



STATE OF WASHINGTON
HEALTH CARE AUTHORITY

REQUEST FOR PROPOSALS (RFP)

RFP NO. 2021HCA31

NOTE: *If you download this RFP from the Health Care Authority website, you are responsible for sending your name, address, e-mail address, and telephone number to the RFP Coordinator in order for your organization to receive any RFP amendments or bidder questions/agency answers. HCA is not responsible for any failure of your organization to send the information or for any repercussions that may result to your organization because of any such failure.*

PROJECT TITLE: Maternity Episode of Care

PROPOSAL DUE DATE: November 29, 2021, by 2:00 p.m. *Pacific Time*, Olympia, Washington, USA.

E-mailed bids will be accepted. Faxed bids will not.

ESTIMATED TIME PERIOD FOR CONTRACT: January 15, 2022, to January 14, 2023

The Health Care Authority reserves the right to extend the contract for up to 3 additional one-year periods at the sole discretion of the Health Care Authority.

BIDDER ELIGIBILITY: This procurement is open to those Bidders that satisfy the minimum qualifications stated herein and that are available for work in Washington State.

SUBMIT PROPOSAL TO:

Delivered Electronically
Mitch Gonzales
HCAProcurements@hca.wa.gov

PROCUREMENT WEBSITE:

<https://www.hca.wa.gov/about-hca/bids-and-contracts>

WEBS:

<https://pr-webs-vendor.des.wa.gov/>

1. INTRODUCTION.....	4
1.1. DEFINITIONS	4
1.2. ESTIMATED SCHEDULE OF PROCUREMENT ACTIVITIES.....	4
1.3. PURPOSE AND BACKGROUND	4
1.4. OBJECTIVES AND SCOPE OF WORK.....	6
1.5. MINIMUM QUALIFICATIONS	9
1.6. DESIRED QUALIFICATIONS.....	9
1.7. FUNDING	9
1.8. PERIOD OF PERFORMANCE	9
1.9. CONTRACTING WITH CURRENT OR FORMER STATE EMPLOYEES	9
1.10. ADA	10
2. GENERAL INFORMATION FOR BIDDERS.....	10
2.1. RFP COORDINATOR	10
2.2. BIDDER QUESTIONS PERIOD.....	10
2.3. SUBMISSION OF PROPOSALS.....	10
2.4. PROPRIETARY INFORMATION / PUBLIC DISCLOSURE	11
2.5. REVISIONS TO THE RFP	11
2.6. DIVERSE BUSINESS INCLUSION PLAN	11
2.7. ACCEPTANCE PERIOD	12
2.8. COMPLAINT PROCESS.....	12
2.9. RESPONSIVENESS	13
2.10. MOST FAVORABLE TERMS	13
2.11. COSTS TO PROPOSE	13
2.12. RECEIPT OF INSUFFICIENT NUMBER OF PROPOSALS	13
2.13. NO OBLIGATION TO CONTRACT.....	13
2.14. REJECTION OF PROPOSALS	13
2.15. COMMITMENT OF FUNDS.....	13
2.16. ELECTRONIC PAYMENT	13
3. PROPOSAL CONTENTS.....	14
3.1. LETTER OF SUBMITTAL (MANDATORY)	14
3.2. EXHIBIT B – DIVERSE BUSINESS INCLUSION PLAN (MANADATORY)	15

3.3.	EXHIBIT C - REFERENCES (MANDATORY)	16
3.4.	EXHIBIT D – DRAFT CONTRACT (MANDATORY).....	16
3.5.	EXHIBIT E – COVID-19 VACCINATION CERTIFICATION (MANDATORY).....	16
3.6.	TECHNICAL PROPOSAL (MANDATORY SCORED)	16
3.7.	MANAGEMENT PROPOSAL (MANDATORY SCORED)	17
3.8.	COST PROPOSAL – EXHIBIT F	18
3.9.	EXHIBIT G – EXECUTIVE ORDER 18-03 (MANDATORY SCORED)	19
4.	EVALUATION AND CONTRACT AWARD	20
4.1.	EVALUATION PROCEDURE	20
4.2.	EVALUATION WEIGHTING AND SCORING	20
4.3.	SUBSTANTIALLY EQUIVALENT SCORES	23
4.4.	NOTIFICATION TO BIDDERS	23
4.5.	DEBRIEFING OF UNSUCCESSFUL BIDDERS	23
4.6.	PROTEST PROCEDURE	24
5.	RFP EXHIBITS	26

1. INTRODUCTION

1.1. DEFINITIONS

Definitions for the purposes of this RFP include:

Apparent Successful Bidder (ASB) – The Bidder selected as the entity to perform the anticipated services under this RFP, subject to completion of contract negotiations and execution of a written contract.

Bidder – Individual or company interested in the RFP that submits a proposal in order to attain a contract with the Health Care Authority.

Health Care Authority (HCA) – an executive agency of the state of Washington that is issuing this RFP.

Proposal – A formal offer submitted in response to this solicitation.

Request for Proposals (RFP) – Formal procurement document in which a service or need is identified but no specific method to achieve it has been chosen. The purpose of an RFP is to permit the bidder community to suggest various approaches to meet the need at a given price.

1.2. ESTIMATED SCHEDULE OF PROCUREMENT ACTIVITIES

Issue Request for Proposals	October 27, 2021
Questions Due	November 5, 2021 2:00PM Pacific Time
Answers Posted*	November 10, 2021
Complaints Due (if applicable)	November 18, 2021
Proposals Due	November 29, 2021 2:00PM Pacific Time
Evaluate Proposals*	December 1, 2021 – December 8, 2021
Conduct Oral Interviews with Finalists, if required	December 15, 2021 – December 16, 2021
Announce “Apparent Successful Bidder” via WEBS*	December 21, 2021
Debrief Request Deadline	December 27, 2021
Negotiate Contract	December 22, 2021 – January 14, 2022
Begin Contract Work	January 15, 2022

**Dates are anticipated and subject to change without an official amendment.*

HCA reserves the right in its sole discretion to revise the above schedule at any time.

1.3. PURPOSE AND BACKGROUND

The Washington State Health Care Authority, hereafter called “HCA,” is initiating this Request for Proposal (RFP) to solicit proposals from firms interested in participating on a project to develop,

scope and refine a Maternity Episode of Care, a value-based payment approach in which care services are defined and required, reporting and accountability for high value outcomes are included and payment is redesigned in a single, fixed rate. All of this is over a defined period of time from initiation of prenatal care through a specified postpartum timeframe. In partnership with HCA, the episode will be completed and will move to implementation. HCA's plan for this episode of care is for it to be implemented first in Medicaid, both in fee-for-service and Managed Care, followed by our commercial insurance side, for our public employees and school employees statewide.

HCA administers programs that provide health care coverage for nearly 1 in 3 Washington residents as well as community behavioral health services, supports, recovery and prevention efforts for the entire state. HCA is the state's largest health care purchaser and oversees the Medicaid program (Apple Health), Public Employees Benefits (PEB), School Employees Benefits (SEB). Through these collective programs HCA covers nearly 2.6 million lives. HCA provides care for just under half of the pregnancies and births in Washington.

HCA's policy and purchasing approaches are focused on transforming the health care delivery system in Washington State. These value-based purchasing strategies are designed to transform care through better health, better care, and lower costs; provide whole-person care through integrating physical and behavioral health services; and make data informed and evidence-based purchasing decisions that drive improved health outcomes.

The U.S. spends more than any other country on maternity care and, yet, has some of the worst perinatal and infant health outcomes, particularly in terms of racial and ethnic disparities. Some of the drivers of poor perinatal and infant health outcomes are: over medicalization of birth, overuse of some interventions and underuse of other evidence-based interventions, uncoordinated care, systemic racism, lack of attention to behavioral health issues and social determinants of health, disrespectful and depersonalized care, and underutilization of postpartum care.

