, and positively impact the health and wellbeing of women and their families.

1.7. Strategic Elements

Contract Type and Term

HHSC will award one or more contracts for the HTW cost reimbursement component of the HTW Program. The initial contract period will commence on or about July 1, 2016 and will terminate on August 31, 2017. The resulting contracts may be renewed for up to two additional two-year terms

Contract Elements

The term "contract" means the contract awarded as a result of this RFP, which includes the signature document and all attachments thereto, HHSC's Uniform Terms and Conditions Version 2.12 (UTCs), the HHSC Special Conditions, this RFP, and the successful respondents' respective proposals. The UTCs are contained in [Appendix B](#) and the HHSC Special Conditions are contained in [Appendix C](#). Additionally, a contract resulting from this RFP will be subject to HHSC's [Data Use Agreement \(DUA\)](#), which will be incorporated into the contract.

HHSC reserves the right to negotiate additional contract terms and conditions. Respondents are responsible for reviewing the UTCs and HHSC Special Conditions and noting any exceptions on the [Respondent Information and Disclosures](#) form.

HHSC's Basic Philosophy: Contracting for Results

HHSC's fundamental commitment is to contract for results. HHSC defines a successful result as the generation of defined, measurable, and beneficial outcomes that satisfy the contract requirements and support HHSC's missions and objectives. This RFP describes what is required of the contractor in terms of services and deliverables, and unless otherwise noted in the RFP, places the responsibility for how they are accomplished on the contractor.

1.8. External Factors

External factors may affect the project, including budgetary and resource constraints. Any contract resulting from this RFP is subject to the availability of state funds. As of the issuance of this RFP, HHSC anticipates that budgeted funds will be available to reasonably fulfill the project requirements. If, however, funds are not available, HHSC reserves the right to withdraw the RFP or terminate the resulting contracts without penalty.

1.9. Legal and Regulatory Constraints

Delegation of Authority

State and federal laws generally limit HHSC's ability to delegate certain decisions and functions to a contractor, including but not limited to: (1) policy-making authority; and (2) final decision-making authority on the acceptance or rejection of contracted services.

Conflicts of Interest

A conflict of interest is a set of facts or circumstances in which either a respondent or anyone acting on its behalf in connection with this procurement has past, present, or currently planned personal, professional or financial interests, or obligations that, in HHSC's determination, would actually or apparently conflict or interfere with the respondent's contractual obligations to HHSC. A conflict of interest would include circumstances in which a respondent's personal, professional or financial interests, or obligations may directly or indirectly:

- make it difficult or impossible to fulfill its contractual obligations to HHSC in a manner that is consistent with the best interests of the State of Texas;
- impair, diminish or interfere with respondent's ability to render impartial or objective assistance or advice to HHSC; or
- provide the respondent with an unfair competitive advantage in future HHSC procurements.

Neither the respondent nor any other person or entity acting on its behalf, including but not limited to subcontractors, employees, agents, and representatives may have a conflict of interest with respect to this procurement. Before submitting a proposal, respondents should carefully review the UTCs and HHSC Special Conditions for additional information concerning conflicts of interests.

A respondent must certify that it does not have personal or business interests that present a conflict of interest with respect to the RFP and resulting contract (see [Required Certifications Form](#)). Additionally, if applicable, the respondent must disclose all potential conflicts of interest. The respondent must describe the measures it will take to ensure that there will be no actual conflict of interest and that its fairness, independence, and objectivity will be maintained (see the [Respondent Information and Disclosure Form](#)). HHSC will determine to what extent, if any, a potential conflict of interest can be mitigated and managed during the term of the contract. **Failure to identify potential conflicts of interest may result in HHSC's disqualification of a proposal or termination of the contract.**

Former Employees of a State Agency

Respondents must comply with Texas laws and regulations relating to the hiring of former state employees (see e.g., Texas Government Code [§572.054](#)). Such “revolving door” provisions generally restrict former agency heads from communicating with or appearing before the agency on certain matters for two years after leaving the agency. The revolving door provisions also restrict some former employees from representing clients on matters that the employee participated in during state service or matters that were in the employee’s official responsibility.

As a result of such laws and regulations, a respondent must certify that it has complied with all applicable laws and regulations regarding former state employees (see the [Respondent Information and Disclosure Form](#)). Furthermore, a respondent must disclose any relevant past state employment of the respondent’s or its subcontractors’ employees and agents in the [Respondent Information and Disclosure Form](#).

1.10. HHSC Amendments and Announcements Regarding this RFP

HHSC will post all official communication regarding this RFP to the [Electronic State Business Daily \(ESBD\)](#). HHSC reserves the right to revise the RFP at any time. Any changes, amendments, or clarifications will be made in the form of written responses to respondent questions, amendments, or addenda issued by HHSC on the [ESBD](#). Respondents should check the website frequently for notice of matters affecting the RFP. To access the website, go to the [ESBD search](#) page and enter a search for this procurement.

1.11. RFP Cancellation/Partial Award/Non-Award

HHSC reserves the right to cancel this RFP, to make a partial award, or to make no award if it determines that such action is in the best interest of the State of Texas.

1.12. Right to Reject Proposals or Portions of Proposals

HHSC may, in its discretion, reject any and all proposals or portions thereof.

1.13. Costs Incurred

Issuance of this RFP in no way constitutes a commitment by HHSC to award a contract or to pay any costs incurred by a respondent in the preparation of a response to this RFP. HHSC is not liable for any costs incurred by a respondent prior to issuance of or entering into a formal agreement, contract, or purchase order. Costs of developing proposals, preparing for or participating in oral presentations and site visits, or any other similar expenses incurred by a respondent are entirely the responsibility of the respondent and will not be reimbursed in any manner by the State of Texas.

1.14. Protest Procedures

[Title 1, Texas Administrative Code Part 15, Chapter 391, Subchapter D, §391.401](#) outlines HHSC’s respondent protest procedures.

