



Department of Health

Request for Proposals

RFP # 18047

Independent Evaluation of the New York Tobacco Control Program

Issued: October 18, 2018

DESIGNATED CONTACT:

Pursuant to State Finance Law §§ 139-j and 139-k, the Department of Health identifies the following designated contact to whom all communications attempting to influence the Department of Health's conduct or decision regarding this procurement must be made.

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PERMISSIBLE SUBJECT MATTER CONTACT:

Pursuant to State Finance Law § 139-j(3)(a), the Department of Health identifies the following allowable contact for communications related to the submission of written proposals, written questions, pre-bid questions, and debriefings.

1. Submission of Written Questions

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2. Submission of Proposal

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3. Request for Debriefing

Email Address: tcp@health.ny.gov

4. Negotiation of Contract Terms After Award

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1.0 CALENDAR OF EVENTS

RFP 18047 INDEPENDENT EVALUATION OF THE NEW YORK TOBACCO CONTROL PROGRAM	
<u>EVENT</u>	<u>DATE</u>
Issuance of Request for Proposals	10/18/2018
Deadline for Submission of Written Questions	11/8/2018 5:00 p.m. ET
Responses to Written Questions Posted by DOH	On or About 11/27/2018
Deadline for Submission of Proposals	12/14/2018 4:00 p.m. ET
<u>Anticipated</u> Contract Start Date	10/1/2019

2.0 OVERVIEW

Through this Request for Proposals (“RFP”), the New York State (“State”) Department of Health (“DOH”) is seeking competitive proposals from qualified vendors to conduct an independent evaluation of the New York State Tobacco Control Program (TCP) as required by Public Health Law (HCRA 2000, Public Health Law Section 1399-jj) and as further detailed in [Section 4.0](#) (Scope of Work). “The purpose of this evaluation is to direct the most efficient allocation of State resources devoted to tobacco education, and cessation to accomplish the maximum prevention and reduction of tobacco use among minors and adults. Such evaluation shall be provided to the governor, the majority leader of the senate and the speaker of the assembly on or before September first, two thousand one, and annually on or before such date thereafter. The comprehensive evaluation design shall be guided by the following: sound evaluation principles including, to the extent feasible, elements of controlled experimental methods; an evaluation of the comparative effectiveness of individual program designs which shall be used in funding decisions and program modifications; and an evaluation of other programs identified by state agencies, local lead agencies, and federal agencies.” The evaluation of TCP should adhere to the general guidelines for evaluation of tobacco control programs provided by such documents as the Centers for Disease Control and Prevention’s (CDC) *Introduction to Program Evaluation for Comprehensive Tobacco Control Programs, Key Outcome Indicators for Evaluating Comprehensive Tobacco Control Programs, Introduction to Process Evaluation in Tobacco Use Prevention and Control*, and the U.S. Department of Health and Human Services (HHS) *Treating Tobacco Use and Dependence: Clinical Practice Guidelines* and its 2008 Update. It is the Department’s intent to award one (1) contract from this procurement.

2.1 Introductory Background

The New York Health Care Reform Act of 2000 (HCRA 2000) created the Tobacco Use Prevention and Control Program (Tobacco Control Program) within the Department “to improve the health, quality of life, and economic well-being of all New York citizens” (Public Health Law Section 1399-jj).

The DOH Bureau of Tobacco Control administers the state's comprehensive TCP to reduce morbidity and mortality and to alleviate the social and economic burdens caused by tobacco use. TCP uses an evidence-based, policy-driven and cost-effective approach, modeled on the CDC “Best Practices for Comprehensive Tobacco Control,” to prevent initiation of tobacco use by youth and young adults, promote quitting among adults and youth, eliminate exposure to secondhand smoke, and identify and eliminate tobacco related disparities among population groups (including persons with low socioeconomic status, mental illness and/or substance use disorders, and persons with disability).

Since TCP's inception in 2000, the program has effectively implemented a comprehensive clean indoor air law, maintained the highest state cigarette tax in the nation, enforced laws that restrict minors' access to tobacco and increased access to effective cessation services through health systems change. These policies have been effective in significantly decreasing the state's adult and youth smoking rates.

This request for proposals seeks a vendor to develop and implement a five-year evaluation plan that will build on and advance previous independent evaluation services consistent with the evolution of the DOH TCP and the tobacco control environment in NYS. The new tobacco evaluation plan should be informed by, but does not have to mirror, prior evaluation planning and activities. The DOH is looking for innovative and effective ways to evaluate the impact of the TCP in NYS. It should be noted that tobacco products include electronic cigarettes (also referred to as electronic nicotine delivery systems or ENDS, e-cigarettes, electronic vapor products) and as such, the evaluation plan should include electronic cigarettes.

2.2 Important Information

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

It should be noted that Appendix A of [Attachment 8](#), "Standard Clauses for New York State Contracts", contains important information related to the contract to be entered into as a result of this RFP and will be incorporated, without change or amendment, into the contract entered into between DOH and the successful Bidder. By submitting a response to the RFP, the Bidder agrees to comply with all the provisions of Appendix A. Note, [Attachment 7](#), the Bidder's Certifications/Acknowledgements, should be submitted and includes a statement that the bidder accepts, without any added conditions, qualifications or exceptions, the contract terms and conditions contained in this RFP including any exhibits and attachments. It also includes a statement that the bidder acknowledges that, should any alternative proposals or extraneous terms be submitted with the proposal, such alternate proposals or extraneous terms will not be evaluated by the DOH.

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

2.3 Term of the Agreement

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

3.0 BIDDERS QUALIFICATIONS TO PROPOSE

3.1 Minimum Qualifications

DOH will accept proposals from organizations with a minimum of five (5) years' experience evaluating large-scale public health programs, and developing, implementing and interpreting studies to measure the effectiveness of public health programs. Relevant experience includes expertise in quantitative and qualitative research methods; development, implementation, analysis and interpretation of cross-sectional, ethnographic and cohort studies; developing logic models and identifying program performance measures; conducting public health surveillance; and integrating all of the above to perform an independent evaluation of a comprehensive public health intervention; and having a written policy prohibiting any affiliation with a tobacco company or tobacco product manufacturer, including receipt of gifts, grants, contracts, financial support, in-kind support and other relationships. The selected Contractor will ensure that subcontractors also have this written policy and that no

subcontractors receiving funding through this award have any affiliates with a tobacco company or tobacco product manufacturer (See Attachment A).

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

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

3.2 Preferred Qualifications

Bidders that demonstrate three (3) or more years of experience evaluating comprehensive statewide tobacco control programs are preferred.

4.0 SCOPE OF WORK

This Section describes the Evaluation, Surveillance and Web-based Performance Monitoring *services* that are required to be provided by the selected bidder. The selected bidder must be able to provide all of these services throughout the contract term.

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

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

4.1 Tasks/Deliverables

4.1.1 Media Tracking and Evaluation Studies

Contractor will provide pre-testing/formative research of 12 tobacco-related ads annually and evaluation of three campaigns of 3-4 tobacco-related ads annually. The Contractor will:

- Conduct formative research and pre-testing studies to inform choice of ads and messages.
- Monitor the implementation of the media plan with systematic tracking.
- Measure audience reactions and receptivity to paid public health advertising.
- Track the number of smokers receiving services from the NYS Smokers’ Quitline as a function of media campaign reach.
- Track changes in smoker (e.g., quit attempts) and provider (e.g., provision of medication and counseling) behavior and public attitudes towards tobacco control policies as a function of media campaign reach.
- Provide recommendations to adjust and/or approve paid public health marketing efforts.

