



STATE OF ARIZONA
Department of Health Services
NOTICE OF REQUEST FOR PROPOSAL

**ARIZONA DEPARTMENT
OF HEALTH SERVICES**
1740 West Adams Street
Phoenix, Arizona 85007
(602) 542-1040
(602) 542-1741 Fax

SOLICITATION NUMBER: **ADHS12-00001132**

SOLICITATION DUE DATE/TIME: **June 12, 2012 at 3:00 P.M. Arizona Time**

Submit via ProcureAZ

SUBMITTAL LOCATION:

<https://procure.az.gov/bsol/login.jsp>

DESCRIPTION: **ELECTRONIC BENEFIT TRANSFER PLANNING SERVICES**

PRE-OFFER CONFERENCE:	May 8, 2012	10:00 A.M.	1740 W. Adams Street
		Arizona Time	Conference Room 309
			Phoenix, AZ 85007
	Date	Time	Location

In accordance with A.R.S. § 41-2534, competitive sealed proposals for the services specified will be received by the Arizona Department of Health Services (ADHS) online in the State of Arizona's online procurement system, Procure.az.gov (ProcureAZ). Proposals received by the due date and time will be opened. The name of each Offeror will be publicly available. Proposals must be submitted in the State ProcureAZ system on or prior to the date and time indicated. Late proposals will not be considered. It is the responsibility of the supplier/offeror to routinely check the ADHS web site for Solicitation Amendments. Additional instructions for preparing an Offer are included in this solicitation.

With seventy-two (72) hours prior notice, persons with disabilities may request special accommodations such as interpreters, alternative formats, or assistance with physical accessibility. Such requests are to be addressed to the Solicitation contact person named below.

OFFERORS ARE STRONGLY ENCOURAGED TO CAREFULLY READ THE ENTIRE SOLICITATION

Solicitation Contact Person:

Mr. Tracey Thomas

Arizona Department of Health Services

(602) 542.1011

E-mail: tracey.thomas@azdhs.gov

<p style="text-align: center;">UNIFORM INSTRUCTIONS TO OFFERORS SOLICITATION NUMBER: ADHS12-00001132</p>
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Part One (1)	Pre-Solicitation Documents	Legal Notice
Part Two (2)	Solicitation	*Included in this document: Notice Page, Table of Contents, Scope of Work, and Special Terms and Conditions, Exhibits
Part Three (3)	Uniform T's & C's	Uniform Terms and Conditions
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Technical Definitions

ADHS – Arizona Department of Health Services.

Arizona in Motion (AIM) – The current MIS system that is used to certify and issue paper food instruments and cash value benefits to participants.

Approved Product List (APL) – The State Agency's list of WIC approved items. It is used for validation by the Point of Sale during the transaction process.

BNPA – Bureau of Nutrition and Physical Activity.

BRD – Business Requirement Document.

Clinic – The location that the participant receives food benefits, nutrition education, and health care referrals. It includes temporary and permanent locations.

Commonwealth of the Northern Mariana Islands (CNMI) – Member of the HANDS Consortium.

Cash Value Voucher (CVV) – A fixed-dollar amount check, voucher, or other document which is used by a participant to obtain WIC authorized fruits and vegetables. In EBT, a CVV is called a Cash Value Benefit (CVB).

Electronic Benefit Transfer (EBT) – An electronic system that allows State governments to provide financial and material benefits to authorized recipients via a plastic debit-type card.

FNS – Food and Nutrition Service, a Federal agency of the USDA.

Food Instrument (FI) – a voucher, check, electronic benefits transfer card, coupon or other document which is used by a participant to obtain supplemental foods. WIC FIs are printed by local WIC clinics and distributed to each participant.

HANDS – Health and Nutrition Delivery System. HANDS is the .net upgrade to the AIM MIS system.

HANDS Consortium – The State Agencies including Arizona, Guam, CNMI, American Samoa, and Navajo Nation that utilize the HANDS MIS System.

Implementation Advance Planning Document (IAPD) – Planning Document for WIC EBT required by USDA.

MIS – Management Information Systems.

National UPC Database (NUPC) – A national database that will contain the WIC approved products for all State Agencies.

NTE – Not to exceed value.

One Card – An EBT card that could be used for SNAP and WIC.

Online/Offline Hybrid System – An EBT system where payment is made with a smart card and the benefit redemption emulates an online WIC EBT system when the EBT processor is available, or an offline WIC EBT system when the host is not available.

PCM – Project Control Manager.

Price Lookup (PLU) – A four (4) or five (5) digit number that is often assigned to produce items. The PLU for most produce items are often uniform across all retailers.

PMP Certification – Project Management Professional Certification recognized by the Project Management Institute.

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Point of Sale (POS) – Refers to the capturing of data and customer payment information at a physical location when goods or services are bought and sold. The POS transaction is captured using a variety of devices which include computers, cash registers, optical and bar code scanners, magnetic card readers, or any combination of these devices.

Supplemental Nutrition Assistance Program (SNAP) – Formerly known as the Food Stamp Program. SNAP provides nutrition assistance benefits to eligible low-income households that can be used to purchase foods from authorized food retailers, thereby providing a food security safety net.

Universal Product Code (UPC) – An eight (8) or twelve (12) digit unique number that is assigned to nearly every item found in grocery stores.

USDA – United States Department of Agriculture.

WIC – Special Supplemental Nutrition Program for Women, Infants and Children.

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A. Background

The ADHS BNPA includes the Arizona WIC Program. ADHS BNPA requires a Contractor to assist the Arizona WIC Program to furnish Planning Services for the WIC EBT project. Planning Services are needed to ensure the WIC EBT project plan proceeds without error, delay or interruption until the planning project is complete, and is in compliance with the USDA approved 901 Handbook that can be found at the following web address: http://www.fns.usda.gov/apd/Handbook_901/HB901_2007.htm.

The Contractor will not be allowed to submit a Proposal for the EBT Implementation RFP that the Contractor will assist ADHS BNPA in developing.

WIC is a program funded by the FNS, a Federal agency of USDA. WIC provides nutritious supplemental foods, referrals to health and social services, and nutrition and breastfeeding education for low-income pregnant, breastfeeding and non-breastfeeding postpartum women, as well as infants and children up to age five (5) who are found to be at nutritional risk.