In Washington, the c-section rate is 27.9%, which is substantially higher than the ideal rate of 19% suggested by a widely quoted 2015 study, (Molina, G., Weiser, T., Lipsitz, S., & al, e. (2015). Relationship Between Cesarean Delivery Rate and Maternal and Neonatal Mortality. *Journal of the American Medical Association*.) and even further from the rate of 10-15% recommended by the World Health Organization. In Washington, the preterm birth rate of 8.3% is lower than the national average of 9.85%, but Washington lags significantly behind rates in the 5-6% range that have been achieved in Ecuador, Latvia, and Estonia. Similar to maternal death rates, preterm birth rates are the highest among Native American/Alaska Native and Black people. The Washington State Maternal Mortality Review Panel has determined that 60% of maternal deaths in Washington are preventable, with a significant number being tied to lack of access to behavioral health evaluation, treatment recovery and support. The panel also found that Native American/Alaska Native women were nearly ten times as likely to die of a pregnancy-associated cause than white women.

In consideration of the gains we are hoping to make, the Bree Collaborative engaged in a statewide effort to identify opportunities. The framework/draft maternity episode of care that has been created by our state Bree Collaborative and is available here: <https://www.qualityhealth.org/bree/wp-content/uploads/sites/8/2021/01/Perinatal-Bundle-FINAL-2021.pdf>

While we will use this Bree Collaborative episode of care as a foundation to move this work forward to implementation, there are numerous components that deserve additional consideration and revision. For example, while the Bree maternity episode of care includes the infant for the first 30 days of life there is a lack of information on how this care will be incorporated or implemented. Additionally, recent legislation passed in Washington in the 2020/21 session that requires implementation of 12 months of postpartum Medicaid coverage following end of pregnancy in June of 2022.

In terms of the 12 months of postpartum coverage, HCA wants to explore both birth parent and infant in the episode. This work will include facilitating the development of short- and long-term goals and what dyadic timeframe will be the most meaningful in terms of impact and improved outcomes. HCA also wants to explore the pros/cons and the facilitators/barriers to having an episode for pregnancy care; and potentially the first 2 or 3 months postpartum; and then a separate episode for the

subsequent 9 or 10 months (a design that we see in acute versus chronic/stable phase episodes for some conditions).

We are eager to incentivize and drive high quality care with this episode of care, for both birth parent and infant, with core principles of equity and addressing disparities, more emphasis on behavioral health, greater attention to addressing unmet social needs and providing whole person, relational, and dyadic care.

Lastly, we want to explore the value of implementing an episode(s) that would capture the majority of the population and then a separate episode(s) which would be designed for persons who have higher, more complex needs and therefore require more services to achieve the same positive outcomes. We envision that this higher service level episode of care would be appropriate for those with increased physical and/or behavioral health needs.

HCA intends to award one contract(s) to provide the services described in this RFP.

1.4. OBJECTIVES AND SCOPE OF WORK

HCA anticipates that it will implement a maternity episode of care by January 1, 2023, which is a top priority for HCA. HCA's goal is to improve and incentivize high-quality, high-value care and intentionally address racial and ethnic disparities in maternal and infant health outcomes.

1.4.1 Scope of Work 1: Consultation

HCA is seeking a contractor with highly skilled, experienced personnel, who will provide subject matter expertise to consult and make recommendations on how to design, implement and maintain a maternity episode of care. The contractor will:

- 1.4.1.1 Identify broad-view approaches which are most likely to deliver high-quality and affordable benefits to the State and clients covered under HCA benefits;
- 1.4.1.2 Share knowledge from other states and insurers (both Medicaid and commercial) including:
 - 1.4.1.2.1 Outcomes and impact;
 - 1.4.1.2.2 Implemented designs (structure, clinical components, metrics, payment, etc.);
 - 1.4.1.2.3 Lessons learned and best practices; and
 - 1.4.1.2.4 Other information that may be applicable to HCA.
- 1.4.1.3 Advise and provide strategic direction and recommendations on the needed refinements or components to implement the maternity episode(s) of care within the parameters of SSB 5068, Ch. 90, Laws of 2021, and focus on a coordinated, whole person approach within the following areas:
 - 1.4.1.3.1 Social determinants of health/unmet social needs/health equity – address disparities in outcomes for both birth parent and for infant;
 - 1.4.1.3.2 Promoting dyadic care – care for pregnancy, labor and delivery and 12 months postpartum and care for the infant for a duration that will be most meaningful;

- 1.4.1.3.3 Care coordination/model of care – design into larger system of care;
- 1.4.1.3.4 Licensure;
- 1.4.1.3.5 Financing of episode(s)– equitable and sustainable funding model that promotes and incentivizes high quality evidence-base care;
- 1.4.1.3.6 Addressing behavioral health needs;
- 1.4.1.3.7 Quality reporting metrics – plan for evaluation from the beginning; and
- 1.4.1.3.8 Patient engagement.

1.4.1.4 **Deliverable:** A report that clearly details an understandable description of the maternal episodes of care landscape with shared evidence that will serve as the framework for the design and implementation of the maternity episode(s) of care.

1.4.2 Scope of Work 2: Design and Implementation Plan

HCA is seeking highly skilled, experienced personnel, who will proactively collaborate with HCA to design and implement a maternity episode of care across Medicaid, PEB and SEB that will span pregnancy care initiation through 12 months postpartum. The contractor will bring expertise in designing, developing, and implementing maternity episodes of care using the framework developed in Scope of Work 1 above. The contractor will engage HCA as thought partners and bring outside expertise and experience in all the components of a maternity episode of care including scope of services and clinical components (framed by integrated health and whole-person care with particular attention to behavioral health needs), quality metrics (reporting only and those tied to thresholds for incentive and penalty), payment models and structural considerations. These components must align and complement each other to achieve success and this is an intricate and iterative process to get to successful implementation. The contractor will use creativity and innovation in refining and designing a maternity episode of care which centers equity in this work as a core value through intentionally addressing disparities in perinatal and infant outcomes.

The contractor will:

- 1.4.2.1 Collaborate with HCA and identify additional stakeholders to map out the current process and potential future state; identify barriers and risks for implementing the episode(s); create mitigation strategies;
- 1.4.2.2 Define episodes, episode timing, patient population;
- 1.4.2.3 Identify inclusion and exclusion criteria for the episode(s) of care including definition of maternity care (pregnancy, delivery, and newborn care);
- 1.4.2.4 Define what potentially avoidable complications are related to maternity episodes of care;
- 1.4.2.5 Identify opportunities and benefits, key barriers, implementation, and operational considerations;
- 1.4.2.6 Facilitate, coordinate, and manage stakeholder engagement, and develop a communications plan;
- 1.4.2.7 Design episode(s) of care including but not limited to these components:

- 1.4.2.7.1 Social determinants of health/health equity – address disparities in outcomes for both birth parent and for infant;
- 1.4.2.7.2 Care coordination/model of care – design into larger system of care;
- 1.4.2.7.3 Licensure;
- 1.4.2.7.4 Financing of episode(s)– equitable and sustainable funding model that promotes and incentivizes high quality evidence-based care;
- 1.4.2.7.5 Addressing behavioral health needs;
- 1.4.2.7.6 Quality reporting metrics – plan for evaluation from the beginning;
- 1.4.2.7.7 Patient engagement;
- 1.4.2.7.8 Potential phased approach.

1.4.2.8 The specific components of the episode of care work include:

1.4.2.8.1 Accountability and performance measures: Create an evaluation framework for the maternity episode of care, both in terms of process and outcome metrics.

1.4.2.8.1.1 Translate a whole person approach/concept into qualitative measures (behavioral health, substance use, SDOH, structural racism).

1.4.2.8.2 Dyad structures: Provide expertise and recommendations on how to best incorporate the dyad (birth parent and infant) in the episode of care. We are looking to drive the best outcomes for parent/family and infant and to be innovative in our approach. In addition, the approach must also be feasible and address barriers to implementation.