1.15. Interpretive Conventions

Whenever the terms “shall,” “must,” or “is required” are used in this RFP in conjunction with a specification or performance requirement, the specification or requirement is mandatory. A respondent’s failure to address or meet a mandatory requirement in a proposal may be cause for HHSC’s rejection of the proposal.

Whenever the terms “can,” “may,” or “should” are used in this RFP in conjunction with a specification or performance requirement, the specification or performance requirement is a desirable, but not mandatory, requirement. Accordingly, a respondent’s failure to address or provide any items so referred to will not be the cause for rejection of the proposal, but will likely result in a less favorable evaluation.

2. Scope of Work

2.1. Project Scope

Activities under the contracts resulting from this RFP must be directly related to support services that enhance services provided by a respondent to a client under the HTW Fee-for-Service Program. Support services include, but are not limited to:

- (1) Assisting eligible women with enrollment into the HTW Fee-for-Service Program;
- (2) Direct clinical care for women deemed presumptively eligible for the HTW Fee-for-Service Program;
- (3) Staff development and training related to HTW Fee-for-Service Program service delivery; and
- (4) Client and community based educational activities related to the HTW Program.

Respondents must provide the following program components in the provision of its proposed support services: (1) Program Administration and Management; (2) Quality Assurance/Quality Improvement; (3) Professional Development; (4) Recruitment; and (5) Long-Acting Reversible Contraception Usage. Respondents must complete the Work Plan required on [Form I](#) and describe how it intends to meet each element of the required program components:

Note: A client will have an HTW identification card.

Program Component 1 - Program Administration and Management

Respondent must:

- A. Identify the services it proposes to provide;
- B. Identify the Priority Population to be served;
- C. Describe organizational workforce, support systems (training, research, financial and administrative systems, technical assistance and support, etc.), and other infrastructure available to achieve service delivery and policy-making activities;
- D. Include a copy of the Institutional Review Board’s approval if the respondent is currently conducting research on individuals who receive services through any HHSC-funded programs; and
- E. Provide an organizational Chart;
- F. Provide job descriptions for the following key employees related to the HTW Program, i.e., Medical Director, Clinical/Program Director, eligibility and billing staff, and clinicians; and
- G. Describe how it will design, implement, and monitor the HTW Program budget in order to ensure the provision of support services to clients throughout the entirety of the contract term.

Program Component 2 - Quality Assurance/Quality Improvement

Respondent must:

1. Describe internal Quality Assurance/Quality Improvement (QA/QI) management and processes utilized to monitor services. Identify staff that participate in the QA/QI process and who is responsible for ensuring QA/QI policies and procedures are updated. Respondent must include job titles and qualifications of the identified individuals; and
2. At a minimum, provide the following information:
 - a. Medical Director’s involvement in the QA/QI activities;

- b. Activities used to identify trends of needed improvement and the frequency of those activities;
- c. Activities to ensure correction and follow-up to findings identified;
- d. Use and frequency of client satisfaction surveys;
- e. System used to identify, report, and monitor adverse outcomes; and
- f. Process used to develop and monitor use of Protocols and Standing Delegation Orders, including the staff involved in the process.

Program Component 3 - Professional Development

Respondents must:

- A. Describe how respondent will ensure health care professionals provide HTW Program services competently and with sensitivity to diverse client cultures; and
- B. Identify staff, including job titles, that will attend HHSC required trainings.

NOTE: The selected contractor(s) may attend HHSC-required trainings in person or participate remotely. Trainings may include, but are not limited to, webinars, conference calls, and in person trainings.

Program Component 4 – Recruitment

Respondent must describe how it will ensure Outreach, In-reach, and education to the Priority Population will be accomplished in every county of the proposed target service area(s) identified in [Form B](#).

Program Component 5 - Long-Acting Reversible Contraception (LARC) Usage:

Respondent must:

- A. Describe which LARC methods will be provided at respondent's clinic(s) and which LARC methods will be provided by referral only;
- B. Describe efforts respondent will use to educate clients about LARC usage and efforts to increase LARC utilization rates in the Priority Population; and
- C. Describe professional development opportunities that respondent will employ for staff related to LARC utilization and education.

For each Program Component, respondent must propose on Form I at least one goal and corresponding objective to achieve the goal(s) including a description of the activities necessary to meet the goal. Additionally, respondent must:

- a. Describe how it will ensure activities are reasonable, achievable, and measurable. Identify what is expected to be accomplished during the contract period.
- b. List methodologies/activities in the chronological sequence that will be used to achieve each objective;
- c. Indicate the name or position of the person primarily responsible for ensuring the completion of each activity.
- d. Define the time frame for accomplishing each objective/activity.
- e. Describe in specific terms how respondent will evaluate each activity. For example, "client services data, pre/post assessments of educational sessions, client interviews/surveys, etc."

2.2. Assessment Narrative

Respondent must perform an assessment of the proposed community and Priority Population respondent intends to serve. Respondent must identify the data sources, e.g. Census Data, used in completing this assessment and the date(s) the assessment(s) was conducted.

Respondent must complete the Assessment Narrative contained in [Form J](#) and provide a description of the community that will be served by the respondent's provision of support services in the HTW Program. Respondent's assessment must provide information describing the:

- A. Geographic boundaries of the community (urban or rural, physical environment)
- B. General demographic data (age, gender, ethnicity, etc.)
- C. General socioeconomic data (per capita income, poverty levels, unemployment, occupational data, etc.)
- D. General description of community-wide health status (e.g., key morbidity/mortality statistics)
- E. Priority Population for respondent's proposed project, including:
 1. Geographic service area (See [Form B](#));
NOTE: For a county to be considered a part of a clinic's designated service area: (1) there must be a clinic located in the county; or (2) at least five percent (5%) of the clinic population served in the previous 12 month period must have resided in the county.
 2. Characteristics of Priority Population (including demographic and socioeconomic data specific to each population)
 3. Priority Population health status (including population data related to health indicators, behavioral data, associated risk factors, and community opinion data)
 4. Current population served (characteristics, population data, numbers of individuals currently served, types and numbers of services provided)
- F. Respondent must identify gaps in resources and potential barriers to improving health status in the community and how respondent's proposed support services will address these issues.

