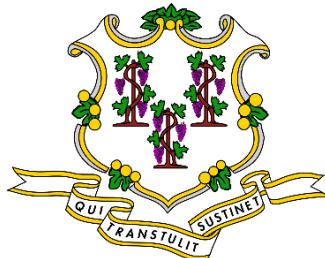


STATE OF CONNECTICUT PROCUREMENT NOTICE**Request for Proposals (RFP) For
Health Access Program****Issued By:****The Department of Public Health****September 8, 2025**

The Request for Proposal is available in electronic format on the State Contracting Portal by filtering by Organization for the Department of Public Health

<https://portal.ct.gov/DAS/CTSource/BidBoard> or from the Department's Official Contact:

Jennifer Squires
410 Capitol Avenue, MS# 11PCO
Hartford, CT 06134
Phone: 860-509-7412
Email:jennifer.squires@ct.gov

The RFP is also available on the Department's website at:

<https://portal.ct.gov/dph/Request-For-Proposals/Request-for-Proposals>

RESPONSES MUST BE RECEIVED NO LATER THAN**October 27, 2025, by 12:00 PM EST**

Department of Public Health is an Equal Opportunity/Affirmative Action Employer.

The Department reserves the right to reject all submissions or cancel this procurement at any time if deemed in the best interest of the State of Connecticut (State).

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I. GENERAL INFORMATION

The Connecticut Department of Public Health ("DPH", the "Department", or the "Agency") is seeking proposals to implement Public Act (P.A.) 22-118, which allocated funding to the Department to increase access to specialty medical health care and social services to low-income children and/or adults who are underinsured or uninsured in Connecticut. The Department received \$1,244,634 in State funding to support this effort. DPH is seeking two (2) organizations that can use these funds to provide specialty medical care to low-income children and/or adults with limited or no health insurance in the State.

A. INTRODUCTION

- 1. RFP Name and Number.** Health Access Program, DPH2026-0904RFP. The name and number will be used on the cover sheet of proposals submitted in response to this RFP.
- 2. RFP Summary.** The Department is seeking proposals for two (2) organizations to implement the Health Access Program, a program to increase access to specialty medical care and services for low-income children and/or adults who are underinsured or uninsured in Connecticut. The selected Proposer will: 1) provide patient navigation for eligible patients; 2) develop a network of specialty providers and health care facilities to supply donated care and ancillary services, and 3) provide social service assistance and address Social Determinants of Health (SDoH) and barriers to accessing and utilizing health care. Patients who are eligible for this program may not have access to health insurance, reliable transportation, or a designated primary care provider. These individuals may also experience a language barrier.
- 3. RFP Purpose.** The Health Access Program will address barriers to access specialty medical care for low-income children and/or adults who are underinsured or uninsured in the State. The Department will contract with two (2) organizations to implement the Health Access Program.
- 4. Commodity Codes.** The services that the Department wishes to procure through this RFP are as follows:
 - 0600: Services (Professional, Support, Consulting and Misc. Services)
 - 1000: Healthcare Services
 - 2000: Community and Social Services

B. INSTRUCTIONS

- 1. Official Contact.** The Department has designated the individual below as the Official Contact for purposes of this RFP. The Official Contact is the **only authorized contact** for this procurement and, as such, handles all related communications on behalf of the Department. Proposers, Prospective Proposers, and other interested parties are advised that any communication with any other Department employee(s) (including appointed officials) or personnel under contract to the Department about this RFP is strictly prohibited. Proposers or Prospective Proposers who violate this instruction may risk disqualification from further consideration.

Name: Jennifer Squires, Health Program Assistant 2
Address: Maternal, Child Health, and Access to Care Section
Community, Family Health, and Prevention Branch
CT Department of Public Health
410 Capitol Avenue, MS# 11PCO
Hartford, CT 06134

Phone: 860-509-7412
Email: jennifer.squires@ct.gov

Please ensure that email screening software, if used, recognizes and accepts emails from the Official Contact.

- 2. Registering with State Contracting Portal.** Respondents must register with the State of CT contracting portal at <https://portal.ct.gov/DAS/CTSource/Registration> if not already registered. Respondents shall submit the following information pertaining to this application to this portal (on their supplier profile), which will be checked by the Department contact.
- Secretary of State recognition – Click on appropriate response
 - Non-profit status, if applicable
 - Notification to Bidders, Parts I-V
 - Campaign Contribution Certification (OPM Ethics Form 1) can be found at: <https://portal.ct.gov/OPM/Fin-PSA/Forms/Ethics-Forms>

- 3. RFP Information.** The RFP, amendments to the RFP, and other information associated with this procurement are available in electronic format from the Official Contact or from the internet at the following locations:

- Department's RFP Web Page at:
<https://portal.ct.gov/dph/Request-For-Proposals/Request-for-Proposals>
- State Contracting Portal (go to CTsource bid board and filter by "Department of Public Health") at:
<https://portal.ct.gov/DAS/CTSource/BidBoard>

It is strongly recommended that any Proposer or Prospective Proposer interested in this procurement check the Bid Board for any solicitation changes. Interested Proposers may receive additional emails from CTsource announcing addendums that are posted on the portal. This service is provided as a courtesy to assist in monitoring activities associated with State procurements, including this RFP.

- 4. Procurement Schedule.** See below. Dates after the due date for proposals ("Proposals Due") are target dates only (*). The Department may amend the schedule as needed at its discretion. Any change to non-target dates will be made by means of an amendment to this RFP and will be posted on the State Contracting Portal and, if available, on the Department's RFP web page.

• RFP Released:	September 8, 2025
• Deadline for Questions:	September 22, 2025
• Answers Released:	September 29, 2025
• Letter of Intent Due:	October 6, 2025
• Proposals Due	October 27, 2025, by 12:00 pm EST
• (*) Proposer Selection	November 17, 2025
• (*) Start of Contract Negotiations:	November 24, 2025
• (*) Start of Contract:	July 1, 2026
• Funding Source:	State Funding, Community Health Services

- 5. Contract Awards.** The award of any contract pursuant to this RFP is dependent upon the availability of funding to the Department. The Department anticipates the following:

- Total Funding Available: \$1,244,634.00
- Number of Awards: 2
- Contract Term: 3 years (with an option to extend up to two years)
- Annual Funding Amount: \$207,439.00 per Proposer

- Funding Source: State funding

6. Eligibility. Applications will be accepted from healthcare organizations, public and non-profit organizations, such as local health districts or departments, community health centers, or Federally Qualified Health Centers (FQHCs). Proposers must be based in Connecticut (CT). Individuals who have not created a duly formed business entity are ineligible to participate in this procurement.

7. Minimum Qualifications of Proposers. To qualify for a contract award, a Proposer must have the following minimum qualifications:

Proposers must exhibit demonstrated experience in administering healthcare services and must provide evidence of established working relationships within the Target User Population. Proposer must be a public or non-profit organization. Proposers must submit a complete proposal in compliance with the requirements specified in this RFP. Proposers with long-standing, significant outstanding unresolved issues on current and/or prior year contracts with the Department may be removed from consideration for additional or future funding.

8. Letter of Intent. A Letter of Intent (LOI) is **strongly recommended** for this RFP. The LOI is non-binding and does not obligate the sender to submit a proposal. The LOI must be submitted to the Official Contact via email by the deadline established in the Procurement Schedule. The LOI must clearly identify the sender, including name, postal address, telephone number, fax number, and email address.

9. Inquiry Procedures. All questions regarding this RFP or the Department's procurement process must be directed, in writing, electronically via email, to the Official Contact before the deadline specified in the Procurement Schedule.

Questions submitted via email must be indicated in the subject line: RFP #2026-0904RFP Health Access Program. The early submission of questions is encouraged. Questions will not be accepted or answered verbally – either in person or over the telephone. All questions received before the deadline will be answered. However, the Department will not answer questions when the source is unknown (i.e., anonymous questions). Questions deemed unrelated to the RFP, or the procurement process will not be answered. At its discretion, the Department may or may not respond to questions received after the deadline. If this RFP requires a Letter of Intent, the Department reserves the right to answer questions only from those who have submitted such a letter. The Department may combine similar questions from multiple Proposers and give only one answer. All questions and answers will be compiled into a written amendment to this RFP. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and noted as such.