1.4.2.8.2.1 Provide specific guidance and expertise around dyadic episodes for maternity and infant care, including implications for duration of time, meaningful metrics, addressing known/perceived barriers in terms of both care and financing, etc. *(An analysis in late 2019 found that 63% of pediatric episodes in that first year of life had a different primary provider than the provider attributed the maternal component of the episode. While we focus on the potential and expected benefits around recognizing these people and therefore care pathways as intertwined and inter-dependent, we recognize the challenges here in terms of care delivery, financing, dividing rewards or penalties between two independent providers, etc.).*

1.4.2.8.3 Doulas and care management: Integrate into the design of the maternity episode(s), the role of doulas during pregnancy, labor, and delivery, and postpartum.

1.4.2.9 Financial modeling: Work collaboratively with HCA designated personnel to draft models that include the financial impacts of implementing maternity episode(s) of care and the value it would provide to clients and potential savings

1.4.2.9.1 Identify systems needs/gaps in terms of information and data exchange, give recommendations in terms of best practices and technological supports for successful and financially viable implementation and short and long-term success.

1.4.2.9.2 Design must consider HCA's legal and financial framework. HCA staff will ensure the required information is available to include those portions.

1.4.2.10 **Deliverable:** Maternity episode(s) of care design and implementation plan. The design and implementation plan must consider and factor in all of the above components contained in Section 1.4.2.

1.5. MINIMUM QUALIFICATIONS

The following are the minimum qualifications for Bidders:

- 1.5.1. Licensed to do business in the State of Washington or provide a commitment that it will become licensed in Washington within 30 calendar days of being selected as the Apparent Successful Bidder.
- 1.5.2. The business of the Bidder must have been in operation for at least five (5) consecutive years.
- 1.5.3. One year of experience with researching, designing, and/or implementing maternity episode of care.

1.6. DESIRED QUALIFICATIONS

The following are the preferred qualifications for Bidders:

- 1.6.1 Experience with researching, designing, and/or implementing maternity episode of care for the Medicaid population.

1.7. FUNDING

HCA has budgeted an amount not to exceed \$400,000 Dollars for this project. Proposals in excess of \$400,000 will be considered non-responsive and will not be evaluated.

Any contract awarded as a result of this procurement is contingent upon the availability of funding.

1.8. PERIOD OF PERFORMANCE

The period of performance of any contract resulting from this RFP is tentatively scheduled to begin on or about January 15, 2022 and to end on January 14, 2023. Amendments extending the period of performance, if any, will be at the sole discretion of HCA.

HCA reserves the right to extend the contract for three one-year periods.

1.9. CONTRACTING WITH CURRENT OR FORMER STATE EMPLOYEES

Specific restrictions apply to contracting with current or former state employees pursuant to chapter 42.52 of the Revised Code of Washington. Bidders should familiarize themselves with the requirements prior to submitting a proposal that includes current or former state employees.

1.10. ADA

HCA complies with the Americans with Disabilities Act (ADA). Bidders may contact the RFP Coordinator to receive written information in another format (e.g., large print, audio, accessible electronic formats, and other formats).

2. GENERAL INFORMATION FOR BIDDERS

2.1. RFP COORDINATOR

The RFP Coordinator is the sole point of contact in HCA for this procurement. All communication between the Bidder and HCA upon release of this RFP must be with the RFP Coordinator, as follows:

Name	Mitch Gonzales
E-Mail Address	HCAProcurements@hca.wa.gov

Any other communication will be considered unofficial and non-binding on HCA. Bidders are to rely on written statements issued by the RFP Coordinator. Communication directed to parties other than the RFP Coordinator may result in disqualification of the Bidder.

2.2. BIDDER QUESTIONS PERIOD

Bidders are provided an opportunity to ask questions during the bidder question period which starts on the date of the RFP posting and concludes on the *Questions Due* date specified in Section 1.2, *Estimated Schedule of Procurement Activities*.

- A. Questions regarding the RFP will only be accepted in writing, sent by email to the RFP Coordinator. The Bidder must use the following email subject line when submitting questions: "RFP # Question(s) – [Bidder Name]" to ensure timely receipt.
- B. HCA anticipates it will post answers to the questions in WEBS as an RFP amendment on the *Answers Posted* date specified in section 1.2, *Estimated Schedule of Procurement Activities*.
- C. HCA is under no obligation to respond to any questions received after the *Questions Due* date, but may do so at its discretion.

2.3. SUBMISSION OF PROPOSALS

The proposal must be received by the RFP Coordinator no later than the Proposal Due deadline in Section 1.2, *Estimated Schedule of Procurement*. Proposals must be submitted electronically as an attachment to an e-mail to the RFP Coordinator at the e-mail address listed in Section 2.1, and meet the following requirements:

- 2.3.1. Attachments to e-mail must be in Microsoft Word format, PDF, or Excel format.
- 2.3.2. The Cost Proposal must be submitted as a separate Excel attachment. Bidders must use the Cost Proposal Template, Exhibit F, attached hereto, to submit a bid for this RFP.
- 2.3.3. Zipped files cannot be received by HCA and cannot be used for submission of proposals.
- 2.3.4. Certifications and Assurances (Exhibit A), Proclamation 21-14 – COVID-19 Vaccination Certification (Section 3.5 and Exhibit E), and Executive Order 18-03 Worker's Rights

(Section 3.9 and Exhibit G) must have a signature of the individual within the organization authorized to bind the Bidder to the offer.

- 2.3.5. HCA does not assume responsibility for problems with Bidder's e-mail. If HCA e-mail is not working, appropriate allowances will be made.

Bidders should allow sufficient time to ensure timely receipt of the proposal by the RFP Coordinator. Late proposals will not be accepted and will be automatically disqualified from further consideration, unless HCA e-mail is found to be at fault or HCA deems a grace period is in the best interest of the State. All proposals and any accompanying documentation become the property of HCA and will not be returned.

2.4. PROPRIETARY INFORMATION / PUBLIC DISCLOSURE

Proposals submitted in response to this RFP will become the property of HCA. All proposals received will remain confidential until the Apparent Successful Bidder is announced; thereafter, the proposals will be deemed public records as defined in chapter 42.56 of the Revised Code of Washington (RCW).

Any information in the proposal that the Bidder desires to claim as proprietary and exempt from disclosure under chapter 42.56 RCW, or other state or federal law that provides for the nondisclosure of a document, must be clearly designated. The information must be clearly identified and the particular exemption from disclosure upon which the Bidder is making the claim must be cited. Each page containing the information claimed to be exempt from disclosure must be clearly identified by the words "Proprietary Information" printed on the lower right hand corner of the page. Marking the entire proposal exempt from disclosure or as Proprietary Information will not be honored.

If a public records request is made for the information that the Bidder has marked as "Proprietary Information," HCA will notify the Bidder of the request and of the date that the records will be released to the requester unless the Bidder obtains a court order enjoining that disclosure. If the Bidder fails to obtain the court order enjoining disclosure, HCA will release the requested information on the date specified. If a Bidder obtains a court order from a court of competent jurisdiction enjoining disclosure pursuant to chapter 42.56 RCW, or other state or federal law that provides for nondisclosure, HCA will maintain the confidentiality of the Bidder's information per the court order.

A charge will be made for copying and shipping, as outlined in RCW 42.56. No fee will be charged for inspection of contract files, but 24 hours' notice to the RFP Coordinator is required. All requests for information should be directed to the RFP Coordinator.

The submission of any public records request to HCA pertaining in any way to this RFP will not affect the procurement schedule, as outlined in Section 1.2, unless HCA, in its sole discretion, determines that altering the schedule would be in HCA's best interests.