For each study, the Contractor will provide:

- Formative research: A study proposal; data collection and a management brief summarizing the study results and a slide deck with full study results.
- Campaign Evaluation: Study proposals, data collection and management briefs summarizing study results and slide decks with full study results for three campaigns per year.

4.1.2 Community Programs – Health Systems for a Tobacco Free New York (HSTFNY) and the New York State Smokers’ Quitline

The Contractor will (1) evaluate and report on progress made by HSTFNY grantees in ensuring the uptake of US Public Health Service Clinical Guidelines for Tobacco Dependence Treatment system-level changes to promote tobacco dependence treatment, (2) conduct one ad hoc study related to tobacco-related health systems work in NYS (the Contractor should propose potential topics knowing the final topics will be negotiated with the program), (3)

report annually on reach, utilization and effectiveness of the Quitline, and (4) report annually on the Quitline's efforts to refer patients back to their providers, and inform callers about available insurance benefits for cessation. For each of these four studies (in response to 1-4 above), the Contractor will provide a study proposal, conduct data collection, and provide a management brief summarizing study findings and a slide deck with full study results.

4.1.3 Community Programs – Advancing Tobacco Free Communities (ATFC)

The Contractor will measure the impact of ATFC community programs on the tobacco control environment across NYS. This evaluation will provide a set of actionable items that the TCP could implement to improve the functioning of these programs and maximize the impact on their communities. The Contractor will conduct three (3) studies annually to evaluate this initiative. In addition, semi-annual focus groups with targeted populations to gather formative information on emerging topics will be conducted. For each study and each round of focus groups, the Contractor will provide a study proposal, conduct data collection, and provide a management brief summarizing study findings and a slide deck with full study results.

4.1.4 Surveillance - New York Adult Tobacco Survey

The Contractor is responsible for conducting a New York Adult Tobacco Survey (ATS) for non-institutionalized adults, 18 and older in New York State (NYS). The sampling design will allow for estimates for the entire state, New York City (NYC), and rest of state (NYS excluding NYC). Sample size is required to be adequate to provide statewide estimates of key indicators for various sociodemographic groups (including, but not limited to sex, race/ethnicity, household income, educational attainment, poor/good mental health, disability status). The survey design and estimated sample should enable estimates of key indicators (including, but not limited to current smoking, past year quit attempts, provider assist for smoking cessation), with 95% confidence and a confidence interval of +/- 3 points for general population based indicators and +/- 5 points for indicators within targeted subpopulations. The most recent instrument can be found in the Survey Instrument Library which has been posted with this RFP on the Department website. Contractor responsibilities: (1) an annual ATS data collection plan which includes proposed updates to the survey instrument, (2) data collection, (3) quarterly analytic datasets, (4) annual analytic and public use datasets and an annual codebook. Data from the ATS should contribute to the annual Key Outcome Indicator document (referenced in Deliverable 4.1.12).

4.1.5 Surveillance - New York National Adult Tobacco Survey

The Contractor will conduct a New York National Adult Tobacco Survey (NY NATS) for non-institutionalized adults, 18 and older across the United States. Sample size needs to be adequate to provide national (US excluding NY) estimates of key indicators (including, but not limited to current smoking, past year quit attempts, provider assist for smoking cessation), with 95% confidence and a confidence interval of +/- 3 points for general population based indicators. The most recent instrument can be found in the Survey Instrument Library which has been posted with this RFP on the Department website. Contractor responsibilities: (1) an annual NATS data collection plan (including updates to the survey instrument), (2) data collection, (3) an annual analytic dataset and an annual codebook. Data from the NATS should contribute to the annual Key Outcome Indicator document (referenced in Deliverable 4.1.12).

4.1.6 Surveillance - New York Youth Tobacco Survey

The Contractor will conduct a New York Youth Tobacco Survey (NY YTS) in even-numbered years in the Spring of 2020 and 2022 with preparation beginning in odd-numbered years in the Summer of 2019, 2021 and 2023 (for a presumed YTS in 2024 but not part of this contract). In 2019, 2021 and 2023, the Contractor is required to submit a data collection plan to DOH, school sample selection, instrument development, and recruitment of schools. The most recent version of the NY YTS instrument can be found in the Survey Instrument Library which has been posted with this RFP on the Department website.

This survey will use the same school-based methodology now used in New York and nationally and described in the 2016 Sampling and Weighting Report available in the Survey Instrument Library which has been posted with this RFP on the Department website. Plan on guidelines like those utilized for the 2016 NY YTS administration.

For 2020 and 2022, plan on field staff training, data collection, analysis and report development, and delivery of analytic and public use datasets and a codebook. Data from the YTS should contribute to the annual Key Outcome Indicator document (referenced in Deliverable 4.1.12).

4.1.7 Surveillance - Retail Advertising of Tobacco Survey

The Contractor will design and implement a sampling strategy and data collection that will track advertising and product displays in a sample of 5% of licensed tobacco retailers (LTRs) in NY stratified minimally by region (NYC, NYS excluding NYC, and NYS) and outlet type. Contractor field staff are trained to complete the Retail Advertising of Tobacco Survey. A copy of the most recent instrument can be found in Survey Instrument Library which has been posted with this RFP on the Department website. This survey will take place in the odd number years, 2019, 2021 and 2023. The sample should be drawn from the list of all LTRs available from the NYS Department of Taxation and Finance. The Contractor will provide training of field staff, field data collection, data analysis, and reporting of results to the TCP. A biennial study proposal, management brief summarizing results, slide deck with full results, dataset and codebook should be submitted after each administration of the Retail Advertising of Tobacco Survey (RATS).

Data from the RATS should contribute to the annual Key Outcome Indicator document (referenced in Deliverable 4.1.12).

4.1.8 Surveillance - Local Opinion Leader Survey

The Contractor will provide a biennial study proposal, data collection, management brief summarizing results, slide deck with full results, dataset and codebook with each administration of the Local Opinion Leader Survey (LOLS). The study will take place in the even years, 2020 and 2022. Data from the LOLS should contribute to the annual Key Outcome Indicator document (referenced in Deliverable 4.1.12). The 2016 LOLS is available in the Survey Instrument Library which has been posted with this RFP on the Department website.

4.1.9 Surveillance - Ad hoc surveillance study

The Contractor will conduct an annual ad hoc surveillance study, on key topics, to be negotiated with the TCP. The Contractor will provide for an annual study proposal, data collection, management brief summarizing study results and PowerPoint with full study results.

4.1.10 Web-Based Monitoring of Grantees

The Contractor is responsible for designing and maintaining a web-based reporting system that provides the necessary tools to monitor Contractor progress toward outcomes and ensure that work plans are being followed. Annual updates to user manuals are required. Monthly trainings and technical assistance to help grantees make work plan or monthly report entries as well as other trainings will be required as necessary. The Contractor will need to maintain the current web-based reporting system data fields in whatever web-based reporting system is proposed.