The Department will release the answers to questions on the date(s) established in the Procurement Schedule. The Department will publish all amendments to this RFP on the State Contracting Portal and, if available, on the Department's RFP web page.

10. RFP Conference. An RFP conference will not be held to answer questions from Prospective Proposers.

11. Proposal Due Date and Time. The Official Contact is the **only authorized recipient** of proposals submitted in response to this RFP. Proposals must be received by the Official Contact on or before the due date and time:

- Due date: October 27, 2025
- Time: 12:00 PM EST

Proposals received after the due date and time will be ineligible and will not be evaluated. The Department will send an official letter alerting late respondents of ineligibility.

An acceptable submission must include the following:

- One (1) conforming electronic copy of the original proposal.

The proposal must be complete, properly formatted as outlined, and ready for evaluation by the Screening Committee.

The electronic copy of the proposal must be emailed to the Official Contact for this procurement. The subject line of the email must read: **RFP #2026-0904RFP Health Access Program**. Required forms and appendices may be scanned and submitted as PDFs at the end of the main proposal document. Please ensure the entire email submission is less than 25MB as this reflects the Department's server limitations. Respondents should work to ensure there are no additional IT limitations from the provider side.

12. Multiple Proposals. The submission of multiple proposals is not an option for this procurement.

II. PURPOSE OF RFP AND SCOPE OF SERVICES

A. AGENCY OVERVIEW

The Connecticut Department of Public Health (DPH) is the state's leader in public health policy and advocacy and is an integral part of the public health system. The Department is the center of a comprehensive network of public health providers and is a partner to local health departments.

The Department is a source of accurate, up-to-date health information to the Governor, the Legislature, the federal government, and local communities. This information is used to monitor the health status of Connecticut's residents, set health priorities, and evaluate the effectiveness of health initiatives. The Department is focused on health outcomes, maintaining a balance between assuring quality and administrative functions among personnel, facilities, and programs.

DPH's mission is to protect and improve the health and safety of the people of Connecticut by:

- Assuring the conditions in which people can be healthy;
- Preventing disease, injury, and disability; and
- Promoting the equal enjoyment of the highest attainable standard of health, which is a human right and a priority of the State.

B. PROGRAM OVERVIEW

- *Program Title:* Health Access Program
- *Problem Statement:* Low-income children and/or adults who are underinsured or uninsured in Connecticut experience multiple barriers that prevent or limit access to specialty medical care and social services, which may increase the risk of poor health outcomes and health disparities.
- *Program Outcome Goals:*
 - Increase the number of patients enrolled in the Health Access Program.
 - Increase the number of patients who receive patient navigation and social services; and
 - Increase the number of specialty medical providers and healthcare facilities that provide donated specialty care and ancillary services.
- *Program Policies/Guidelines:* Proposers must adhere to all applicable professional standards as outlined in Connecticut Practice Acts and CLAS standards. The CLAS standards can be found here:
<https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvid=53>.
- *Target User Population:* Low-income, as defined for the purposes of this proposal, is the government-established federal poverty level, or FPL. Children and/or adults at or below 250% FPL living in Connecticut who are underinsured or uninsured and in need of specialty medical care and social services comprise the Target User Population.
- *Service Authorization:* Public Act 22-118.
- *Vision for a Successful Service:* A successful Health Access Program will serve the needs of low-income children and/or adults who are underinsured or uninsured living in Connecticut by ensuring the Target User Population gains access to high-quality, affordable specialty medical care, ancillary services, and patient navigation support

to coordinate the delivery of care across the continuum and to address the SDoH. Another initiative of the Health Access Program is to develop and maintain a robust network of volunteer providers and healthcare facilities further described in Section II.C and D.3.

C. SCOPE OF SERVICES DESCRIPTION

The Department is seeking proposals for two (2) organizations to increase access to specialty care for a Target User Population of low-income, underinsured, or uninsured children and/or adults with a need for specialty care. The awarded bidder(s) will provide patient navigation and care coordination to eligible individuals. They will also develop a network of volunteer providers who will provide donated specialty care and develop relationships with local hospitals and outpatient facilities that will donate ancillary care services. The awarded bidder(s) will also ensure patients have primary care providers and connect patients with other necessary services addressing the SDoH, such as transportation, translation, pharmacy assistance, social services, insurance enrollment, and appropriate entitlements, as needed.

Primary care services are **NOT** included in this RFP, but the awarded bidder(s) shall ensure eligible individuals have a primary care provider or receive a referral if they do not have one.

Specialty care is medical care provided by healthcare providers with specialized training and expertise in a particular area of medicine. These services can include but are not limited to: Arthritis and Rheumatology; Cardiology; Clinical Pathology; Dermatology; Emergency Medicine; Endocrinology; Gastroenterology; Geriatrics; Gynecology; Hematology/Oncology; Transfusion Medicine/Apheresis; Infectious Diseases; Interventional Radiology; Nephrology; Neurology; Ophthalmology; Orthopedics; Otolaryngology; Pathology; Podiatry; Psychiatry; Pulmonary; Surgery (General, Cardiothoracic, Vascular, Plastic); and Urology.

Ancillary care services are supplemental services that support primary medical treatment and can include but are not limited to: Biopsy (surgical or non-surgical); Chemotherapy/other transfusion treatment; Colonoscopy; CT Scan; Echocardiogram/Stress Echocardiogram; EGD (Esophagogastroduodenoscopy); EKG (Electrocardiogram); Emergency Services; Hospitalization/Inpatient Services; Laboratory Services/Inpatient Services/ MRI; Occupational Therapy; Palliative Care; PET Scan; PFT (Pulmonary Function Test); Physical Therapy; Radiation Therapy; Speech Therapy; Stress Test/Stress Exercise Test; Surgery (Ambulatory); Surgery (Inpatient); Ultrasound; and X-Ray.

1. Organizational Expectations:

- Proposals will be accepted from health care organizations, public and non-profit organizations, such as local health districts or departments, community health centers, or FQHCs. Proposers must be based in Connecticut. Proposers must demonstrate experience in coordinating specialty healthcare services. Proposers must also furnish evidence of existing working relationships with specialty care providers, including but not limited to hospitals, and outpatient facilities, and with individuals who are included within the Target User Population.

2. Financial Expectations:

- Proof of tax-exempt status for nonprofit Proposers.
- Two years of most recent annual audited financial statement or any financial statements prepared by a Certified Public Accountant for Proposers whose organizations have been incorporated for less than two years.

3. Budget Expectations:

- Total Available Funding: \$1,244,634.00.
- Period of Award: 7/1/2025 – 6/30/2028 (with an option to extend up to two years).

- Number of Awards: 2
- Annual Budget Amount: \$207,439 annually per Proposer
- Compliance with all budget restrictions. See Section IV.7b.
- Adhere to a Department- approved budget.

4. Data and Technology Expectations:

- Email/Internet Capabilities
- Data Collection
- Records / Data Collection / Storage / Reporting / Deliverables

5. Staffing Expectations:

- Project Lead
- Project Team
- Appropriate level of staffing, including Bilingual staff, to implement the Program and activities and execute the work plan to achieve established performance targets.

D. PERFORMANCE MEASURES

The following performance metrics highlight key priorities that will be analyzed with providers and vendors collaboratively during the life of the contract. This is not an exhaustive list, but rather an indication of significant performance metrics of interest to the Department. The Department looks forward to working with providers to define additional important performance metrics.

Relevant performance measures may be drawn from the Department's program evaluation framework, and may include the following key outcomes to assess the impact of the access to specialty care model for low-income children and/or adults with limited or no health insurance:

1. Quarterly statistical and progress reports detailing quantitative data, including but not limited to:
 - Number of patients enrolled;
 - Number of participating providers and specialty;
 - Monetary value in donated care;
 - Number of visits;
 - Type of service provided;
 - Type and number of specialty care services provided;
 - Type and number of ancillary services provided; and
 - Patient demographics, including age, gender, insurance status, income status, town of residence, etc.
2. Enroll a minimum of 500 voluntary specialty medical providers for each funding period.
3. Obtain voluntary specialty care services from at least 25 different specialties during each funding period.
4. Enroll a minimum of 300 eligible patients into the Health Access Program each funding period.