The current WIC MIS is called AIM. It is utilized by the HANDS Consortium. The HANDS Consortium consists of the following WIC State Agencies: American Samoa, Arizona, CNMI, Guam, and the Navajo Nation. AIM only has the capability to print paper Food Instruments. AIM design documents are located at <http://www.azwic.gov/aim.htm>. ADHS BNPA is currently in the design and development phase of updating AIM to a web-based .NET platform referred to as HANDS. Upon Contract award, the Planning Contractor will have access to the latest HANDS technical documentation.

More than six hundred fifty (650) State and Local Agency staff within the HANDS Consortium utilizes the current WIC application to serve more than two hundred fifteen thousand (215,000) clients on a monthly basis. In an effort to leverage economies of scale, ADHS BNPA will complete EBT enhancements to HANDS in unison for the entire HANDS Consortium.

ADHS BNPA will build enhancements to HANDS that will enable a smooth transition to EBT. HANDS will have some of the necessary fields for EBT to work, such as Categories and Subcategories and Household accounts. ADHS BNPA will modify the maintenance tables in HANDS to accommodate nomenclature changes such as Food Groups to Food Categories. HANDS users will have the ability to maintain and update Food Categories as updates come from USDA. HANDS users will be able to establish and maintain EBT accounts for WIC participants. HANDS screens will have fields added to aid in establishing, tracking, and maintaining EBT accounts. Enhancing the application to fully integrate with EBT will improve operating efficiencies, increase user productivity, reduce maintenance and operating costs, and allow the HANDS Consortium State Agencies to implement EBT by 2020 as federally mandated.

The HANDS Consortium would like to evaluate the Online, Offline, and potential Online/Offline Hybrid Technology. Additionally, the HANDS Consortium would like to learn about the technology life spans, costs, and benefits of each technology.

The HANDS Consortium State Agencies has made an effort to learn about EBT in preparation for its planning and implementation. Arizona WIC staff has visited Michigan, Kentucky, Nevada, Texas, and New Mexico to learn about their systems with regards to technical functionality as well as administrative concerns and solutions brought forth with the implementation of EBT. Arizona WIC staff researched the requirements of sending an APL to the NUPC and has also been in contact with the SNAP EBT administrators to learn about challenges and successes within the State. Additionally, representatives from the HANDS Consortium also participated in the 2010 and 2011 WIC EBT User Group meetings and the 2010 and 2011 EBT Next Generation conferences. The HANDS Consortium State Agencies also participate in the monthly Western Region USDA EBT conference calls.

Each State Agency in the HANDS Consortium has different advantages and challenges that they will encounter when implementing EBT. The results from the cost benefit analysis and feasibility study will help each state identify these advantages and challenges to enable the HANDS Consortium to make appropriate decisions and plans regarding their approach to EBT.

All planning activities referred to within the Contract will take place for each of the five (5) State Agencies within the HANDS Consortium unless otherwise noted.

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B. Objective

ADHS BNPA's objective is to hire a Planning Contractor to evaluate online, offline, and hybrid EBT solutions to determine the optimal EBT solution and evaluate alternative methods for operating and maintaining the technology for each State Agency in the HANDS Consortium.

C. Scope of Work

The Contractor shall provide overall planning services which includes but are not limited to, development of the formal project plan, completion of an extensive cost evaluation, feasibility study/alternatives analysis, development of the Implementation Advance Planning Document (IAPD), and the formation of the implementation scope of work Request for Proposal (RFP).

The Contractor shall develop a project schedule and plan to complete a feasibility study for the HANDS Consortium. The feasibility study shall include a cost benefit analysis of each EBT solution. The cost benefit analysis shall include State, Clinic, and Vendor equipment, telecommunications, and processes for each State Agency. The Contractor shall recommend the EBT solution that best fits each member of the HANDS Consortium and prepare one (1) IAPD that encompasses the HANDS Consortium. Additionally, the Contractor shall prepare one (1) Scope of Work for Implementation.

The Contractor shall complete a thorough assessment of other states' EBT functionality. It is the assumption that the HANDS Consortium will outsource banking and reconciliation services. This assessment shall specifically look at EBT systems that utilize an outsourced EBT processor. It is the intention of the HANDS Consortium to implement an EBT solution that is the best fit for each State Agency.

The Contractor shall conduct an evaluation of the retailers' technical capabilities, telecommunications infrastructure, and equipment to determine EBT readiness and estimated costs for equipping vendors. The Arizona and Navajo Nation WIC Programs have begun working with vendors to identify EBT equipment and technology currently in their stores.

The Contractor shall utilize a USDA and HANDS Consortium approved cost evaluation tool to evaluate the affordability of EBT. An example of an approved WIC EBT evaluation tool is located at http://www.fns.usda.gov/apd/Library/WIC_EBt_docs.htm. Currently, the HANDS Consortium provides benefits via paper Food Instruments. To complete the cost analysis, each State Agency will help evaluate and identify the costs of continuing paper Food Instruments versus providing EBT benefits through analysis of the following areas: State Agency and clinic staffing, state materials, banking fees, and new costs related to EBT operations. Additionally, the cost analysis will provide detail for both implementation costs as well as ongoing maintenance.

In order to achieve a comprehensive assessment, the Contractor shall conduct a thorough evaluation of the offline solution, online solution, and potential hybrid model. Additionally, the Contractor shall assess the internal and external requirements for each EBT solution in an effort to fully determine the impact to the State Agency's business capacity and financial transactions.

The Contractor shall evaluate each of the EBT solutions based on the results of the cost analysis and feasibility study. The results will assist each State Agency in determining the best EBT solution for their program. From these evaluation exercises, the Contractor shall recommend a plan in which each State Agency can pursue EBT in an operationally cost-effective manner using HANDS. Upon approval from the HANDS Consortium, the Contractor shall assist the HANDS Consortium in preparing an IAPD and RFP Scope of Work for EBT Implementation.