2.3. Clinic Site Readiness

Respondent must complete a Clinic Site Readiness ([Form K](#)) assessment for each clinic site that will provide HTW support services funded through this RFP.

The Clinic Site Readiness Assessment must address the following:

- A. Appropriate signage
- B. Space for clinical and administrative functions
- C. Secure storage of records and medical supplies
- D. Disposal of medical waste
- E. CLIA certification

- F. Accessibility
- G. Emergency policies
- H. Interpreter policies
- I. Compliance with ADA
- J. Financial management systems

Respondent must also provide the requisite "Clinic Site Information" and "Clinic Hours and Services" information contained on [Form K-1](#) for each clinic that will provide HTW services funded through this RFP.

2.4. Staff Development Plan

Respondent must conduct staff development activities to ensure staff has the knowledge, skills and abilities to provide HTW services and meet the required Program Components. Respondent must provide a Staff Development Plan, see [Form L](#), that is comprehensive and addresses the following:

- A. Identification of personnel responsible for coordinating staff development activities including job titles and qualifications for each person identified;
- B. Identification of specific training for eligibility and billing staff;
- C. A description of how training needs assessments are conducted and how staff training activities are tied to quality management review findings; and
- D. A description of procedures and documentation for staff annual performance review. Respondent must specify how the staff development plan incorporates review outcomes to further develop knowledge, skills, and abilities to provide HTW services.

Respondent must also develop a "Staff Development Training Calendar" in accordance with the following requirements (see [Form L-1](#)):

- A. Training twice a year on current LARC practice guidelines. However, if specific LARC methods are provided through referral only, respondent must include this information in the Staff Development Plan and respondent will be exempted from this training requirement for that specific LARC method;
- B. At least one training for frontline staff on HTW Program objectives, program eligibility, and HTW services to ensure clear communication to clients and presumptively eligible clients on Women's Health Services and Family Planning Services offered through the HTW Program; and
- C. Training twice a year to staff on HTW eligibility screening and HTW Program application procedures.

2.5. Community Education/Program Promotion Plan

Respondent must develop and implement an annual plan ([Form M](#)) to provide community education and program promotion to:

- A. Inform the public of its purpose and services;
- B. Enhance community understanding of its objectives;
- C. Disseminate basic Women's Health Services and Family Planning Services education including the benefits of LARC;

- D. Enlist community support; and
- E. Recruit potential clients for the HTW Program.

The plan must be based on an assessment of the needs of the community required in subsection 2.2, above.

The Community Education/Program Promotion Plan must be comprehensive and it must describe each of the following topics:

1. Respondent’s HTW Program promotion/education/Outreach plan for the contract period; and
2. Respondent’s community education/HTW Program promotion collaborative efforts carried out in conjunction with other health care providers or social service agencies in the proposed service area. Respondent must include a description of the Outreach plan detailing media releases and Outreach strategies for marketing the respondent to the community.

Respondent must provide a calendar of the proposed community education/HTW Program promotion for the contract period. The calendar must include information regarding topics, presentation-dates, locations, and presenters.

2.6 Reporting Requirements

The selected contractors must adhere to the following reporting requirements to ensure contract obligations have been met. The reports will assist HHSC with tracking progress towards objectives; evaluating and validating performance; ensuring adherence to policy; and ensuring availability and access to services.

HHSC may review, approve, or require modifications to the reporting requirements at its discretion. The agreed upon format will be determined prior to submission of the required report. Contractors will be provided with reporting templates post-award.

Respondent must propose goals and objectives as required in [Form I](#), “Work Plan.” Selected contractors will be required to report on whether they attained the goals and objectives they proposed on Form I on an annual basis.

Program Component	Reporting Period	Reporting Due Date
1. Program Administration and Management Update	Annually	On or before September 30, 2017.
2. Quality Assurance/Quality Improvement	Annually	On or before September 30, 2017.
3. Professional Development	Annually	On or before September 30, 2017.
4. Recruitment	Annually	On or before September 30, 2017.
5. Long-Acting Reversible Contraception (LARC) Usage	Annually	On or before September 30, 2017.

The selected contractors will be required to report on Staff Development activities included in the Staff Development calendar on an annual basis. The information contained in these reports must, at a minimum, include: topic, presenter (including credentials if applicable), dates, location, and the number of attendees.

Staff Development	Reporting Period	Reporting Due Date
Description of Staff Development Activities.	Annually	On or before September 30, 2017

Selected contractors will be required to report on community education and program promotion activities by providing a Community Education/Program Promotion calendar in accordance with requirements set forth in Form M, "Community Education/Program Promotion Plan. Selected contractors are required to report on activities included in their Community Education/HTW Program Promotion calendar on an annual basis. The information contained in these reports must, at a minimum, include: topics, presenter (including credentials if applicable), dates, location, and the number of attendees.

Community Education/Program Promotion	Reporting Period	Reporting Due Date
Description of Community Education/Program Promotion Activities.	Annually	On or before September 30, 2017

2.7 Budget Requirements and Monthly Cost Reimbursement Process

A. Proposed Budget Requirements:

In accordance with the requirements contained in Forms F, F-1 through F-7, respondent must develop a categorical budget, where costs may be allocated to any of the following categories the respondent identifies during its budget development process:

1. Personnel
2. Fringe Benefits
3. Travel
4. Equipment
5. Supplies
6. Contractual
7. Other
8. Indirect Costs

NOTE: Indirect costs are costs incurred for a common or joint purpose benefiting more than one project or cost objective of respondent's organization and not readily identified with a particular project or cost objective. Typical examples of Indirect Costs may include general administration and general expenses such as salaries and expenses of executive officers, personnel administration and accounting; depreciation or use allowances on buildings and equipment; and costs of operating and maintaining facilities.