E. CONTRACT MANAGEMENT/DATA REPORTING

As part of the State's commitment to becoming more outcomes-oriented, the Department seeks to actively and regularly collaborate with providers to enhance contract management, improve results, and adjust service delivery and policy based on learning what works. Reliable and relevant data is necessary to ensure compliance, inform trends to be monitored, evaluate results and performance, and drive service improvements. As such, the Department reserves the right to request/collect other key data and metrics from providers.

III. PROPOSAL SUBMISSION OVERVIEW

A. SUBMISSION FORMAT INFORMATION

1. Required Outline. All proposals must follow the required outline presented in Section IV – Proposal Outline. Proposals that fail to follow the required outline will be deemed non-responsive and not evaluated.

2. Cover Sheet. Proposers must complete and use the Cover Sheet and Proposer Information Form provided by the Department in Section VII Application Forms.

Legal Name is defined as the name of the provider, vendor, CT State agency, or municipality submitting the proposal. *Contact Person* is defined as the individual who can provide additional information about the proposal or who has immediate responsibility for the proposal. *Authorized Official* is defined as the individual empowered to submit a binding offer on behalf of the Proposer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto.

3. Table of Contents. All proposals must include a Table of Contents that conforms with the required proposal outline.

4. Executive Summary. Proposals must include a high-level summary, not exceeding two (2) pages of the main proposal and cost proposal. The summary must also include the organization's eligibility and qualifications to respond to this RFP.

5. Attachments. Attachments other than the required Appendices or Forms identified in the RFP are not permitted and will not be evaluated. Further, the required Appendices or Forms must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions will result in disqualification.

6. Style Requirements. Submitted proposals must conform to the following specifications:

- Paper Size: 8.5" x 11"
- Page Limits: Not to exceed 25 pages, excluding Budget Forms
- Font Size: 12-point font
- Font Type: Times New Roman
- Margins: 1" margins
- Line Spacing: 1 or 1.5 line spacing
- Print Style: 2-sided

7. Pagination. The Proposer's name must be displayed in the header of each page. All pages, including the required Appendices and Forms, must be numbered in the footer.

8. Declaration of Confidential Information. Proposers are advised that all materials associated with this procurement are subject to the terms of the Freedom of Information Act (FOIA), the Privacy Act, and all rules, regulations and interpretations resulting from them. If a Proposer deems that certain information required by this RFP is confidential, the Proposer must label such information as CONFIDENTIAL prior to submission. The Proposer must reference where the information labeled CONFIDENTIAL is in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the Proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the Proposer that would result if the identified information

were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).

- 9. Conflict of Interest - Disclosure Statement.** Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the Proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a Proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. The Department will determine whether any disclosed conflict of interest poses a substantial advantage to the Proposer over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State. In the absence of any conflict of interest, a Proposer must affirm such in the disclosure statement. *Example: "[name of Proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

B. EVALUATION OF PROPOSALS

- 1. Evaluation Process.** It is the intent of the Department to conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this RFP. When evaluating proposals, negotiating with successful Proposers, and awarding contracts, the Department will conform with its written procedures for POS and PSA procurements (pursuant to C.G.S. § 4-217) and the State's Code of Ethics (pursuant to C.G.S. §§ 1-84 and 1-85). Final funding allocation decisions will be determined during contract negotiation.
- 2. Evaluation Review Committee.** The Department will designate a Review Committee to evaluate proposals submitted in response to this RFP. The Review Committee will be composed of individuals, Department staff or other designees as deemed appropriate. The contents of all submitted proposals, including any confidential information, will be shared with the Review Committee. Only proposals found to be responsive (that is, complying with all instructions and requirements described herein) will be reviewed, rated, and scored. Proposals that fail to comply with all instructions will be rejected without further consideration. The Review Committee shall evaluate all proposals that meet the Minimum Submission Requirements by score and rank ordered and make recommendations for awards. The Commissioner will make the final selection. Attempts by any Proposer (or representative of any Proposer) to contact or influence any member of the Review Committee may result in disqualification of the Proposer.
- 3. Minimum Submission Requirements.** To be eligible for evaluation, proposals must (1) be received on or before the due date and time; (2) meet the Proposal Format requirements; (3) meet the Eligibility and Qualification requirements to respond to the procurement, (4) follow the required Proposal Outline; and (5) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements will not be reviewed further. The Department will reject any proposal that deviates significantly from the requirements of this RFP.
- 4. Evaluation Criteria.** Proposals meeting the Minimum Submission Requirements will be evaluated according to the established criteria. The criteria are the objective standards that the Review Committee will use to evaluate the technical merits of the proposals. Only the criteria listed below will be used to evaluate proposals. The weights are confidential.

Evaluation Criterion Title	What would a top score look like?
Organizational Requirements and Profile	The Proposer shall describe the history of their organization, experience with specialty medical care and the Target User Population to be served; provide evidence that the organization can successfully manage the program; and shall include activities the organization has currently to accommodate the cultural and linguistic needs of the community. The Proposer shall describe past accomplishments and resources of their organization detailing the success in achieving the desired programmatic goals.
Scope of Services	<p>The Proposer shall discuss how they will address the programmatic requirements, outcomes, and performance measures stated in the RFP.</p> <p>The Proposer shall explain how the proposed program will address the needs of the Target User Population. The Proposer shall describe plans for meeting the requirements outlined in the Scope of Services. Plans should provide strategies to engage and retain the population to be served.</p>
Staffing Plan	The Proposer shall demonstrate an appropriate level of staffing, including bilingual staff, to implement the program and activities and execute the work plan to achieve established performance targets.
Data and Technology	The Proposer shall develop or maintain a system or database to collect and track all required performance measures and data. The Proposer must have consistent access to the internet and be able to communicate with the Department via phone, email, and conferencing technology.
Work Plan and performance measures	The Proposer shall clearly define objectives, tasks involved, and how objectives are measurable and achievable with the resources available to the program. The Proposer shall identify the actions to be taken that will significantly contribute to the achievement of the program goals.
Budget Narrative	The Proposer shall define and demonstrate a clear and concise relationship between funds requested, the program activities, and performance targets/outcomes. The Proposer shall describe how the budget focuses on program expenses and direct services.

Note:

As part of its evaluation of the Staffing Plan, the Review Committee will review the Proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).

- 5. Proposer Selection.** Upon completing its evaluation of proposals, the Review Committee will submit the rankings of all proposals to the Commissioner or Department Head. The final selection of a successful Proposer is at the discretion of the Commissioner or Department Head. Any Proposer selected will be so notified and awarded an opportunity to negotiate a contract with the Department. Such negotiations may, but will not automatically, result in a contract. Any resulting contract will be posted on the State Contracting Portal. All unsuccessful Proposers will be notified by email or U.S. mail, at the Department's discretion, about the outcome of the evaluation and Proposer selection process. The Department reserves the right to decline to award contracts for activities in which the Commissioner or Department Head considers there are not adequate respondents.
- 6. Debriefing.** Within ten (10) days of receiving notification from the Department, unsuccessful Proposers may contact the Official Contact and request information about the evaluation and Proposer selection process. The email sent date or the postmark date on the notification envelope will be considered "day one" of the ten (10) days. If unsuccessful Proposers still have questions after receiving this information, they may contact the Official Contact and request a meeting with the Department to discuss the evaluation process and their proposals. If held, the debriefing meeting will not include any comparisons of unsuccessful proposals with other proposals. The Department may schedule and hold the debriefing meeting within fifteen (15) days of the request. The Department will not change, alter, or modify the outcome of the evaluation or selection process because of any debriefing meeting.
- 7. Appeal Process.** Proposers may appeal any aspect the Department's competitive procurement, including the evaluation and Proposer selection process. Any such appeal must be submitted to the Department head. A Proposer may file an appeal at any time after the proposal due date, but not later than thirty (30) days after an agency notifies unsuccessful Proposers about the outcome of the evaluation and Proposer selection process. The email sent date or the postmark date on the notification envelope will be considered "day one" of the thirty (30) days. The filing of an appeal shall not be deemed sufficient reason for the Department to delay, suspend, cancel, or terminate the procurement process or execution of a contract. More detailed information about filing an appeal may be obtained from the Official Contact.
- 8. Contract Execution.** Any contract developed and executed because of this RFP is subject to the Department's contracting procedures, which may include approval by the Office of the Attorney General. Fully executed and approved contracts will be posted on the State Contracting Portal and the Department website.