2.5. REVISIONS TO THE RFP

If HCA determines in its sole discretion that it is necessary to revise any part of this RFP, then HCA will provide addenda via e-mail to all individuals who have made the RFP Coordinator aware of their interest. Addenda will also be published on Washington's Electronic Bid System (WEBS), at <https://fortress.wa.gov/ga/webs/>. For this purpose, the published questions and answers and any other pertinent information will be provided as an addendum to the RFP and will be placed on the website.

HCA also reserves the right to cancel or to reissue the RFP in whole or in part, prior to execution of a contract.

2.6. DIVERSE BUSINESS INCLUSION PLAN

Bidders will be required to submit a Diverse Business Inclusion Plan with their proposal. In accordance with legislative findings and policies set forth in RCW 39.19, the state of Washington encourages participation in all contracts by firms certified by the Office of Minority and Women's Business Enterprises (OMWBE), set forth in RCW 43.60A.200 for firms certified by the Washington State Department of Veterans Affairs, and set forth in RCW 39.26.005 for firms that are Washington Small Businesses. Participation may be either on a direct basis or on a subcontractor basis. However, no preference on the basis of participation is included in the evaluation of Diverse Business Inclusion Plans submitted, and no minimum level of minority- and women-owned business enterprise, Washington Small Business, or Washington State certified Veteran Business participation is required as a condition for receiving an award. Any affirmative action requirements set forth in any federal governmental regulations included or referenced in the contract documents will apply.

2.7. ACCEPTANCE PERIOD

Proposals must provide one hundred twenty (120) calendar days for acceptance by HCA from the due date for receipt of proposals.

2.8. COMPLAINT PROCESS

The complaint process allows potential Bidders to focus on the solicitation requirements and evaluation process, and raise issues early enough in the process to allow HCA to correct a problem before proposals are submitted. The complaint period starts on the date of the RFP posting and concludes on the Complaints Due date identified in Section 1.2, *Estimated Schedule of Procurement of Procurement Activities*.

- 2.8.1. Potential Bidders may submit a complaint to HCA based on any of the following:
 - 2.8.1.1. The RFP unnecessarily restricts competition;
 - 2.8.1.2. The RFP evaluation or scoring process is unfair or unclear; or
 - 2.8.1.3. The RFP requirements are inadequate or insufficient to prepare a response.
- 2.8.2. For a complaint to be considered, it must be received by HCA by 5:00 pm PT on the Complaints Due date identified in Section 1.2. The complaint must:
 - 2.8.2.1. Be in writing;
 - 2.8.2.2. Be sent to the RFP Coordinator, or designee;
 - 2.8.2.3. Clearly articulate the basis for the complaint; and
 - 2.8.2.4. Include a proposed remedy.
- 2.8.3. HCA will address any complaint as follows:
 - 2.8.3.1. The RFP Coordinator, or designee will respond to the complaint in writing.
 - 2.8.3.2. The response to the complaint and any changes to the RFP will be posted on WEBS.
 - 2.8.3.3. The Director of HCA will be notified of all complaints and will be provided a copy of HCA's response.

Complaints may not be raised again during a protest and HCA's action or inaction in response to a complaint will be final. There is no appeal process.

2.9. RESPONSIVENESS

The RFP Coordinator will review all proposals to determine compliance with administrative requirements and instructions specified in this RFP. A Bidder's failure to comply with any part of the RFP may result in rejection of the proposal as non-responsive.

HCA also reserves the right at its sole discretion to waive minor administrative irregularities.

2.10. MOST FAVORABLE TERMS

HCA reserves the right to make an award without further discussion of the proposal submitted. Therefore, the proposal should be submitted initially on the most favorable terms which the Bidder can propose. HCA reserve the right to contact a Bidder for clarification of its proposal.

HCA also reserves the right to use a Best and Final Offer (BAFO) before awarding any contract to further assist in determining the ASB(s).

The ASB should be prepared to accept this RFP for incorporation into a contract resulting from this RFP. The contract resulting from this RFP will incorporate some, or all, of the Bidder's proposal. The proposal will become a part of the official procurement file on this matter without obligation to HCA.

2.11. COSTS TO PROPOSE

HCA will not be liable for any costs incurred by the Bidder in preparation of a proposal submitted in response to this RFP, in conduct of a presentation, or any other activities related in any way to this RFP. Funds are not obligated until a contract has been fully executed.

2.12. RECEIPT OF INSUFFICIENT NUMBER OF PROPOSALS

If HCA receives only one responsive proposal as a result of this RFP, HCA reserves the right to either: 1) directly negotiate and contract with the Bidder; or 2) not award any contract at all. HCA may continue to have the bidder complete the entire RFP. HCA is under no obligation to tell the Bidder if it is the only Bidder.

2.13. NO OBLIGATION TO CONTRACT

This RFP does not obligate HCA to enter into any contract for services specified herein.

2.14. REJECTION OF PROPOSALS

HCA reserves the right, at its sole discretion, to reject any and all proposals received without penalty and not to issue any contract as a result of this RFP.

2.15. COMMITMENT OF FUNDS

The Director of HCA or his/her delegate is the only individual who may legally commit HCA to the expenditures of funds for a contract resulting from this RFP. No cost chargeable to the proposed contract may be incurred before receipt of a fully executed contract.

2.16. ELECTRONIC PAYMENT

The state of Washington prefers to utilize electronic payment in its transactions. The ASB will need to be registered as a Statewide Vendor.

3. PROPOSAL CONTENTS

Proposals must be submitted electronically to the RFP Coordinator in the order noted below:

MANDATORY:

- A. *Letter of Submittal, including signed Certifications and Assurances (Section 3.1 and Exhibit A)
- B. Diverse Business Inclusion Plan (Section 3.2 and Exhibit B)
- C. References (Section 3.3 and Exhibit C)
- D. Draft Contract (Section 3.4 and Exhibit D)
- E. *Proclamation 21-14 – COVID-19 Vaccination Certification (Section 3.5 and Exhibit E)

MANDATORY SCORED:

- A. Technical Proposal (Section 3.6)
- B. Management Proposal (Section 3.7)
- C. Cost Proposal (Section 3.8 and Exhibit F)
- D. *Executive Order 18-03 Worker’s Rights (Section 3.9 and Exhibit G)

**Authorized signature required.*

Proposals must provide information in the same order as presented in this document with the same headings.

Items marked “mandatory” must be included as part of the proposal for the proposal to be considered responsive; however, these items are not scored. Items marked “mandatory scored” are those that are awarded points as part of the evaluation conducted by the evaluation team.

3.1. LETTER OF SUBMITTAL (MANDATORY)

The Letter of Submittal and the attached Certifications and Assurances form (Exhibit A to this RFP) must be signed and dated by a person authorized to legally bind the Bidder to a contractual relationship, e.g., the President or Executive Director if a corporation, the managing partner if a partnership, or the proprietor if a sole proprietorship. Along with introductory remarks, the Letter of Submittal is to include by attachment the following information about the Bidder and any proposed subcontractors:

- 3.1.1. Name, address, principal place of business, telephone number, and fax number/e-mail address of legal entity or individual with whom contract would be written.
- 3.1.2. Name, address, and telephone number of each principal officer (President, Vice President, Treasurer, Chairperson of the Board of Directors, etc.).
- 3.1.3. Legal status of the Bidder (sole proprietorship, partnership, corporation, etc.) and the year the entity was organized to do business as the entity now substantially exists.
- 3.1.4. Federal Employer Tax Identification number or Social Security number and the Washington Uniform Business Identification (UBI) number issued by the state of Washington Department of Revenue. If the Bidder does not have a UBI number, the Bidder must state

that it will become licensed in Washington within 30 calendar days of being selected as the Apparent Successful Bidder.