Respondent must base their budget and funding request on the Scope of Work. This section should include any business, economic, legal, programmatic, or practical assumptions that underlie respondent's funding request. HHSC reserves the right to accept or reject any assumptions. All assumptions not expressly identified and incorporated into the contract resulting from this RFP are deemed rejected by HHSC.

Respondent must separately identify value-added benefits, cost-savings and cost-avoidance methods and measures, and the effect of such methods on the budget, requested funding, and Scope of Work.

B. Monthly Cost Reimbursement Process

HTW contractors will seek reimbursement for project costs by submitting monthly vouchers for expenses outlined in a categorical budget approved by HHSC as required for the cost reimbursement portion of the HTW Program.

HTW funds will be disbursed to contractors through a voucher system as expenses are incurred during the contract term.

Reimbursement must be requested by using a purchase voucher and providing supporting documentation. Vouchers and supporting documentation must be submitted monthly, within 30 days following the end of the month in which the costs were incurred.

Program income from the HTW Fee-for-Service Program claims payment must be expended before HTW cost reimbursement funds are requested through the voucher process. Contractors will be required to submit monthly vouchers even if program income equals or exceeds program expenses. When program expenses exceed program income, the monthly voucher will result in a payment up to the not-to-exceed amount of the contract.

2.8 Funding Request and Clients Served

On [\(Form H\)](#), a respondent must propose the amount of cost reimbursement funding, which must be based on the total cost of providing support services and conducting activities that enhance the clinical outcomes of HTW Fee-for-Service Program clients. Respondent must estimate the number of Unduplicated Clients that will be served during the term of the contract.

NOTE: Selected contractors who, at the time of contract commencement, are not yet enrolled as Texas Medicaid Providers for the HTW Program will be allowed to provide support services for clients and women deemed presumptively eligible for participation in the HTW Program. The services may only be provided in clinics that are assessed to be ready on Form K. All direct clinical services provided that qualify for payment under the HTW Fee-for-Service Program must, upon enrollment as a Texas Medicaid Provider, be charged to the HTW Fee-for-Service portion of the HTW Program prior to a contractor seeking reimbursement under the contract resulting from this procurement. In the event those services are not paid under the HTW Fee-for-Service portion of the HTW Program, a contractor may then submit those costs for reimbursement under the contract resulting from this procurement.

3. General Instructions and Proposal Requirements

3.1. Vendor Conference

HHSC will hold a vendor conference on **April 1, 2016 at 9:00 A.M. (CST)** located at **909 W. 45th Street, Austin, TX 78756, Building 2-Room 164**; Teleconference information: **1-877-226-9790**, access code: **8802578#**. Those that plan to listen-in may submit their questions prior to the conference via email by **5:00 P.M. (CST), March 30, 2016**, to the designated RFP Point of Contact mailbox mahsa.azadi@hhsc.state.tx.us. Questions will not be accepted over the phone during the vendor conference. Vendor conference attendance is strongly recommended, but is not required.

Respondents must email questions for the conference to the HHSC Point of Contact ([see Section 1.2](#)) no later than three (3) days before the conference. HHSC will also give respondents the opportunity to submit written questions at the conference. All questions must reference the appropriate RFP page and section

number. HHSC will attempt to respond to questions at the vendor conference, but responses are not official until posted in final form on the ESBD.

People with disabilities who wish to attend the meeting and require auxiliary aids or services should contact the sole point of contact identified in the HHS RFP/solicitation at least 72 hours before the meeting so appropriate arrangements can be made.

3.2. Modification or Withdrawal of Proposal

Prior to the proposal submission deadline set forth in [Section 1.3](#), a respondent may: (1) withdraw its proposal by submitting a written request to the HHSC Point of Contact; or (2) modify its proposal by submitting a written amendment to the HHSC Point of Contact. HHSC may request proposal modifications at any time.

In accordance with TAC Rules, HHSC reserves the right to waive minor irregularities or genuine mistakes in a proposal and award a contract that is in the best interest of the State of Texas. HHSC may waive a minor irregularity or permit a respondent to correct a minor irregularity in a response, if the irregularity: (1) is purely a matter of form rather than substance; and (2) does not affect price, quality, or delivery of the desired goods or services.

3.3. Multiple Responses

A respondent may only submit one proposal as a prime contractor. If a respondent submits more than one proposal, HHSC may reject one or more of the submissions. This requirement does not limit a subcontractor's ability to collaborate with one or more respondents submitting proposals.

3.4. No Joint Proposals

HHSC will not consider joint or collaborative proposals that require it to contract with more than one respondent.

3.5. Use of Subcontractors

Subcontractors providing services under the contract shall meet the same requirements and level of experience as required of the respondent. No subcontract under the contract shall relieve the respondent of the responsibility for ensuring the requested services are provided. Respondents planning to subcontract all or a portion of the work to be performed shall identify the proposed subcontractors.

3.6. Texas Public Information Act

General Requirement for the Release of Proposals

Proposals will be subject to the Texas Public Information Act (the Act), located in Texas Government Code [Chapter 552](#) and may be disclosed to the public upon request. Subject to the Act, respondents may protect trade secret and confidential information from public release. If the respondent asserts that information provided in the proposal is trade secrets or other confidential information, each page containing confidential information must be clearly marked with the words "confidential" or "trade secret" at top of the page. Furthermore, the respondent must identify trade secret or confidential information, and provide an explanation of why the information is exempted from public disclosure, on the [Respondent Information and Disclosures](#) form.

HHSC will process any request from a member of the public in accordance with the procedures outlined in the Act. Respondents should consult the Texas Attorney General's website (www.oag.state.tx.us) for information concerning the Act's application to proposals and potential exceptions to disclosure.