IV. REQUIRED PROPOSAL SUBMISSION OUTLINE AND REQUIREMENTS**A: Cover Sheet**

Respondents must complete and use the Cover Sheet and Proposer Information Form provided by the Department in Section VII Application Forms.

Legal Name is defined as the name of the provider, vendor, CT State agency, or municipality submitting the proposal. *Contact Person* is defined as the individual who can provide additional information about the proposal or who has immediate responsibility for the proposal. *Authorized Official* is defined as the individual empowered to submit a binding offer on behalf of the Proposer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto.

B: Table of Contents

Respondents must include a Table of Contents that lists sections and subsections with page numbers that follow the organization outline and sequence for this proposal.

C: Proposer Executive Summary

The page limitation for this section is two (2) pages briefly describing how the Respondent meets the eligibility and qualification criteria outlined in the Proposal Overview and a brief overview of why the Respondent should be selected for the activities highlighted in the scope of services.

D: Main Proposal Submission Requirements to Submit a Responsive Proposal

*****Please note the maximum total page length for this section is 10** (all appendices and other attachments should be referred to in Section D and then placed in Section E.)

Application Submission Details:

1. Proposer Organizational Requirements and Profile

- a. Purpose, Mission, Vision, Values: The Proposer must provide a brief overview of the history and structure of their organization. Explain how the proposal will fit into the organization's overall mission and meet the intent of the RFP.
- b. Entity Type / Years of Operation: Proposers must indicate their entity type and years of operation. Proposals will be accepted from healthcare organizations, public or non-profit organizations, such as local health districts or departments, community health centers, or FQHCs. Proposers must be based in Connecticut. Organizations that are not identified as duly incorporated business entities are ineligible to participate in this procurement.
- c. Location of Offices / Clients: Proposers must identify the specific locations where services are currently being provided.
- d. Organizational Experience and Range of Services: Proposers must describe what is currently being implemented in each of the following areas:
 - Patient Navigation Services: Provide an overview of the patient navigation services currently being provided by your organization, including type of services, such as transportation, translation, insurance enrollment, medical home referrals, entitlements, etc., where the services are being provided and what community partners you work with to coordinate these services.

- Target User Population: Provide an overview of how your organization currently supports and works with the Target User Population, including demographics of the population and their needs including specialty care and SDoH.
 - Provider Network: Describe any current relationships and/or partnerships with specialty care providers, hospitals, and/or outpatient facilities who provide specialty care and ancillary services. Include the number of providers or facilities and the types of specialty care and ancillary services. Please reference any existing or pending Memorandums of Agreements, Memorandums of Understanding, or letters of commitment.
 - Data Collection: Provide an overview of how your data is currently captured (e.g. electronic health record, Excel, etc.), what processes are in place to collect, track, and report data, and include an example of what Health Indicators are currently being collected.
 - Evaluation: Provide an overview of how you currently evaluate the impact and effectiveness of your programs. Include examples of patient satisfaction surveys, provider satisfaction surveys, feedback surveys, informant interviews, etc.
 - Sustainability: Provide an overview of how services are billed, what sources currently fund the program, and any identified challenges or barriers to sustainability of the Health Access Program.
- e. Accreditation / Certification / Licensure: Please define any relevant organizational accreditations, certifications, or licensure.
- f. Professional Standards: Proposers must confirm an adherence to all applicable professional standards and/or Connecticut Practice Acts.

2. Scope of Services

- a. Your proposal, at a minimum, must describe the following:
- Catchment Area(s) that will be served by this program.
 - Documentation of Community Needs and Resources – Any recently completed needs assessments and current resources available in the proposed Catchment Area.
 - Location of Services – Identify specific locations where the proposed project will be implemented and demonstrate the need with any baseline data.
 - Target User Population – The Target User Population is comprised of low-income children and/or adults with limited or no insurance and Connecticut residency with a need for specialty care, social services, or a primary care provider. Provide the total Target User Population and patient demographic information, e.g., race, ethnicity, insurance type, etc.
 - Describe how culturally competent services will be provided, including CLAS standards. The CLAS standards can be found here: <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>.
 - Describe any proposed community/partner collaborations and the internal and external coordination that will be established.

- Describe how the Proposer will integrate and coordinate with ongoing or anticipated initiatives that may compete or overlap.
- b. Outline a proposal to implement the Health Access Program by addressing the following elements:

Patient Navigation Services: Develop a plan to increase access and reduce barriers to specialty healthcare and social services by providing patient navigation services, including a description of how you will:

- Identify and screen patients for program eligibility;
- Enroll patients in the Health Access Program;
- Provide care coordination for specialty care and ancillary services; Assist patients with social service enrollment, such as insurance, entitlements, etc., and decrease barriers to care in terms of transportation, translation, pharmacy assistance, appointment reminders, referrals, etc.;
- Provide bilingual and culturally competent services;
- Refer patients to primary care providers; and
- Meet the performance measures to be defined by the Department.

Provider Network: Describe how you will develop and maintain a network of providers and healthcare facilities who will provide the Target User Population with donated specialty care and ancillary services. Address how you will meet the performance measures and reference any existing or pending Memorandums of Agreements, Memorandums of Understanding, or letters of commitment. Include a plan on how you will recruit for donated care to establish new or maintain existing partnerships with providers and facilities, including a strategy for promotion and outreach for the program, such as community, health system, provider, or facility presentations.

Data Collection and Reporting: The successful Proposer will be required to collect and report project data. Submission requirements include quarterly data reports to the Department. The successful Proposer will be required to submit data using a Department-provided template. Describe how you will meet the data collection and reporting requirements. Describe how you will track and monitor performance towards achieving the performance measures outlined in Section II.D.

Quality Assurance: Describe your organization's plan to measure and ensure quality. The plan should include but is not limited to staff training, data collection, evaluating patient and/or provider satisfaction, effectiveness of care coordination services and outreach, referral for follow-up care, and evaluation plans.

Sustainability: Describe a plan to address the sustainability of this Project beyond the funding period.

Evaluation: Proposers must include a plan on how they will evaluate the implementation and effectiveness of the program, such as patient or provider satisfaction surveys, feedback surveys, informant interviews, site visits, etc.

3. Staffing Requirements – Staffing Plan

- a. Staffing Plan Narrative: The proposal must describe the key personnel assigned to this program. Your staffing plan must specify who will serve as the:

- Project Lead – identify the staff member who will coordinate any staff providing direct patient services, technical assistance, and project implementation. This person will serve as the Department's main point of contact and must be assigned to the contract at a minimum of 0.25 FTE.
 - Project Team – identify the team of staff who will be implementing the project. The Proposer must indicate that adequate staff and time are allocated to manage the services to be provided.
- b. Staffing Levels & Qualifications: For each staff person identified, include in the narrative:
- A brief job description;
 - A description of the individual's role and the extent to which he or she has appropriate training, qualifications, credentials, and experience to perform assigned duties;
 - The number of hours to be dedicated to this project, per staff, per week; and
 - Hourly rates for each staff person funded through this project.
- Attach full job descriptions and resumes as appendices for all professionals that will be assigned to this program.

The Proposer must provide evidence that the Proposer will utilize small and minority businesses whenever feasible and appropriate in the purchase of supplies and services.

- c. Organization Chart: The Proposer must include an organizational chart.
- d. Recruitment, Hiring, Retention Plan & Staff Turnover Plans: The Proposer must describe how new staff are recruited, hired, and trained and the process to retain current staff, including continuing education and staff development. Also, describe how staff turnover and/or extended leaves of absence will be addressed.

4. Data and Technology Requirements

- a. Email/Internet Capabilities: The Proposer must define current capabilities as well as system restrictions. Proposers must have access to and be able to open email and the internet for the purposes of data collection and record reporting, as well as for any required or recommended Department webinars and teleconferences.
- b. Data Collection: The Proposer must describe their ability to meet the data collection requirements of this project.
- c. Reporting requirements include: Quarterly data reports submitted to the Department per a Department-provided template.
- d. Records / Data Collection / Storage / Reporting / Deliverables: The Proposer must describe how project-related records and data will be securely collected and stored to ensure compliance with applicable confidentiality laws and regulations. The Proposer must describe its ability to track and report activities and data for each component.

