



DELAWARE HEALTH AND SOCIAL SERVICES
DIVISION OF MANAGEMENT SERVICES
1901 N. DuPont Highway
New Castle, DE 19720

REQUEST FOR PROPOSAL NO. HSS-14-019

FOR

DELAWARE MEDICAID MANAGED CARE ORGANIZATIONS

FOR

**Division of Medicaid and Medical Assistance
Lewis Building
1901 North Du Pont Highway
New Castle, DE 19720**

Deposit	Waived
Performance Bond	Waived

**Date Due: April 4, 2014
11:00 a.m. Eastern Time (ET)**

A pre-bid meeting will be held on February 14, 2014, at 10:30 a.m. at the Delaware Health and Social Services, Herman M. Holloway Sr. Campus, Main Administrative Building, 1st Floor Conference Room #198, 1901 N. DuPont Highway, New Castle, DE 19720. While attendance is not mandatory, entities who wish to bid on this RFP are strongly encouraged to take advantage of this opportunity for face to face discussion with state personnel responsible for managing the contract(s) resulting from this RFP and to hand deliver the Bidder's Notice of Intent to Bid. Due to space limitations, it is requested that Bidders limit representation to three (3) individuals. Bidders will be allowed to attend via conference call. The conference call information will be posted at a later date as an Addendum title conference call information. Bidders should RSVP for the pre-bid meeting by calling (302) 255-9290 or by emailing: DHSS_DMS_DMSprocure@state.de.us.

REQUEST FOR PROPOSAL # HSS-14-019

Sealed Proposals for Delaware Medicaid Managed Care Organizations for the Division of Medicaid and Medical Assistance will be **received** by:

Delaware Health and Social Services
Herman M. Holloway Sr. Campus
Procurement Branch
Main Administration Building, Sullivan Street
Second Floor, Room #257
1901 North DuPont Highway
New Castle, Delaware 19720

Proposals will be accepted until 11:00 a.m. ET on April 4, 2014, at which time the proposals will be opened and read.

A pre-bid meeting will be held on February 14, 2014 at 10:30 a.m. at Delaware Health and Social Services, Herman M. Holloway Sr. Campus, First Floor Conference Room #198, 1901 N. DuPont Highway, New Castle, DE 19702.

A "Notice of Intent to Propose" is due at or before the pre-bid meeting.

Obtaining Copies of the RFP

This RFP is available in electronic form [only] through the State of Delaware Procurement Website at <http://bids.delaware.gov>.

Public Notice

Public notice has been provided in accordance with 29 *Del. C.* § 6981.

IMPORTANT: ALL PROPOSALS MUST HAVE OUR HSS-14-019 NUMBER ON THE OUTERMOST PACKAGING. IF THIS NUMBER IS OMITTED YOUR PROPOSAL WILL IMMEDIATELY BE REJECTED.

FOR FURTHER BIDDING INFORMATION PLEASE CONTACT:

Kieran Mohammed
Procurement Administrator
Delaware Health and Social Services
Herman M. Holloway Sr. Campus
Procurement Branch
Main Administration Bldg, Sullivan Street
Second Floor, Room #257
1901 North DuPont Highway
New Castle, Delaware 19720
Email: Kieran.Mohammed@state.de.us

IMPORTANT: DELIVERY INSTRUCTIONS

IT IS THE RESPONSIBILITY OF THE BIDDER TO ENSURE THAT ITS PROPOSAL HAS BEEN RECEIVED BY THE PROCUREMENT UNIT OF THE DELAWARE HEALTH AND SOCIAL SERVICES BY THE DEADLINE.

ATTENTION BIDDERS: Your proposal must include all of the information specified in Appendix E of this RFP, Mandatory Submission Requirements Checklist.

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1 PURPOSE AND OVERVIEW

1.1 Introduction

This is a Request for Proposal (RFP) for Delaware Medicaid Managed Care Organizations (MCOs) issued by the State of Delaware Department of Health and Social Services (DHSS), Division of Medicaid and Medical Assistance (DMMA).

DHSS is issuing this RFP for the procurement of MCOs to provide statewide managed care services for the Diamond State Health Plan (DSHP) and the Diamond State Health Plan Plus (DSHP Plus) programs.

1.2 Purpose of this Request for Proposal

Through competitive bids, DHSS intends to procure two or three MCOs to provide high quality, cost-effective, and integrated managed care services to DSHP and DSHP Plus members, statewide. DHSS seeks to procure the best services at the most favorable, competitive prices.

DHSS has issued this RFP to define the State's minimum service requirements, solicit proposals, detail proposal requirements, and outline the State's process for evaluating proposals and selecting contractors.

The current MCO contracts will not be extended beyond December 31, 2014. Consequently, implementation of the new Medicaid MCO contract by January 1, 2015 is of critical importance to the State. The Contractor must assure assumption of MCO responsibilities without disruption to client services or provider payments.

The following goals are of importance to DHSS:

1. Assumption of operations by January 1, 2015.
2. Assumption of operations without disruption in services or payments.
3. Compliance with this Contract, including State and Federal law and policy incorporated by reference.
4. Compliance with the requirements of Title II of the Health Insurance Portability and Accountability Act (HIPAA), including standard code sets such as the International Classification of Diseases and Related Health Problems, Tenth Revision, Clinical Modification (ICD-10-CM) diagnosis codes and International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS) procedure codes and the standard transactions such as the Accredited Standards Committee (ASC) X12 Version 5010 and National Council for Prescription Drug Programs (NCPDP) Version D.0 and 3.0. Compliance includes both the Information Technology (IT) portion (e.g., format, syntax, and code set) and the business policy rules (e.g., prior authorization, claim adjudication, and fraud detection business rules that have been updated for ICD-10).
5. Provision of high quality, cost-effective and integrated managed care services.
6. Implementation of innovative and best practices in care coordination and case management.
7. Payment and delivery reform consistent with Delaware's State Health Care Innovation Plan.

8. Implementation of processes, tools, and metrics that establish performance measurement benchmarks and improve DHSS's ability to monitor contract performance.
9. Recommendations, including industry best practices to support DHSS's administration of the Medicaid managed care program.

1.3 Overview: DHSS

The mission of DHSS is to improve the quality of life for Delaware's citizens by promoting health and well-being, fostering self-sufficiency, and protecting vulnerable populations. DHSS is comprised of 12 divisions, as follows:

- Division of Substance Abuse and Mental Health.
- Division of Child Support Enforcement.
- Division of Long Term Care Residents Protection.
- Division of Management Services.
- Division of Developmental Disabilities Services.
- Division of Public Health.
- Division of Services for Aging and Adults with Physical Disabilities.
- Division of Social Services.
- Division of Medicaid and Medical Assistance.
- Division of State Service Centers.
- Division for the Visually Impaired.
- Office of the Chief Medical Examiner.

DHSS is designated as the single State agency responsible for the overall administration of Medicaid and the Delaware Healthy Children Program (DHCP). This administrative responsibility is discharged at the operational level through DMMA. The Contractors will be required to work with DHSS staff, including staff from DMMA and other divisions of DHSS, other State staff, the other contracted MCO(s), the State's Health Benefits Manager (HBM), the State's fiscal agent, the State's external review organization, the State's consultants and any other parties, agents, or contractors specified by DHSS.

For further information regarding the Delaware Department of Health and Social Services, go to: <http://dhss.delaware.gov/dhss/>.

1.4 Overview: Medicaid Managed Care

Delaware's Medicaid managed care program, comprised of DSHP and DSHP Plus, is authorized under the authority of a Section 1115 demonstration. This demonstration has been renewed five times, and the current renewal is effective through December 31, 2018. DSHP was implemented in 1996 and requires most Medicaid and DHCP clients to receive acute physical and behavioral health care services through an MCO. In 2012, Delaware implemented the DSHP Plus program, which expanded the

populations required to enroll in managed care to include Dual Eligibles and individuals receiving nursing facility or home and community based services (HCBS) as an alternative to nursing facility services. It also expanded the MCO benefit package to include custodial nursing facility services and HCBS for Medicaid clients who meet the applicable level of care. Currently approximately 92% of the State's Medicaid and DHCP clients (170,000) are enrolled in DSHP or DSHP Plus.

1.5 Procurement Library

In addition to information available on the State's websites, an electronic procurement library has been established for use by prospective Bidders during the procurement process. The procurement library contains a number of resource materials that Bidders may find useful in preparing their proposals. Information on relevant State websites and the materials included in the procurement library is included in Appendix C, Procurement Library.

A digital versatile disk (DVD) of materials listed in Appendix C, Procurement Library, will be provided upon request if the Bidder has submitted a Notice of Intent to Bid in accordance with Section 2.2 of this RFP. The DVD can be requested by emailing Dina Bogino at dina.bogino@state.de.us.

1.6 Procurement Contact

The procurement contact person for this RFP is:

Kieran Mohammed – DHSS Procurement Administrator
DE Department of Health and Social Services
Division of Management Services Procurement Branch, DHSS Campus
Administration Building – 2nd Floor Main Bldg., Room 259
1901 N. DuPont Highway
New Castle, DE 19720
Email: Kieran.Mohammed@state.de.us

1.7 Definitions

A glossary of terms and acronyms used throughout this RFP appears in Section 1 of Appendix A, Pro Forma Contract. Additional terms used in the body of the RFP are as follows:

Bidder – The entity that submits a proposal in response to this RFP.

Evaluation Team – The body appointed by DHSS to evaluate proposals submitted in response to this RFP.

Executive Selection Committee – The body appointed by DHSS to review Evaluation Team findings, the results of price negotiations and other evaluation factors and select contractors.