- 3.1.5. Location of the facility from which the Bidder would operate.
- 3.1.6. Explanation of how the Bidder meets the Minimum Qualifications identified in Section 1.5.
- 3.1.7. Explanation of how the Bidder meets, if applicable, the Desired Qualifications identified in Section 1.6.
- 3.1.8. Identify any state employees or former state employees employed or on the firm's governing board as of the date of the proposal. Include their position and responsibilities within the Bidder's organization. If following a review of this information, it is determined by HCA that a conflict of interest exists, the Bidder may be disqualified from further consideration for the award of a contract.
- 3.1.9. If the Bidder or any subcontractor contracted with the state of Washington during the past 24 months, indicate the name of the agency, the contract number, and project description and/or other information available to identify the contract.
- 3.1.10. If the Bidder's staff or subcontractor's staff was an employee of the state of Washington during the past 24 months, or is currently a Washington State employee, identify the individual by name, the agency previously or currently employed by, job title or position held, and separation date.
- 3.1.11. If the Bidder has had a contract terminated for default in the last five years, describe such incident. Termination for default is defined as notice to stop performance due to the Bidder's non-performance or poor performance and the issue of performance was either (a) not litigated due to inaction on the part of the Bidder, or (b) litigated and such litigation determined that the Bidder was in default.
- 3.1.12. Submit full details of the terms for default including the other party's name, address, and phone number. Present the Bidder's position on the matter. HCA will evaluate the facts and may, at its sole discretion, reject the proposal on the grounds of the past experience. If no such termination for default has been experienced by the Bidder in the past five years, so indicate.
- 3.1.13. Any information in the proposal that the Bidder desires to claim as proprietary and exempt from disclosure under the provisions of RCW 42.56 must be clearly designated. The page must be identified and the particular exemption from disclosure upon which the Bidder is making the claim must be listed. Each page claimed to be exempt from disclosure must be clearly identified by the word "Proprietary" printed on the lower right hand corner of the page. In your Letter of Submittal, please list which pages and sections that have been marked "Proprietary" and the particular exemption from disclosure upon which the Bidder is making the claim.

3.2. EXHIBIT B – DIVERSE BUSINESS INCLUSION PLAN (MANADATORY)

Bidders will be required to complete Exhibit B, Diverse Business Inclusion Plan and submit it with their proposal. In accordance with legislative findings and policies set forth in RCW 39.19 the state of Washington encourages participation in all contracts by firms certified by the Office of Minority and Women's Business Enterprises (OMWBE), set forth in RCW 43.60A.200 for firms certified by the Washington State Department of Veterans Affairs, and set forth in RCW 39.26.005 for firms that are Washington Small Businesses. Participation may be either on a direct basis or on a Subcontractor basis. However, no preference on the basis of participation is included in the evaluation of Diverse

Business Inclusion Plans submitted, and no minimum level of minority- and women-owned business enterprise, Washington Small Business, or Washington State certified Veteran Business participation is required as a condition for receiving an award. Any affirmative action requirements set forth in any federal governmental regulations included or referenced in the contract documents will apply.

3.3. EXHIBIT C - REFERENCES (MANDATORY)

Provide three business references for the Bidder using Exhibit C, Reference Form. References must be independent of the Bidder's and Subcontractor's company corporation (e.g., non-Bidder owned, in whole or in part, or managed, in whole or in part) and be for work similar to the scope of work contained herein. Complete all boxes of the reference form for each reference, including a description of the services provided, the timeframe in which services were provided, and the Bidder's team members who provided the services. By submitting a proposal in response to this solicitation, the Bidder and team members grant permission to HCA to contact these references and others, who from HCA's perspective, may have pertinent information. HCA may or may not, at HCA's discretion, contact references.

3.4. EXHIBIT D – DRAFT CONTRACT (MANDATORY)

The ASB will be expected to enter into a contract which is substantially the same as the sample contract and its general terms and conditions attached as Exhibit D. HCA will not accept any draft contracts prepared by any Bidder. The Bidder must be prepared to agree to all terms of the attached Exhibit D, *Draft Contract*, as presented or the Proposal may be rejected. If Bidder has exceptions to the terms and conditions, they must include with their proposal a copy of the Draft Contract with redline edits/comments documenting the changes they propose to be made if selected as ASB. If the Bidder fails to identify an objection to any particular term or condition, the term or condition will be deemed agreed to by the Bidder. HCA will review requested exceptions and accept or reject the same at its sole discretion.

If, after the announcement of the ASB, and after a reasonable period of time, the ASB and HCA cannot reach agreement on acceptable terms for the Contract, the HCA may cancel the selection and Award the Contract to the next most qualified Bidder

3.5. EXHIBIT E – COVID-19 VACCINATION CERTIFICATION (MANDATORY)

Bidder must review Exhibit E, COVID-19 Vaccination Certification and respond as to whether the Bidder complies with Proclamation 21-14.1 – COVID-19 Vaccination Requirement. Bidder must sign and return Exhibit E with its Proposal.

Note: Compliance with the Proclamation is mandatory. For more information please visit <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/505-160-VaccinationRequirementFAQs.pdf>.

3.6. TECHNICAL PROPOSAL (MANDATORY SCORED)

Maximum Available Points: 350 points

Maximum page limit: 15

The Technical Proposal must contain a comprehensive description of services including the following elements:

- 3.6.1. **Project Approach/Methodology** – Include a complete description of the Bidder's proposed approach and methodology for the project. This section should convey Bidder's understanding of the proposed project. Specifically describe how your approach would

consider a twelve month post-partum care and engagement of diverse OB provider types (including Certified nurse midwives and Licensed midwives) in twelve month dyadic care program. We are also interested in hearing your approach on incentivizing high value care for those with higher needs across the spectrum of physical and behavioral health, unmet social needs, those who suffer disproportionately worse outcomes (BIPOC, LGBTQ+). **(Maximum available points: 100 Points)**

- 3.6.2. **Work Plan** – Include all project requirements and the proposed tasks, services, activities, etc. necessary to accomplish the scope of the project defined in this RFP. This section of the technical proposal must contain sufficient detail to convey to members of the evaluation team the Bidder's knowledge of the subjects and skills necessary to successfully complete the project. Include any required involvement of HCA staff. The Bidder may also present any creative approaches that might be appropriate and may provide any pertinent supporting documentation. **(Maximum available points: 50 Points)**
- 3.6.3. **Project Schedule** – Include a project schedule indicating when the elements of the work will be completed. Project schedule must ensure that any deliverables requested are met. **(Maximum available points: 50 Points)**
- 3.6.4. **Outcomes and Performance Measurement** – Describe the impacts/outcomes the Bidder proposes to achieve as a result of the delivery of these services including how these outcomes would be monitored, measured, and reported to HCA. **(Maximum available points: 50 points)**
- 3.6.5. **Risks** – The Bidder must identify potential risks that are considered significant to the success of the project. Include how the Bidder would propose to effectively monitor and manage these risks, including reporting of risks to the HCA contract manager. **(Maximum available points: 50 Points)**
- 3.6.6. **Deliverables** – Fully describe deliverables to be submitted under the proposed contract. Deliverables must support the requirements set forth in Section 1.4, Objectives and Scope of Work. **(Maximum available points: 50 Points)**

3.7. MANAGEMENT PROPOSAL (MANDATORY SCORED)

Maximum available points: 600

Maximum page limit: 12

- 3.7.1. Project Management **(Maximum available points: 300)**
 - 3.7.1.1. **Project Team Structure/Internal Controls** – Provide a description of the proposed project team structure and internal controls to be used during the course of the project, including any subcontractors. Provide an organizational chart of your firm indicating lines of authority for personnel involved in performance of this potential contract and relationships of this staff to other programs or functions of the firm. This chart must also show lines of authority to the next senior level of management. Include who within the firm will have prime responsibility and final authority for the work. **(Maximum available points: 100 Points)**
 - 3.7.1.2. **Staff Qualifications/Experience** – Identify staff, including subcontractors, who will be assigned to the potential contract, indicating the responsibilities and qualifications of such personnel, and include the amount of time each will be assigned to the project. Provide resumes for the named staff, which include information on the individual's particular skills related to this project, education, experience, significant accomplishments, and any other pertinent information.