5. Subcontractors

- a. If Subcontractors will be used in the proposed program, specify the following information for each:
 - Legal Name of Agency, Address, FEIN
 - Contact Person, Title, Phone, Fax, Email
 - Services To Be Provided Under Subcontract
 - Subcontractor Oversight

- Subcontract Cost and Term
- Subcontractor Qualifications (see Staffing Requirements above)

NOTE: The proposal must include a completed Subcontractor Schedule A Detail Form for each Subcontractor proposed (If known at application time, otherwise, Proposer will be required to submit during contract negotiations; see Budget Justification Subcontractor Schedule A-Detail Form in Section VII. Application Forms).

6. Work Plan

A work plan is required and must describe how the Proposer plans to implement all the required strategies and activities to achieve program goals. For Year 1, outline activities in the Work Plan table as indicated on the worksheet in the Appendices section. Describe work to be completed in subsequent years in a narrative format. The Work Plan (Work Plan Table and Narrative) must not exceed six (6) pages. The selected awardees will submit a detailed Work Plan as a post-award requirement and update at least annually as a contingency to receive continued funding. Please see the Work Plan Form in Section VII. Application Forms.

7. Cost Proposal Components

a. Financial Profile

Funding for these prospective services is from the State of Connecticut Biennial Budget. **Budgets for services requested in this RFP for each year of the project are contingent as funds are available. Funds for this RFP are anticipated to be as follows:**

Year 1 – ends 6/30/2026: \$414,878 (\$207,439 per contractor)
Year 2 – ends 6/30/2027: \$414,878 (\$207,439 per contractor)
Year 3 – ends 6/30/2028: \$414,878 (\$207,439 per contractor)
TOTAL: \$1,244,634

Financial Management Systems: The Proposer must describe its capacity to engage with CT DPH Grants and Contracts Management Unit through the CORE-CT web-based contract platform for all aspects of contract development, execution and reporting including budgets and fiscal reporting.

Revenue Generation / Billing / Third Party Reimbursement: The Proposer must describe its revenue generation process, billing, and/or third-party reimbursements.

History of Violations: The Proposer must disclose any financial or programmatic violations and by which entity.

b. Budget Requirements – Budget and Budget Narrative

The proposal must contain a written narrative and an itemized budget with justification for each line item utilizing the Budget Summary Form A, Budget Summary – Position Schedule #2a- Staffing Profile, and Budget Justification Schedule Form B included in Section VII. All relevant budget Forms must be completed for each funding year.

- The narrative explaining all line-item costs (personnel, travel, printing, supplies, subcontractor costs, cost standards, etc.) must be included in the proposal. Competitiveness of the budget will be considered as part of the proposal review process (Please note

- lower levels of Administrative and General Costs will be looked upon more favorably during the proposal evaluation process.)
- Please complete and attach the budget summary and budget justification forms in Section VII. Application Forms. Add pages to the required forms as needed in the format provided. If applying for both components, be sure to complete the budget forms as required for each component.
 - The State of Connecticut is exempt from the payment of excise, transportation and sales taxes imposed by the Federal and/or State government. Such taxes must not be included in contract prices.
 - The maximum amount of the bid may not be increased after the proposal is submitted. All cost estimates will be considered as "not to exceed" quotations against which time and expenses will be charged.
 - The proposed budget is subject to change during the contract award negotiations.

Funding from this award cannot support:

- Any costs that are not directly related to the coordination and delivery of this project;
- Volunteers and volunteer gifts;
- Purchases of equipment at \$5,000 or more per unit;
- Food or drink; and
- Salary bonuses.

If equipment is purchased, Proposers must describe how the equipment will be used and maintained.

E: Attachments

Attachments other than the required Appendices and Forms identified are not permitted and will not be evaluated. See the Proposal Checklist in Appendix C for a list of relevant attachments. Further, the required Appendices and Forms must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions may result in disqualification.

F: Declaration of Confidential Information

If a Proposer deems that certain information required by this RFP is confidential, the Proposer must label such information as CONFIDENTIAL prior to submission. The Proposer must reference where the information labeled CONFIDENTIAL is in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the Proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the Proposer that would result if the identified information were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).

G: Conflict of Interest – Disclosure Statement

Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the Proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a Proposer tries to influence, or succeeds in influencing,

the outcome of an official decision for their personal or corporate benefit. In the absence of any conflict of interest, a Proposer must affirm such in the disclosure statement. *Example:* "[name of Proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."

H: Statement of Assurances

Place after Conflict of Interest-Disclosure Statement. Sign and return Appendix VI.B.

V. MANDATORY PROVISIONS

A. POS STANDARD CONTRACT, PARTS I AND II

By submitting a proposal in response to this RFP, the Proposer implicitly agrees to comply with the provisions of Parts I and II of the State's "standard contract" for POS:

Part I of the standard contract is maintained by the Department and will include the scope of services, contract performance, quality assurance, reports, terms of payment, budget, and other program-specific provisions of any resulting POS contract. A sample of Part I is available from the Department's Official Contact upon request.

Part II of the standard contract is maintained by OPM and includes the mandatory terms and conditions of the POS contract. Part II is available on OPM's website at:

http://www.ct.gov/opp/fin/standard_contract

Note:

Included in Part II of the standard contract is the State Elections Enforcement Commission's notice (pursuant to C.G.S. § 9-612(g)(2)) advising executive branch State contractors and prospective State contractors of the ban on campaign contributions and solicitations. If a Proposer is awarded an opportunity to negotiate a contract with the Department and the resulting contract has an anticipated value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts has an anticipated value of \$100,000 or more, the Proposer must inform the Proposer's principals of the contents of the SEEC notice.

Part I of the standard contract may be amended by means of a written instrument signed by the Department, the selected Proposer, and, if required, the Attorney General's Office. Part II of the standard contract may be amended only in consultation with, and with the approval of, the Office of Policy and Management and the Attorney General's Office.

B. ASSURANCES

By submitting a proposal in response to this RFP, a Proposer implicitly gives the following assurances:

- 1. Collusion.** The Proposer represents and warrants that the Proposer did not participate in any part of the RFP development process and had no knowledge of the specific contents of the RFP prior to its issuance. The Proposer further represents and warrants that no agent, representative, or employee of the State participated directly in the preparation of the Proposer's proposal. The Proposer also represents and warrants that the submitted proposal is in all respects fair and is made without collusion or fraud.
- 2. State Officials and Employees.** The Proposer certifies that no elected or appointed official or employee of the State has or will benefit financially or materially from any contract resulting from this RFP. The Department may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the officials or employees from the Proposer, contractor, or its agents or employees.
- 3. Competitors.** The Proposer assures that the submitted proposal is not made in connection with any competing organization or competitor submitting a separate proposal in response to this RFP. No attempt has been made, or will be made, by the Proposer to induce any other organization or competitor to submit, or not submit, a proposal for the purpose of restricting competition. The Proposer further assures that the proposed costs have been arrived at independently, without consultation, communication, or agreement with any other organization or competitor for the purpose of restricting competition. Nor has the Proposer

knowingly disclosed the proposed costs on a prior basis, either directly or indirectly, to any other organization or competitor.

- 4. Validity of Proposal.** The Proposer certifies that the proposal represents a valid and binding offer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto. The proposal shall remain valid for a period of 180 days after the submission due date and may be extended beyond that time by mutual agreement. At its sole discretion, the Department may include the proposal, by reference or otherwise, into any contract with the successful Proposer.
- 5. Press Releases.** The Proposer agrees to obtain prior written consent and approval of the Department for press releases that relate in any manner to this RFP or any resultant contract.

C. TERMS AND CONDITIONS

By submitting a proposal in response to this RFP, a Proposer implicitly agrees to comply with the following terms and conditions:

- 1. Equal Opportunity and Affirmative Action.** The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment, or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate based on disability in admission to, access to, or operation of its programs, services, or activities.
- 2. Preparation Expenses** Neither the State nor the Department shall assume any liability for expenses incurred by a Proposer in preparing, submitting, or clarifying any proposal submitted in response to this RFP.
- 3. Exclusion of Taxes.** The Department is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Proposers are liable for any other applicable taxes.
- 4. Proposed Costs.** No cost submissions that are contingent upon a State action will be accepted. All proposed costs must be fixed throughout the entire term of the contract.
- 5. Changes to Proposal.** No additions or changes to the original proposal will be allowed after submission. While changes are not permitted, the Department may request and authorize Proposers to submit written clarification of their proposals, in a manner or format prescribed by the Department, and at the Proposer's sole expense.
- 6. Supplemental Information.** Supplemental information will not be considered after the deadline for submission of proposals, unless specifically requested by the Department. The Department may ask the Proposer to give demonstrations, interviews, oral presentations, or further explanations to clarify information contained in a proposal. Any such demonstration, interview, or oral presentation will be at a time selected and in a place provided by the Department. At its sole discretion, the Department may limit the number of Proposers invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per Proposer.
- 7. Presentation of Supporting Evidence.** If requested by the Department, the Proposer must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFP. The Department may make onsite visits to an operational facility or facilities of a Proposer to evaluate furtherthe

Proposer's capability to perform the duties required by this RFP. At its discretion, the Department may also check or contact any reference provided by the Proposer.