2 RFP SCHEDULE

2.1 Anticipated Schedule

The following timetable is anticipated for key activities within the procurement process:

Activity	Date
Issue RFP	January 31, 2014
Pre-Bid Meeting and Submission of Notice of Intent to Bid	February 14, 2014 at 10:30 A.M.
Submission of Questions	February 21, 2014
Responses to Questions	March 14, 2014
Receipt of Proposals	April 04, 2014
Technical Proposal Opening	April 07, 2014
Technical Proposal Review	May 12, 2014
Oral Presentations	May 26, 2014
Negotiate Price	June 9, 2014
Selection and Intent to Award (tentative)	June 12, 2014
Negotiate and Finalize Contract	June 26, 2014
Contract Signature	June 26, 2014
Contract Start Date	July 1, 2014
Implementation and Readiness Review	July 1, 2014 to December 31, 2014
Start Date of Operations	January 1, 2015

2.2 Notice of Intent to Bid

Bidders are encouraged to submit a Notice of Intent to Bid (see Appendix D). This notice is due by 10:30 a.m. ET on February 14, 2014 and must be emailed to Dina Bogino at dina.bogino@state.de.us or hand delivered to Ms. Bogino at the pre-bid meeting (see Section 2.3 below).

A Notice of Intent to Bid creates no obligation and is not a prerequisite for submitting a proposal; however, it is necessary to receive the procurement library DVD (see Section 1.5 above).

2.3 Pre-Bid Meeting

DHSS will hold a pre-bid meeting. The pre-bid meeting will take place February 14, 2014 at 10:30 a.m. ET at the following location:

DHSS Campus
Administration Building
Room 198
1901 N. DuPont Highway
New Castle, DE 19720

The purpose of the pre-bid meeting is to discuss the procurement process and the RFP scope of services. Bidders may ask clarifying questions regarding the RFP at the pre-bid meeting; however DHSS's verbal response to any question at the pre-bid meeting is tentative and non-binding. Bidders should submit written questions concerning the RFP in accordance with Section 4.1.3 of the RFP, below. Bidders are encouraged to email written questions to Dina Bogino at dina.bogino@state.de.us prior to the pre-bid meeting.

3 RFP TERMS AND CONDITIONS

3.1 Restrictions on Communications with State Staff

From the issue date of this RFP until contractors are selected and the contract award is announced, Bidders are NOT allowed to contact any State staff, except those specified in this RFP, regarding this procurement. Contact between Bidders and DMMA regarding this procurement is restricted to submission of the Notice of Intent to Bid in accordance with Section 2.2 of the RFP, the pre-bid meeting (see Section 2.3 of the RFP) and emailed questions submitted in accordance with Section 4.1.3. Following the deadline for submission of questions, Bidder communication with State staff regarding this RFP is limited to Kieran Mohammed, Delaware Health and Social Services. The central phone number for the Procurement office is (302) 255-9290. Failure to adhere to this limitation will be grounds for disqualification from the procurement process and the immediate rejection of the offending party's proposal.

3.2 Consultants and Legal Counsel

DHSS may retain consultants or legal counsel to assist in the review and evaluation of Bidders' proposals. Bidders shall not contact consultants or legal counsel on any matter related to the RFP.

3.3 Reserved Rights

Notwithstanding anything to the contrary, DHSS reserves the right to:

- Reject any and all proposals received in response to this RFP;
- Select proposals other than the one(s) with the lowest cost;
- Waive or seek clarification on any information, irregularities, or inconsistencies in proposals received;
- Negotiate as to any aspect of the technical proposal and price with the Bidder and negotiate with more than one Bidder at a time;
- If negotiations fail to result in a Contract within two weeks, DHSS may terminate negotiations and select the next most responsive Bidder(s), prepare and release a new RFP, or take such other action as DHSS may deem appropriate.

3.4 Entities Ineligible to Bid

In order to submit a proposal, the Bidder must be licensed by the Delaware Department of Insurance as a Health Maintenance Organization (HMO) or Health Service Corporation, or be licensed by another state as an HMO.

Any individual, business, organization, corporation, consortium, partnership, joint venture, or any other entity, including subcontractors currently debarred or suspended is ineligible to submit a proposal. Any entity ineligible to conduct business in the State of Delaware for any reason is ineligible to submit a proposal.

3.5 Exclusions

DHSS reserves the right to refuse to consider any proposal from a Bidder who:

- Has been convicted for commission of a criminal offense as an incident to obtaining or attempting to obtain a public or private contract or subcontract, or in the performance of the contract or subcontract;
- Has been convicted under State or Federal statutes of embezzlement, theft, forgery, bribery, falsification or destruction of records, receiving stolen property, or other offense indicating a lack of business integrity or business honesty that currently and seriously affects responsibility as a State contractor;
- Has been convicted or has had a civil judgment entered for a violation under State or Federal antitrust statutes;
- Has violated contract provisions such as:
 - Knowing failure without good cause to perform in accordance with the specifications or within the time limit provided in the contract;
 - Failure to perform or unsatisfactory performance in accordance with terms of one or more contracts;
 - Has violated ethical standards set out in law or regulation; and
 - Any other cause listed in regulations of the State of Delaware determined to be serious and compelling as to affect responsibility as a State contractor, including suspension or debarment by another governmental entity for a cause listed in the regulations.

3.6 Project Cost

DHSS reserves the right to award this project to a Bidder other than the one with the lowest cost or to decide not to fund this project at all. DHSS reserves the right to reject, as technically unqualified, proposals that are unrealistically low if, in the judgment of DHSS, a lack of sufficient budgeted resources would jeopardize the successful completion of the project.

3.7 Opening of Technical Proposals

The State of Delaware will receive technical proposals until the date and time shown in Section 2.1 of this RFP. Proposals will be opened only in the presence of State of Delaware personnel. Any unopened proposals will be returned to the Bidder.

There will be no public opening of proposals, but a public log will be kept of the names of all Bidders that submitted proposals. The contents of any proposal shall not be disclosed to other Bidders prior to contract award.

3.8 Acknowledgement of Understanding of Terms

By submitting a technical proposal, each Bidder shall be deemed to acknowledge that it has carefully read all sections of this RFP, including appendices hereto, and has fully informed itself as to all requirements and existing conditions and limitations.

3.9 Realistic Proposals

It is the expectation of the State of Delaware that the Bidder can fully satisfy the obligations of the technical proposal in the manner and timeframe defined within the proposal. Proposals must be realistic and must represent the best estimate of time, materials and other costs, including the impact of inflation and any economic or other factors that are reasonably predictable.

The State of Delaware shall bear no responsibility or increase obligation for a Bidder's failure to accurately estimate the costs or resources required to meet the obligations defined in the Bidder's proposal.

3.10 Non-Conforming Proposals

Non-conforming proposals will not be considered. Non-conforming proposals are defined as those that do not meet the requirements of this RFP. The determination of whether an RFP requirement is substantive or a mere formality shall reside solely with the State of Delaware.

3.11 Notification of Acceptance

Notification of DHSS's intent to enter into contract negotiations will be made in writing to all Bidders.

3.12 Amendments to Technical Proposals

A Bidder may submit an amended technical proposal before the deadline for proposal submission. An amended proposal must be a complete replacement for a previously submitted proposal and must be clearly identified as such in the transmittal letter.

Amendments to proposals will not be accepted after the deadline for proposal submission has passed. The State reserves the right at any time to request clarification and/or further technical information from any or all Bidders submitting proposals.

3.13 Proposals Become State Property

All proposals become the property of the State of Delaware and will not be returned to the Bidders.

3.14 Investigation of Bidder's Qualifications

DHSS may make such investigation as it deems necessary to determine the ability of the Bidder to furnish the required services, and the Bidder shall furnish such data as DHSS may request for this purpose.

3.15 RFP and Final Contract

The contents of the RFP will be incorporated into the final contract by reference and will become binding upon the successful Bidders. Appendix A is a copy of the pro forma contract, which will be the one used for any contract resulting from this RFP. Execution of the contract is NOT required with proposal submission.

If the Bidder has an objection to or is unwilling to comply with any of the requirements, terms, or conditions of the RFP, including any appendices, objections must be clearly stated in the transmittal letter of the Bidder's proposal. Objections will be considered and may be subject to negotiation at the discretion of the State.

3.16 Proposal and Final Contract

The contents of each proposal will be considered binding on the Bidder, and the contents of a successful proposal will be included by reference in the resulting contract. All terms and conditions contained in the proposal will remain fixed and valid for the term of the Contract.

3.17 Cost of Proposal Preparation

All costs for proposal preparation will be borne by the Bidder.

3.18 Public Information and Confidentiality

After contract award, all proposals, documents, and materials submitted by a Bidder pertaining to this RFP will be considered public information and will be made available for inspection, unless otherwise determined by the Procurement Administrator under the laws of the State of Delaware. The Bidder must inform DHSS in writing of the exact materials in the proposal that CANNOT be made a part of the public record in accordance with Delaware's Freedom of Information Act (FOIA), Title 29, Chapter 100 of the Delaware Code. The Bidder shall indicate in its technical proposal the information that cannot be made a part of the public record.

3.19 Debriefing and FOIA Requests

If a Bidder wishes to request a debriefing, the Bidder must submit a formal letter to the Procurement Administrator, Herman M. Holloway Campus, Delaware Health and Social Services Main Building, 2nd Floor, Room 257, 1901 N. DuPont Highway, New Castle, Delaware 19720 within 10 days after receipt of Notice of Award. The letter must specify reasons for the request.

If a Bidder wishes to access documents pertaining to this RFP under the Freedom of Information Act, please contact ernest.sudler@state.de.us with the specific details of your request. This request can be made at any time, but please note debriefing and FOIA requests will be scheduled for response after the RFP process is completed in its entirety.

