

ADDENDUM II

March 8, 2013

RFA# 1209120315

New York State Department of Health
Center for Community Health
Division of Chronic Disease Prevention
Bureau of Chronic Disease Control

Request for Applications

Integrated Breast, Cervical and Colorectal Cancer Screening Program

Attachment Revisions

New versions of the following attachments have been developed and posted along with the Request for Applications (RFA). Applicants are encouraged to use the attachments, dated 3.05.13, which resolve technical issues, allow text being entered by the applicant to continue onto additional pages, remove the automatic underlining of text which could not be deleted and increases page numbers.

Attachment 6 - Comprehensive Health Foods Policy Status and Intent Attestation. The document has been updated to remove underlines. Applicants should type text in the gray form field boxes that are provided in the document.

Attachment 11 - Application Checklist. The document has been updated to remove underlines. Applicants should type text in the gray form field boxes that are provided in the document.

Attachment 12 – Application Cover Page. The document has been updated to remove underlines. Applicants should type text in the gray form field boxes that are provided in the document.

Attachment 13 – Workplan Template. The form has been updated. Applicants should NOT complete the column for the year-end report as part of their applications. This column will be used as part of the reporting requirement for those applicants awarded contracts.

Attachment 17 - Vendor Responsibility Attestation. The document has been updated to remove underlines. Applicants should type text in the gray form field boxes that are provided in the document.

RFA Modifications

Revisions to the RFA have been made as the result of the official response to submitted questions. Question numbers are provided for your reference and applicants are encouraged to review the official Questions and Answer document posted as a separate document.

(Questions 38 and 39)

Page 24

IV. Completing the Application

(5) Technical proposal

Component A Maximum 10 pages

Component B Maximum 13 pages

Maximum score: 42 points

(Questions 38 and 39)

Page 28

IV. Completing the Application

(6) Work Plan

Component A Maximum 15 pages

Component B Maximum 18 pages

Maximum score: 14 points

(Question 21)

Page 24

IV. Completing the Application

(5) Technical proposal

- ii. Describe how the applicant organization will implement all transition and start-up activities prior to initiation of cancer screening services, per the Contractor Start-up Checklist ([Attachment 9](#)); describe how the required transition and start-up activities will be implemented, who will implement them and the timeframe for completion of all activities. **The Contractor Start-up Checklist (Attachment 9) does not need to be submitted with the application. New contractors will be expected to complete this as part of post-award process.**

(Question 40)

Page 35 – B. Application Format

Applications should not exceed 42 double spaced pages (not including cover page, summary, budget pages and attachments), numbered consecutively (including attachments), be typed using a **Times New Roman** 12-point font and have one-inch margins on all sides. Applicant identification should be inserted in the header (or marked field on supplied forms) to state applicant name and RFA#1209120315.

Document templates for the work plan, budget and budget justification are provided as Attachments [13](#) and [15](#). Applicants should complete the work plan (using the instructions provided in [Attachment 14](#)), budget and budget justification documents as part of the hard copy application, but are encouraged to save electronic versions of these completed templates. The NYSDOH may request that electronic copies of these documents be submitted by successful applicants upon notice of award. Failure to follow these guidelines will result in a deduction of up to 5 points.

(Questions 38 and 39)

Page 35 – B. Application Format

Reviewers will base scoring on the page limits and maximum points indicated below for each section.

Cover Page	1 Page	Maximum Score: N/A – Not Scored
Summary of the Application	2 Pages or Less	Maximum Score: N/A – Not Scored
Service Region/Population to be Served	3 Pages or Less	Maximum Score: 8 points
Applicant Organization	4 Pages or Less	Maximum Score:10 points
Technical Proposal Component A	10 Pages or Less	Maximum Score:42 points
Technical Proposal Component B	13 Pages or Less	Maximum Score:42 points
Work Plan* Component A	15 Pages or Less	Maximum Score:14 Points
Work Plan* Component B	18 Pages or Less	Maximum Score:14 Points
Letters of Collaboration	10 Pages or Less	Maximum Score:6 Points
Budget and Justification*	N/A	Maximum Score:20 Points

* Work Plan and Budget and Justification should use templates provided as Attachments [13](#) and [15](#).

(Questions 9,11,13,14, and 16) Revision below clarifies text.

Pages 51,52, and 53. Attachment 2 - Service Areas

Column 5, Estimated Number of **Eligible** People to ~~be Screened~~ **Receive Comprehensive Screening and Diagnostic Services** for 9 Month Period

A Revision to the page below corrects text (typographical error on last line).

Page 16

4. Provision of Health Services: Screening, Diagnostic and Case Management Activities

- Establish and monitor systems for:
 - Conducting intake activities and program eligibility assessment for new clients for guideline-concordant breast, cervical and colorectal cancer screening. This may be accomplished through a centralized, decentralized, or combined centralized and decentralized intake model. In a centralized intake model, lead organization staff identify potential clients and act as the first point of contact, assess eligibility, conduct client intake, complete intake forms, schedule appointments and conduct other related administrative tasks. In a decentralized intake model, client identification, eligibility assessment, intake, form completion, scheduling and other administrative tasks take place at many different sites including the lead organization, individual providers, partner organizations, etc. Additional consideration will be given to applicants proposing a more centralized process where the majority of intake is done at a central location and not primarily dispersed among participating providers. Intake systems will include provisions for ensuring client information and signed consent forms, as required by NYSDOH, are obtained prior to the provision of services. Eligibility assessment systems will include documentation that eligibility criteria have been reviewed for each client. It is expected that at least 75% of clients screened through the program will be **ages** 50 through 64.