- 8. RFP Is Not an Offer.** Neither this RFP nor any subsequent discussions shall give rise to any commitment on the part of the State or the Department or confer any rights on any Proposer unless and until a contract is fully executed by the necessary parties. The contract document will represent the entire agreement between the Proposer and the Department and will supersede all prior negotiations, representations, or agreements, alleged, or made, between the parties. The State shall assume no liability for costs incurred by the Proposer or for payment of services under the terms of the contract until the successful Proposer is notified that the contract has been accepted and approved by the Department and, if required, by the Attorney General's Office.

D. RIGHTS RESERVED TO THE STATE

By submitting a proposal in response to this RFP, a Proposer implicitly accepts that the following rights are reserved to the State:

- 1. Timing Sequence.** The timing and sequence of events associated with this RFP shall ultimately be determined by the Department.
- 2. Amending or Canceling RFP.** The Department reserves the right to amend or cancel this RFP on any date and at any time, if the Department deems it to be necessary, appropriate, or otherwise in the best interests of the State.
- 3. No Acceptable Proposals.** If no acceptable proposals are submitted in response to this RFP, the Department may reopen the procurement process, if it is determined to be in the best interests of the State.
- 4. Award and Rejection of Proposals.** The Department reserves the right to award in part, to reject all proposals in whole or in part, for misrepresentation or if the proposal limits or modifies any of the terms, conditions, or specifications of this RFP. The Department may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State will be served. The Department reserves the right to reject the proposal of any Proposer who submits a proposal after the submission date and time.
- 5. Sole Property of the State.** All proposals submitted in response to this RFP are to be the sole property of the State. Any product, whether acceptable or unacceptable, developed under a contract awarded because of this RFP shall be the sole property of the State, unless stated otherwise in this RFP or subsequent contract. The right to publish, distribute, or disseminate all information or reports, or part thereof, shall accrue to the State without recourse.
- 6. Contract Negotiation.** The Department reserves the right to negotiate or contract for all or any portion of the services contained in this RFP. The Department further reserves the right to contract with one or more Proposers for such services. After reviewing the scored criteria, the Department may seek Best and Final Offers (BFO) on cost from Proposers. The Department may set parameters on any BFOs received.
- 7. Clerical Errors in Award.** The Department reserves the right to correct inaccurate awards resulting from its clerical errors. This may include, in extreme circumstances, revoking the awarding of a contract already made to a Proposer and subsequently awarding the contract to another Proposer. Such action on the part of the State shall not constitute a breach of contract on the part of the State since the contract with the initial Proposer is deemed to be void *ab initio* and of no effect as if no contract ever existed between the State and the Proposer.

- 8. Key Personnel.** When the Department is the sole funder of a purchased service, the Department reserves the right to approve any additions, deletions, or changes in key personnel, except for key personnel who have terminated employment. The Department also reserves the right to approve replacements for key personnel who have terminated employment. The Department further reserves the right to require the removal and replacement of any of the Proposer's key personnel who do not perform adequately, regardless of whether they were previously approved by the Department.

E. STATUTORY AND REGULATORY COMPLIANCE

By submitting a proposal in response to this RFP, the Proposer implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, the following:

- 1. Freedom of Information, C.G.S. § 1-210(b).** The Freedom of Information Act (FOIA) generally requires the disclosure of documents in the possession of the State upon request of any citizen, unless the content of the document falls within certain categories of exemption, as defined by C.G.S. § 1-210(b). Proposers are generally advised not to include in their proposals any confidential information. If the Proposer indicates that certain documentation, as required by this RFP, is submitted in confidence, the State will endeavor to keep said information confidential to the extent permitted by law. The State has no obligation to initiate, prosecute, or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information pursuant to a FOIA request. The Proposer has the burden of establishing the availability of any FOIA exemption in any proceeding where it is an issue. While a Proposer may claim an exemption to the State's FOIA, the final administrative authority to release or exempt any or all material so identified rests with the State. In no event shall the State or any of its employees have any liability for disclosure of documents or information in the possession of the State and which the State or its employees believe(s) to be required pursuant to the FOIA or other requirements of law.
- 2. Contract Compliance, C.G.S. § 4a-60 and Regulations of CT State Agencies § 46a-68j-21 thru 43, inclusive.** CT statute and regulations impose certain obligations on State agencies (as well as contractors and Subcontractors doing business with the State) to ensure that State agencies do not enter contracts with organizations or businesses that discriminate against protected class persons.
- 3. Consulting Agreements, C.G.S. § 4a-81. Consulting Agreements Representation, C.G.S. § 4a-81.** Pursuant to C.G.S. §§ 4a-81 the successful contracting party shall certify that it has not entered into any consulting agreements in connection with this Contract, except for the agreements listed below. "Consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (A) providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (B) contacting, whether in writing or orally, any executive, judicial, or administrative office of the State, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction, requests for information, or (C) any other similar activity related to such contracts. "Consulting agreement" does not include any agreements entered with a consultant who is registered under the provisions of chapter 10 of the Connecticut General Statutes as of the date such contract is executed in accordance with the provisions of section 4a-81 of the Connecticut General Statutes. Such representation shall be sworn as true to the best knowledge and belief of the person signing the resulting contract and shall be subject to the penalties of a false statement.

4. Campaign Contribution Restriction, C.G.S. § 9-612. For all State contracts, defined in section 9-612 of the Connecticut General Statutes as having a value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts having a value of \$100,000 or more, the authorized signatory to the resulting contract must represent that they have received the State Elections Enforcement Commission's notice advising state contractors of state campaign contribution and solicitation prohibitions, and will inform its principals of the contents of the notice, as set forth in "Notice to Executive Branch State Contractors and Prospective State Contractors of Campaign Contribution and Solicitation Limitations." Such notice is available at https://seec.ct.gov/Portal/data/forms/ContrForms/seec_form_11_notice_only.pdf

5. Gifts, C.G.S. § 4-252. Pursuant to section 4-252 of the Connecticut General Statutes and Acting Governor Susan Bysiewicz's Executive Order No. 21-2, the Contractor, for itself and on behalf of all its principals or key personnel who submitted a bid or proposal, represents:

- (1) That no gifts were made by (A) the Contractor, (B) any principals and key personnel of the Contractor, who participate substantially in preparing bids, proposals or negotiating State contracts, or (C) any agent of the Contractor or principals and key personnel, who participates substantially in preparing bids, proposals or negotiating State contracts, to (i) any public official or State employee of the State agency or quasi-public agency soliciting bids or proposals for State contracts, who participates substantially in the preparation of bid solicitations or requests for proposals for State contracts or the negotiation or award of State contracts, or (ii) any public official or State employee of any other State agency, who has supervisory or appointing authority over such State agency or quasi-public agency;
- (2) That no such principals and key personnel of the Contractor, or agent of the Contractor or of such principals and key personnel, knows of any action by the Contractor to circumvent such prohibition on gifts by providing for any other principals and key personnel, official, employee or agent of the Contractor to provide a gift to any such public official or State employee; and
- (3) That the Contractor is submitting bids or proposals without fraud or collusion with any person. Any bidder or Proposer that does not agree to the representations required under this section shall be rejected and the State agency or quasi-public agency shall award the contract to the next highest ranked Proposer or the next lowest responsible qualified bidder or seek new bids or proposals.