4 PROPOSAL REQUIREMENTS

4.1 Technical Proposal Instructions

The Bidder's technical proposal must be submitted as follows:

Two (2) original disks (each labeled as "Original") and fifteen (15) disk copies (each labeled as "Copy") that contain the Bidder's technical proposal (see Section 4.2).

Each disk must contain the following files at a minimum:

- Disk Directory (Microsoft Word 2003 or higher).
- RFP Technical Proposal (Microsoft Word 2003 or higher).
- RFP Technical Proposal.pdf.

The disks can be in either CD-R or DVD-R formats.

The Disk Directory file must contain a Word table listing each file contained on the disk along with a short description of each. The PDF of the technical proposal must be a single file containing a printable copy of the entire technical proposal. Other files may be submitted separately.

It is the responsibility of the Bidder to ensure all submitted disks are machine-readable, virus-free, and are otherwise error-free. Disks (or their component files) not in this condition may be cause for the Bidder to be disqualified from bidding.

The disks must be labeled on the outside as follows:

<p>State of Delaware Department of Health and Social Services RFP</p> <p>Delaware Medicaid MCO Procurement Technical Proposal</p> <p>DHSS RFP #HSS-14-019</p> <p>(Name of Bidder)</p> <p>April 4, 2014</p>
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The technical proposal must also be submitted on paper and comply with the following:

1. Be printed on 8.5" x 11" paper with one-inch margins; font size no smaller than Times New Roman 12; and have single line spacing within a paragraph and one blank line between paragraphs. Larger paper (up to 11" x 17") and smaller fonts are permissible for charts, diagrams, and related visuals.
2. Be double-sided.

3. Be presented in a 3-ring binder (or similar binding that allows for easy removal of documents).
4. Indicate information that is confidential and cannot be made a part of the public record (see Section 3.18 of this RFP); for example, by using a different font.

For the paper copies of the technical proposal, the Bidder must provide one (1) original and fifteen (15) copies. The original and the copies must be labeled as "Original" or "Copy" as appropriate.

Each technical proposal package (the disk and paper copies of the technical proposal) must be sealed in a box (or boxes).

The packing boxes must be numbered sequentially (e.g., Box 1 of 4, Box 2 of 4). Each box must be labeled with the following information:

- Bidder's Name and Address.
- Procurement Administrator's Name and Address.
- RFP Title and HSS 14-019.

4.1.1 Proposal Delivery

Technical proposals must be delivered to:

Procurement Administrator
DE Department of Health & Social Services Division of Management Services Procurement Branch,
DHSS Campus
Administration Building – 2nd Floor Main Bldg., Room 257
1901 N. DuPont Highway
New Castle, DE 19720

4.1.2 Closing Date

All technical proposals must be received no later than April 4, 2014, 11:00 a.m. ET. Later submission will be cause for disqualification.

4.1.3 Bidder Questions

All questions concerning this RFP shall reference the pertinent document (e.g., RFP Appendix A), section number(s), applicable heading(s), and page number(s). Questions must be in writing and emailed to Dina Bogino at dina.bogino@state.de.us. The deadline for submission of all questions is 4 p.m. ET on February 21, 2014, but Bidders are encouraged to submit questions before the pre-bid meeting, which is February 14, 2014.

It is the Bidder's responsibility to ensure that questions are received by the above named person by the date and time specified above. DHSS will not respond to questions received after that date and time. A final list of written questions and responses will be posted as an RFP addendum at the following address: <http://Bids.delaware.gov>.

4.2 Technical Proposal Contents

The Bidder's technical proposal shall consist of and be labeled with the following sections:

- Title Page.
- Table of Contents (Tab 1).
- Transmittal Letter (Tab 2).
- Executive Summary (Tab 3).
- Mandatory Submission Requirements Checklist (Tab 4).
- Required Forms (Tab 5).
- Financial Statements (Tab 6)
- Responses to Questions (Tab 7).
 - Qualifications and Experience (Tab 8).
 - Enrollment and Disenrollment (Tab 9).
 - Marketing (Tab 10).
 - Covered Services (Tab 11).
 - Pharmacy Services (Tab 12).
 - Care Coordination (Tab 13).
 - Case Management for DSHP Plus LTSS (Tab 14).
 - Service Coordination (Tab 15).
 - Provider Network (Tab 16).
 - Provider Agreements (Tab 17).
 - Provider Payment (Tab 18).
 - Utilization Management (Tab 19).
 - Quality (Tab 20).
 - Member Services (Tab 21).
 - Grievance and Appeal System (Tab 22).
 - Program Integrity (Tab 23).
 - Financial Management (Tab 24).

- Claims Management (Tab 25).
- Information Systems (Tab 26).
- Staffing (Tab 27).
- Reporting (Tab 28).

Each tab should include the name of the section (e.g., the first tab should say “Table of Contents”). The format and contents for the material to be included in each section is described below. Each section of the technical proposal must include all items listed under the applicable heading below. The technical proposal shall not include or reference cost information.

4.2.1 Title Page

The title page shall include: 1) the RFP title and HSS number; 2) the name of the Bidder; 3) the Bidder’s full address; 4) the Bidder’s telephone number; 5) the name and title of the Bidder’s designated contact person; and 6) the technical proposal opening date.

4.2.2 Table of Contents (Tab 1)

Tab 1 shall be labeled Table of Contents and contain the table of contents of the technical proposal. The table of contents shall include all sections listed above (Tabs 1 through 28) and the corresponding page number.

4.2.3 Transmittal Letter (Tab 2)

Tab 2 shall be labeled Transmittal Letter and contain the Bidder’s transmittal letter. The transmittal letter shall be written on the Bidder’s official business letterhead and shall be signed by an individual authorized to commit the Bidder to the Contract.

The transmittal letter must include the following in the order given:

1. If the Bidder has an objection to or is unwilling to comply with any of the requirements, terms or conditions of the RFP, including any appendices, a clear statement of the objection and proposed alternative language. The Bidder shall include no more than ten objections. If the Bidder does not have any objections and is willing to comply with all of the requirements, terms and conditions of the RFP, including appendices, a statement to that effect.
2. A statement regarding whether the Bidder has identified any information in the proposal that is confidential and cannot be made a part of the public record; how the Bidder has identified such information; and a list of sections with confidential information.
3. A statement certifying that, as applicable, the Bidder is (a) licensed by the Delaware Department of Insurance (DOI) as a Health Maintenance Organization, (b) licensed by DOI as a Health Service Corporation or (c) licensed by a state other than Delaware as a health maintenance organization. Include the license type and number, and, if licensed by a state other than Delaware, contact information for the state insurance agency (name of agency, contact name, contact phone and email address).
4. A statement indicating the percentage of the work to be completed by the Contractor and each subcontractor that will manage or provide Covered Services as a percentage of the total work to be performed. The technical proposal must not include actual price information. Such inclusion may result in rejection of the proposal.

5. A statement certifying that the Bidder and any proposed subcontractor is not currently debarred or suspended from doing business with the Federal government or the State of Delaware.
6. A statement providing assurance that the Bidder and any proposed subcontractor is eligible to conduct business in Delaware.
7. A statement identifying both the Bidder's and its subcontractors' federal tax identification numbers.
8. A statement certifying that the Bidder is not proposing to use and will not use any offshore services in fulfilling the requirements outlined in this RFP and in the attached pro forma Contract.
9. A statement identifying all addenda to this RFP issued by the State and received by the Bidder. If no addenda have been received, a statement to that effect.
10. A statement certifying that the person signing the letter is the person in the Bidder's organization responsible for, or authorized to make, decisions regarding prices to be negotiated.
11. If the use of subcontractor(s) is proposed, a statement from each subcontractor on the subcontractor's letterhead must be appended to the transmittal letter signed by an individual authorized to legally bind the subcontractor stating:
 - a. The general scope of work to be performed by the subcontractor.
 - b. The subcontractor's willingness to perform the work indicated.
 - c. The subcontractor's assertion that it does not discriminate in employment practices with regard to race, color, religion, age (except as provided by law), sex, marital status, political affiliation, national origin, or handicap or any other status protected by State or Federal law.

4.2.4 Executive Summary (Tab 3)

Tab 3 shall be labeled Executive Summary and contain an executive summary. The executive summary shall present a high-level project description to give the Evaluation Team and others a broad understanding of the Bidder's technical proposal. The executive summary is limited to a maximum of five (5) pages. The Executive Summary will not be scored.

4.2.5 Mandatory Submission Requirements Checklist (Tab 4)

Tab 4 shall be labeled Mandatory Submission Requirements Checklist and contain the completed checklist of mandatory submission requirements provided in Appendix E. This checklist will be used to confirm that the Bidder has produced and submitted a technical proposal according to the RFP specifications.

4.2.6 Required Forms (Tab 5)

Tab 5 shall be labeled Required Forms and shall include the following completed forms.

4.2.6.1 Certification and Statement of Compliance

Appendix F provides forms in which the Bidder must certify certain required compliance provisions.

4.2.6.2 State of Delaware Contracts Disclosure

Appendix G provides a form onto which the Bidder shall list all contracts awarded to it or its predecessor firm(s) by the State of Delaware that have been active during the last three years. Failure to list any contract as required by this paragraph may be grounds for immediate rejection of the proposal.

4.2.6.3 Bidder's Signature Form

Appendix H contains a standard Bidder's Signature Form to be completed and signed by the Bidder.

4.2.7 Financial Statements (Tab 6)

Tab 6 shall be labeled Financial Statements and contain copies of the Bidder's most recent audited financial statements for each line of business operated, showing a separation between Medicaid, Medicare and other accounts. Audited financial statements shall include, but not be limited to, the income statement, statement of changes in financial condition or cash flow, balance sheet, notes to the financial statements, and final management letter and report of internal controls.