4.1.11 Reports and Manuscripts - Annual Evaluation Report

The Contractor is responsible for completing an annual Independent Evaluation Report (IER), including findings from all the evaluation and surveillance studies conducted during that year. This report is due to the Governor and NYS Legislature by September 1 of each year. To meet the September 1 deadline, the following schedule of deliverables must be followed by the successful bidder:

- Detailed outline due the second week of March of each year
- First draft due the second week of May of each year
- TCP-approved second draft due July 1 of each year
- Department-approved final draft due the end of August of each year.

4.1.12 Reports and Manuscripts - Topical/Thematic Reports

The Contractor is required to complete eight topical reports each year that vary in scope and breadth, five of which will be “Key Outcome Indicator” reports (one annual and four quarterly). The annual Key Outcome Indicator (KOI) report will include data from all the surveillance systems the Contractor is responsible for as well as relevant data from other publicly available data sources. The report is a chart book with key outcomes depicted in charts and analyses annotated in a notes field. The most recent KOI report is available on the Department’s website at: http://www.health.ny.gov/prevention/tobacco_control/reports_brochures_fact-sheets.htm. Quarterly KOI reports will be specific to the Adult Tobacco Survey, which is conducted quarterly. The other three reports might include thematic topical reports that broadly cover evaluation themes or other important and timely tobacco control topics or they may focus on one theme in depth (e.g., cessation, progress on the point of sale initiative, etc.). These reports will be written for a broad audience to include program leadership and staff, other Department staff, program Contractors, and other stakeholders in the tobacco control community. The bidder should propose potential topics knowing the final topics will be negotiated with the program.

4.1.13 Reports and Manuscripts – Manuscripts

The Contractor will provide four manuscript proposals and four full manuscripts written for peer review, and designed to contribute to the scientific literature on tobacco control annually.

4.1.14 Implementation Plan

Within 60 days of the contract start date, the Contractor will provide an implementation plan and timeline for accomplishing all contract deliverables (4.1.1 through 4.1.13) for the five-year period.

4.2 Staffing Requirements

The Contractor will ensure organizational capacity and a staffing structure that exhibits sufficient capacity and expertise to complete all deliverables, and provide sufficient oversight of the entire project while maintaining excellent communication between the evaluator and all components of the TCP. Required staff include:

- A full-time project coordinator to ensure timely completion of all deliverables, timely submission of all deliverables for Department review, timely submission of annual scope of work and budget, and timely submission of payment vouchers to proper Department personnel.
- A scientific director who will oversee the evaluation, with an advanced degree in public health or the social sciences and a history of peer reviewed publications related to the evaluation of public health programs and/or tobacco control.
- Additional staff with competencies in public health surveillance, survey methodology, statistics, health systems evaluation, community programs evaluation, media evaluation, performance measurement and reporting and dissemination.

The scientific director and any senior staff named should have an excellent understanding of tobacco control science and practice and be capable of quickly developing an understanding of the TCP and New York-specific issues that might enhance or inhibit TCP success.

Staff participation is expected in the following meetings:

- Weekly conference calls with DOH staff (relevant staff, depending on topic)
- Annual reverse site visit to DOH (scientific director and relevant staff)
- Annual in-person presentation to the Tobacco Use Prevention and Control Advisory Board (scientific director)
- Annual in-person presentation to ATFC and HSTFNY Contractor statewide meeting (scientific director or designee)

4.3 Reporting Requirements

The Contractor will submit reports as specified in Section 4.1 Tasks/Deliverables. The Contractor is required to prepare and submit quarterly reports on the progress of contract deliverables, in a format to be determined by the Department. The reports will outline any evaluation, surveillance, web-based monitoring or dissemination activities begun, in progress and/or completed during the month. The reports will also outline any follow up and monitoring of deficiencies.

4.4 Information Technology

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

4.5 Security

The selected Contractor shall comply with all privacy and security policies and procedures of the Department (<https://its.ny.gov/eiso/policies/security>) and applicable state and federal law and administrative guidance with respect to the performance of this contract. The Contractor is required, if applicable, to execute a number of security and privacy agreements with the Department including a Business Associate Agreement (Appendix H) and a Data Use Agreement (DUA) at contract signing.

The Contractor is expected to provide secure and confidential backup, storage and transmission for hard copy and electronically stored information. Under no circumstances will any records be released to any person, agency, or organization without specific written permission of the DOH. The Contractor is obligated to ensure any Subcontractor hired by Contractor who stores, processes, analyzes or transmits MCD on behalf of Contractor has the appropriate Security requirements in place. Contractor is required to include in all contracts and Business Associate Agreements with their Subcontractors language surrounding the security and privacy requirements as well as the language contained in the Confidentiality Language for Third Parties section of the DUA. If any breach or suspected breach of the data or confidentiality occurs, whether the breach occurred with the Contractor or Subcontractor, DOH must be notified immediately.

The Contractor is required to maintain and provide to the Department upon request their data confidentiality plans and procedures for meeting security requirements as they relate to the deliverables and services within this RFP, including all plans as they relate to subcontractor work where applicable.

The Contractor will develop and maintain adequate fully trained staff to respond to all stakeholder inquiries while protecting confidentiality and maintaining the security and integrity of all systems. Staff must be trained to understand and observe requirements related to confidentiality and operating guidelines for functions included in this RFP.

The Contractor will comply fully with all current and future updates of the security procedures of the DOH/HRI, as well as with all applicable State and federal requirements, in performance of this contract.

4.6 Transition

The transition represents a period when the current contract activities performed by the Contractor must be turned over to the Department, another Department agent or successor Contractor during or at the end of the contract.

The Contractor shall ensure that any transition to the Department, Departmental agency or successor Contractor be done in a way that provides the Department with uninterrupted Evaluation, Surveillance and Web-based Performance Monitoring services. This includes a complete and total transfer of all data, files, reports, and records generated from the inception of the contract through the end of the contract to the Department or another Department agent should that be required during or upon expiration of its contract.

The Contractor shall provide technical and business process support as necessary and required by the Department to transition and assume contract requirements to the Department or another Department agent should that be required during or at the end of the contract.

The Contractor shall manage and maintain the appropriate number of staff to meet all requirements listed in the RFP during the transition. All reporting and record requirements, security standards, and performance standards are still in effect during the transition period.

The Contractor is required to develop a work plan and timeline to securely and smoothly transfer any data and records generated from the inception of the Contract through the end of the contract to the Department or another Department agent should that be required during or upon expiration of its contract. The plan and documentation must be submitted to the Department no later than four (4) months before the last day of its contract with the Department of Health or upon request of the Department.

5.0 ADMINISTRATIVE INFORMATION

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

5.1 Restricted Period

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

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

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

5.2 Questions

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

5.3 Right to Modify RFP

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

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

If the Bidder discovers any ambiguity, conflict, discrepancy, omission, or other error in this RFP, the Bidder shall immediately notify DOH of such error in writing at tcp@health.ny.gov and request clarification or modification of the document.

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

5.4 Payment

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

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

Subject: 3450263 <Contract # TBD>

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

**NYS Department of Health
Unit ID 3450263
c/o NYS OGS BSC Accounts Payable
Building 5, 5th Floor
1220 Washington Ave.
Albany, NY 12226-1900**

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

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

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

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

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

1. Monthly payments will be made based upon satisfactory completion/submission of each of the deliverables outlined in the Section 4.0 Scope of Work, Section 4.1 Tasks and Deliverables, Section 4.2 Staffing Requirements (periodic conference calls/meetings) and Section 4.3 Reporting, 4.4 Transition and the amount enumerated in Attachment C, Cost Proposal.