Publication of Major Contracts

In accordance with Texas Government Code [§322.020](#), HHSC will provide copies of “major contracts” to the Legislative Budget Board (LBB). If the contract resulting from this procurement falls within the Texas Government Code [§322.020](#) definition of a “major contract,” the LBB will provide the public with access to all contract documents. This includes the proposal, unless the respondent can demonstrate that all or part of the proposal is excepted from disclosure under the Texas Public Information Act. In such cases, the respondent will be responsible for preparing, for HHSC’s approval, an appendix that describes the exempt information contained in the proposal without disclosing its content, as required by Texas Government Code [§322.020\(d\)](#).

3.7. Instructions for Submitting Proposals

Number of Copies

Respondent must submit the following:

Submit one (1) original and four (4) copies of the proposal. An authorized representative must sign the original in ink. In addition, one (1) electronic copy of the entire proposal on a USB flash drive compatible with Microsoft Office 2013. USB flash drives must contain all sections of the RFP along with the other required documents. The USB drives must be organized with files that correspond to Respondent’s Original bound proposal. USB should contain copies of all signature documents. The electronic copy must be organized with a file format that corresponds with *Section 3.8, Format and Content*, of the RFP. HHSC will not accept PDF format, telephone, or facsimile proposals. Any disparities between the contents of the original printed proposal and the electronic proposal will be interpreted in favor of HHSC.

Submission

Respondent must submit all copies of the proposal to HHSC PCS Division no later than **2:00 PM (CST)** on **April 21, 2016**. All submissions will be date and time stamped when received by PCS. The clock in the PCS office is the official timepiece for determining compliance with the deadlines in this procurement. HHSC reserves the right to reject late submissions. It is the respondent’s responsibility to appropriately mark and deliver the proposal to HHSC by the specified date.

Physical Address for hand delivery and overnight and commercial mail:

HHSC Procurement and Contracting Services Division
Bid Room
Attn: Mahsa Azadi, Procurement Project Manager
1100 W. 49th Street, MC 2020
Service Building (Building S)
Austin, Texas 78756

All proposals become the property of HHSC after submission.

All proposals must be:

- A. clearly legible
- B. sequentially page-numbered and include the respondent's name at the top of each page;
- C. organized in the sequence outlined in Section 3.8;
- D. bound in a notebook or cover;
- E. Correctly identified with the RFP number and submittal deadline;
- F. responsive to all RFP requirements;
- G. Typed on 8 ½" by 11" paper;
- H. In Arial or Times New Roman font, size 12 for normal text, no less that size

10 for tables, graphs and appendices; and

- Proposals may not include materials or pamphlets not specifically requested in this RFP.

3.8. Format and Content

The proposal must contain the respondent's Business Proposal, which must include the following sections:

- Section 1 – Executive Summary
- Section 2 -- Completed Forms A - M:
 - Form A: Proposal Table of Contents and Checklist
 - Form B: Texas Counties and Regions List Served By Project
 - Form C: Contact Person Information
 - Form D: Healthy Texas Women Certification
 - Form E-1: Governmental Entity
 - Form E-2: Non-Profit or For-Profit Entity
 - Form F: Budget Summary & Details
 - Form G: Respondent Background
 - Form H: Funding Request and Performance Measures
 - Form I: Work Plan
 - Form J: Assessment Narrative
 - Form K: Healthy Texas Women Clinic Site Readiness
 - Form K-1: Healthy Texas Women Clinic Sites
 - Form L: Staff Development Plan
 - Form L-1: Staff Development Training Calendar
 - Form M: Community Education/Program Promotion Plan
- Section 3 – Value-added Benefits
- Section 4 – Assumptions
- Section 5 – Appendices
- Section 6 – HUB Subcontracting Plan
- Section 7 – Certifications and Other Required Forms contained in [Appendix D](#)

3.8.1.1. Section 1 – Executive Summary

In this section, condense and highlight the content of the Business Proposal to provide HHSC with a broad understanding of the respondent's approach to meeting the RFP's business requirements. The summary must demonstrate an understanding of HHSC's goals and objectives for this procurement.

3.8.1.1.1. Financial Capacity

Respondents are not required to submit evidence of financial capacity with their proposals. HHSC reserves the right to request such information at a later date.

3.8.1.1.2. Corporate Guarantee

If the respondent is substantially or wholly owned by another corporate (or other) entity, HHSC reserves the right to request that such entity unconditionally guarantee performance by the respondent in each and every term, covenant, and condition of the contract as executed by the parties.

3.8.1.1.3. Bonding

HHSC reserves the right to require the respondent to procure one or more performance, fidelity, payment or other bond, if during the term of the contract; HHSC in its sole discretion determines that there is a business need for such requirement.

3.8.1.2. Section 2 – Completed Forms A - M

Respondent must provide the requested information for each form required in this section as it pertains to the support services and program components for the HTW Program being procured in this RFP.

3.8.1.3. Section 3 – Value-added Benefits

Describe any services or deliverables that are not required by the RFP that the respondent proposes to provide at no additional cost to HHSC. Respondents are not required to proposed value-added benefits, but inclusion of such benefits may result in a more favorable evaluation.

3.8.1.4. Section 4 – Assumptions

State any business, economic, legal, programmatic, or practical assumptions that underlie the respondent's response to the Business Proposal. HHSC reserves the right to accept or reject any assumptions. All assumptions not expressly identified and incorporated into the contract resulting from this RFP are deemed rejected by HHSC.

A proposal should be responsive to the RFP as worded, not with any assumption that any or all terms, conditions, or provisions of the RFP will be negotiated. Furthermore, all proposals constitute binding offers. Any proposal that includes any type of disclaimer or other statement indicating that the proposal does not constitute a binding offer will be disqualified.

3.8.1.5. Section 5 – Appendices

Respondents are not required to submit appendices to the Business Proposal.

3.8.1.6. Section 6 – HUB Subcontracting Plan

Submit one (1) copy of the HUB Subcontracting Plan (HSP), in accordance with the RFP, in a separate sealed envelope, with the RFP submission, labeled: HUB Subcontracting Plan (HSP), and include all supporting documentation in accordance with the HSP.