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D. Tasks

1. Project Plan and Project Schedule

- 1.1 The Contractor shall convene a project initiation meeting with the HANDS Consortium at the ADHS, BNPA office within ten (10) days of Contract award. Members of the HANDS Consortium may opt not to attend the meeting, thereby allowing ADHS BNPA to represent their interests. The Contractor's Project Manager and other key Contractor staff, as deemed necessary by the AZ WIC PCM or designee shall attend the meeting. The purpose of the meeting is to establish expectations as well as review the schedule and deliverables;
- 1.2 The Contractor shall develop a project plan and project schedule in accordance with project management standards using Microsoft® Project. The Contractor's project plan shall include, but not be limited to a project charter, scope statement, communication plan, and risk plan. The project schedule shall break down deliverables into work packages of no less than eight (8) hours and no larger than eighty (80) hours. The Contractor shall prepare and submit a project plan and project schedule with target dates and a schedule of deliverables as agreed upon by both parties and present them to the AZ WIC PCM or designee, HANDS Managers, and the HANDS Consortium partners; and
- 1.3 The Contractor shall provide a Monthly Status Report five (5) days following the report month. In the event of holidays the previous working day shall apply. The Status Report shall provide the support for the Contractor's monthly invoices, be current through the end of the reporting/billing month and include, minimally:
 - 1.3.1 Staff Resource time:
 - 1.3.1.1 Staff allocation;
 - 1.3.1.2 Staff resource time utilized to resolve assigned deliverable tasks during the month; and
 - 1.3.1.3 Recap of staff resource time cost by resource type,
 - 1.3.2 Percent of work completed,
 - 1.3.3 List of outstanding items with suggested action plan,
 - 1.3.4 Accomplishments for the reporting month,
 - 1.3.5 Planned accomplishments next month,
 - 1.3.6 Description of accomplishments and activities underway during the month,
 - 1.3.7 An open items list providing status of current and future EBT project activities, relative priorities, and completion dates, and
 - 1.3.8 Detailed status report describing time and materials applied to each deliverable invoiced. The corresponding tasks relative to any deliverable invoice shall be completed, accepted, and approved before ADHS shall pay any invoice.

2. Baseline Cost Analysis

- 2.1 The Contractor shall work with the HANDS Consortium to analyze the current costs associated with the current "as-is" environment of printing paper FIs. The Contractor shall gather cost information from each member of the HANDS Consortium. The Contractor shall utilize a USDA and HANDS Consortium approved cost evaluation tool to evaluate the cost of printing paper food instruments. A sample of an approved baseline cost model is located at: http://www.fns.usda.gov/apd/Library/WIC_EBt_docs.htm;

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2.2 The Contractor shall provide a cost analysis of paper FIs for each State Agency in the HANDS Consortium including, but not limited to, the following areas: State Agency and clinic staffing, computer hardware and software, printer ink cartridges, regular and annual printer maintenance, paper FI and CVV, banking fees, and new costs related to EBT operations;

2.2.1 Provide a detailed list of all information needed from the State Agency to complete a baseline paper-based system cost analysis for the chosen cost analysis model, and

2.2.2 Complete a baseline paper cost analysis using the chosen cost analysis model for each member of the HANDS Consortium; and

2.3 The Contractor shall meet on-site in Arizona with the HANDS Consortium to discuss the findings of the baseline cost analysis.

3. Risk Analysis

3.1 The Contractor shall complete a risk analysis of alternative WIC EBT solutions. The analysis shall identify potential risks and recommend ways to reduce or eliminate the risk. Risk analysis includes, but is not limited to:

3.1.1 Risk associated with each EBT solution,

3.1.1.1 The physical security risk associated with each EBT solution,

3.1.1.2 The hardware and software risk associated with each EBT solution,

3.1.1.3 Third Party Processors, and

3.1.1.4 Telecommunications;

3.1.2 Fraud at the participant level.

3.1.2.1 Buying, exchanging, or selling EBT cards,

3.1.2.2 False reports of lost EBT cards,

3.1.2.3 Dual participation,

3.1.2.4 Unauthorized use of EBT cards,

3.1.2.5 Intentional destruction of EBT cards,

3.1.2.6 Theft of EBT cards,

3.1.2.7 Ease of use if the card is stolen or lost; and

3.1.3 Fraud at the employee level.

3.1.3.1 Internal fraud such as collusion between participants and WIC staff;

4. Additional EBT Functionality Evaluation

4.1 ADHS BNPA completed a preliminary analysis of the MIS solution to determine which components to change to make the HANDS application EBT ready and the EBT readiness functionality is currently in design and development. All EBT enhancements completed as part of the HANDS modifications shall comply with existing EBT standards;

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- 4.2 The Contractor shall work with the HANDS Consortium to determine if HANDS will require any additional modifications. While the HANDS solution will encompass EBT ready functionality, the evaluation shall identify additional MIS enhancements required for each EBT solution. The HANDS documentation regarding EBT functionality is currently in development. The Contractor can reference the AIM technical documentation and the working version of the HANDS EBT Business Requirement Document (BRD) located at <http://www.azwic.gov/aim.htm>. Upon contract award, the Contractor will have access to the latest EBT functionality documentation. Any suggested enhancements to HANDS shall meet WIC EBT Universal Interface Specifications, which are currently being developed (documentation is located at the following website: http://www.fns.usda.gov/apd/library/wic_ebt_docs.htm). In addition, the HANDS solution shall be flexible to allow each State Agency in the HANDS Consortium to choose the EBT solution that works best for them (offline, online, or hybrid), rather than having all the State Agencies on the same EBT solution;
- 4.3 It is the assumption that the HANDS Consortium will outsource banking and reconciliation services. The HANDS EBT functionality requirements will vary based on the services that the EBT system will provide;
- 4.4 The Contractor shall identify EBT providers and possible services, as well as analyze implementation and on-going operational and maintenance costs; and
- 4.5 The Contractor shall recommend a method for associating food items purchased with EBT to an individual in the family to allow clinic staff to be able to view the food items that remain for that individual. This recommendation shall meet WIC Federal regulations.

5. UPC Database

- 5.1 Each State Agency in the HANDS Consortium will gather the information needed to create an APL. The information needed includes the requirements for the NUPC database such as the UPC, brand name, description, size, etc. The APL validates whether items purchased at the POS are WIC-eligible. The State Agency's WIC approved items will consist of items from all food categories including produce. The State Agency WIC APL must integrate with the NUPC Database.
- 5.1.1 The Contractor shall evaluate and recommend the best solution for building and maintaining an APL. The APL shall require, but not be limited to, the following:
- 5.1.1.1 Limit access to designated users with passwords;
- 5.1.1.2 Have the ability to validate that items meet Federal nutrition and ingredient requirements; and
- 5.1.1.3 Have the ability to create a report containing all items that have been added or removed since the last update to the vendors.
- 5.2 The Contractor shall recommend a policy and process for APL maintenance regarding items that undergo a size change. Scenarios of size changes include, but are not limited to:
- 5.2.1 An item will undergo a size change and the UPC may or may not stay the same,
- 5.2.1.1 Which version of the item do you keep in the APL; and
- 5.2.1.2 If you keep both sizes of the item in the APL, for how long;
- 5.2.2 An item goes through a size change, thereby making the item no longer WIC-eligible.
- 5.2.2.1 When do you remove the item from the APL;
- 5.2.3 The size change of the item affects a food category that is decremented by weight instead of unit. For example, a can of formula decreases in size from 12.9 to 12.2 ounces. This may affect how many cans the client should receive.