2. All invoices submitted by the successful bidder pursuant to this AGREEMENT shall be submitted to the STATE on a monthly basis no later than thirty (30) days after the end date of the period for which payment is being claimed.

5.5 Minority & Woman-Owned Business Enterprise Requirements

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

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

Business Participation Opportunities for MWBEs

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

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

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

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

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

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

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

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

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

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

5.6 Equal Employment Opportunity (EEO) Reporting

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

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

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

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

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

Section 5-a of the Tax Law, as amended, effective April 26, 2006, requires certain contractors awarded state contracts for commodities, services and technology valued at more than \$100,000 to certify to the Department of Tax

and Finance (DTF) that they are registered to collect New York State and local sales and compensating use taxes. The law applies to contracts where the total amount of such contractors' sales delivered into New York State are in excess of \$300,000 for the four quarterly periods immediately preceding the quarterly period in which the certification is made, and with respect to any affiliates and subcontractors whose sales delivered into New York State exceeded \$300,000 for the four quarterly periods immediately preceding the quarterly period in which the certification is made.

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

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

Forms are available through these links:

- ST-220 CA: http://www.tax.ny.gov/pdf/current_forms/st/st220ca_fill_in.pdf
- ST-220 TD: http://www.tax.ny.gov/pdf/current_forms/st/st220td_fill_in.pdf

5.8 Contract Insurance Requirements

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

5.9 Subcontracting

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

5.10 DOH's Reserved Rights

The Department of Health reserves the right to:

1. Reject any or all proposals received in response to the RFP;
2. Withdraw the RFP at any time, at the agency's sole discretion;
3. Make an award under the RFP in whole or in part;
4. Disqualify any bidder whose conduct and/or proposal fails to conform to the requirements of the RFP;
5. Seek clarifications and revisions of proposals;
6. Use proposal information obtained through site visits, management interviews and the state's investigation of a bidder's qualifications, experience, ability or financial standing, and any material or information submitted by the bidder in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFP;
7. Prior to the bid opening, amend the RFP specifications to correct errors or oversights, or to supply additional information, as it becomes available;
8. Prior to the bid opening, direct bidders to submit proposal modifications addressing subsequent RFP amendments;

9. Change any of the scheduled dates;
10. Eliminate any mandatory, non-material specifications that cannot be complied with by all of the prospective bidders;
11. Waive any requirements that are not material;
12. Negotiate with the successful bidder within the scope of the RFP in the best interests of the state;
13. Conduct contract negotiations with the next responsible bidder, should the Department be unsuccessful in negotiating with the selected bidder;
14. Utilize any and all ideas submitted in the proposals received;
15. Every offer shall be firm and not revocable for a period of three hundred and sixty-five days from the bid opening, to the extent not inconsistent with section 2-205 of the uniform commercial code. Subsequent to such three hundred and sixty- five days, any offer is subject to withdrawal communicated in a writing signed by the offerer; and,
16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's proposal and/or to determine an offerer's compliance with the requirements of the solicitation.

5.11 Freedom of Information Law (“FOIL”)

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

5.12 Lobbying

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

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

- g) increased the monetary threshold which triggers a lobbyist's obligations under the Lobbying Act from \$2,000 to \$5,000; and
- h) established the Advisory Council on Procurement Lobbying.

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

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

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

5.13 State Finance Law Consultant Disclosure Provisions

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

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

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

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

5.14 Debriefing

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

5.15 Protest Procedures

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

5.16 Iran Divestment Act

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

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

5.17 Piggybacking

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

5.18 Encouraging Use of New York Businesses in Contract Performance

Public procurements can drive and improve the State's economic engine through promotion of the use of New York businesses by its contractors. New York State businesses have a substantial presence in State contracts and strongly contribute to the economies of the state and the nation. In recognition of their economic activity and leadership in doing business in New York State, bidders/proposers for this contract for commodities, services or technology are strongly encouraged and expected to consider New York State businesses in the fulfillment of the requirements of the contract. Such partnering may be as subcontractors, suppliers, protégés or other supporting roles. All bidders should complete [Attachment 6](#), Encouraging Use of New York Businesses in Contract Performance, to indicate their intent to use/not use New York Businesses in the performance of this contract.

5.19 Diversity Practices Questionnaire

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

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

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

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, Bidders/Contractors are strongly encouraged and expected to consider

SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as protégés, or in other partnering or supporting roles.

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

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

5.21 Intellectual Property

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

5.22 Vendor Assurance of No Conflict of Interest or Detrimental Effect

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

5.23 Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination

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

6.0 PROPOSAL CONTENT

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

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

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

6.1 Administrative Proposal

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

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

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

B. Freedom of Information Law – Proposal Redactions

Bidders must clearly and specifically identify any portion of the proposal that a Bidder believes constitutes proprietary information entitled to confidential handling as an exception to the Freedom of Information Law. See [Section 4.10](#), (Freedom of Information Law)

C. Vendor Responsibility Questionnaire

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

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

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

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

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

E. M/WBE Forms

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

F. Bidder's Certified Statements

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

G. Encouraging Use of New York Businesses in Contract Performance

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

H. References

Provide references using [Attachment 9](#), (References) for three firms that will verify the bidders qualifications to propose (Section 3.1). Provide firm names, addresses, contact names, telephone numbers, and email addresses.

I. Diversity Practices Questionnaire

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

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

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

6.2 Technical Proposal

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

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

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

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

A. Title Page

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

B. Table of Contents

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

C. Documentation of Bidder's Eligibility Responsive to Section 3.0 of RFP

Bidders must be able to meet all the requirements stated in Section 3.0 of the RFP. The bidder must submit documentation that provides sufficient evidence of meeting the criterion. This documentation may be in any format needed to demonstrate how they meet the minimum qualifications to propose.

C.1: Minimum Qualifications

Bidder MUST submit documentation of how they meet the bidder's eligibility responsive to Section 3.0, Bidders Minimum Qualifications to Propose:

- Describe how the bidder meets the required five (5) years' experience evaluating large-scale public health programs and developing, implementing and interpreting studies to measure the effectiveness of public health programs.

Experience acquired concurrently is not considered acceptable.

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

- Submit [Attachment C](#) to provide a written policy prohibiting any affiliation with a tobacco company or tobacco product manufacturer, including receipt of gifts, grants, contracts, financial support, in-kind support and other relationships. The selected Contractor will ensure that subcontractors also have this written policy and that no subcontractors receiving funding through this award have any affiliates with a tobacco company or tobacco product manufacturer.

C.2: Preferred Qualifications

- Describe how the bidder meets the preferred three (3) or more years of experience evaluating comprehensive statewide tobacco control programs.

D. Technical Proposal Narrative

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

Elements of the technical proposal are as follows:

D.1 Evaluation Studies

D.1.1. Media Tracking and Evaluation Studies

The TCP invests in paid advertising on television, radio, print, the Internet, and other venues. Media campaigns targeted toward smokers have three goals: to motivate smokers to make quit attempts using evidence based treatments, to increase awareness among smokers of health insurance benefits for cessation aids and to motivate smokers to talk to their health care provider about quitting. Media campaigns targeted towards health care providers also have three goals: to motivate health care providers to treat their patients who use tobacco products, to increase awareness of health insurance benefits for cessation aids and to increase use of evidence based tobacco cessation treatments. This significant investment requires careful planning and evaluation.