4.2.8 Responses to Questions (Tab 7)

Tab 7 shall be labeled Responses to Questions and contain the Bidder's response to each of the questions in the following subsections. For each question the Bidder shall start on a new page and include both the number of the question and the text of the question and then provide the response. All pages within a section shall be numbered sequentially and include the section name and total number of pages for the section. In addition, all pages should include the Bidder's name in the header or footer.

The Bidder's response shall be concise but complete and should reflect an understanding of applicable requirements of the pro forma contract (Appendix A), the data book (Appendix B), and information available on the State's websites and in the procurement library (Appendix C). All responses should include relevant experience and how it will be applied to this Contract. In responding to a question, if the Bidder will use a subcontractor to fulfill any part of the response, the Bidder shall provide the name of the subcontractor and explain how the subcontractor's performance will be no less effective than if done by the Bidder.

The response to each question must be complete and independent from information or responses provided in other sections of the proposal. The Evaluation Team will not follow references to other sections of the proposal or review information not included as part of a response. Any exhibits must be incorporated into the applicable response but may be included at the end of the response or section. All pages of a response, including any exhibits, shall be counted toward the page limits for each section. The Evaluation Team may elect not to evaluate any information on pages that exceed the maximum number of pages specified for each section, as provided below.

4.2.8.1 Qualifications and Experience (Tab 8) (No page limit)

1. Submit a corporate organizational chart that illustrates the lines of authority within the Bidder's organization, including parent, affiliated and/or related business entities including, but not limited to, subsidiaries, joint ventures or sister companies, and describe the Bidder's relationship, including financial relationship, to parent, affiliated and/or related business entities that the Bidder anticipates will be providing services under this Contract.

2. Submit an organization chart and a brief narrative explaining how administrative functions will be conducted for this Contract. The chart and brief narrative shall include:
 - a. Key functions;
 - b. Key personnel (existing or projected) as listed in Section 3.20.2 of this Contract;
 - c. Reporting relationships showing lines of authority within and among the Bidder and subcontractors;
 - d. Number of full time equivalent positions (both existing and projected for start date of service delivery) per functional area;
 - e. Location of staff (city and state); and
 - f. Use of administrative subcontractors.
3. Submit an organization chart of the Bidder's implementation team and provide a brief narrative describing the Bidder's implementation team, including the number and type of staff (by function); the percentage and length of time they will be dedicated to this Contract, including time onsite in Delaware; and how the Bidder will transition to the operations team, if applicable.
4. Identify, in table format, all of the Bidder's publicly-funded managed care contracts for Medicaid/CHIP within the last five years. In addition, identify, in table format, the Bidder's 10 largest (as measured by number of enrollees) managed care contracts for populations other than Medicaid/SHIP within the last five years. For each prior experience identified, please provide a brief description of the scope of work (including whether the Bidder was responsible for the provision of physical health, pharmacy, behavioral health, nursing facility and/or HCBS), the duration of the contract, if the contract has ended, the reason for termination, the contact name, phone number and email address, the number of members and the population types (e.g., TANF, ABD, duals, CHIP), the annual contract payments, whether payment was capitated or other, and the name and role of subcontractors, if any.
5. Identify any anticipated administrative subcontractors or service subcontractors (e.g., for behavioral health or pharmacy or subcontracts with providers to provide administrative services in addition to covered services) the Bidder will use to provide services outlined in this RFP. This shall include the name of the subcontractor, ownership information (including any relationship to the Bidder), the services to be provided by the subcontractor, the estimated amount of the subcontract, the qualifications of the subcontractor, and how the Bidder will monitor the subcontractor to ensure compliance with all requirements.
6. List the states in which the Bidder is NCQA-accredited and indicate the accreditation status by product line. If the Bidder has ever had its accreditation status with NCQA or another national accreditation organization (e.g., URAC) adjusted down, suspended, or revoked, identify the state and product line and provide an explanation. Include information on parent, affiliated and/or related business entities.
7. State whether there is any pending or recent (i.e., in the last seven years) civil, criminal or administrative litigation against the Bidder (including parent, affiliated and/or related business entities) where the amount in controversy is \$1 million or more OR any litigation that is related to a public sector contract (including, but not limited to, Medicaid, Medicare, CHIP, and public employees). If there is any such pending or recent litigation, provide the contract that is being

litigated (if applicable), the damages being sought or awarded and the extent to which adverse judgment is/would be covered by insurance or reserves set aside for this purpose. Also include any outcomes, deferred prosecution agreements (or agreements whose effect is the same) and settlement agreements. Also include any Securities and Exchange Commission (SEC) filings discussing any pending or recent litigation. The Bidder does not need to divulge workers' compensation litigation, real estate litigation, internal contractual litigation (including labor litigation), and employment litigation if there is no Equal Employment Opportunity Commission (EEOC) cause finding (or state/local agency equivalent of cause finding).

8. State whether the Bidder is currently or has recently (within the past seven years) been the subject of a criminal or civil investigation by a state or federal agency. If yes, provide an explanation with relevant details and the outcome (if applicable). If the outcome was against the Bidder, provide the corrective action plan the Bidder implemented to prevent such future offenses. Include information for the Bidder's organization as well as any parent organization and any affiliated and/or related business entities that provide Medicaid or Medicare services or will provide services under this Contract. The Bidder is not required to include information regarding EEOC investigations that did not result in a cause finding, unless those investigations are ongoing.
9. Identify and describe any debarment or suspension, regulatory action or sanction (monetary or non-monetary sanctions) imposed by any federal or state regulatory entity against the Bidder within the last seven years. This shall include information on parent, affiliated and/or related business entities.
10. Provide a work plan for the implementation of this Contract from Contract award to the Start Date of Operations. At a minimum, the work plan shall include key activities by function with associated timeframes.

4.2.8.2 Enrollment and Disenrollment (Tab 9) (Limit of 10 pages)

11. Describe the Bidder's experience regarding enrollment of newborns, including lessons learned.
12. In cases when the Bidder requests a member be transferred to another MCO, describe how the Bidder first attempts to resolve the issue that led to the transfer request directly with the member.

4.2.8.3 Marketing (Tab 10) (Limit of 10 pages)

13. Describe the types of events and activities that the Bidder plans to sponsor and/or participate in during the first year of operations, including the target audience.
14. Describe how the Bidder will educate the Bidder's employees, subcontractors, providers, agents, etc. about prohibited marketing activities as specified in this Contract and will ensure that prohibited activities do not occur.

4.2.8.4 Covered Services (Tab 11) (Limit of 35 pages)

15. Describe how the Bidder will ensure the appropriate delivery of immunizations and dental services to members who are under age 21. Include any relevant experience, lessons learned, and innovative practices that will be used for this Contract.
16. Describe the Bidder's experience managing or contracting for a mental health service system. Include the services managed, the populations served, and outcomes achieved.

17. Describe the Bidder's experience managing or contracting for a comprehensive substance use disorder treatment system, including incorporation of Medication Assisted Treatment and opioid treatment programs. Include the services and levels of care managed, the populations served, and the outcomes achieved.
18. Describe how the Bidder will ensure that members (for both members participating in PROMISE and those not participating in PROMISE) receive appropriate behavioral health services. At a minimum, include:
 - a. How the Bidder will ensure early identification of behavioral health needs;
 - b. How the Bidder will determine that appropriate behavioral health services are being provided on an individual basis;
 - c. How the Bidder will determine that appropriate behavioral health services are being provided at the program level;
 - d. How the Bidder will define successful outcomes at the individual level; and
 - e. How the Bidder will define successful outcomes on the program level.
19. Provide a description of the "extra" services (not "in lieu of" services) you propose to provide to members pursuant to Section 3.4.8 of this Contract throughout the term of the Contract, including the following:
 - a. Service name and description, including name of service, procedure code(s), description, prior authorization requirements, and any amount, scope or duration limitations;
 - b. Information about the populations eligible to receive the service, including category or group of members, age range, other characteristics, and projected number to be served;
 - c. Goals and objectives;
 - d. Type of providers qualified to provide the service, including provider qualifications and any limitations on provider capacity;
 - e. Units of service and anticipated number of units of service per member served;
 - f. Targeted length of service;
 - g. How and when providers and members will be notified about the availability of the service;
 - h. How a member may obtain or access the service;
 - i. The process for reporting encounter data (including record type, procedure codes, etc.); and
 - j. How the Bidder will monitor the provision of the service.

4.2.8.5 Pharmacy Services (Tab 12) (Limit of 25 pages)

20. Describe in detail the Bidder's proposed pharmacy protocols for the following:
- a. Provider and member inquiries for coverage, including response time;
 - b. Accessing drugs that are not on the Preferred Drug List (PDL), fall outside of general prescribing rules or exceed the DMMA prescribed quantity limits; and
 - c. Delivery for specialty drugs that are administered in a clinical setting.
21. Describe the Bidder's process for overseeing prescribing and dispensing practices of providers. At a minimum, include how the Bidder will:
- a. Identify providers who prescribe and dispense controlled substances at a rate excessive to their area of practice;
 - b. Identify and address member drug-seeking behavior;
 - c. Ensure that medications provided to children/adolescents are appropriate to the diagnosis, symptoms, and age of the child/adolescent; and
 - d. Ensure the appropriate use of anti-psychotics by nursing facility residents.
22. Describe how the Bidder will manage the fiscal impact of the pharmacy benefit. At a minimum describe how the Bidder will:
- a. Encourage a high rate of PDL use;
 - b. Minimize labeler disputes that reduce rebate collection; and
 - c. Maximize primary coverage and payment.