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5.2.3.1 What can be done to assure that the client receives the proper amount of formula; and

5.3 The Contractor shall provide analysis on how each State Agency will be able to upload and maintain the State Agency's current WIC approved items in the new NUPC database. NUPC database specifications are expected be available in early 2013.

6. Analyze Requirements at State, Clinic, and Vendor Levels

6.1 The Contractor shall conduct an evaluation of each HANDS Consortium member's state operations, staffing, technical capabilities, including telecommunications and equipment, to determine EBT readiness and estimated costs for equipping vendors, clinics, and State Agency offices. In addition, the Contractor shall look at the necessary processes for ongoing EBT support, including, but not limited to, help desk operations, POS equipment maintenance in retailer locations, and banking. The accompanying analysis shall describe what each State Agency in the HANDS Consortium is capable of now, and what are the gaps that would need to be filled for each of the options. Specific requirements can be found in the WIC EBT Operating Rules and WIC EBT Technical implementation Guide, that are located at <http://www.fns.usda.gov/wic/EBT/wicebt.htm>. Refer to the Exhibit A Table One (1) for all of the required tasks.

6.2 The Contractor shall develop a survey tool to gather the required information about operations, staffing, telecommunication and equipment capabilities at the State, Clinic, and Vendor levels. The Contractor shall conduct the survey or advise the State Agency staff on how to conduct the survey as agreed upon by ADHS and the Contractor.

6.3 The Contractor shall prepare a report summarizing the barriers and benefits of each EBT technology. The report shall be based on the survey results and provide recommendations of what would be required for the State Agency, Local Clinics, and vendors to be able to operate with each type of card technology, including the potential cost of acquiring any necessary hardware, software or telecommunication service. Refer to Exhibit A for the required analysis. The Contractor shall provide this report for each member of the HANDS Consortium.

6.4 The Contractor shall analyze the cost to implement each EBT solution at the state, clinic, and vendor levels including one-time costs necessary for initial implementation, recurring costs, and end-of-technology equipment replacement costs.

7. Assess Other State Agency Approaches

7.1 The Contractor shall assess the different approaches to implementation and identify the internal and external requirements for each. The Contractor shall research a minimum of two (2) states using an online EBT solution, with at least (1) from Michigan, Nevada, and Kentucky. The Contractor shall research a minimum of two (2) states using an offline EBT solution, with at least one (1) from New Mexico, Texas, and Wyoming. Of the states being analyzed, the Contractor shall evaluate one (1) State Agency similar in size to Arizona, and one (1) State Agency similar in size to American Samoa, Guam or CNMI. The information gathered for this deliverable shall be gathered remotely.

7.2 The Contractor shall interview other state agencies that have implemented different types of EBT card technology. The Contractor shall gather data from each State Agency including, but not limited to:

7.2.1 Performance,

7.2.2 Ease of use by clinics and participants,

7.2.3 Impact to clinic flow,

7.2.4 Lessons learned,

7.2.5 Vendor preferences,

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- 7.2.6 Training and rollout processes,
- 7.2.7 Cost of implementation,
- 7.2.8 UPC database preferences,
- 7.2.9 Fraud and risk, and
- 7.2.10 Cost containment strategies.

8. Evaluate EBT Alternatives

- 8.1 The Contractor shall recommend an EBT solution that best fits each State Agency and show how EBT can be affordable based on the results of tasks two (2) through seven (7).
- 8.2 The Contractor shall create and facilitate an evaluation process of each EBT solution, and recommend the best EBT solution for each State Agency. The Contractor shall compile a written analysis of how the recommended EBT solution can be cost-effective in each HANDS State Agency, and recommend when and how to implement. Analysis includes, but is not limited to:
 - 8.2.1 Food instrument baseline cost analysis,
 - 8.2.2 Risk assessment of each EBT solution,
 - 8.2.3 EBT Providers and Services and additional EBT functionality requirements,
 - 8.2.4 UPC database recommendations,
 - 8.2.5 State, vendor, and clinic requirements for each EBT solution,
 - 8.2.6 Lessons learned from other EBT State Agencies,
- 8.3 The Contractor shall hold a meeting in Arizona with the HANDS Consortium to discuss report findings.

9. Implementation Advance Planning Document

- 9.1 Upon approval from the HANDS Consortium, the Contractor shall work with ADHS to prepare one (1) IAPD that encompasses the entire HANDS Consortium. The contents of the IAPD shall be based on results and conclusions related to the analysis of the EBT solutions. The Contractor shall develop the IAPD in accordance with the USDA Handbook 901 – Advanced Planning Document Handbook. The USDA Handbook 901 can be found at http://www.fns.usda.gov/apd/Handbook_901/HB901_2007.htm;
- 9.2 Provide first draft of IAPD;
- 9.3 Provide updated drafts of the IAPD and coordinate its review with HANDS PCM or designee at regular intervals within the project plan timeline;
- 9.4 Coordinate final review and acceptance of the IAPD by the HANDS Consortium with the HANDS PCM or designee. Provide summary presentation to HANDS Consortium; and
- 9.5 Provide a digital copy of the final IAPD in PDF and Word 2010 format and four (4) hard copies.

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10. Scope of Work

10.1 Implementation

10.1.1 The Contractor shall prepare one (1) RFP Implementation scope of work that encompasses the entire HANDS Consortium,

10.1.1.1 Provide first draft of the RFP implementation scope of work,

10.1.1.2 Provide updated drafts of the RFP implementation scope of work and coordinate its review with HANDS PCM or designee at regular intervals within the project plan timeline,

10.1.1.3 Coordinate final review and acceptance of the RFP implementation scope of work by the HANDS Consortium with the HANDS PCM or designee, and

10.1.1.4 Provide a digital copy of the final RFP implementation scope of work in PDF and Word 2010 format.

11. Final Report

11.1 The Contractor shall provide a final report and project completion.

12. State Agency Optional Planning Services

12.1 Each State Agency reserves the right to have the Contractor host EBT orientation meeting(s) with each member of the HANDS Consortium. The State Agency may choose to have the EBT orientations in-person or virtually. If the EBT orientation is held virtually, the Contractor shall provide the web conference technology. If the Contractor hosts an in-person meeting, the location shall be at the State Agency's office or at a State Agency approved location.