3.8.1.7. Section 7 – Certifications and Other Required Forms

Respondent must submit the following required forms—completed and signed—which are contained in [Appendix D](#), with their proposals:

- [Child Support Certification](#);
- [Debarment, Suspension, Ineligibility, and Voluntary Exclusion of Covered Contracts](#);
- [Required Certifications](#);
- [Federal Lobbying Certification](#);
- [Anti-Trust Certification](#); and
- [Respondent Information and Disclosures](#).

The required forms are also located on HHSC's website, under the [HHSC Business Opportunities Webpage](#). HHSC encourages respondents to carefully review all of these forms and submit questions regarding their completion prior to the deadline for submitting questions ([see Section 1.3](#)).

3.9. News Releases

Prior to final award, a vendor may not issue a press release or provide any information for public consumption regarding its participation in the procurement. Requests should be directed to the HHSC Point of Contact identified in [Section 1.2](#).

This Section 3.10 does not preclude business communications necessary for a Respondent to develop a proposal or required reporting to shareholders or governmental authorities.

3.10. Incomplete Proposals

HHSC may reject without further consideration a proposal that does not include a complete, comprehensive, or total solution as requested by the RFP.

3.11. State Use of Ideas

HHSC reserves the right to use any and all ideas presented in a proposal unless the respondent presents a valid legal case that such ideas are trade secret or confidential information, and identifies the information as such in its proposal (see Section 3.13). A respondent may not object to the use of ideas that are not the respondent's intellectual property and so designated in the proposal that: (1) were known to HHSC before the submission of the proposal; (2) were in the public domain through no fault of HHSC; or (3) became properly known to HHSC after proposal submission through other sources or through acceptance of the proposal.

3.12. Property of HHSC

Except as otherwise provided in this RFP or the resulting contract, all products produced by a respondent, including without limitations the proposal, all plans, designs, software, and other contract deliverables, become the sole property of HHSC.

3.13. Copyright Restriction

HHSC will not consider any proposal that bears a copyright.

3.14. Additional Information

By submitting a proposal, the respondent grants HHSC the right to obtain information from any lawful source regarding the respondent's and its directors', officers', and employees': (1) past business history, practices, and conduct; (2) ability to supply the goods and services; and (3) ability to comply with contract requirements. By submitting a proposal, a respondent generally releases from liability and waives all claims against any party providing HHSC information about the respondent. HHSC may take such information into consideration in evaluating proposals.

4. Historically Underutilized Business Participation

It is the policy of the Health and Human Services' (HHS) HUB Program Office to include the HUB Subcontracting Plan (HSP), when subcontracting opportunities are probable and a contract has an expected value of \$100,000 or more over and the HSP is applicable for the life of the contract including any subsequent amendments and renewals related to the original HSP.

In addition to, and in accordance with, Texas Administrative Code Title 34, Part 1, Chapter 20, Subchapter B, Rule §20.14, when the contractor is selected and decides to subcontract any part of the contract after the award, as a provision of the contract, the contractor must comply with the HSP provisions relating to developing and submitting a revised HSP before any modifications or performance in the awarded contract involving subcontracting can be authorized by the state agency.

HHSC has determined that subcontracting opportunities are probable for this RFP. As a result, the respondent must submit an HSP with its proposal. The HSP is required whether a respondent intends to subcontract or not.

In accordance with Texas Government Code §2161.252, a proposal that does not contain a HUB Subcontracting Plan (HSP) is non-responsive and will be rejected without further evaluation. In addition, **if HHSC determines that the HSP was not developed in good faith, it will reject the proposal for failing to comply with material RFP specifications.**

4.1. Introduction

The sole point of contact for HUB inquires:

Texas Health and Human Services Commission
John Wesley Smith, HUB Coordinator
Phone: (512) 406-2536
E-mail: John.Wesley.Smith@hhsc.state.tx.us

HHSC is committed to promoting full and equal business opportunities for businesses in state contracting in accordance with the goals specified in the State of Texas Disparity Study. HHSC encourages the use of Historically Underutilized Businesses (HUBs) through race, ethnic and gender-neutral means. HHSC has adopted administrative rules relating to HUBs and a Policy on the Utilization of HUBs which is located on HHSC's website.

Pursuant to Texas Government Code [§2161.181](#) and [§2161.182](#) and HHSC's HUB policy and rules, HHSC is required to make a good faith effort to increase HUB participation in its contracts. HHSC may accomplish the goal of increased HUB participation by contracting directly with HUBs or indirectly through subcontracting opportunities.

4.2. HHSC's Administrative Rules

HHSC has adopted the Comptroller of Public Accounts' (CPA) HUB rules as its own. HHSC's rules are located in the Texas Administrative Code [Title 1, Part 15, Chapter 391, Subchapter G](#) and the CPA rules are located in Texas Administrative Code [Title 34, Part 1, Chapter 20, Subchapter B](#). If there are any discrepancies between HHSC's administrative rules and this RFP, the rules shall take priority.

4.3. Statewide Annual HUB Utilization Goal

The CPA has established **statewide annual HUB utilization goals** for different categories of contracts in Texas Administrative Code [Title 34, Part 1, Chapter 20, Subchapter B, §20.13](#) of the HUB rules. In order to meet or exceed the **statewide annual HUB utilization goals**, HHSC encourages Outreach to certified HUBs. Contractors shall make a good faith effort to include certified HUBs in the procurement process.

This procurement is classified as an **All Other Services** procurement under the CPA rule and therefore has a **statewide annual HUB utilization goal** of **26.0%** per fiscal year.

4.4. Required HUB Subcontracting Plan

In the HSP, a respondent must indicate whether it is a Texas certified HUB. Being a certified HUB does not exempt a respondent from completing the HSP requirement.

HHSC shall review the documentation submitted by the respondent to determine if a good faith effort has been made in accordance with solicitation and HSP requirements. During the good faith effort evaluation, HHSC may, at its discretion, allow revisions necessary to clarify and enhance information submitted in the original HSP.