6. Iran Energy Investment Certification C.G.S. § 4-252(a). Pursuant to C.G.S. § 4-252(a), the successful contracting party shall certify the following: (a) that it has not made a direct investment of twenty million dollars or more in the energy sector of Iran on or after October 1, 2013, as described in Section 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 2010, and has not increased or renewed such investment on or after said date. (b) If the Contractor makes a good faith effort to determine whether it has made an investment described in subsection (a) of this section it shall not be subject to the penalties of false statement pursuant to section 4-252a of the Connecticut General Statutes. A "good faith effort" for purposes of this subsection includes a determination that the Contractor is not on the list of persons who engage in certain investment activities in Iran created by the Department of General Services of the State of California pursuant to Division 2, Chapter 2.7 of the California Public Contract Code. Nothing in this subsection should be construed to impair the ability of the State agency or quasi-public agency to pursue a breach of contract action for any violation of the provisions of the resulting contract.

7. Nondiscrimination Certification, C.G.S. § 4a-60 and 4a-60a. If a bidder is awarded an opportunity to negotiate a contract, the Proposer must provide the State agency with *written representation* in the resulting contract that certifies the bidder

complies with the State's nondiscrimination agreements and warranties. This nondiscrimination certification is required for all State contracts – regardless of type, term, cost, or value. Municipalities and CT State agencies are exempt from this requirement. The authorized signatory of the contract shall demonstrate his or her understanding of this obligation by either (A) initialing the nondiscrimination affirmation provision in the body of the resulting contract, or (B) providing an affirmative response in the required online bid or response to a proposal question, if applicable, which asks if the Contractor understands its obligations. If a bidder or vendor refuses to agree to this representation, such bidder or vendor shall be rejected, and the State agency or quasi-public agency shall award the contract to the next highest ranked vendor or the next lowest responsible qualified bidder or seek new bids or proposals.

8. Access to Data for State Auditors. The Contractor shall provide to OPM access to any data, as defined in C.G.S. § 4e-1, concerning the resulting contract that are in the possession or control of the Contractor upon demand and shall provide the data to OPM in a format prescribed by OPM [or the Client Department] and the State Auditors of Public Accounts at no additional cost.

VI. APPENDIX**A. ABBREVIATIONS / ACRONYMS / DEFINITIONS**

ADA	American Disabilities Act
BFO	Best and Final Offer
C.G.S.	Connecticut General Statutes
CLAS	Culturally and Linguistically Appropriate Services
CT	Connecticut
DAS	Department of Administrative Services (CT)
DPH	Department of Public Health
ED	Emergency Department
FOIA	Freedom of Information Act (CT)
FPL	Federal Poverty Level
FQHC	Federally Qualified Health Center
IRS	Internal Revenue Service (US)
LOI	Letter of Intent
OAG	Office of the Attorney General
OPM	Office of Policy and Management (CT)
PHAB	Public Health Accreditation Board
POS	Purchase of Service
P.A.	Public Act (CT)
RFP	Request for Proposal
SDoH	Social Determinants of Health
U.S.	United States

- *Catchment Area:* a geographic area that an organization serves.
- *Contractor:* a private provider organization, CT State agency, or municipality that enters a POS contract with the Agency because of this RFP.
- *Health Indicators:* a quantifiable measurement that provides information of a population or the performance of a health system.
- *Proposer:* a private provider organization, CT State agency, or municipality that has submitted a proposal to the Agency in response to this RFP. This term may be used interchangeably with respondent throughout the RFP.
- *Prospective Proposer:* a private provider organization, CT State agency, or municipality that may submit a proposal to the Agency in response to this RFP, but has not yet done so.
- *Social Determinants of Health (SDoH):* the conditions in which people are born, grow, live, work, age, and die, that affect a wide range of health, functioning, and quality-of-life outcomes and risks. These conditions, which include available health care systems, are shaped by the distribution of money, power, and other resources at global, national, and local levels.
- *Subcontractor:* an individual (other than an employee of the contractor) or business entity hired by a Contractor to provide a specific health or human service as part of a POS contract with the Department because of this RFP.

B. STATEMENT OF ASSURANCES

Department of Public Health

The undersigned Respondent affirms and declares that:

1) General

- a. This proposal is executed and signed with full knowledge and acceptance of the RFP CONDITIONS stated in the RFP.
- b. The Respondent will deliver services to the Agency the cost proposed in the RFP and within the timeframes therein.
- c. The Respondent will seek prior approval from the Agency before making any changes to the location of services.
- d. Neither the Respondent of any official of the organization nor any Subcontractor has received any notices of debarment or suspension from contracting with the State of CT or the Federal Government.
- e. Neither the Respondent of any official of the organization nor any Subcontractor to the Respondent of any official of the Subcontractor's organization has received any notices of debarment or suspension from contracting with other states within the United States.

Legal Name of Organization:

Authorized Signatory

Date

C. PROPOSAL CHECKLIST

To assist respondents in managing proposal planning and document collation processes, this document summarizes key dates and proposal requirements for this RFP. Please note that this document does not supersede what is stated in the RFP. Please refer to the Proposal Submission Overview, Required Proposal Submission Outline, and Mandatory Provisions (Sections II, III, and IV of this RFP) for more comprehensive details. **This is a tool for Proposers to use.** It is the responsibility of each respondent to ensure that all required documents, forms, and attachments, are submitted in a timely manner.

Key Dates

<u>Procurement Timetable</u>		
The Agency reserves the right to modify these dates at its sole discretion.		
Item	Action	Date
1	RFP Release	September 8, 2025
2	Deadline for Questions	September 22, 2025
3	Answers released by	September 29, 2025
4	Letter of Intent Due	October 6, 2025
5	Proposals due by	October 27, 2025 by 12:00 pm EST
6	Proposer Selection	November 17, 2025
7	Start of Contract Negotiations	November 24, 2025
8	Contract(s) start date	July 1, 2026

Registration with State Contracting Portal (if not already registered):

- Register at: <https://portal.ct.gov/DAS/CTSOURCE/Registration>
- Submit required forms:
 - Campaign Contribution Certification (OPM Ethics Form 1): <https://portal.ct.gov/OPM/Fin-PSA/Forms/Ethics-Forms>

Proposal Content Checklist

- Cover Sheet and Applicant Information Form**
- Table of Contents**
- Executive Summary:** high-level summary of proposal and cost
- Main proposal body answering all questions with relevant attachments.**
- IRS Determination Letter** (for nonprofit Proposers)
- Two years of most recent annual audited financial statements; OR any financial statements prepared by a Certified Public Accountant** for Proposers whose organizations have been incorporated for less than two years.
- Proposed budget**, including budget narrative and cost schedules for planned Subcontractors if applicable.
- Conflict of Interest Disclosure Statement**
- Statement of Assurances**

Formatting Checklist

- Is the proposal formatted to fit 8 1/2 x 11 (letter-sized) paper?
- Is the main body of the proposal within the page limit?
- Is the proposal in 12-point, Times New Roman font?
- Does the proposal format follow normal (1 inch) margins?
- Does the Proposer's name appear in the header of each page?
- Does the proposal include page numbers in the footer?
- Are confidential labels applied to sensitive information (if applicable)?

SECTION VII: Application Forms

The following forms are also available in WORD Format for applicant use during the application period; the forms are available in a separate file that is posted in the same location as the RFP.

REQUEST FOR PROPOSAL COVER SHEET
State of Connecticut – Department of Public Health
DPH RFP # 2026-0904: HEALTH ACCESS PROGRAMS

Legal Name	FEIN
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Address

City/Town	State	Zip Code
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Telephone No.	FAX No.	Email Address
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Principal Contact Person	Title
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Telephone No.	Email Address
---------------	---------------

TOTAL PROGRAM COST: \$ _____

I certify that to the best of my knowledge and belief, the information contained in this application is true and correct. The application has been duly authorized by the governing body of the applicant, the applicant has the legal authority to apply for this funding, the applicant will comply with applicable state and federal laws and regulations, and that I am a duly authorized signatory for the applicant.

Signature of Authorizing Official:	Date	Typed Name and Title
------------------------------------	------	----------------------

The applicant agency is the agency or organization, which is legally and financially responsible and accountable for the use and disposition of any awarded funds.

Please provide the following information:

- a. Full legal name of the organization or corporation as it appears on the corporate seal and as registered with the Secretary of State; Federal Employment Identification Number (FEIN).
- b. Mailing address;
- c. Main telephone number; Fax number, and email address;
- d. Principal contact person for the application (person responsible for developing application), Title, Contact Information: Telephone, Email address;
- e. Total program cost

The funding application and all required submittals must include the signature of an officer of the applicant agency who has the legal authority to bind the organization. The signature, typed name, and position of the authorized official of the applicant agency must be included as well as the date on which the application is signed.