12.2 Each State Agency reserves the right to have the Contractor host stakeholder and steering committee meetings. The State Agency may choose to have the meetings in-person or virtually. If the Contractor hosts virtual meetings, the Contractor shall provide the web conference technology. If the Contractor hosts an in-person meeting, the location shall be at the State Agency's office or at a State Agency approved location;

12.3 Upon completion of the IAPD, each State Agency reserves the right to host an on-site meeting with the Contractor to discuss EBT findings with community, legislators, etc. The on-site meeting shall be at the State Agency's office or at a State Agency approved location; and

12.4 Each State Agency reserves the right to identify additional planning services that are needed. The State Agency may utilize the Contractor on an hourly basis as needed for any additional planning services.

13. Project Manager

13.1 The Contractor shall provide a Project Manager who shall be the primary contact person for the ADHS Program Unit Manager in discussing work that needs to be completed. The Contractor shall provide a detailed description of the Project Manager's function and how they will accomplish the minimum tasks listed. The Contractor's Project Manager shall, at a minimum:

13.1.1 Serve as a primary day-to-day contact with the Agency;

13.1.2 Attend, lead, and prepare materials for meetings as requested;

13.1.3 Ensure all necessary operational components are completed.;

13.1.4 Troubleshoot and correct problems;

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13.1.5 Designate an alternate contact for when the Project Manager is unavailable; and

13.1.6 Assure that the Contractor, as well as any subcontractors, fulfills its duties and responsibilities under the Contract; and deliver required documents to the ADHS.

E. Approvals

1. All approvals for deliverables, reports, invoices, etc. shall be made by the ADHS BNPA PCM or designee.

F. Requirements

The Contractor shall:

1. Assign a Project Manager that shall possess Project Management Professional (PMP) Certification and at least two (2) year of WIC experience.
2. The Contractor shall provide a current and accurate Certificate of Insurance (COI) within ten (10) days of Contract award per the written instructions in the Special Terms and Conditions. A Master Blanket Contract Release Purchase Order will not be provided without the COI in the Contract file. Work shall not be performed without the issuance of a Purchase Order.

G. Deliverables

1. The Contractor shall submit to the ADHS BNPA the deliverables listed, but not limited to, Exhibit B Table 2.

H. Notices, Correspondence and Reports

1. Notices, correspondence, reports and invoices from the Contractor to ADHS shall be sent to:

Arizona Department of Health Services
Bureau of Nutrition and Physical Activity
Karen Sell, Chief
150 N. 18th Street, Suite 310
Phoenix, Arizona 85007
Tel: 602.364.0687
Fax: 602-364-1834
Email: karen.sell@azdhs.gov

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The Pricing shall be completed in the Items Tab of the Bid in ProcureAZ.

No other format for the submission of pricing shall be accepted.

The website to access ProcureAZ is: <https://procure.az.gov>

The Pricing must be all-inclusive hourly rates and fully loaded firm fixed price. Refer to page forty-four (44), Provision B, Proposal Requirements, Item 12, Completed Price Sheet in ProcureAZ Items Tab

SPECIAL TERMS AND CONDITIONS

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A. Purpose

Pursuant to provisions of the Arizona Procurement Code, A.R.S. 41-2501 Et Seq., the State of Arizona, Department of Health Services (ADHS) intends to establish a Contract for the materials or services as listed herein.

B. Term of Contract

The term of any resultant Contract shall commence on date of award and shall continue through September 30, 2013, unless terminated, canceled or extended as otherwise provided herein.

C. Contract Extensions

The Contract term is through September 30, 2013, subject to additional successive periods of twelve (12) months per extension with a maximum aggregate including all extensions not to exceed sixty (60) months.

D. Contract Type

☒ Fixed Price

E. Licenses

The Contractor shall maintain in current status, all federal, state and local licenses and permits required for the operation of the business conducted by the Contractor.

F. Key Personnel

It is essential that the Contractor provide adequate experienced personnel, capable of and devoted to the successful accomplishment of work to be performed under this Contract. The Contractor must agree to assign specific individuals to the key positions.

1. The Contractor agrees that, once assigned to work under this Contract, key personnel shall not be removed or replaced without written notice to the State. Such notice shall be given thirty (30) days prior to the reassignment or personnel's last day assigned to the Contract.
2. Key personnel are not available for work under this Contract for a continuous period exceeding 30 calendar days, or are expected to devote substantially less effort to the work than initially anticipated, the Contractor shall immediately notify the State, and shall, subject to the concurrence of the State, replace such personnel with personnel of substantially equal ability and qualifications.
3. The State Agency reserves the right to review resumes and participate in interviews for the hiring of any staff assigned to this Contract. Further, the State Agency reserves the right to deny or refuse any offered replacement personnel by the Planning Contractor.

G. Price Adjustment

Contractor prices accepted and subsequently awarded by a Contract shall remain in effect for a minimum of one (1) year. The Contractor may request a price adjustment, but the State will not review or approve an increase until the Contract has been in effect for one (1) year. The ADHS Procurement Office will review any requested rate increase to determine whether such request is reasonable in relation to increased supplier or material costs. Contractor shall provide written justification for any price adjustment requested, including information contained in the Consumer Price Index or similar official cost analysis to support any requested price increase. Any price increase adjustment, if approved, will be effective upon execution of a written Contract amendment. Likewise, the Contractor shall offer the State a price adjustment reduction concurrent with reduced costs from their suppliers. Price reductions will become effective upon execution of a Contract amendment.

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H. Non-Exclusive Contract

Any contract resulting from this solicitation shall be awarded with the understanding and agreement that it is for the sole convenience of the State of Arizona. The State reserves the right to obtain like goods or services from another source when necessary, or when determined to be in the best interest of the State.

I. Volume of Work

The ADHS does not guarantee a specific amount of work either for the life of the Contract or on an annual basis.