The Bidder must commit that staff identified in its proposal will actually perform the assigned work. Any staff substitution must have the prior approval of HCA. **(Maximum available points: 200 Points)**

3.7.2. Experience of the Bidder **(Maximum available points: 300 Points)**

3.7.2.1. Indicate the experience the Bidder and any subcontractors have in the following areas associated with:

3.7.2.1.1. **(Maximum available points: 100 Points)** Researching, designing, and/or implementing maternity episode of care. Provide at least one example of your work inclusive of these areas; clinical, financial, provider, community, reporting/evaluation, and stakeholder components and specifically describe the following components or note that the component was absent:

3.3.2.1.1.1 How the episode addressed behavioral health.

3.3.3.1.1.2 How the episodes addressed health equity.

3.7.2.1.2. Describe the experience of the Bidder with creating episodes of care with Medicaid and commercial insurance. **(Maximum available points: 50 Points)**

3.7.2.1.3. Describe the experience of the Bidder with Maternity episodes of care that include the infant. **(Maximum available points: 50 Points)**

3.7.2.2. Indicate other relevant experience that indicates the qualifications of the Bidder, and any subcontractors, for the performance of the potential contract. **(Maximum available points: 50 Points)**

3.7.2.3. Include a list of contracts the Bidder has had during the last five years that relate to the Bidder's ability to perform the services needed under this RFP. List contract reference numbers, contract period of performance, contact persons, telephone numbers, and fax numbers/e-mail addresses. **(Maximum available points: 50 Points)**

3.8. COST PROPOSAL – EXHIBIT F

Maximum available points: 150

The evaluation process is designed to award this procurement not necessarily to the Bidder of least cost, but rather to the Bidder whose proposal best meets the requirements of this RFP. However, Bidders are encouraged to submit proposals which are consistent with state government efforts to conserve state resources.

Bidder must complete the Cost Proposal spreadsheet, provided as Exhibit F, per the instructions below. The Bidder's response to the Cost Proposal must be submitted as a separate Excel attachment.

- Bidder's Cost Proposal must be in U.S. Dollars and inclusive of all expenses to be charged for performing the services necessary to establish the objectives of the resulting contract. The Bidder is to submit costs inclusive of staff costs, estimates for applicable sales and use taxes,

and any expenses necessary to accomplish the tasks to produce the deliverables under the resulting contract.

- The resulting contractor will be required to collect Washington state sales and use taxes from HCA, as applicable, and for remittance of payment to the Washington State Department of Revenue (DOR). Bidders must identify any expenses to which Washington State sales and use taxes (based on current tax rate(s)). HCA understands these amounts may fluctuate as tax rates fluctuate. If a tax isn't specifically identified, HCA will assume it is included in the costs identified.
- Proposed Sample Budget (**Maximum available points: 100**)
 - Proposed Sample Budgets in excess of \$400,000 total will be considered non-responsive and will not be evaluated. This budget is also subject to the following constraints:
 - Proposals in excess of \$60,000 for Proposed Sample Budget - Scope of Work 1 will be considered non-responsive and will not be evaluated.
 - Proposals in excess of \$340,000 for Proposed Sample Budget - Scope of Work 2 will be considered non-responsive and will not be evaluated.
- Hourly Rates (**Maximum available points: 50**)
 - Bidders are to complete the Hourly Rates tab for each Key Professional Staff Category who may perform work under a resulting contract. Bidders are welcome to add additional rows for as many categories as they'd like to submit. The hourly rate should be inclusive of all costs of performing the work, including travel (time and cost) and other overhead expenses. Bidders are required to collect and pay Washington state sales and use taxes, as applicable.
 - The rates provided in the Hourly Rates tab will be the maximum hourly rate for professional services under a resulting contract unless otherwise agreed upon in writing.

3.9. EXHIBIT G – EXECUTIVE ORDER 18-03 (MANDATORY SCORED)

Bidder must review Exhibit G and respond as to whether the Bidder requires its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses and class or collective action waivers.

4. EVALUATION AND CONTRACT AWARD

4.1. EVALUATION PROCEDURE

Responsive Proposals will be evaluated strictly in accordance with the requirements stated in this RFP and any addenda issued. The evaluation of proposals will be accomplished by an evaluation team(s), to be designated by HCA, which will determine the ranking of the proposals. Evaluations will only be based upon information provided in the Bidder's Proposal.

All proposals received by the stated deadline, Section 1.2, *Estimated Schedule of Procurement Activities*, will be reviewed by the RFP Coordinator to ensure that the Proposals contain all of the required information requested in the RFP. Only responsive Proposals that meet the requirements will be evaluated by the evaluation team. Any Bidder who does not meet the stated qualifications or any Proposal that does not contain all of the required information will be rejected as non-responsive.

The RFP Coordinator may, at his or her sole discretion, contact the Bidder for clarification of any portion of the Bidder's Proposal. Bidders should take every precaution to ensure that all answers are clear, complete, and directly address the specific requirement.

Responsive Proposals will be reviewed and scored by an evaluation team using a weighted scoring system, Section 4.2, *Evaluation Weighting and Scoring*. Proposals will be evaluated strictly in accordance with the requirements set forth in this RFP and any addenda issued.

HCA, at its sole discretion, may elect to select the top-scoring firms as finalists for an oral presentation.

4.2. EVALUATION WEIGHTING AND SCORING

Bidder's final score will be based on four (4) scored sections: Technical Proposal, Management Proposal, Cost Proposal, and Executive Order 18-03. HCA may elect to advance Bidder's to Oral Presentations.

- A. Points will be assigned to each question based on the average of all evaluation team members scores for the question (0-10) as identified in the scoring methodology in section B, below. The averaged scores will be multiplied by the assigned weights. Individual question scores will then be combined to result in the Bidder's total weighted score. Any point calculations that result in decimal points will be rounded to the nearest whole number. The maximum available points for each scored question are outlined in the following evaluation table:

Technical and Management Evaluation Table		Total Possible Points
Technical Proposal (Section 3.6)	Subsection Points	350
Project Approach/Methodology (Subsection 3.6.1)	100	
Work Plan (Subsection 3.6.2)	50	
Project Schedule (Subsection 3.6.3)	50	
Outcomes and Performance Measurements (Subsection 3.6.4)	50	
Risks (Subsection 3.6.5)	50	
Project Deliverables (Subsection 3.6.6)	50	

Management Proposal (Section 3.7)	Subsection Points	600
Project Team Structure/Internal Controls (Subsection 3.7.1.1)	100	
Staff Qualifications/Experience (Subsection 3.7.1.2)	200	
Experience of the Bidder (Subsection 3.7.2.1.1)	100	
Experience of the Bidder (Subsection 3.7.2.1.2)	50	
Experience of the Bidder (Subsection 3.7.2.1.3)	50	
Experience of the Bidder (Subsection 3.7.2.2)	50	
Experience of the Bidder (Subsection 3.7.2.3)	50	
Technical and Management Proposal	Maximum Points	950

B. Scoring Methodology

Evaluators will score the Technical, Management, and Oral Presentation (if required) Sections using the following (0-10) scoring methodology:

Scoring Methodology		
Score	Description	Scoring Criteria
10	Far Exceeds Requirements	The Bidder has provided an innovative, detailed, and thorough response to the requirement, and clearly demonstrates a high level of experience with, or understanding of the requirement.
7	Exceeds Requirements	The Bidder has demonstrated an above-average capability, approach, or solution and has provided a complete description of the capability, approach, or solution.
5	Meets Requirements	The Bidder has an acceptable capability of solution to meet this criterion and has described its approach in sufficient detail to be considered “as substantially meeting the requirements”.
3	Below Requirements	The Bidder has established some capability to perform the requirement but descriptions regarding their approach are not sufficient to demonstrate the Bidder will be fully able to meet the requirements.
1	Substantially Below Requirements	The Bidder has not established the capability to perform the requirement, has marginally described its approach, or has simply restated the requirement.
0	No Value	The Bidder does not address any component of the requirement or no information was provided.