4.2.8.6 Care Coordination (Tab 13) (Limit of 35 pages)

23. Describe the Bidder's relevant experience in implementing care coordination for Medicaid or similar populations, including the types of care coordination interventions utilized, typical member engagement levels, and a description of the outcomes the Bidder has achieved.
24. Describe the Bidder's approach for risk stratifying members to the levels identified in this Contract, including processes to conduct and utilize the results of member health risk assessments.
25. For the All-Member Level, describe how the Bidder will:
- a. Provide appointment assistance and linkage to services;
 - b. Identify members who have missed a preventive care visit, and outreach to these members and their primary care provider (PCP) to encourage member access to preventive care, including outreach methods that will be used;
 - c. Identify community resources to populate the registry of wellness, health education, disease management and self-management programs and activities that are available to

members and that are accepting new participants, as well as processes for keeping this registry up-to-date;

- d. Identify providers who would benefit from Contractor training on topics related to building provider-level wellness programs; and
- e. Evaluate provider wellness program training effectiveness.

26. For Level 1 resource coordination, describe how the Bidder will:

- a. Actively assist providers in discharge planning for Level 1 members following acute episodes of care; and
- b. Identify a Level 1 member with a high rate of low acuity, non-emergent visits to the emergency room, and how the Contractor will actively engage with the member and his/her PCP to identify barriers and coordinate the member's linkage back to primary care services.

27. For Level 2 care coordination, describe how the Bidder will:

- a. Train and ensure adequate supervision of Level 2 care coordination staff;
- b. Ensure that members have access to a back-up care coordinator if their assigned care coordinator is unavailable;
- c. Ensure that the member assessment is comprehensive and includes the member, member representative, as well as the member's caregivers and family, PCP and other providers as appropriate; and
- d. Reassess members for need to move to a lower level of care coordination.

28. Describe the Bidder's commitment to supporting practice-based care coordination activities in Delaware.

4.2.8.7 Case Management for DSHP Plus LTSS (Tab 14) (Limit of 25 pages)

29. Describe how the Bidder will (a) assign members to case managers; (b) inform members of assigned case manager and how to change case managers; and (c) track, monitor and evaluate the adequacy and appropriateness of case manager caseloads. Include any relevant experience, including lessons learned.

30. Describe how the Bidder's case management program will address:

- a. Coordination and integration at the individual member level of covered services (i.e., physical health, behavioral health, and long term services and supports)
- b. Coordination and follow-up of inpatient care;
- c. The process for receiving and sharing pertinent information and interfacing with the member's PCP and other relevant providers to promote continuity of care and coordination of services;

- d. Referrals to, and coordination with, community-based resources/non-covered services; and
 - e. Involvement of the member and member representative in decisions regarding care.
31. Describe how the Bidder will ensure that members receive appropriate HCBS. At a minimum, include:
- a. How the Bidder will verify that authorized HCBS are being provided in accordance with the member's plan of care, including the amount, frequency, duration and scope of each service, in accordance with the member's service schedule.
 - b. The criteria the Bidder will use to determine that appropriate HCBS are being provided on an individual basis;
 - c. The criteria the Bidder will use to determine that appropriate HCBS are being provided at the program level;
 - d. How the Bidder will define successful outcomes at the individual level; and
 - e. How the Bidder will define successful outcomes on the program level.

4.2.8.8 Service Coordination (Tab 15) (Limit of 35 pages)

32. Describe the Bidder's planned approach to transitioning DSHP or DSHP Plus members who become eligible for DSHP Plus LTSS.
33. Describe the Bidder's planned approach to transitioning individuals who are not current members but will be enrolled as DSHP Plus LTSS members, including individuals currently living out of State.
34. Describe how the Bidder will manage the provision of self-directed attendant care services, including at a minimum:
- a. Conducting a self-assessment;
 - b. Monitoring the provider of support for self-direction;
 - c. Ensuring that support brokers and case managers work collaboratively and do not duplicate tasks and activities;
 - d. Monitoring the quality of service delivery and the health, safety and welfare of members electing self-directed attendant care services;
 - e. Monitoring for and addressing fraud and abuse; and
 - f. The Bidder's experience with self-directed care, including lessons learned.
35. Describe how the Bidder will coordinate non-emergency medical transportation for DSHP members.
36. Describe how the Bidder will provide and coordinate specialized services for nursing facility residents.

37. Describe the Bidder's proposed strategies and agreements to effectively communicate and coordinate care for members who are participating in the PROMISE program, including proposals related to ensuring adequate resources and capacity to participate in service coordination and participation in developing, implementing, and updating member plans of care.

4.2.8.9 Provider Network (Tab 16) (Limit of 30 pages)

38. Provide the following based on the Bidder's proposed provider network for this Contract, as supported by provider participation agreements or letters of intent (LOIs):
- a. Number of participating providers, by type (as specified defined in the "List of Provider Types for Question 38" in the procurement library (see Appendix C)) and county served;
 - b. Description of monitoring activities to ensure that access (time and distance) standards are met;
 - c. Description of monitoring activities to ensure that members have timely access to services (appointment standards and wait times);
 - d. Network deficiencies by Covered Service and by county and interventions to address the deficiencies;
 - e. Strategies for recruiting providers (by provider type) that do not currently serve members covered by Medicaid; and
 - f. Ongoing activities for provider network development.
39. Describe how the Bidder will monitor the quality and performance of participating providers, including the use of performance measures and incentives, and how the Bidder will address provider performance issues.
40. Describe how the Bidder will educate, train, and assist providers with billing mechanisms and requirements and service authorization processes and criteria.
41. Describe how the Bidder will identify specific and general provider needs for training, technical assistance, etc., and how the Bidder will address those needs. Include an example of how the Bidder has identified and addressed (a) a specific provider need with a particular provider and (b) a general provider need among multiple providers.
42. Describe the Bidder's proposed PCP assignment process, including the factors considered and the hierarchy, how the Bidder will ensure that each member is assigned a PCP in a timely manner, how the Bidder will ensure that the member is provided information on his/her PCP (including any changes) and how to request a change, how the Bidder will notify the PCP of the assignment, and how the Bidder will encourage members to establish a relationship with their PCP and will support that relationship.

4.2.8.10 Provider Participation Agreements (Tab 17) (Limit of 5 pages)

43. Provide an example of how the Bidder has handled provider non-compliance with participation agreement requirements, including the issue, steps taken and timeframes for resolution.

4.2.8.11 Provider Payment (Tab 18) (Limit of 15 pages)

44. Describe the Bidder's anticipated provider payment models under this Contract, including the number and type of providers and services that will be reimbursed through fee-for-service, pay for value (P4V), and total cost of care models, and proposed design parameters for each model. In responding to this question consider the following example shared savings design parameters, which are illustrative of the model Delaware Medicaid is interested in: (a) shared savings level 30% upside only (50% if upside and downside risk), after 2% minimum savings rate; (b) multi-year baseline, reset every two years; (c) 3% baseline trend; (d) stop/gain limit of 10% of total cost of care; and (e) care coordination fees of \$2 per member per month. Also describe the Bidder's commitment to introduce new payment models consistent with the payment models under this Contract if the Bidder offers other lines of business (e.g., commercial group, Medicare Advantage) in Delaware.
45. Describe how the Bidder will design, implement and monitor P4V and total cost of care models to support provider transition to these models and ensure quality of care.

4.2.8.12 Utilization Management (Tab 19) (Limit of 25 pages)

46. Describe the Bidder's proposed utilization management (UM) program for HCBS, including, at a minimum:
- a. UM guidelines/review criteria for attendant care services and for chore services;
 - b. The role of case management and UM staff;
 - c. How the Bidder will ensure consistent application of the guidelines/review criteria; and
 - d. The Bidder's experience with authorizing HCBS, including lessons learned.
47. Describe how the Bidder will identify utilization patterns, including over and under utilization, and change those patterns when the patterns suggest inappropriate use of services that impacts quality of care.
48. Describe the Bidder's proposed PCP profiling methodology, including measures, data sources, and frequency, and how the Bidder will use the results of PCP profiling to improve quality of care for members. Include the Bidder's experience with PCP profiling.
49. Describe the Bidder's proposed strategies and agreements for achieving the inpatient behavioral health utilization reduction targets contained within the Department of Justice Settlement Agreement, including proposals related to (a) monitoring adult inpatient behavioral health admissions, readmissions and lengths of stay and (b) collaborating with local emergency departments and behavioral health providers to appropriately utilize adult inpatient diversion services.

4.2.8.13 Quality (Tab 20) (Limit of 20 pages)

50. Describe the Bidder's approach to ensuring effective diagnosis and treatment under this Contract, including areas of focus, protocols and guidelines in these areas and the metrics that will be used to track progress.
51. Describe how the Bidder will evaluate and improve both the quality of clinical care and the quality of non-clinical aspects of service for the entire range of Covered Services and member population. Include related experience.

52. Describe how the Bidder will implement and monitor an External Quality Review Organization (EQRO)-related corrective action plan, including any related experience.

4.2.8.14 Member Services (Tab 21) (Limit of 35 pages)

53. Describe how the Bidder will ensure that member materials:

- a. Use language and a format that are easily understood;
- b. Are worded at no more than a sixth (6th) grade reading level;
- c. Are available in Spanish, including how the Bidder will ensure accuracy and cultural competency; and
- d. Are available in alternative formats such as Braille, large print and audio

54. Describe how the Bidder will update and maintain the accuracy of the information on the Bidder's member website including, but not limited to, member handbooks and provider directories.