J. Information Disclosure

The Contractor shall establish and maintain procedures and controls that are acceptable to the State for the purpose of assuring that no information contained in its records or obtained from the state or from others in carrying out its functions under the Contract shall be used or disclosed by it, its agents, officers, or employees, except as required to efficiently perform duties under the Contract. Persons requesting such information should be referred to the State. The Contractor also agrees that any information pertaining to individual persons shall not be divulged other than to employees or officers of the Contractor as needed for the performance of duties under the Contract, unless otherwise agreed to in writing by the State.

K. Employees of the Contractor

All employees of the Contractor employed in the performance of work under the Contract shall be considered employees of the Contractor at all times, and not employees of the ADHS or the State. The Contractor shall comply with the Social Security Act, Workman's Compensation laws and Unemployment laws of the State of Arizona and all State, local and Federal legislation relevant to the Contractor's business.

L. Order Process

The award of a contract shall be in accordance with the Arizona Procurement Code. Any attempt to represent any material and/or service not specifically awarded as being under contract with ADHS is a violation of the Contract and the Arizona Procurement Code. Any such action is subject to the legal and contractual remedies available to the state inclusive of, but not limited to, Contract cancellation, suspension and/or debarment of the Contractor.

M. Contractor Performance Reports

Program management shall document Contractor performance, both exemplary and needing improvements where corrective action is needed or desired. Copies of corrective action reports will be forwarded to the ADHS Procurement Office for review and any necessary follow-up. The Procurement Office may contact the Contractor upon receipt of the report and may request corrective action. The Procurement Office shall discuss the Contractor's suggested corrective action plan with the Procurement Specialist for approval of the plan.

N. Payment Procedures

ADHS accounting will not make payments to any Entity, Group or individual other than the Contractor with the Federal Employer Identification (FEI) Number identified in the Contract. Contractor invoices requesting payment to any Entity, Group or individual other than the contractually specified Contractor shall be returned to the Contractor for correction.

The Contractor shall review and insure that the invoices for services provided show the correct Contractor name prior to sending them to the ADHS Accounting Office for payment.

If the Contractor Name and FEI Number change, the Contractor must complete an "Assignment and Agreement" form transferring contract rights and responsibilities to the new Contractor. ADHS must indicate consent on the form. A written Contract Amendment must be signed by both parties and a new W-9 form must be submitted by the new Contractor and entered into the system prior to any payments being made to the new Contractor.

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O. Financial Management

For all contracts, the practices, procedures, and standards specified in and required by the Accounting and Auditing Procedures Manual for Arizona Department of Health Services funded programs shall be used by the Contractor in the management of contract funds and by the ADHS when performing a contract audit. Funds collected by the Contractor in the form of fees, donations and/or charges for the delivery of these contract services shall be accounted for in a separate fund.

State Funding. Contractors receiving state funds under this Contract shall comply with the certified Compliance provisions of A.R.S. § 35-181.03.

Federal Funding. Contractors receiving federal funds under this contract shall comply with the certified finance and compliance audit provision of the Office of Management and Budget (OMB) Circular A-133, if applicable. The federal financial assistance information shall be stated in a Change Order or Purchase Order.

P. Inspection and Acceptance

All services, deliverables, data and required reports are subject to final inspection, review, and evaluation and acceptance by the ADHS. ADHS reserves the right to obtain USDA approval prior to acceptance of deliverables. The ADHS may withhold payment for services that are deemed to not meet contract standards.

Q. Authorization for Services

Authorization for purchase of services under this Contract shall be made only upon ADHS issuance of a Purchase Order that is signed by an authorized agent. The Purchase Order will indicate the Contract number and the dollar amount of funds authorized. The Contractor shall only be authorized to perform services up to the amount on the Purchase Order. ADHS shall not have any legal obligation to pay for services in excess of the amount indicated on the Purchase Order. No further obligation for payment shall exist on behalf of ADHS unless a) the Purchase Order is changed or modified with an official ADHS Procurement Change Order, and/or b) an additional Purchase Order is issued for purchase of services under this Contract.

R. Indemnification Clause

Contractor shall indemnify, defend, save and hold harmless the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees (hereinafter referred to as "Indemnitee") from and against any and all claims, actions, liabilities, damages, losses, or expenses (including court costs, attorneys' fees, and costs of claim processing, investigation and litigation) (hereinafter referred to as "Claims") for bodily injury or personal injury (including death), or loss or damage to tangible or intangible property caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of Contractor or any of its owners, officers, directors, agents, employees or subcontractors. This indemnity includes any claim or amount arising out of or recovered under the Workers' Compensation Law or arising out of the failure of such Contractor to conform to any federal, state or local law, statute, ordinance, rule, regulation or court decree. It is the specific intention of the parties that the Indemnitee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnitee, be indemnified by Contractor from and against any and all claims. It is agreed that Contractor will be responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable. In consideration of the award of this Contract, the Contractor agrees to waive all rights of subrogation against the State of Arizona, its officers, officials, agents and employees for losses arising from the work performed by the Contractor for the State of Arizona.

This indemnity shall not apply if the Contractor or Sub-contractor(s) is/are an agency, board, commission or university of the State of Arizona.

S. Insurance Requirements

Contractor and subcontractors shall procure and maintain until all of their obligations have been discharged, including any warranty periods under this Contract, are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees or subcontractors.

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The *insurance requirements* herein are minimum requirements for this Contract and in no way limit the indemnity covenants contained in this Contract. The State of Arizona in no way warrants that the minimum limits contained herein are sufficient to protect the Contractor from liabilities that might arise out of the performance of the work under this Contract by the Contractor, its agents, representatives, employees or subcontractors, and Contractor is free to purchase additional insurance.

1. **MINIMUM SCOPE AND LIMITS OF INSURANCE:** Contractor shall provide coverage with limits of liability not less than those stated below.

1.1 Commercial General Liability – Occurrence Form

- 1.1.1 Policy shall include bodily injury, property damage, personal injury and broad form contractual liability coverage.

1.1.1.1 General Aggregate	\$2,000,000
1.1.1.2 Products – Completed Operations Aggregate	\$1,000,000
1.1.1.3 Personal and Advertising Injury	\$1,000,000
1.1.1.4 Blanket Contractual Liability – Written and Oral	\$1,000,000
1.1.1.5 Fire Legal Liability	\$ 50,000
1.1.1.6 Each Occurrence	\$1,000,000

- 1.1.2 The policy shall be endorsed to include the following additional insured language: ***“The Department of Health Services, the State of Arizona, its Departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor”.***

- 1.1.3 Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.