Historically, pre-testing and formative research have allowed the program to select ads that are likely to have the greatest impact on the targeted audience. Typically, the program selects ads that have "high" sensation value, defined as using strong emotional appeals and intense graphic content that research

has shown are more likely to move a targeted audience to act (e.g., smokers to make a quit attempt or smokers and nonsmokers to alter their attitude towards tobacco policies). When media campaigns are implemented, it is important to measure ad reach as measured by confirmed awareness, audience reaction, and audience receptivity to ads.

Bidder should describe their plan to conduct media tracking and evaluation studies as outlined in Tasks/Deliverables section 4.1.1.

D.1.2 Community Programs – Health Systems for a Tobacco Free New York and the New York State Smokers' Quitline

The BTC funds ten regional grantees and one statewide center of excellence through the Health Systems for a Tobacco-Free NY (HSTFNY) initiative. These grantees advocate with high-level decision-makers in medical and mental health care organizations, which primarily serve the program's disparate populations, to establish and implement interventions consistent with the evidence-based recommendations of the U.S. Department of Health and Human Services Public Health Service (PHS) Clinical Practice Guideline for Treating Tobacco Use and Dependence: 2008 Update (Clinical Guideline). These system-level recommendations include establishment of tobacco screening systems preferably in an electronic medical record, provision of training, resources and feedback to providers about provision of tobacco dependence treatment, having a dedicated cessation specialist within health care organizations, and ensuring the wide availability of smoking cessation benefits, namely medications and counseling.

As an integral component of health systems change, the NYS Smokers' Quitline (Quitline) staff inform and assist clients with accessing available health insurance cessation benefits; encourage callers to talk to their health care provider about cessation; educate providers on available guidelines to assist patients with quitting; and work as a clinician extender by accepting health care providers' referrals to extend quit support to their patients. The Quitline provides cessation coaching, related information, nicotine replacement therapy, and support materials to NYS residents via telephonic and web-based services. The Quitline works with DOH, its community Contractors and the health care community of employers, medical and mental health clinicians, federally qualified health centers (FQHCs), and health plans to increase health care provider delivery of tobacco dependence treatment and tobacco users' access to cessation counseling and medication. The Contractor's evaluation of the Quitline will focus on measurement of the reach, utilization, and effectiveness of smoking cessation services provided by the Quitline. Reach is the proportion of adult smokers using an evidence-based quit service from the Quitline. Utilization is overall use of Quitline and Quitsite services. Effectiveness is the impact on cessation attempts and sustained cessation relative to reach and utilization.

The bidder should describe their plan to conduct evaluation studies of community programs – Health Systems for a Tobacco Free New York and the New York State Smokers' Quitline as described in Task/Deliverables section 4.1.2.

D.1.3 Community Programs – Advancing Tobacco Free Communities

The BTC funds 17 community grantees (Advancing Tobacco Free Communities, or ATFC) to cultivate a tobacco free norm, through community education, community mobilization, government policy maker education and advocacy with organizational decision makers. These grantees implement a strategic, coordinated set of evidence based activities in four primary initiatives (currently these are point of sale, tobacco free outdoors, smoke free housing and smoke free media) to build public, organizational and political support to advance tobacco control policy.

The bidder should describe their plan to conduct evaluation studies of community programs – Advancing Tobacco Free Communities as described in Task/Deliverables section 4.1.3.

Surveillance Activities

D.1.4 New York Adult Tobacco Survey

The New York Adult Tobacco Survey (NY ATS) has been fielded continually since June 2003. The survey is designed to provide timely public health surveillance data to inform the TCP and support the independent evaluation. The NY ATS assesses (a) adult tobacco-related behavior, attitudes, and beliefs (including electronic nicotine delivery systems); (b) tobacco purchasing, cessation and cessation attempt behavior; (c) health status and health-related problems; (d) attitudes toward and exposure to secondhand smoke; (e) perceptions of risk related to tobacco use; (f) recollection of exposure to tobacco advertising or anti-tobacco health communications (confirmed awareness of anti-tobacco ads); and (g) attitudes toward other smoking policies. Some key survey items have been included since inception (e.g., current smoking status); some questions may be included for a shorter period of time to assess time-sensitive issues (e.g., support for tax increase), and other questions may be rotated in and out of the survey instrument as necessary.

In recent years, the NY ATS has utilized mixed methodologies, combining list-assisted random-digit-dial survey methods (utilizing both landline and cell phone) with address based sampling to invite respondents to a web-based survey. The eligible population is NYS residents who are non-institutionalized and at least 18 years old. Currently, the phone based portion of the ATS is conducted with 65% cell phone respondents and 35% land line.

The bidder should describe their plan to conduct the NY ATS as described in Task/Deliverables section 4.1.4. Bidders should estimate response rates for all data collection modes used to administer the ATS using standard methods provided by the Council of American Research Organizations (CASRO) and the American Association for Public Opinion Research (AAPOR3) methods. Bidders should discuss strategies they would use to maximize response rates (estimate using CASRO and AAPOR methodologies), including but not limited to provision of incentives and use of alternative survey methodologies. Proposals should provide documentation regarding telephone, mail and web-based surveys the bidder has conducted in the past, including the size, administration modes and response rates.

D.1.5 New York National Comparison Adult Tobacco Survey

Similar to the NY ATS, the NY National Comparison Adult Tobacco Survey (NY NATS) is administered to a nationwide sample of the non-institutionalized adult population, aged 18 years or older. A national comparison sample allows for direct comparison between NY and the rest of the nation, providing a superior measure of program progress. The survey is designed to provide timely surveillance and evaluation data to inform the TCP. The NY NATS questions parallel the NY ATS assessing (a) adult tobacco-related behavior, attitudes, and beliefs (including electronic nicotine delivery systems); (b) tobacco purchasing and cessation attempt behavior; (c) health status and health-related problems; (d) attitudes toward and exposure to secondhand smoke; (e) perceptions of risk related to tobacco use; (f) recollection of exposure to tobacco advertising or anti-tobacco health communications; and (g) attitudes toward other smoking policies. Some key survey items have been included since inception (e.g., current smoking status); some questions may be included for a shorter period of time to assess a time-sensitive issue (e.g., support for tax increase), and other questions may be rotated in and out of the survey instrument as necessary.

In recent years, the NATS has used mixed methodologies, utilizing list-assisted random-digit-dial (RDD) survey, both land line and cell phone as well as other more experimental methods to decrease cost and increase response rate. Currently, the phone based portion of the NATS is conducted with 65% cell phone respondents and 35% land line.

Bidders should state expected response rates (using CASRO and AAPOR methodologies), any special strategies to increase or maintain response rates, including but not limited to provision of incentives and use of alternative survey methodologies, and provide documentation regarding telephone, web-based and mail surveys the bidder has conducted. The bidder should describe their plan to conduct the NY NATS as described in Task/Deliverables section 4.1.5.

D.1.6 New York Youth Tobacco Survey

The New York Youth Tobacco Survey (NY YTS) is a school-based survey of middle school and high school age youth conducted biennially since 2000. The Youth Tobacco Survey (YTS), was developed by the CDC and is updated for use in NY with input from the independent evaluator and the TCP.