Applicant Information Form(continuation)

PLEASE LIST THE AGENCY CONTACT PERSONS RESPONSIBLE FOR COMPLETION AND SUBMITTAL OF:

Contract and Legal Documents/Forms:

Name	Title	Tel. No.
Street	Town	Zip Code
Email	Fax No.	

Program Progress Reports:

Name	Title	Tel. No.
Street	Town	Zip Code
Email	Fax No.	

Financial Expenditure Reporting Forms:

Name	Title	Tel. No.
Street	Town	Zip Code
Email	Fax No,	

Incorporated: YES NO

Agency Fiscal Year: _____

Type of Agency: Public Private Other, Explain: _____ Profit Non-ProfitFederal Employer I.D.
Number: _____

Town Code No: _____

Medicaid Provider Status: YES NO

Medicaid Number: _____

Minority Business Enterprise (MBE): YES NOWomen Business Enterprise (WBE): YES NO

Work Plan Form

Provide a detailed work plan for Year 1. Subsequent years to be included in narrative format. Not to exceed six pages.

Services to be Provided (Provide specifics)	Activities (Tasks/Deliverables)	Staff Position(s) Responsible Target Population for This Activity	Expected Outcomes, Measures of Success	Timeframe for Completion (Include scheduled start and end dates)

Years 2-3 Narrative Work Plan:

A. BUDGET SUMMARY INSTRUCTIONS

- 1) **Position Schedule #2a** (complete first)
 - a) Complete the schedule for all positions to be funded, even if currently vacant.
 - b) Complete one Position Schedule (#2a) for each Program/Fund to be included in the Budget.
- 2) **Personnel** (lines #1 - #2)
 - a) Line #1 **Salary and Wages**: Enter the total salary to be charged, as listed on Position Schedule 2a.
 - b) Line #2 **Fringe Benefits** Line: Enter the total fringe benefits to be charged, as listed on Position Schedule 2a.
- 3) **Line #3 Contractual (Subcontracts):**

Provide the total of all subcontracts and complete Subcontractor Schedule, Item C, below.
- 4) Lines #4 - 7: Complete categories as appropriate
- 5) **Line #8: Other Expenses:**

For any other types of expense that do not fit into the categories listed; provide details.
- 6) **Audit Costs**

The cost of audits made in accordance with OMB Circular A133 (Federal Single Audit) are allowable charges to Federal awards. The costs of State Single Audits (CGS 4-23 to 4-236) are allowable charges to State awards. Audit costs are allowable to the extent that they represent a pro-rata share of the cost of such audit.

Audit costs charged to Department of Public Health contracts **must be budgeted, reported and justified as an audit cost line item within the Administrative and General Cost category.**
- 7) **Line Item #9: Administrative and General Costs**

Are defined as those costs that have been incurred for the overall executive and administrative offices of the organization or other expenses of a general nature that do not relate solely to any major cost objective of the overall organization. Examples of A&G costs include salaries of executive directors, administrative & financial personnel, accounting, auditing, management information systems, proportional office costs such as building occupancy, telephone, equipment, and office supplies.

Please review the OPM website on Cost Standards for more information at:<https://portal.ct.gov/opp/fin-pos/standards/pos-cost-standards>

Administrative and General Costs must be itemized on the Budget Justification Schedule. Costs that have a separate line item in the Budget Summary may not be duplicated as an Administrative and General Cost. For example, if the Budget Summary includes an amount for telephone costs, this cannot also be included as an Administrative and General Cost.

Cost Allocation Plans must be submitted with applications that include budget line items for allocated Administrative and General costs.
- 8) **Other Program Income:** list any other program income, if appropriate, such as in-kind contributions, fees collected, or other funding sources and include brief explanation on the Budget Justification.
- 9) **Multiple Funding Periods:** Assume level funding for each of the three years for budgeting line items.

Budget Instructions, Continued**B. Budget Justification Schedule B**

1. Please provide a brief explanation for each line item listed on the Budget Summary. This must include a detailed breakdown of the components that make up the line item and any calculation used to compute the amount.

Line Item (Description)	Amount	Justification - Breakdown of Costs
Travel	\$975	1,500 miles @ .65 = \$975.00 outreach workers going to meetings and site visits.

2. For contractors who have subcontracts, a brief description of the purpose of each subcontract must be provided. Use additional sheets as necessary.

****Please note: If Laboratory Services is a line item on the primary or subcontract budget, please supply a justification as to why a private laboratory is being used as opposed to the Connecticut State Laboratory.*

Budget Justification – Subcontractor Schedule A Instructions**C. Subcontractor Schedule A-Detail**

For contractors who have subcontracts, a brief description of the purpose of each subcontract must be provided.

All subcontractors used by each program must be included, if it is not known who the subcontractor will be, an estimated amount and whatever budget detail is anticipated should be provided. Actual details must be submitted when available. A separate subcontractor schedule must be completed for each program included in the contract.

Detail of Each Subcontractor:

1. Choose a category below for each subcontract using the basis by which it is paid:
 A. Budget Basis B. Fee for Service C. Hourly Rate.
2. Choose whether the subcontractor is a minority or woman owned business:
 MBE WBE Neither
3. Provide the detail for each subcontract just as for the primary contract budget referencing the corresponding program of the contract. Detail must be provided for each subcontractor listed in the Summary.

Note: If space allowed is not sufficient for large or complex subcontract budgets, the primary Budget Summary format may be copied and used instead.

BUDGET SUMMARY FORM A

Applicant Name:

FUNDING and CONTRACT PERIOD

Period:	7/1/2026- 6/30/2027	7/1/2027- 6/30/2028	7/1/2028- 6/30/2029	Total
1. Salaries & Wages				
2. Fringe Benefits				
3. Contractual (Sub-Contracts)**				
4. Transportation				
5. Materials and Supplies				
6. Facilities				
7. Client Subsidies				
8. Other Expenses (list)				
a.				
b.				
c.				
d.				
e.				
f.				
g.				
h.				
i.				
9. Administrative and General Costs				
Total Project Budget				
Other Program Income				

****Complete Subcontractor Schedule A**

BUDGET SUMMARY – POSITION SCHEDULE # 2a – Staffing Profile Form

Applicant Name:

FUNDING PERIOD:

CONTRACT PERIOD: 7/1/2026 – 6/30/2029

Position Description and Staff Person Assigned	Site/ Location	Hours wk./ wks. per Year	Hourly Rate	Total Salary Charged	Fringe Benefit Rate %	Total Fringe Benefits
1.Position: Name:		/			%	
2.Position: Name:		/			%	
3.Position: Name:		/			%	
4.Position: Name:		/			%	
5.Position: Name:		/			%	
6.Position: Name:		/			%	
7.Position: Name:		/			%	
8.Position: Name:		/			%	
9.Position: Name:		/			%	
10.Position: Name:		/			%	
11.Position: Name:		/			%	
12.Position: Name:		/			%	
Totals						

BUDGET JUSTIFICATION SCHEDULE FORM B**Applicant Name:****FUNDING PERIOD:****CONTRACT PERIOD: 7/1/2026 – 6/30/2029****Budget Justification Schedule**

Please provide an explanation for each line item listed on the budget summary form and include a detailed breakdown of the components that make up the line item and any calculation used to compute the amount.

Line Item (Description)	Amount per Unit	Total for Line Item	Justification including Breakdown of Costs
Total Budget:			

Budget Justification Subcontractor Schedule A-Detail Form**Applicant Name:****Budget Period:**
Program/Site:**#1**

Subcontractor Name:

Address:

Telephone: () (-)

Select One: A Budget Basis B F e-for-Service C Hourly RateIndicate One: MBE WBE Neither

Description of Services to be Provided	Total
Line Item(s)	
Total Subcontract Amount:	

#2

Subcontractor Name:

Address:

Telephone: () (-)

Select One: A Budget Basis B F e-for-Service C Hourly RateIndicate One: MBE WBE Neither

Description of Services to be Provided	Total
Line Item(s)	
Total Subcontract Amount:	

#3

Subcontractor Name:

Address:

Telephone: () (-)

Select One: A Budget Basis B F e-for-Service C Hourly RateIndicate One: MBE WBE Neither

Description of Services to be Provided	Total
Line Item(s)	
Total Subcontract Amount:	