1.2 Worker's Compensation and Employers' Liability

- 1.2.1 Workers' Compensation Statutory

- 1.2.2 Employers' Liability

1.3.2.1 Each Accident	\$ 500,000
1.3.2.2 Disease – Each Employee	\$ 500,000
1.3.2.3 Disease – Policy Limit	\$1,000,000

- 1.2.3 Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.

- 1.2.4 This requirement shall not apply to: Separately, EACH Contractor or subcontractors exempt under A.R.S. 23-901, and when such Contractor or subcontractor executes the appropriate waiver (Sole Proprietor/Independent Contractor) form.

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1.3 Professional Liability (Errors and Omissions Liability)

1.3.1 Each Claim \$1,000,000

1.3.2 Annual Aggregate \$2,000,000

1.3.3 In the event that the professional liability insurance required by this Contract is written on a claims-made basis, Contractor warrants that any retroactive date under the policy shall precede the effective date of this Contract; and that either continuous coverage will be maintained or an extended discovery period will be exercised for a period of two (2) years beginning at the time work under this Contract is completed.

1.3.4 The policy shall cover professional misconduct or lack of ordinary skill for those positions defined in the Scope of Work of this Contract.

2. ADDITIONAL INSURANCE REQUIREMENTS: The policies shall include, or be endorsed to include, the following provisions:

2.1 The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees wherever additional insured status is required such additional insured shall be covered to the full limits of liability purchased by the Contractor, even if those limits of liability are in excess of those required by this Contract.

2.2 The Contractor's insurance coverage shall be primary insurance with respect to all other available sources.

2.3 Coverage provided by the Contractor shall not be limited to the liability assumed under the indemnification provisions of this Contract.

4. NOTICE OF CANCELLATION: Each insurance policy required by the insurance provisions of this Contract shall provide the required coverage and shall not be suspended, voided, canceled, or reduced in coverage or in limits except after thirty (30) days prior written notice has been given to the State of Arizona. Such notice shall be sent directly to **The Arizona Department of Health Services, 1740 West Adams, Room, 303, Phoenix, AZ 85007** and shall be sent by certified mail, return receipt requested.

5. ACCEPTABILITY OF INSURERS: Insurance is to be placed with duly licensed or approved non-admitted insurers in the state of Arizona with an "A.M. Best" rating of not less than A- VII. The State of Arizona in no way warrants that the above-required minimum insurer rating is sufficient to protect the Contractor from potential insurer insolvency.

6. VERIFICATION OF COVERAGE: Contractor shall furnish the State of Arizona with certificates of insurance (ACORD form or equivalent approved by the State of Arizona) as required by this Contract. The certificates for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf.

All certificates and endorsements are to be received and approved by the State of Arizona before work commences. Each insurance policy required by this Contract must be in effect at or prior to commencement of work under this Contract and remain in effect for the duration of the project. Failure to maintain the insurance policies as required by this Contract, or to provide evidence of renewal, is a material breach of Contract.

All certificates required by this Contract shall be sent directly to **The Arizona Department of Health Services, 1740 West Adams, Room 303, Phoenix, AZ 85007**. The State of Arizona project/Contract number and project description shall be noted on the certificate of insurance. The State of Arizona reserves the right to require complete, certified copies of all insurance policies required by this Contract at any time. **DO NOT SEND CERTIFICATES OF INSURANCE TO THE STATE OF ARIZONA'S RISK MANAGEMENT SECTION.**

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7. **SUBCONTRACTORS:** Contractors' certificate(s) shall include all subcontractors as insureds under its policies or Contractor shall furnish to the State of Arizona separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to the minimum requirements identified above.
8. **APPROVAL:** Any modification or variation from the *insurance requirements* in this Contract shall be made by the contracting agency in consultation with the Department of Administration, Risk Management Division. Such action will not require a formal Contract amendment, but may be made by administrative action.
9. **EXCEPTIONS:** In the event the Contractor or subcontractor(s) is/are a public entity, then the Insurance Requirements shall not apply. Such public entity shall provide a Certificate of Self-insurance. If the Contractor or subcontractor(s) is/are a State of Arizona agency, board, commission, or university, none of the above shall apply.

T. Health Insurance Portability and Accountability Act of 1996

The Contractor warrants that it is familiar with the requirements of HIPAA, as amended by the Health Information Technology for Economic and Clinical Health Act (HITECH Act) of 2009, and accompanying regulations and will comply with all applicable HIPAA requirements in the course of this Contract. Contractor warrants that it will cooperate with the Arizona Department of Health Services (ADHS) in the course of performance of the Contract so that both ADHS and Contractor will be in compliance with HIPAA, including cooperation and coordination with the Government Information Technology Agency (GITA), Statewide Information Security and Privacy Office (SISPO) Chief Privacy Officer and HIPAA Coordinator and other compliance officials required by HIPAA and its regulations. Contractor will sign any documents that are reasonably necessary to keep ADHS and Contractor in compliance with HIPAA, including, but not limited to, business associate agreements.

If requested by the ADHS Procurement Office, Contractor agrees to sign a "Pledge To Protect Confidential Information" and to abide by the statements addressing the creation, use and disclosure of confidential information, including information designated as protected health information and all other confidential or sensitive information as defined in policy. In addition, if requested, Contractor agrees to attend or participate in HIPAA training offered by ADHS or to provide written verification that the Contractor has attended or participated in job related HIPAA training that is: (1) intended to make the Contractor proficient in HIPAA for purposes of performing the services required and (2) presented by a HIPAA Privacy Officer or other person or program knowledgeable and experienced in HIPAA and who has been approved by the GITA/SISPO Chief Privacy Officer and HIPAA Coordinator.

U. Pandemic Contractual Performance

1. The State shall require a written plan that illustrates how the Contractor shall perform up to contractual standards in the event of a pandemic. The State may require a copy of the plan at any time prior or post award of a Contract. At a minimum, the pandemic performance plan shall include:
 - 1.1 Key succession and performance planning if there is a sudden significant decrease in Contractor's workforce;
 - 1.2 Alternative methods to ensure there are products in the supply chain; and
 - 1.3 An up to date list of company contacts and organizational chart.
2. In the event of a pandemic, as declared the Governor of Arizona, U.S. Government or the World Health Organization, which makes performance of any term under this Contract impossible or impracticable, the State shall have the following rights:
 - 2.1 After the official declaration of a pandemic, the State may temporarily void the Contract(s) in whole or specific sections, if the Contractor cannot perform to the standards agreed upon in the initial terms;
 - 2.2 The State shall not incur any liability if a pandemic is declared and emergency procurements are authorized by the Director as per A.R.S. 41-2537 of the Arizona Procurement Code; and

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- 2.3 Once the pandemic is officially declared over and/or the Contractor can demonstrate the ability to perform, the State, at its sole discretion, may reinstate the temporarily voided Contract(s).
3. The State, at any time, may request to see a copy of the written plan from the Contractor. The Contractor shall produce the written plan within seventy-two (72) hours of the request.