If HHSC determines that the respondent's HSP was not developed in good faith, the HSP will be considered non-responsive and will be rejected as a material failure to comply with advertised specifications. The reasons for rejection shall be recorded in the procurement file.

4.5. CPA Centralized Master Bidders List

Respondents may search for HUB subcontractors in the CPA's Centralized Master Bidders List (CMBL) HUB Directory, which is located on the CPA's website at <http://www2.cpa.state.tx.us/cmb/cmbhub.html>. For this procurement, HHSC has identified the following class and item codes for potential subcontracting opportunities:

National Institute of Governmental Purchasing (NGIP) Class/Item Code(s):

- **924-16: Laboratory Testing Services**
- **918-88: Quality Assurance Services**
- **948-47: Care Center Services, Health**
- **948-48: Drug Monitoring Services, International; Ethics & Code of conduct, Medical, Euthanasia; Faith Healers**
- **948-55: Laboratory Services; Non-Physician**
- **948-74: Physician Professional Services**
- **952-62: Mental Health Services**
- **952-88: Teen Pregnancy Services**
- **952-42: Family Planning**

Respondents are not required to use, nor are they limited to using, the class and item codes identified above, and may identify other areas for subcontracting. However, the NIGP class/item codes are preferred with all responses.

HHSC does not endorse, recommend nor attest to the capabilities of any company or individual listed on the CPA's CMBL. The list of certified HUBs is subject to change, so respondents are encouraged to refer to the CMBL often to find the most current listing of HUBs.

4.6. HUB Subcontracting Procedures – If a Respondent Intends to Subcontract

An HSP must demonstrate that the respondent made a good faith effort to comply with HHSC's HUB policies and procedures. The following subparts outline the items that HHSC will review in determining whether an HSP meets the good faith effort standard. A respondent that intends to subcontract must complete the HSP to document its good faith efforts.

4.6.1 Identify Subcontracting Areas and Divide Them into Reasonable Lots

A respondent should first identify each area of the contract work it intends to subcontract. Then, to maximize HUB participation, it should divide the contract work into reasonable lots or portions, to the extent consistent with prudent industry practices.

4.6.2 Notify Potential HUB Subcontractors

The HSP must demonstrate that the respondent made a good faith effort to subcontract with HUBs. The respondent's good faith efforts shall be shown through utilization of all methods in conformance with the development and submission of the HSP and by complying with the following steps:

Divide the contract work into reasonable lots or portions to the extent consistent with prudent industry practices. The respondent must determine which portions of work, including goods and services, will be subcontracted.

Select the appropriate method(s) to demonstrate good faith effort. The respondent can use either method(s) 1, 2, 3, 4 or 5:

4.6.2.1 Method 1: Respondent Intends to Subcontract with only HUBs:

The respondent must identify in the HSP the HUBs that will be utilized and submit written documentation that confirms 100% of all available subcontracting opportunities will be performed by one or more HUBs; **or**,

4.6.2.2 Method 2: Respondent Intends to Subcontract with HUB Protégé(s):

The respondent must identify in the HSP the HUB Protégé(s) that will be utilized and should:

- Include a fully executed copy of the Mentor Protégé Agreement, which must be registered with the CPA prior to submission to HHSC; and
- Identify areas of the HSP that will be performed by the Protégé.

HHSC will accept a Mentor Protégé Agreement that has been entered into by a respondent (Mentor) and a certified HUB (Protégé) in accordance with Texas Government Code §2161.065. When a respondent proposes to subcontract with a Protégé(s), it does not need to provide notice to three (3) HUB vendors for that subcontracted area.

Participation in the Mentor Protégé Program, along with the submission of a Protégé as a subcontractor in an HSP, constitutes a good faith effort for the particular area subcontracted to the protégé; **or**,

4.6.2.3 Method 3: Respondent Intends to Subcontract with HUBs and Non-HUBs (Meet or Exceed the Goal):

The respondent must identify in the HSP and submit written documentation that one or more HUB subcontractors will be utilized and that the aggregate expected percentage of subcontracts with HUBs will meet or exceed the goal specified in this solicitation. When utilizing this method, only HUB subcontractors that have existing contracts with the respondent for five years or less may be used to comply with the good faith effort requirements.

When the aggregate expected percentage of subcontracts with HUBs meets or exceeds the goal specified in this solicitation, respondents may also use non-HUB subcontractors; **or**,

4.6.2.4 Method 4: Respondent Intends to Subcontract with HUBs and Non-HUBs (Does Not Meet or Exceed the Goal):

The respondent must identify in the HSP and submit documentation regarding both of the following requirements:

- Written notification to trade organizations and/or development centers to assist in identifying potential HUBs of the subcontracting opportunities the respondent intends to subcontract.

Respondents must give trade organizations and/or development centers at least seven (7) working days prior to submission of the respondent's response for dissemination of the subcontracting opportunities to their members. A list of trade organizations and/or development centers is located on CPA's website under the [Minority and Women Organization Links](#).

- Written notification to at least three (3) HUB businesses of the subcontracting opportunities that the respondent intends to subcontract. The written notice must be sent to potential HUB subcontractors prior to submitting proposals and must include:
 - a description of the scope of work to be subcontracted;
 - information regarding the location to review project plans or specifications;
 - information about bonding and insurance requirements;
 - required qualifications and other contract requirements; and
 - a description of how the subcontractor can contact the respondent.
- Respondents must give potential HUB subcontractors a reasonable amount of time to respond to the notice, at least seven (7) working days prior to submission of the respondent's response unless circumstances require a different time period, which is determined by the agency and documented in the contract file.
- Respondents must also use the CMBL, the HUB Directory, and Internet resources when searching for HUB subcontractors. Respondents may rely on the services of contractor groups, local, state and federal business assistance offices, and other organizations that provide assistance in identifying qualified applicants for the HUB program.