The NY YTS includes questions about tobacco use (including electronic nicotine delivery systems), exposure to environmental tobacco smoke, minors' ability to purchase or otherwise obtain tobacco products, knowledge and attitudes about tobacco, and familiarity with pro- and anti-tobacco media messages. The NY YTS is designed to collect data sufficient to provide accurate estimates separately for students in New York City (NYC, all five boroughs), for students in NYS attending schools outside NYC, and for the students in NYS as a whole.

Bidders should estimate expected response rates separately for schools and for students. Using the Sampling and Weighting Report as a guide, sample about 90 schools, divided approximately evenly between middle and high schools and between all five boroughs of NYC and the Rest of the State. Bidders should state expected response rates, any special strategies to maintain response rates and provide documentation regarding school-based surveys the bidder has conducted. The bidder should describe their plan to conduct the New York Youth Tobacco Survey as described in Task/Deliverables section 4.1.6.

D.1.7 Retail Advertising of Tobacco Survey

There are about 20,000 licensed tobacco retailers (LTRs) in NYS and the majority have tobacco advertising and product displays that appeal to young smokers and nonsmokers alike and make it difficult for adult smokers to quit or stay quit. The TCP is currently working to support policy changes to protect youth from retail tobacco marketing.

Since 2004 the TCP has conducted an observational study of a sample of LTRs annually. Sample size ranged from a low of 800 (~4% of all LTRs) retailers to a high of approximately 4,000 (~20% of all LTRs). The list of LTRs is updated annually based on paid registrations and is maintained and made available by the NYS Department of Taxation and Finance. Samples were stratified by geographic area and retailer outlet type. The latter includes convenience stores with and without gas pumps, pharmacies, large and small grocery stores, mass merchandisers, and tobacco specialty shops. Over the course of this procurement, vape shops may be added to the list of Licensed Retailers that would need to be incorporated into this study.

Important indicators include retailer characteristics, assessment of interior and exterior tobacco advertising and other signage indicators (e.g., "at or below child's eye level"), and price and purchase promotion information, presence of price promotions and discounts, and assessment of tobacco product displays (approximate percentage of space taken up behind the counter, type and location of shelving, and total area).

The bidder should describe their plan to conduct the Retail Advertising of Tobacco Survey, on a biennial basis, as described in Task/Deliverables section 4.1.7.

D.1.8 Local Opinion Leader Survey

The Local Opinion Leader Survey (LOLS) is a survey that has been conducted in 2011, 2014 and 2016 and is expected to be conducted biennially (2020 and 2022 for this proposal) thereafter. The survey targets the population of local officials (census of elected and appointed officials in NY counties and NYC boroughs and census of county health officials). In the past administration of the LOLS, the population consists of just over 1,100 local officials. The purpose of the survey is to document local opinion leader awareness of and support for select tobacco control policies and beliefs relevant to tobacco control issues.

The bidder should describe their plan to conduct the Local Opinion Leader Survey, on a biennial basis, as described in Task/Deliverables section 4.1.8.

D.1.9 Ad hoc surveillance study

Bidders should propose plans for an annual ad hoc surveillance study, on key topics. Examples of these types of studies include methodological studies of existing surveillance systems to increase response rates, surveys with targeted demographic groups to gather in-depth information on emerging tobacco products (e.g., ENDS). The bidder should propose potential topics knowing the final topics will be negotiated with the program. The bidder should describe their plan to conduct the ad hoc surveillance study as described in Task/Deliverables section 4.1.9.

Web-Based Monitoring of Grantees

D.1.10 Collection of performance data from funded grantees is integral to assessing fidelity to work plan activities and allows BTC staff to provide regular feedback to grantees about their performance and areas for improvement. These data also contribute to the evaluation of the TCP.

Data on community activities are currently recorded by grantees into a web-based tool designed to facilitate program monitoring for TCP and to generate standardized reports for funded TCP grantees. These grantees – HSTFNY, Health Systems Center of Excellence (HS COE) and ATFC – record their annual work plans at the beginning of their contract year, and then complete monthly progress reports online. Entries are reviewed monthly by contract managers and feedback is provided to the Contractor through the system. The monitoring system focuses on meaningful progress towards successful outcomes (e.g., local smoke free parks and beaches policies passed; face to face meeting with organizational decision maker held). Six progress toward outcomes reports will be generated annually.

The system will be accessed by grantees through user accounts with a user ID and password. Multiple users on the same grant contract are able to share the same user ID and password. The system will be equipped to generate email notifications to the TCP when grantees submit or make changes to entries and vice versa. The current system will be used by an estimated 110 users. Additional features to allow users to upload and share resources as well as for TCP to upload and post guidance documents are achieved through a bulletin board.

The bidder should describe their plan to implement and maintain the web-based reporting system as described in Task/Deliverables section 4.1.10.

Reports and Manuscripts

Dissemination of evaluation, public health surveillance, and performance measurement information to key stakeholders and the public is an important function of the independent evaluation.

D.1.11 Annual Evaluation Report

An annual Independent Evaluation Report (IER) is required by statute to be written by the Contractor and submitted by the Department to the Governor and NYS Legislature by September 1 of each year. The report should be a comprehensive assessment of the TCP's progress toward preventing and reducing tobacco use based on the evaluation systems established by the vendor and other information available to the vendor (e.g., national data sets such as the National Health Interview Survey, Behavioral Risk Factor Surveillance System and the Current Population Survey). The report should address the initiatives of the program (ATFC, HSTFNY, paid tobacco-related media) and provide a synthesis of all relevant information including those outside the scope of this contract, such as the Behavioral Risk Factor Surveillance System, Current Population Survey, taxation data, etc. Previous years reports are available on the Department's website at:

http://www.health.ny.gov/prevention/tobacco_control/reports_brochures_fact-sheets.htm The most recent reports better reflect expectations for reporting styles.

The bidder should describe their plan to complete the annual IER as described in Task/Deliverables section 4.1.11.

In order to meet the September 1 deadline, the following schedule of deliverables must be followed by the successful bidder:

- Detailed outline due the second week of March of each year
- First draft due the second week of May of each year
- TCP-approved second draft due July 1 of each year
- Department-approved final draft due the end of August of each year.

D.1.12 Topical/Thematic Reports

The Contractor is required to complete eight topical reports each year that vary in scope and breadth, five of which will be “Key Outcome Indicator” reports (one annual and four quarterly) and three will be thematic topical reports that broadly cover evaluation themes or other important and timely tobacco control topics, or they may focus on one theme in depth. Final approved reports may be publicized by the Department in the form of press releases and the bidder should be prepared to assist in that process. Reports will be posted on the Department’s website, emailed to a relevant mailing list, and at times, printed for distribution at program meetings.

The bidder should describe their plan to develop and submit each year three thematic report proposals, three final thematic reports, one annual KOI document and four quarterly KOI documents, as described in Task/Deliverables section 4.1.12.

D.1.13 Manuscripts

Contributing to the scientific literature on tobacco control is an important goal of the program and the independent evaluation should provide ample opportunity and data for this purpose. Collaborations on research manuscripts with Department program leadership will be encouraged and expected.

The bidder should describe their experience with manuscript development and collaboration as well as their publication history. The bidder should describe their plan to develop and submit manuscripts for peer review, as described in Task/Deliverables section 4.1.13.