C. Scoring of the Cost Proposal

Each of the two (2) cost proposal categories listed in Section 3.8 and Exhibit F will be scored individually based on the Bidder’s Proposed Sample Budget and Bidder’s blended hourly Key Professional Staff Category. Points for each cost category will be awarded according to the

following formula. Any point calculations that result in decimal points will be rounded to the nearest whole number.

Lowest Cost Proposal Element		Cost Proposal Maximum Available Points Per Element	=	Bidder's Cost Proposal Points
Bidder's Cost Proposal Element	x			

The maximum number of points possible for each category are outlined in the table below:

Evaluation Table – Cost Proposal		
Cost Element	Cost Element Description	Maximum Points Possible
1	Proposed Budget	100
2	Blended Hourly Rate	50
Cost Maximum Points		150

The Bidder's score for each of the cost elements will then be summed to determine the Bidder's total Cost Proposal score.

D. Scoring of Executive Order 18-03

Pursuant to RCW 39.26.160(3) and consistent with Executive Order 18-03 – Supporting Workers' Rights to Effectively Address Workplace Violations (dated June 12, 2018), HCA will evaluate bids for best value and provide a bid preference in the amount of 50 points to any Bidder who certifies, pursuant to the certification attached as Exhibit G, that their firm does NOT require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waiver. Bidders that do require their employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waiver will not be disqualified evaluation of this RFP, however they will receive 0 out of 50 points for this section.

E. Oral Presentations

HCA may after evaluating the Technical, Management, Cost proposals, and Executive Order 18-03 elect to schedule oral presentations of the finalists. Should oral presentations become necessary, HCA will contact the top-scoring firm(s) from the Technical, Management, Cost proposals, and Executive Order 18-03 evaluation to schedule a date, time, and location. Commitments made by the Bidder at the oral interview, if any, will be considered binding.

Bidders who advance to this phase of the evaluation will be provided more information about the presentation at the time they are notified, including topics to be presented and weighting of the scored elements. The evaluation team will evaluate the presentation using the scoring methodology identified in section B, above. Each oral presentation will receive a score, and each Bidder will be assigned a score out of 1000 points.

If HCA elects to schedule oral presentations, the oral presentation will determine the Apparent Successful Bidder.

F. Total Score – without Oral Presentation

Evaluation Table – All Scored Items
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Section/Exhibit	Title	Maximum Points
	Technical Proposal	350
	Management Proposal	600
	Cost Proposal	150
	Executive Order 18-03	50
Total Maximum Points without Oral Presentation		1,150

G. Total Score – with Oral Presentation

Evaluation Table – Oral Presentation	
Category	Maximum Points
Oral Presentation	1000

HCA reserves the right to award the contract to the Bidder whose proposal is deemed to be in the best interest of HCA and the state of Washington.

4.3. SUBSTANTIALLY EQUIVALENT SCORES

Substantially equivalent scores are scores separated by two percent or less in total points. If multiple Proposals receive a Substantially Equivalent Score, HCA may leave the matter as scored, or select as the ASB the one Proposal that is deemed by HCA, in its sole discretion, to be in HCA's best interest relative to the overall purpose and objective as stated in Sections 1.1 and 1.4 of this RFP.

If applicable, HCA's best interest will be determined by HCA managers and executive officers, who have sole discretion over this determination. The basis for such determination will be communicated in writing to all Bidders with equivalent scores.

4.4. NOTIFICATION TO BIDDERS

HCA will announce the ASB to all Bidders via the WEBS notification system.

4.5. DEBRIEFING OF UNSUCCESSFUL BIDDERS

Any Bidder who has submitted a Proposal and been notified it was not selected for contract award may request a debriefing. The request for a debriefing conference must be received by the RFP Coordinator no later than 5:00 p.m., local time, in Olympia, Washington, within three business days after the Unsuccessful Bidder Notification is e-mailed to the Bidder. The debriefing will be held within three business days of the request, or as schedules allow.

Discussion at the debriefing conference will be limited to the following:

- 4.5.1. Evaluation and scoring of the Bidder's Proposal;
- 4.5.2. Critique of the Proposal based on the evaluation; and
- 4.5.3. Review of the Bidder's final score in comparison with other final scores without identifying the other Bidders.

Topics a Bidder could have raised as part of the complaint process (Section 2.8) cannot be discussed as part of the debriefing conference, even if the Bidder did not submit a complaint.

Comparisons between proposals, or evaluations of the other proposals will not be allowed. Debriefing conferences may be conducted in person or on the telephone and will be scheduled for a maximum of thirty (30) minutes.

4.6. PROTEST PROCEDURE

A protest may be made only by Bidders who submitted a response to this RFP and who have participated in a debriefing conference. Upon completing the debriefing conference, the Bidder is allowed five Business Days to file a protest. Protests must be received by the Contracts Administrator no later than 4:30 p.m., local time, in Olympia, Washington on the fifth Business Day following the Bidder's debriefing. Protests must be submitted by e-mail to ensure timely receipt.

Consistent with RCW 39.26.030, proposal submissions and proposal evaluations will be available for public inspection following the announcement of ASB(s). If requested, the protest period will not conclude before the requestor has been provided with the applicable proposal submissions and proposal evaluations and provided five (5) Business Days to review the same. Bidder is responsible for notifying the RFP Coordinator of any such public disclosure requests so the timeline can be adjusted accordingly.

Bidders protesting this RFP must follow the procedures described below. Protests that do not follow these procedures will not be considered. This protest procedure constitutes the sole administrative remedy available to Bidders under this RFP.

- 4.6.1. All protests must be in writing, addressed to the Contracts Administrator, and signed by the protesting party or an authorized agent. The protest must state (1) the RFP number, (2) the grounds for the protest with specific facts, (3) complete statements of the action(s) being protested, and (4) the relief or corrective action being requested. Protests must be emailed to contracts@hca.wa.gov with the following subject line: "RFP 2021HCA31 Protest – [Bidder Name]"
- 4.6.2. Only protests alleging an issue of fact concerning the following subjects will be considered:
 - 4.6.2.1. A matter of bias, discrimination, or conflict of interest on the part of an evaluator;
 - 4.6.2.2. Errors in computing the score; or
 - 4.6.2.3. Non-compliance with procedures described in the RFP, HCA's protest process, or DES policy requirements (POL-DES-170-00).

Protests based on anything other than those items listed above will not be considered. Protests will be rejected as without merit to the extent they address issues such as: 1) an evaluator's professional judgment on the quality of a Proposal; or 2) HCA's assessment of its own needs or requirements.

- 4.6.3. Upon receipt of a protest, HCA will undertake a protest review. The HCA Director, or an HCA employee delegated by the HCA Director who is a neutral party with no involvement in the evaluation and award process (Protest Officer), will investigate and respond to the protest. If the HCA Director delegates the protest review to an HCA employee, the Director nonetheless reserves the right to make the final agency decision on the protest. The Protest Officer will have the right to seek additional information regarding the procurement from sources they deem appropriate in order to fully consider the protest.
- 4.6.4. If HCA determines in its sole discretion that a protest from one Bidder may affect the interests of another Bidder, then HCA may invite such Bidder to submit its views and any relevant information on the protest to the Protest Officer. In such a situation, the protest

materials submitted by each Bidder will be made available to all other Bidders upon request.