55. Provide a comprehensive description of how the Bidder will operate the required toll-free member service line and nurse triage/nurse advice line. At a minimum, for both the member service center and the nurse triage/nurse advice line, describe:

- a. The Bidder's training curricula and schedule for training call center staff for both the member service line and the nurse triage/nurse advice line, including ongoing training and training when program or operational changes occur;
- b. How the Bidder will route calls among staff to ensure timely and accurate response to member inquiries, including procedures for referring the calls to supervisors or managers;
- c. How and when the Bidder will refer calls to third parties, including 911, the behavioral health crisis line and the pharmacy services line;
- d. The type of information available to member service line staff and how it is provided and updated (e.g., hard copy at the person's desk or online search capacity);
- e. How the Bidder will ensure that the member service line and nurse triage/nurse advice line staff can handle calls from non-English speaking callers and from members who are hearing impaired, including the number of staff that are fluent in Spanish;
- f. How the Bidder will ensure that the member service line and nurse triage/nurse advice line staff can appropriately respond to calls from members experiencing a behavioral health crisis, including the ability to warm-transfer the caller to the behavioral health crisis line;
- g. The Bidder's automated system for receiving after-hours calls, including a voice mailbox and procedures for returning all messages by close of business on the next business day;
- h. How the Bidder will monitor the quality and accuracy of information provided to members (e.g., via recording or other means); and

- i. How the Bidder will monitor compliance with performance standards outlined in Section 3.5.10.2 of this Contract, and what the Bidder will do in the event that standards are not being met.
- j. How the Bidder will train its member service line staff on identifying, handling, documenting, processing, and referring calls where the member expresses a grievance or requests to file an appeal.

56. Please address the following scenario: One of the Bidder's member service line operators takes a call from a clearly distraught member who states that her 16-year-old daughter, who is asthmatic, has been experiencing wild mood swings over the past several weeks. The member says that she believes her child is taking illegal drugs, although she can't identify any specific drug. She also reports that her child has gained a lot of weight over the past month. The member states that she does not know what to do or where to go for help, but fears that her child is in serious danger of hurting herself or hurting someone else. How does the Bidder's member service line operator process this call? What steps has the operator been trained to take before she can end the call?

4.2.8.15 Grievances and Appeal System (Tab 22) (Limit of 5 pages)

57. Describe how information obtained through the Bidder's grievance and appeal system is tracked, analyzed, evaluated and utilized in quality management/quality improvement (QM/QI) activities. Provide a specific example of how the Bidder has used information from the grievance and appeal system to improve quality of care or services.

4.2.8.16 Program Integrity (Tab 23) (Limit of 25 pages)

58. Describe how the Bidder will verify with a sample of members on a monthly basis whether services billed were actually received, including criteria for "high-risk" services and provider types.

59. Describe the Bidder's experience coordinating with state agencies to report and investigate potential fraud and abuse. Include the number of referrals the Bidder made per 1,000 members in calendar year 2013.

60. Describe the Bidder's procedures and internal controls for preventing, detecting and investigating potential fraud, waste or abuse pursuant to this Contract, including unique procedures for HCBS.

4.2.8.17 Financial Management (Tab 24) (Limit of 15 pages)

61. Describe innovative actions, plans, and systems that the Bidder will use to reduce administrative costs.

62. Describe any findings in any of the Bidder's prior three years of audits (parent, affiliated and/or related business entities) in which the finding is associated with the management or expenditure of public or governmental funding. Explain any corrective action taken in the past, or currently being taken, to address these findings.

4.2.8.18 Claims Management (Tab 25) (Limit of 50 pages)

63. Describe how the Bidder will identify third party coverage, including private insurance and Medicare, and the Bidder's procedures for cost avoidance and the collection of third party liability (TPL).

64. Describe how the Bidder will conduct subrogation activities, including identification, investigation and collection procedures.
65. Describe the procedures that the Bidder will follow to ensure compliance with State and Federal standards for processing claims and encounters, including any sanctions or remedial actions the Bidder will invoke if a subcontractor fails to meet these standards.
66. Describe the Bidder's methodology for ensuring that claims payment accuracy standards will be monitored and improved through audit. At a minimum, address the following:
 - a. The process for auditing a sample of claims;
 - b. The sampling methodology;
 - c. Documentation of the results of these audits; and
 - d. The processes for implementing any necessary corrective actions resulting from an audit.
67. Submit detailed flowcharts and a narrative description of the Bidder's claims processing and payment operational process, addressing both paper and electronic claims submissions. Include the following in the narrative: monitoring process for accurate and timely claim adjudication, including performance metrics; how deficiencies are identified and resolved; the process for development and implementation of interventions for improved claims processing and payment; and cost avoidance/TPL activities.
68. Submit a flowchart and narrative description of the Bidder's encounter data submission operational process including, but not limited to, how accuracy, timeliness and completeness are ensured. Include tracking, trending, reporting, process improvement, and monitoring of encounter submissions and encounter revisions. Include any feedback mechanisms to improve encounter accuracy, timeliness and completeness.
69. Describe how the Bidder will work with providers, particularly subcapitated providers, subcontractors, atypical providers, and non-participating providers to ensure the accuracy, timeliness and completeness of encounter data.

4.2.8.19 Information Systems (Tab 26) (Limit of 50 pages)

70. Submit detailed flowcharts and a narrative description of the Bidder's information systems and architecture to meet the requirements in this Contract, addressing, at a minimum, the functional areas listed below.
 - a. Eligibility, enrollment, and disenrollment management and data exchange;
 - b. Provider network management, credentialing, enrollment, and confirmation file exchange;
 - c. Member and provider information access (please include screenshots of websites);
 - d. Report generation and transmission;
 - e. Care coordination and case management;

- f. Claims processing, edits, corrections, and adjustments due to retroactive eligibility changes or other reasons;
 - g. Claims adjudication, payment, and coordination of benefits for claims with TPL;
 - h. Claims adjudication, payment, and coordination for Medicare crossover claims;
 - i. Encounter submissions, correction, voiding, and resubmission; and
 - j. Financial management and accounting activities.
71. Describe the extent to which the Bidder's systems are: (a) currently implemented as opposed to planned; and (b) integrated (or planned to be integrated) with other systems, internal and external. To the extent that the Bidder has a system in place, please describe the Bidder's experience in implementing and operating in other accounts.
72. Describe the Bidder's electronic and physical architecture and elements to ensure that the requirements in Section 3.19.3 of this Contract for system and information security and access, including HIPAA standards for security and privacy, are met. Describe the extent to which these elements are currently implemented as opposed to planned.
73. Describe the Bidder's process for information system change management, whether internally initiated, requested by the State or Federally or otherwise mandated. Include a description of the process for all aspects of change implementation, from initial planning to testing and production control operations.
74. Describe any shared infrastructure that is a part of the solution. For example, will the State's data reside in the same database as another customer?
75. Regarding cloud/remote hosting:
- a. Cloud and Offsite Hosting Terms and Conditions
 - The State has explicit requirements around data and systems that are on the cloud or are hosted remotely. These requirements are specified in the State of Delaware Cloud and Offsite Hosting Specific Terms and Conditions at <http://dti.delaware.gov/pdfs/pp/CloudandOffsiteHostingTemplate.pdf>
 - In its response, the Bidder will acknowledge each of the clauses (1-23) with either "Accept", "Accept - Conditional" along with an explanation or "Reject" along with an explanation. Clauses 1-9 are mandatory and a "Reject" response for any of these clauses may be cause to reject the proposed solution. Please respond to clauses 10-23 as instructed. Depending on the solution proposed, the State will make the final determination on the applicability of specific clauses in this section.
 - Any clause(s) with an explanation must be reviewed by DTI prior to contract signature. If this is the case, DTI's approval of this must be attached to the final contract. If contractor responds with "Accept" to all clauses with no explanation, DTI review is not required.

- The final signed version of the Terms and Conditions document must be attached to the final contract.

b. Standard Practices

- The contractor(s) shall be responsible for the professional quality, technical accuracy, timely completion, and coordination of all services furnished to the State. The contractor(s) shall follow practices consistent with generally accepted professional and technical policies and standards.

c. Mandatory Inclusions for Cloud/Remote Hosting

- Network Diagram - The service provider must include a network diagram of the user's interaction with the solution and any interfaces between the solution and the State needs to be clearly documented (ports, protocols, direction of communication). The network diagram does not need to contain the inner workings of the solution or proprietary information.
- List of Software - The service provider must include a list of software that the State needs to utilize the solution. For example, a certain web browser (IE) or web service technology for an interface. The service provider will include a list of browsers and versions that are officially supported. The software list will be formatted as follows:

Product Name	Version	Vendor Name

- Third Party Authentication - The service provider must include a list of any 3rd party authentication solutions or protocols that they support.
- Shared Infrastructure - The service provider must describe any shared infrastructure that is a part of the solution. For example, will the State's data reside in the same database as another customer?
- Operational Health/3rd Party Providers - The service provider must describe their approach to conveying the 'operational health' of the solution to the State of Delaware. Also, the service provider must list any 3rd party cloud management providers that they integrate with.
- Password Hashing - The service provider must describe the method used by the solution for hashing user passwords. Include items like hash algorithm, salt generation and storage and number of iterations.
- Data Encryption - The service provider must describe the solution's ability to encrypt non-public State data at rest. Include encryption algorithm(s) and the approach to key management.
- Data Center Tier Rating - The service provider must meet or exceed a Tier 3 rating (as defined in the Uptime Institute Guidelines for 2012 or the latest version – Data Center Site Infrastructure Tier Standard – Topology and Data Center Site

Infrastructure Tier Standard – Operational Sustainability) for the data center hosting the proposed solution.

4.2.8.20 Staffing (Tab 27) (Limit of 50 pages)

76. Describe the Bidder's plan for establishing an office in Delaware, including timeframes.

77. Provide job descriptions for all key personnel positions listed below, including each position's operational title within the Bidder's organization.