Implementation Plan

D.1.14 The bidder should describe a comprehensive, logical, achievable plan and timeline for organizing, implementing and accomplishing all contract deliverables as described in Tasks/Deliverables section 4.1.14. This timeline should include time for regular review and communication of evaluation information and presentation of information to program staff, stakeholders and the public to enhance program performance. The bidder’s response should reflect and be grounded in sound evaluation and rigorous scientific principles.

If the bidder plans to subcontract for any of the deliverables listed herein, the bidder should describe the general scope of work to be performed by the subcontractor. Known subcontractors should be identified. Upon award, any proposed subcontractors must be approved by the NYS Department of Health. The winning bidder is ultimately responsible for the completion of the deliverables of the contract. Subcontractors must have no affiliation with any tobacco company or its affiliates.

D.2 Staffing Requirements

D.2.1 Describe the bidder’s organizational capacity and staffing qualifications, including experience providing large-scale public health evaluation services, working with state agencies, including health departments, and experience with tobacco control evaluation and planning. Organizational capacity should match the scale and scope of this project, including ability to design and implement the required program evaluation, surveillance, web-based monitoring and reporting activities. Staffing qualifications

should indicate experience at all levels of this project including project development, data collection, data analysis, interpretation and synthesis of results, and report development for professional and public audiences. This section should show how your organization will successfully function and meet the requirements of this project. Include an organization chart as an attachment to the proposal.

D.2.2 Describe a proposed staffing structure that will adequately meet the required deliverables and maintain adequate levels of management oversight including a flow chart describing how the bidder will conduct internal management of this large-scale project. Management oversight must be adequate to ensure the integrity of evaluation projects throughout the course of the contract period.

D.2.3 In an appendix, provide a job description for each position. **Resumes are not required to be submitted with this proposal and will not be evaluated. The successful bidder will submit resumes of staff for Department review prior to individuals commencing work as described in Section 4.2.**

D.3. Proposed Approach- Reporting

D.3.1. Bidder should describe how it plans to provide the reports described in Section 4.3. The bidder should provide examples of reports that demonstrates the bidder's capacity to summarize monthly reports and contract deliverables, per Section 4.3

D.4. Proposed Approach – Information Technology

D.4.1. Bidder should describe their plan to ensure any applications, including systems and components supporting it, comply with all NYS security policies and standards. (see Scope of Work Section 4.4)

D.5. Proposed Approach- Security (see Scope of Work Section 4.5)

D.5.1 Bidder should describe their plan to comply with all privacy and security policies and procedures of the Department, applicable state and federal law and administrative guidance with respect to the performance of the contract. (see Scope of Work Section 4.5)

D.6. Proposed Approach- Transition

D.6.1. The bidder should provide an overview of its transition plan that ensures a complete and total transfer of all files and records necessary to perform the scope of work and discussion of continuity of services for evaluation, surveillance and web-based performance monitoring activities (Section 4.6).

6.3 Cost Proposal

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

The bid price is to cover the cost of furnishing all of the said services, including but not limited to travel, materials, equipment, overhead, profit and labor to the satisfaction of the Department of Health and the performance of all work set forth in said specifications.

7.0 PROPOSAL SUBMISSION

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

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

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

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

Proposals should be submitted in three (3) separate, clearly labeled packages: (1) Administrative Proposal, (2) Technical Proposal and (3) Cost Proposal, prepared in accordance with the requirements stated in this RFP. Mark the outside envelope of each proposal as "RFP #18047 **Independent Evaluation of the New York Tobacco Control Program** – (Administrative) (Technical) or (Cost) Proposal submitted by (Bidder's name)". The three (3) sealed proposals may be combined into one (1) mailing, if desired.

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

Department of Health (RFP # 18047)
 Attention: Deborah Spinosa
 Division of Chronic Disease Prevention
 Corning Tower, Room 1055
 Albany, NY 12237

NOTE: You should request a receipt containing the time and date received and the signature of the receiver for all

hand-deliveries and ask that this information also be written on the package(s).

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

7.1 No Bid Form

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

8.0 METHOD OF AWARD

8.1 General Information

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

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

The evaluation process will be conducted in a comprehensive and impartial manner, as set forth herein, by an Evaluation Committee. The Technical Proposal and compliance with other RFP requirements (other than the Cost Proposal) will be weighted **75%** of a proposal’s total score and the information contained in the Cost Proposal will be weighted **25%** of a proposal's total score.

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

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

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

8.2 Submission Review

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

8.3 Technical Evaluation

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

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

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

The technical evaluation is **75% (up to 75 points)** of the final score.

8.4 Cost Evaluation

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

The Cost Proposals will be scored based on a maximum cost score of 25 points. The maximum cost score will be allocated to the proposal with the lowest all-inclusive not-to-exceed maximum price. All other responsive proposals will receive a proportionate score based on the relation of their Cost Proposal to the proposals offered at the lowest final cost, using this formula:

$$C = (A/B) * 25\%$$

A is Total price of lowest cost proposal;

B is Total price of cost proposal being scored; and

C is the Cost score.

The cost evaluation is **25% (up to 25 points)** of the final score.

8.5 Composite Score

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

8.6 Interviews

For all bids, and as part of the bid review process, the Department reserves the right to interview proposed project participants. The purpose of an interview is to allow the evaluators to validate the Bidder's experience and qualifications.

8.7 Reference Checks

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

8.8 Best and Final Offers

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

8.9 Award Recommendation

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

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

ATTACHMENTS

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

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

The following attachments are attached and included in this RFP:

- A. Proposal Document Checklist
- C. Tobacco Free Attestation

The following has been posted with this RFP on the Department website at <https://www.health.ny.gov/funding/>:

Attachment B - Cost Proposal
Survey Instrument Library

**ATTACHMENT A
PROPOSAL DOCUMENT CHECKLIST**

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

RFP 18047 – INDEPENDENT EVALUATION OF THE NEW YORK TOBACCO CONTROL PROGRAM		
FOR THE ADMINISTRATIVE PROPOSAL		
RFP §	SUBMISSION	INCLUDED
§ 6.1.A	Attachment 1 – Bidder’s Disclosure of Prior Non-Responsibility Determinations, completed and signed.	<input type="checkbox"/>
§ 6.1.B	Freedom of Information Law – Proposal Redactions (If Applicable)	<input type="checkbox"/>
§ 6.1.C	Attachment 3- Vendor Responsibility Attestation	<input type="checkbox"/>
§ 6.1.E	Attachment 4 - Vendor Assurance of No Conflict of Interest or Detrimental Effect	<input type="checkbox"/>
§ 6.1.f	M/WBE Participation Requirements:	<input type="checkbox"/>
	Attachment 5 Form 1	<input type="checkbox"/>
	Attachment 5 Form 2 (If Applicable)	<input type="checkbox"/>
§ 6.1.g	Attachment 6- Encouraging Use of New York Businesses	<input type="checkbox"/>
§ 6.1.H	Attachment 7 - Bidder’s Certified Statements, completed & signed.	<input type="checkbox"/>
§ 6.1.I	Attachment 9 – References	<input type="checkbox"/>
§ 6.1.J	Attachment 10 - Diversity Practices Questionnaire	<input type="checkbox"/>
§ 6.1.K	Attachment 11 - Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination	<input type="checkbox"/>
FOR THE TECHNICAL PROPOSAL		
RFP §	SUBMISSION	INCLUDED
§ 6.2.A	Title Page	<input type="checkbox"/>
§ 6.2.B	Table of Contents	<input type="checkbox"/>
§ 6.2.C	Documentation of Bidder’s Eligibility (Requirement)	<input type="checkbox"/>
§ 6.2.D	Technical Proposal Narrative	<input type="checkbox"/>
§ 6.2.D	Attachment C- Tobacco Free Attestation	<input type="checkbox"/>
FOR THE COST PROPOSAL REQUIREMENT		
RFP §	REQUIREMENT	INCLUDED
§ 6.3	Attachment B- Cost Proposal	<input type="checkbox"/>