4.6.3 Written Justification of the Selection Process

HHSC will make a determination if a good faith effort was made by the respondent in the development of the required HSP. One or more of the methods identified in the previous sections may be applicable to the respondent's good faith efforts in developing and submission of the HSP. HHSC may require the respondent to submit additional documentation explaining how the respondent made a good faith effort in accordance with the solicitation.

A respondent must provide written justification of its selection process if it chooses a non-HUB subcontractor. The justification should demonstrate that the respondent negotiated in good faith with qualified HUB bidders and did not reject qualified HUBs who were the best value responsive bidders.

4.7 Method 5: Respondent Does Not Intend to Subcontract

When the respondent plans to complete all contract requirements with its own equipment, supplies, materials and/or employees, it is still required to complete an HSP.

The respondent must complete the "Self Performance Justification" portion of the HSP, and attest that it does not intend to subcontract for any goods or services, including the class and item codes identified in [Section 4.5](#). In addition, the respondent must identify the sections of the proposal that describe how it will complete the Scope of Work using its own resources or provide a statement explaining how it will complete the Scope of Work using its own resources. The respondent must agree to comply with the following if requested by HHSC:

- provide evidence of sufficient respondent staffing to meet the RFP requirements;
- provide monthly payroll records showing the respondent staff fully dedicated to the contract;
- allow HHSC to conduct an on site review of company headquarters or work site where services are to be performed; and

- provide documentation proving employment of qualified personnel holding the necessary licenses and certificates required to perform the Scope of Work.

4.8 Post-award HSP Requirements

The HSP shall be reviewed and evaluated prior to contract award and, if accepted, the finalized HSP will become part of the contract with the successful respondent(s).

After contract award, HHSC will coordinate a post-award meeting with the successful respondent to discuss HSP reporting requirements. The contractor must maintain business records documenting compliance with the HSP and must submit monthly subcontract reports to HHSC by completing the HUB HSP [Prime Contractor Progress Assessment](#). This monthly report is required as a condition for payment to report to the agency the identity and the amount paid to all subcontractors.

As a condition of award, the Contractor is required to send notification to all selected subcontractors as identified in the accepted/approved HSP. In addition, a copy of the notification must be provided to the agency's Contract Manager and/or HUB Program Office within 10 days of the contract award.

During the term of the contract, if the parties in the contract amend the contract to include a change to the scope of work or add additional funding, HHSC will evaluate to determine the probability of additional subcontracting opportunities. When applicable, the Contractor must submit an HSP change request for HHSC review. The requirements for an HSP change request will be covered in the post-award meeting.

When making a change to an HSP, the Contractor will obtain prior written approval from HHSC before making any changes to the HSP. Proposed changes must comply with the HUB Program good faith effort requirements relating to the development and submission of a HSP.

If the Contractor decides to subcontract any part of the contract after the award, it must follow the good faith effort procedures outlined in [Section 4](#) of this RFP (e.g., divide work into reasonable lots, notify at least three (3) vendors per subcontracted area, provide written justification of the selection process, and/or participate in the Mentor Protégé Program).

For this reason, HHSC encourages respondents to identify, as part of their HSP, multiple subcontractors who are able to perform the work in each area the respondent plans to subcontract. Selecting additional subcontractors may help the selected contractor make changes to its original HSP, when needed, and will allow HHSC to approve any necessary changes expeditiously.

Failure to meet the HSP and post-award requirements will constitute a breach of contract and will be subject to remedial actions. HHSC may also report noncompliance to the CPA in accordance with the provisions of the Vendor Performance and Debarment Program.

5. Proposal Evaluation

HHSC will use a formal evaluation process to select the successful respondent(s). HHSC will consider capabilities or advantages that are clearly described in the proposal, which may be confirmed by oral presentations, site visits, demonstrations, and/or references contacted by HHSC. HHSC reserves the right to contact individuals, entities, or organizations that have had dealings with the respondent or proposed staff, whether or not identified in the proposal.

HHSC will more favorably evaluate proposals that offer no or few exceptions, reservations, or limitations to the terms and conditions of the RFP, including the UTCs and the HHSC Special Conditions. Further, any exception included in a proposal may result in a respondent not being awarded a contract.

5.1 Evaluation Criteria

HHSC will evaluate proposals based on the following criteria to determine best value, in accordance with the [Title 1 Texas Administrative Code Part 15, Chapter 391, Subchapter B, §391.207](#).

Description	Weights
Required Program Components (Project Work Plan)	30
Corporate Background and Experience	25
Assessment Narrative	10
Budget, Funding Request, and Clients Served	13
Clinic Site Readiness	6
Staff Development Plan	8
Community Education and Program Promotion Plan	8

5.2 Initial Compliance Screening

HHSC will perform an initial screening of all proposals received. Unsigned proposals and proposals that do not include all required forms and sections will be rejected without further evaluation and will result in automatic disqualification.

A respondent that does not meet the eligibility requirements contained in Section 1.6 will have their proposal rejected and disqualified without further evaluation.

HHSC reserves the right to disqualify a respondent that takes numerous or substantive exceptions to the UTCs and/or the HHSC Special Conditions. Exceptions not contained on the Respondent's Information and Disclosures form will not be considered by HHSC and will be deemed rejected.

In accordance with Section 3.2, HHSC reserves the right to waive minor irregularities or genuine mistakes in a proposal and award contracts that are in the best interest of the State of Texas.

5.3 Competitive Range Determinations

HHSC may determine which proposals are within the competitive range to be considered for negotiation and possible contract award. The competitive range consists of proposals that receive the highest or most satisfactory ratings, based on the published evaluation criteria and procedures that govern the procurement. HHSC may, in the interest of administrative efficiency, place reasonable limits on the number of proposals that will be included in the competitive range.

5.4 Oral Presentations and Site Visits

HHSC may, at its sole discretion, request oral presentations, site visits, and/or demonstrations from one or more respondents included in the competitive range. HHSC will notify selected respondents of the time and location for these activities.

The respondent's oral presentation, site visit, and/or demonstration must substantially represent material included in the written proposal, and should not introduce new concepts or offers unless specifically requested by HHSC.