- a. Chief Executive Officer (CEO);
- b. Chief Operations Officer (COO);
- c. Chief Medical Office (CMO);
- d. Behavioral Health CMO;
- e. Long Term Services and Supports (LTSS) CMO;
- f. Senior Pharmacist;
- g. Health Services Director;
- h. Chief Financial Officer (CFO);
- i. Chief Data Analytics Coordinator;
- j. Staff member responsible for DSHP provider services and provider relations;
- k. Staff member responsible for DSHP Plus and DSHP Plus LTSS provider services and provider relations;
- l. Utilization Management Coordinator;
- m. Staff member responsible for member services;
- n. DSHP Member Advocate;
- o. DSHP Plus Member Advocate;
- p. Staff member responsible for member grievances and appeals;
- q. Staff member responsible for provider complaints;
- r. Staff member responsible for claims management activities;
- s. Compliance Officer; and
- t. QM/QI Coordinator.

78. Describe how the Bidder will fill a vacancy in the key personnel listed above within 60 calendar days.

4.2.8.21 Reporting (Tab 28) (Limit of 10 pages)

79. Describe how the Bidder will monitor its internal reporting processes to ensure accuracy and timeliness of reports.
80. Describe how the Bidder will implement targeted improvement activities to address negative trends or access or quality issues identified through reports.

5 EVALUATION OF PROPOSALS

5.1 Introduction and Overview

The State will conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this procurement. The State reserves the right to reject any and all proposals.

The evaluation will be conducted in six phases:

- Phase 1 – The mandatory submission requirements will be evaluated.
- Phase 2 – The Bidder's financial statements will be reviewed
- Phase 3 – The technical proposals will be evaluated and scored.
- Phase 4 – The oral presentations will be evaluated and scored.
- Phase 5 – Price will be negotiated.
- Phase 6 - The Executive Selection Committee will select contractors.

In Phase 1, the State will review the technical proposals to determine if each technical proposal complies with the Mandatory Submission Requirements Checklist provided in Appendix E. All proposals passing the mandatory submission requirements will be provided to the Evaluation Team. In Phase 2, the State will review the Contractor's financial statements.

In Phase 3, the Evaluation Team will evaluate and score the technical proposals that passed Phase 1 and Phase 2. The technical proposals will be evaluated and scored using the process described in Section 5.4, below.

If the Bidder's technical proposal is one of the most responsive technical proposals, the Bidder will be invited to participate in oral presentations (Phase 4) (see Section 5.6, below). The Evaluation Team will evaluate and score the oral presentations. The Bidder's score for its oral presentation will be added to the Bidder's score for its technical proposal.

If the Bidder is one of the Bidders with the most responsive technical proposal and oral presentation, the Bidder will be invited to participate in price negotiations (Phase 5) (see Section 5.7, below).

In Phase 6 (see Section 5.8, below), the Executive Selection Committee will review the findings of the Evaluation Team and the results of the price negotiations and recommend two or three Bidders for contract award.

5.2 Evaluation Team

The State will establish an Evaluation Team composed of selected DHSS staff and other State staff or technical experts (which may include consultants or legal counsel), as deemed appropriate. The Evaluation Team may be comprised of sub-teams that evaluate specific sections of the technical proposal.

5.3 Evaluation of Mandatory Submission Requirements (Phase 1)

Each technical proposal will be reviewed for responsiveness to the mandatory submission requirements set forth in the RFP. This will be a yes/no evaluation and proposals that fail to satisfy all of the criteria of this phase may not be considered further for the award of a Contract.

The purpose of this phase is to determine if the Bidder's technical proposal is sufficiently responsive to permit a complete evaluation. Mandatory submission requirements for the technical proposal are presented as a checklist in Appendix E.

No points will be awarded for passing the mandatory submission requirements.

Failure to adequately meet any one mandatory submission requirement may cause the entire proposal to be deemed non-responsive and be rejected from further consideration. However, the State reserves the right to waive minor irregularities and minor instances of non-compliance.

5.4 Evaluation of Bidder Financial Viability (Phase 2)

In phase 2, the State will review the Bidder's financial statements and evaluate the Bidder's financial viability. This will be a pass/fail evaluation and proposals that fail to satisfy the criteria of this phase may not be considered further for the award of a Contract.

No points will be awarded for passing the mandatory submission requirements.

5.5 Evaluation and Scoring of Technical Proposals (Phase 3)

Only those proposals passing the mandatory submission requirements (Phase 1) and financial viability (Phase 2) will be considered for Phase 3. All technical proposals that pass Phase 1 and Phase 2 will be reviewed and rated by the Evaluation Team. In addition to other evaluation factors, the following weights per area will be used in scoring the Bidder's technical proposal:

Area	Weight	Sections
Qualifications and Experience	15	Qualifications and Experience
Covered Services and Members	15	Covered Services Pharmacy Enrollment and Disenrollment Marketing Member Services
Coordination	20	Care Coordination Case Management for DSHP Plus LTSS Service Coordination
Providers	15	Provider Network Provider Participation Agreements Provider Payment Program Integrity
Quality and Related	20	Utilization Management (UM) Quality Grievance and Appeal System Financial Management Staffing Reporting
Claims and Information Systems	15	Claims Management Information Systems
Total	100	

In order for a Bidder to proceed to oral presentations (Phase 4), its technical proposal must be one of the most responsive technical proposals.

5.6 Oral Presentations (Phase 4)

Phase 4 of the evaluation process is oral presentations. The State will invite Bidders whose technical proposal is one of the most responsive technical proposals to participate in an oral presentation. During the oral presentation Bidders will address questions posed by DHSS.

The oral presentations will be arranged with each Bidder individually. The State expects members of the Bidder's proposed key staff to participate in the oral presentation in person. The Bidder may not include consultants as a member of its team for the oral presentation.

The Bidder's score for its oral presentations will be added to the Bidder's score for its technical proposal to determine whether the Bidder will be invited to participate in price negotiations (Phase 5) (see Section 5.7, below).

5.7 Price Negotiations (Phase 5)

The Bidders with the most responsive technical proposal and oral presentation will be invited to participate in price negotiations (Phase 5) with DHSS. Price negotiations will be conducted separately with each Bidder. During price negotiations DHSS will make a rate offer and conduct limited negotiations.

5.8 Executive Selection Committee Process (Phase 6)

In Phase 6, the Executive Selection Committee will review the Evaluation Team findings and the results of price negotiations, determine whether to select two or three Bidders for contract award, and select the Bidders for contract award. In determining whether to select two or three Bidders for contract award, the Executive Selection Committee will consider, among other evaluation factors, the financial viability of having three contractors, the Bidders' responsiveness on the technical proposal and the oral presentation, and the results of the price negotiations.

5.9 Federal Approvals

Federal approval of the Contract for services between the selected contractors and the State is required from CMS. Every effort will be made by DHSS to obtain and expedite Federal approval.

APPENDIX A: PRO FORMA CONTRACT

**APPENDIX B: DATA BOOK (TO BE PROVIDED AS AN
ADDENDUM)**

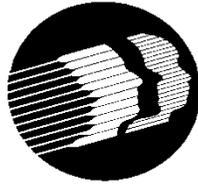
APPENDIX C: PROCUREMENT LIBRARY

Bidders should review and understand reference material accessible on the DMMA website (<http://www.dhss.delaware.gov/dhss/dmma/>), the DMAP website (<http://www.dmap.state.de.us/home/index.html>), the Information Technology Publications webpage (<http://dhss.delaware.gov/dhss/dms/itpubs.html>) and in the procurement library.

The following materials are included in the procurement library (see Section 1.5 of the RFP):

1. Draft of Delaware's Quality Management Strategy (QMS).
2. Table showing the value based purchasing incentive tiers.
3. List of Provider Types for Question 38.
4. Draft provider manual for licensed behavioral health practitioners, addiction services and crisis intervention.
5. Directory of Delaware's Division of Substance Abuse and Mental Health (DSAMH) licensed and certified providers.
6. Concept paper for PROMISE.
7. Concept paper for Pathways.
8. Delaware's Money Follows the Person (MFP) protocol.
9. Delaware's Department of Technology & Information (DTI) Systems Architecture Standards.
10. Managed Care Data Exchanges.

APPENDIX D: NOTICE OF INTENT TO BID



**DELAWARE HEALTH AND SOCIAL SERVICES
REQUEST FOR PROPOSAL**

NOTICE OF INTENT TO BID

Our organization intends to submit a proposal in response to RFP No. HSS-14-019 for Delaware Medicaid MCOs.

Name of Bidder: _____

Bidder Contact:

Contact Name	
Phone Number	
Email Address	

Authorized Bidder Representative:

Printed Name	
Signature & Date	
Phone Number	
Email Address	

A completed Notice of Intent to Bid may be emailed to Dina Bogino at dina.bogino@state.de.us by 10:30 a.m. ET on February 14, 2014 or hand delivered to Ms. Bogino at the pre-bid meeting (see Section 2.3 of the RFP).

APPENDIX E: MANDATORY SUBMISSION REQUIREMENTS CHECKLIST

DHSS has provided below the template for the Mandatory Submission Requirements Checklist that is to be submitted with the technical proposal. Bidders are expected to confirm compliance by entering "Yes" in the Bidder Check column. Upon receipt of technical proposals, DHSS will confirm compliance by entering "Yes" in the DHSS column.