**RFP # 18047 ATTACHMENT C
Tobacco Free Attestation**

ATTESTATION: REFUSAL OF FUNDS FROM TOBACCO-RELATED ENTITIES

The bidder understands and agrees that if it becomes a vendor of the Department of Health, the bidder and all persons within the organizational unit it represents shall not accept any grant or anything else of value from, or otherwise be affiliated with¹, any tobacco manufacturer, distributor, or other tobacco-related entity.²

The bidder understands and agrees that this attestation, when signed, serves as the bidder’s written policy regarding its tobacco-free status as defined herein.

The bidder understands and agrees to ensure that any agreement with subcontractors or consultants whose work is instrumental to achieving the goals and objectives of the contract shall execute a copy of this attestation.

Title: _____

Printed Name: _____

Signature: _____ Date: _____

¹ *Affiliation* includes, but is not limited to:

- being employed by, or a contractor of, any tobacco company, association or any other agent known to advance the interests of a tobacco company or association; or
- owning a patent or proprietary interest in a technology or process related to the consumption of tobacco or other tobacco use-related products.

² *Tobacco manufacturer, distributor, or other tobacco-related entity* includes, but is not limited to, any person, corporation or entity, including any repacker or relabeler, that manufactures, fabricates, assembles, processes, or labels a tobacco product; or imports a finished tobacco product for sale or distribution in New York State.

Frequently Asked Questions

Q. *What is the purpose of the Refusal of Funds from Tobacco-related Entities (RFTE) requirement?*

A. The RFTE requirement helps to assure that there are no conflicts of interest, potential conflicts of interest or perceived conflicts of interest between the DOH, its contractor's and tobacco-related entities. It assures that contractors do not rely on funding from sources that could dilute, or call into question, their commitment to tobacco control.

Q. *Does the RFTE requirement apply only during the life of the contract or does it extend more broadly?*

A. The RFTE requirement prohibits contractors from having any ongoing contractual relationships or any other affiliations with a tobacco manufacturer, its affiliates or its subsidiaries when the contractor signs the contract or from entering into such a relationship during the life of the contract. It does not bar grants to entities which have had past contractual relationships or any other affiliations with tobacco companies, nor does it prohibit contractors from entering into relationships with tobacco companies after the completion of the contract.

Q. *The RFTE requirement states that bidders may not accept any grant or anything else of value. In this context, what does "value" mean?*

A. Value means anything having or being perceived as having monetary value. This includes, but is not limited to, a salary, fee, goods, services, gifts, benefits, discounts, loans, advances, forbearances, travel, lodging, or any other thing paid, owed, given or promised. It also includes items which may be of a nominal value, including but not limited to refreshments, promotional items or ceremonial items (e.g., awards or plaques).

Q. *Does the RFTE requirement apply to the institutional recipient, the individuals working on the contract, or both?*

A. The RFTE requirement applies to both the institutional recipient and all individuals working on the contract.

Q. *How does the RFTE requirement apply to complex institutions, for example, universities or state or local governments? Is the entire university or state or local government bound by the RFTE requirement when one part of it accepts a DOH contract that includes the RFTE requirement in the funding announcement?*

A. No. DOH understands that it would be unduly burdensome for a university or state or local government to enforce this throughout the entire institution or state. For that reason, DOH only requires that the organizational unit receiving the contract comply with the RFTE requirement.

Q. *What does that mean in the context of an educational institution or other large institution such as a hospital? What is the "organizational unit receiving the contract"?*

A. In the case of an educational institution, the RFTE requirement applies to all programs of the School for which the contract project coordinator and/or principal investigator carries out the contract duties. It does not apply to other Schools or other components of the university. For example, if the contract project coordinator and principal investigator are carrying out the contract duties for a university's School of Public Health or for a department of the School of Public Health, the entire School of Public Health, including all of its departments and any other sub-units, must comply with the RFTE

requirement. Schools, departments, or other units located outside of the School of Public Health would not be similarly bound.

Similarly, in the case of a hospital, the RFTE requirement applies to the organizational unit for which the contract project coordinator and/or principal investigator are carrying out the contract duties. It does not apply to other organizational units within the hospital. For example, if the contract project coordinator and principal investigator are carrying out the contract duties in the community health unit of a hospital, the entire unit, including all of its departments and any other sub-units, must comply with the RFTE requirement. Other parts of the hospital would not be similarly bound.

Q. What about a local government such as a local health department?

A. The same principles apply. The department or agency within which the Contract Project Coordinator and/or Principal Investigator are carrying out the contract activities would be bound by the RFTE requirement. Other departments, agencies, etc. would not be.

Q. Do the RFTE requirement restrictions apply to sub-contractors or anyone else to whom the contractor disburses DOH funds?

A. The RFTE requirement of the contract applies to any sub-contractors that are instrumental to achieving the goals and objectives of the contract. For example, if a contractor subcontracts a scope of work to an entity to work on developing a media campaign to educate residents about the dangers of secondhand smoke in multi-unit housing buildings, or if a contractor sub-contracts with a consultant to do work with a health system to ensure tobacco screening policies, those sub-contracts/consultants are subject to the same requirements. If a contractor subcontracts with an entity to process payroll, conduct audits or rent space for a coalition meeting, those businesses are not subject to the RFTE requirement.

Q. Is a contractor required to divest itself of tobacco-related stock or other financial holdings?

A. No. The RFTE requirement does not contain divestiture provisions.

Q. How will a contractor know the identity of tobacco manufacturers, distributors or other tobacco-related entities?

A. DOH recognizes that identifying tobacco manufacturers, distributors and other tobacco-related entities can be challenging given the complex nature of conglomerates. Contractors are encouraged to review publicly-available information regarding tobacco companies.

Q. Are there any exceptions to the RFTE requirement?

A. DOH will consider, on a case-by-case basis, requests for a temporary waiver to permit a contractor to come into compliance with the RFTE requirement. Those requests should be submitted as a question during the procurement's open Q&A time.

Q. Isn't DOH concerned that potential contractors that could make a real contribution to tobacco control may be disqualified by this RFTE requirement?

A. DOH has made a substantial effort to assure that the RFTE required obligations are realistic, do not unduly burden institutions and do not interfere with humanitarian work. However, it is DOH's carefully considered view that it would be inconsistent with our mission and lead to conflicts of interest, if we were to fund institutions or, as described above, components of institutions that accept tobacco-

industry funding. We encourage institutions to review their own fundraising criteria and programs and consider the concerns we have put forward.

Q. What is the penalty if a contractor is not compliant with the RFTE requirement?

A. Depending on the nature of the noncompliance, the Department reserves the right to terminate the contract.