V. Food and Nutrition Services Required Federal Provisions

1. The Contractor shall comply with the Food and Nutrition Services Required Federal Provisions contained in Attachment Four (4).

EXHIBIT A
TABLE 1
SOLICITATION NO: ADHS12-00001132

Task	State Level	Clinic Level	Vendor Level
Evaluate telecommunication requirements for offline, online, and hybrid EBT solutions	X	X*	X
Identify equipment requirements for offline, online, and hybrid EBT solutions	X	X	X
Evaluate the technology lifespan of equipment and EBT cards for offline, online, and hybrid EBT solutions.	X	X	X
Identify requirements and barriers of a One Card solution combining SNAP EBT and WIC EBT.	X	X	X
Evaluate current staffing vs. staff required to implement each EBT solution.	X	N/A	N/A
Recommend a comprehensive cost containment strategy for all vendors, including vendors whose WIC sales account for more than 50% of total sales. The cost containment strategy includes, but is not limited to price band regions, retailer types, and whether maximum prices are calculated at the subcategory or UPC level.	X	N/A	N/A
Evaluate how offline, online, and hybrid EBT solutions will impact Help Desk operations.	X	N/A	N/A
Evaluate how offline, online, and hybrid EBT solutions will impact banking.	X	N/A	X
Analyze whether small and/or rural vendors are able to easily integrate WIC EBT due to technology costs and the cost of alternative solutions for these vendors.	N/A	N/A	X
Evaluate the requirements of enabling Cash Value Benefits at farmers markets.	N/A	N/A	X
Analyze the benefits and opportunities of using a third party processor versus keeping it in house.	X	N/A	X
Evaluate the requirements and benefits of full and partial mapping of produce items. Refer to the WIC EBT Operating Rules located at http://www.fns.usda.gov/wic/EBT/wicebt.htm	N/A	N/A	X
Evaluate how the timing of the WIC EBT card being swiped (before versus after items are scanned) affects when the POS, cashier, and customer will know if the item is WIC eligible. Additionally, identify if the retailers POS applications limit the timing of the EBT card being swiped.	N/A	N/A	X
Evaluate banking options including local banks and treasury.	X	N/A	X

X* - Each State Agency may prefer not to analyze telecommunications at the clinic level. Instead, each State Agency may prefer to analyze telecommunication at a higher level, such as county, village, or island. The Contractor must work with each State Agency to completing this task.

EXHIBIT B
TABLE 2
SOLICITATION NO: ADHS12-00001132

Task #	Deliverable Name	Due	Document Format
1.1	Project initiation meeting	Ten (10) days after contract award	
1.2	Schedule of deliverables and project plan	One (1) month after contract award	Word 2010 and Project 2010
1.3	Monthly Status Report	Five (5) days following month end	Word 2010
2.2.1	Information for baseline cost analysis of paper food instruments	Two (2) months after contract award	Word 2010
2.2.2	Baseline cost analysis of paper food instruments	Three (3) months after contract award	Word 2010
2.3	Baseline cost analysis of paper food instruments results meeting in Arizona with Partners	Four (4) months after contract award	Electronic, hard copies for each attendee, and In-Person Presentation
3.1.1	Risks associated with each EBT solution	Five (5) months after contract award	Word 2010
3.1.2	Fraud at participation level	Five (5) months after contract award	Word 2010
3.1.3	Fraud at employee level	Five (5) months after contract award	Word 2010
4.2	EBT Functionality Requirements	Six (6) months after contract award	Word 2010
4.4	Identify EBT Providers and Services	Six (6) months after contract award	Word 2010
4.5	Associating food items purchased to an individual in the family.	Six (6) months after contract award	Word 2010
5.1.1	APL building and maintenance recommendation	Seven (7) months after contract award	Word 2010
5.2	APL maintenance policies regarding size changes	Seven (7) months after contract award	Word 2010
5.3	Uploading APL changes to NUPC	Seven (7) months after contract award	Word 2010
6.2	Develop survey tool	Four (4) months after contract award	Word 2010

EXHIBIT B
TABLE 2
SOLICITATION NO: ADHS12-00001132

6.3	EBT solution barriers and benefits at State, Clinic, and Vendor levels	Eight (8) months after contract award	Word 2010
6.4	Analyze cost to implement each EBT solution at State, clinic, and vendor levels	Eight (8) months after contract award	Word 2010
7.2	Analysis of other state's EBT processes.	Six (6) months after contract award	Word 2010
8.2	EBT alternatives evaluation and recommendation	Nine (9) months from contract	Word 2010
8.3	Recommended EBT solution meeting with HANDS consortium	Nine (9) months from contract award	Word 2010
9.2	IAPD first draft	Ten (10) months from contract award	Word 2010
9.3	IAPD draft revisions	Seven (7) days of receipt	Word 2010
9.4	IAPD final review	Eleven (11) months from contract award	Word 2010
9.5	IAPD Soft and Hard Copies	Eleven (11) months from contract award	Word 2010 and PDF
10.1.1.1	First draft of RFP implementation scope of work	Ten (10) months from contract award	Word 2010
10.1.1.2	Draft revisions of RFP implementation scope of work	Seven (7) days of receipt	Word 2010
10.1.1.3	Final review of RFP implementation scope of work	Eleven (11) months from contract award	Word 2010
10.1.1.4	Soft copy of RFP implementation scope of work	Eleven (11) months from contract award	Word 2010 and PDF
11	Final report and project completion	Twelve (12) months from contract award	Word 2010
12.1	State Agency optional EBT Orientation meetings with each State Agency	TBD	
12.2	State Agency optional stakeholder and steering committee meetings with each State Agency	TBD	
12.3	Upon completion of IAPD, State Agency optional three (3) consecutive business day planning visit	TBD	
12.4	State Agency optional additional planning services	TBD	