Mandatory Submission Requirements Checklist

Bidder Name:				
MANDATORY REQ. #	REQUIREMENT	RFP Section #	BIDDER CHECK	DHSS CHECK
1.	Did the Bidder submit a technical proposal on or before the specified submission deadline?	4.1.2		
2.	Are there two original disks labeled as "Original" and 15 disks labeled as "Copy"?	4.1		
3.	Does each disk contain, at a minimum, the following files: <ul style="list-style-type: none"> • Disk Directory (Microsoft Word 2003 or higher) • RFP Technical Proposal (Microsoft Word 2003 or higher) • RFP Technical Proposal.pdf 	4.1		
4.	Is the PDF file a single file containing the entire technical proposal?	4.1		
5.	Are all disks labeled as specified in Section 4.1 of the RFP?	4.1		
6.	Do the paper copies of the technical proposal meet the following guidelines: <ul style="list-style-type: none"> • Submitted on 8.5" x 11' paper with one-inch margins; font size no more than Times New Roman 12"; and single line spacing within a paragraph and one blank line between paragraphs? • Printed double-sided? 	4.1		
7.	Are materials for each technical proposal presented in a three-ring binder or similar binding that allows for easy removal of documents?	4.1		
8.	Does each proposal package include one original and 15 hard copies of the technical proposal?	4.1		
9.	Are packing boxes numbered in the following fashion: 1 of 4, 2 of 4, etc., for each proposal that consists of multiple boxes?	4.1		
10.	Are all packing boxes labeled as specified in Section 4.1?	4.1		

Bidder Name:				
MANDATORY REQ. #	REQUIREMENT	RFP Section #	BIDDER CHECK	DHSS CHECK
11.	Does each technical proposal consist of the sections identified in Section 4.2 separated by tabs that include the name of the section?	4.2		
12.	Does the transmittal letter include each of the statements specified in Section 4.3.4 in the order specified?	4.2.3		
13.	Is a completed copy of the Mandatory Submission Requirements Checklist included in Tab 4?	4.2.5		
14.	Is there a completed Certification and Statement of Compliance form in Tab 5?	4.2.6		
15.	Is there a completed State of Delaware Contracts Disclosure form in Tab 5?	4.2.6		
16.	Is there a completed Bidder's Signature Form in Tab 5?	4.2.6		
17.	Does Tab 6 include the Bidder's most recent audited financial statements as specified in Section 4.2.7?	4.2.7		
18.	In the Bidder's response to questions (Tab 7 et seq.), did the Bidder: <ul style="list-style-type: none"> • Include both the number and text of each question in Section 4.2.7? • Comply with the page limits in Section 4.2.7? 	4.2.8		

APPENDIX F: CERTIFICATION AND STATEMENT OF COMPLIANCE



**DELAWARE HEALTH AND SOCIAL SERVICES
REQUEST FOR PROPOSAL**

CERTIFICATION SHEET

As the official representative for the Bidder, I certify on behalf of the agency that:

- a. They are a regular dealer in the services being procured.
- b. They have the ability to fulfill all requirements specified for development within this RFP.
- c. They have independently determined their prices.
- d. They are accurately representing their type of business and affiliations.
- e. They will secure a Delaware Business License.
- f. They have acknowledged that no contingency fees have been paid to obtain award of this contract.
- g. The prices in this proposal have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other contractor or with any competitor.
- h. Unless otherwise required by law, the prices that have been quoted in this offer have not been knowingly disclosed by the contractor and prior to the award in the case of a negotiated procurement, directly or indirectly to any other contractor or to any competitor.
- i. No attempt has been made or will be made by the contractor in part to other person or firm to submit or not to submit an offer for the purpose of restricting competition.
- j. They have not employed or retained any company or person (other than a full-time bona fide employee working solely for the contractor) to solicit or secure this contract, and they have not paid or agreed to pay any company or person (other than a full-time bona fide employee working solely for the contractor) any fee, commission percentage or brokerage fee contingent upon or resulting from the award of this contract.
- k. They (check one) operate _____an individual; _a Partnership _____a non-profit (501C-3) organization; _____a not-for-profit organization; or _____a for profit corporation, incorporated under the laws of the State of ____.
- l. The referenced Bidder has neither directly or indirectly entered into any agreement, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with this proposal submitted this date to Delaware Health and Social Services.
- m. The referenced Bidder agrees that the signed delivery of this bid represents the Bidder's acceptance of the terms and conditions of this RFP including all specifications and special provisions.

n. They (check one): _____are; ___are not owned or controlled by a parent company. If owned or controlled by a parent company, enter name and address of parent company:

Violations and Penalties:

Each contract entered into by a State of Delaware agency for professional services shall contain a prohibition against contingency fees as follows:

1. The firm offering professional services swears that it has not employed or retained any company or person working primarily for the firm offering professional services, to solicit or secure this Contract by improperly influencing the agency or any of its employees in the professional service procurement process.
2. The firm offering the professional services has not paid or agreed to pay any person, company, corporation, individual or firm other than a bona fide employee working primarily for the firm offering professional services, any fee, commission, percentage, gift, or any other consideration contingent upon or resulting from the award or making of this Contract; and
3. For the violation of this provision, the agency shall have the right to terminate the Contract without liability and at its discretion, to deduct from the contract price, or otherwise recover the full amount of such fee, commission, percentage, gift or consideration.

The following conditions are understood and agreed to:

- a. No charges, other than those specified in the executed Contract, are to be levied upon the State as a result of a contract.
- b. The State will have exclusive ownership of all products of this contract unless mutually agreed to in writing at the time a binding contract is executed.

Date

Signature & Title of Official Representative

Type Name of Official Representative

PROCUREMENT STATEMENT OF COMPLIANCE

As the official representative for the Bidder, I certify on behalf of the agency that _____
(Company name) will comply with all Federal and Delaware laws and regulations pertaining to equal
employment opportunity and affirmative action. In addition, compliance will be assured in regard to
Federal and Delaware laws and regulations relating to confidentiality and individual and family privacy in
the collection and reporting of data.

Authorized Signature: _____

Title: _____

Date: _____

APPENDIX G: DELAWARE CONTRACTS DISCLOSURE

STATE OF DELAWARE CONTRACTS DISCLOSURE FORM

Contractor/ Predecessor Firm Name	State Department and Division	Contact Name, Address, and Phone Number	Period of Performance	Contract Number	Amount
Sample Contractor Firm Name	DHSS \ DMS	Contact Name 1901 N DuPont Highway New Castle, DE 19720 302.999.9999	01/01/2012 – 12/31/2012	HSS-99-999	\$100,000

Bidder shall list all contracts awarded to it or its predecessor firm(s) by the State of Delaware during the last three years by State Department, Division, Contact Person (with address/phone number), period of performance, contract number, and amount. The Evaluation Team will consider these additional references and may contact each of these sources. Information regarding Bidder performance gathered from these sources may be included in the Evaluation Team’s deliberations and factored in the final scoring of the proposal. Failure to list any contract as required by this paragraph may be grounds for immediate rejection of the proposal.

List contracts in the format specified. Include those contracts whose period of performance has been within the past three years in addition to those awarded within this timeframe. Contracts with amendments only have to be listed once. If a Bidder has had no contracts within this timeframe, enter “**No contracts to specify**” under Contractor/Predecessor Firm Name in the first row of the table.

APPENDIX H: BIDDER'S SIGNATURE FORM



**DELAWARE HEALTH AND SOCIAL SERVICES
REQUEST FOR PROPOSAL**

BIDDER'S SIGNATURE FORM

NAME OF BIDDER: _____

SIGNATURE OF AUTHORIZED PERSON: _____

TYPE IN NAME OF AUTHORIZED PERSON: _____

TITLE OF AUTHORIZED PERSON: _____

STREET NAME AND NUMBER: _____

CITY, STATE, & ZIP CODE: CONTACT PERSON: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

DATE: _____

BIDDER'S FEDERAL EMPLOYER IDENTIFICATION NUMBER: _____

THE FOLLOWING MUST BE COMPLETED BY THE BIDDER:

AS CONSIDERATION FOR THE AWARD AND EXECUTION BY THE DEPARTMENT OF HEALTH AND SOCIAL SERVICES OF THIS CONTRACT, (COMPANY NAME) _____
HEREBY GRANTS, CONVEYS, SELLS, ASSIGNS, AND TRANSFERS TO THE STATE OF DELAWARE ALL OF ITS RIGHTS, TITLE AND INTEREST IN AND TO ALL KNOWN OR UNKNOWN CAUSES OF ACTION IT PRESENTLY HAS OR MAY NOW HEREAFTER ACQUIRE UNDER THE ANTITRUST LAWS OF THE UNITED STATES AND THE STATE OF DELAWARE, RELATING THE PARTICULAR GOODS OR SERVICES PURCHASED OR ACQUIRED BY THE DELAWARE HEALTH AND SOCIAL SERVICES DEPARTMENT, PURSUANT TO THIS CONTRACT.

APPENDIX I: SUPPLIER DIVERSITY INFORMATION

The following definitions are from the State Office of Supplier Diversity

Vendors wishing to apply for certification or gain more information on Supplier Diversity programs may do so at: <http://gss.omb.delaware.gov/osd/index.shtml>

Definitions

Women Owned Business Enterprise (WBE):

At least 51% is owned by women, or in the case of a publicly owned enterprise, a business enterprise in which at least 51% of the voting stock is owned by women; or any business enterprise that is approved or certified as such for purposes of participation in contracts subject to women-owned business enterprise requirements involving federal programs and federal funds.

Minority Business Enterprise (MBE):

At least 51% is owned by minority group members; or in the case of a publicly owned enterprise, a business enterprise in which at least 51% of the voting stock is owned by minority group members; or any business enterprise that is approved or certified as such for purposes of participation in contracts subjects to minority business enterprises requirements involving federal programs and federal funds.

Corporation:

An artificial legal entity treated as an individual, having rights and liabilities distinct from those of the persons of its members, and vested with the capacity to transact business, within the limits of the powers granted by law to the entity.

Partnership:

An agreement under which two or more persons carry on a business, sharing in the profit or losses, but each liable for losses to the extent of his or her personal assets.

Individual:

Self-explanatory

For certification in one of above, the bidder must contract:

Michelle Morin
Office of Supplier Diversity
(302) 857-4554
Fax (302) 677-7086