- 4.6.5. The Protest Officer will issue a written protest response no more than ten (10) Business Days after receipt of the protest, unless additional time is needed, in which case HCA will notify the protesting bidder in writing. The Protest Officer's decision is final, unless the HCA Director exercises their right to make the final agency decision on the protest. There will be no appeal process.
- 4.6.6. The final determination of the protest will:
 - 4.6.6.1. Find the protest lacking in merit and uphold HCA's action; or
 - 4.6.6.2. Find only technical or harmless errors in HCA's acquisition process and determine HCA to be in substantial compliance and reject the protest; or
 - 4.6.6.3. Find merit in the protest and provide options to the HCA Director, which may include:
 - 4.6.6.3.1. Correct the errors and re-evaluate all Proposals; or
 - 4.6.6.3.2. Issue a new solicitation document and begin a new process; or
 - 4.6.6.3.3. Make other findings and determine other courses of action as appropriate.

If the protest is not successful, HCA will enter into a contract with the ASB(s), assuming the parties reach agreement on the contract's terms.

5. RFP EXHIBITS

Exhibit A	Certifications and Assurances
Exhibit B	Diverse Business Inclusion Plan
Exhibit C	Reference Form
Exhibit D	Draft Contract (included as a separate attachment)
Exhibit E	Proclamation 21-14 COVID-19 Vaccination Certification
Exhibit F	Cost Proposal (included as a separate attachment)
Exhibit G	Executive Order 18-03 Worker's Rights

CERTIFICATIONS AND ASSURANCES

I/we make the following certifications and assurances as a required element of the proposal to which it is attached, understanding that the truthfulness of the facts affirmed here and the continuing compliance with these requirements are conditions precedent to the award or continuation of the related contract:

1. I/we declare that all answers and statements made in the proposal are true and correct.
2. The prices and/or cost data have been determined independently, without consultation, communication, or agreement with others for the purpose of restricting competition. However, I/we may freely join with other persons or organizations for the purpose of presenting a single proposal.
3. The attached proposal is a firm offer for a period of 120 days following receipt, and it may be accepted by HCA without further negotiation (except where obviously required by lack of certainty in key terms) at any time within the 120-day period.
4. In preparing this proposal, I/we have not been assisted by any current or former employee of the state of Washington whose duties relate (or did relate) to this proposal or prospective contract, and who was assisting in other than his or her official, public capacity. If there are exceptions to these assurances, I/we have described them as redline edits/comments within our submission of Exhibit D.
5. I/we understand that HCA will not reimburse me/us for any costs incurred in the preparation of this proposal. All proposals become the property of HCA, and I/we claim no proprietary right to the ideas, writings, items, or samples, unless so stated in this proposal.
6. Unless otherwise required by law, the prices and/or cost data which have been submitted have not been knowingly disclosed by the Bidder and will not knowingly be disclosed by him/her prior to opening, directly or indirectly, to any other Bidder or to any competitor.
7. I/we agree that submission of the attached proposal constitutes acceptance of the solicitation contents and the attached sample contract and general terms and conditions. If there are any exceptions to these terms, I/we have described those exceptions in detail as redline edits/comments within our submission of Exhibit D.
8. No attempt has been made or will be made by the Bidder to induce any other person or firm to submit or not to submit a proposal for the purpose of restricting competition.
9. I/we grant HCA the right to contact references and other, who may have pertinent information regarding the ability of the Bidder and the lead staff person to perform the services contemplated by this RFP.
10. If any staff member(s) who will perform work on this contract has retired from the State of Washington under the provisions of the 2008 Early Retirement Factors legislation, his/her name(s) is noted on a separately attached page.

We (circle one) **are / are not** submitting proposed Contract exceptions. (See Section heading, Contract and General Terms and Conditions.) If Contract exceptions are being submitted, they are included as redline edits/comments within our submission of Exhibit D.

On behalf of the Bidder submitting this proposal, my name below attests to the accuracy of the above statement. We are submitting a scanned signature of this form with our proposal.

Signature of Bidder

Title

Date

DIVERSE BUSINESS INCLUSION PLAN

Do you anticipate using, or is your firm, a State Certified Minority Business?	Y/N
Do you anticipate using, or is your firm, a State Certified Women's Business?	Y/N
Do you anticipate using, or is your firm, a State Certified Veteran Business?	Y/N
Do you anticipate using, or is your firm, a Washington State Small Business?	Y/N

If you answered No to all of the questions above, please explain:

Please list the approximate percentage of work to be accomplished by each group:

Minority ___%
Women ___%
Veteran ___%
Small Business ___%

Please identify the person in your organization to manage your Diverse Inclusion Plan responsibility.

Name: _____

Phone: _____

E-Mail: _____

BIDDER REFERENCE FORM	
Organization Legal Name:	
Contact Name:	Contact Title:
Contact's Phone Number:	Contact Email Address:
Time Frame of Services Provided:	
Description of Services Performed:	
Names and Titles for Bidder Team Members who Provided the Services:	

This exhibit is included as a separate attachment.

Proclamation 21-14 – COVID-19 Vaccination Certification

To reduce the spread of COVID-19, Washington state Governor Jay Inslee, pursuant to emergency powers authorized in [RCW 43.06.220](#), issued [Proclamation 21-14 – COVID-19 Vaccination Requirement](#) (dated August 9, 2021), as amended by [Proclamation 21-14.1 – COVID-19 Vaccination Requirement](#) (dated August 20, 2021) and as may be amended thereafter. The Proclamation requires contractors who have goods, services, or public works contracts with a Washington state agency to ensure that their personnel (including subcontractors) who perform contract activities on-site comply with the COVID-19 vaccination requirements, unless exempted as prescribed by the Proclamation.

[HCA] Procurement Number: 2021HCA31

I hereby certify, on behalf of the firm identified below, as follows (check one):

- COVID-19 CONTRACTOR VACCINATION PROCLAMATION COMPLIANCE. Contractor:
 - o Has reviewed and understands Contractor’s obligations as set forth in [Proclamation 21-14 – COVID-19 Vaccination Requirement](#) (dated August 9, 2021), as amended by [Proclamation 21-14.1 – COVID-19 Vaccination Requirement](#) (dated August 20, 2021); and
 - o Contractor personnel (including subcontractors) who are subject to the vaccination requirement in the above-referenced Proclamation will provide Agency proof of full vaccination against COVID-19 or appropriate exemption for which a reasonable accommodation has been provided.

OR

- CONTRACTOR IS NOT ABLE TO PERFORM IN COMPLIANCE WITH THE VACCINATION PROCLAMATION. Contractor is not able to perform the contract obligations in compliance with the above-referenced Proclamation.

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

Firm Name: _____
Name of Contractor/Bidder – Print full legal entity name of firm

By: _____
Signature of authorized person

Print Name of person making certifications for firm

Title: _____
Title of person signing certificate

Place: _____
Print city and state where signed

Date: _____

**CONTRACTOR CERTIFICATION
EXECUTIVE ORDER 18-03 – WORKERS’ RIGHTS
WASHINGTON STATE GOODS & SERVICES CONTRACTS**

Pursuant to the Washington State Governor’s Executive Order 18-03 (dated June 12, 2018), the Washington State Health Care Authority is seeking to contract with qualified entities and business owners who certify that their employees are not, as a condition of employment, subject to mandatory individual arbitration clauses and class or collective action waivers.

Solicitation No.: RFP# 2021HCA31

I hereby certify, on behalf of the firm identified below, as follows (check one):

NO MANDATORY INDIVIDUAL ARBITRATION CLAUSES AND CLASS OR COLLECTIVE ACTION WAIVERS FOR EMPLOYEES. This firm does NOT require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

OR

MANDATORY INDIVIDUAL ARBITRATION CLAUSES AND CLASS OR COLLECTIVE ACTION WAIVERS FOR EMPLOYEES. This firm requires its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

FIRM NAME: _____
Name of Contractor/Bidder – Print full legal entity name of firm

By: _____
Signature of authorized person

Print Name of person making certifications for firm

Title: _____
Title of person signing certificate

Place: _____
Print city and state where signed

Date: _____