

**Request for Proposal (RFP) Log# 2025-0904**

**Connecticut AIDS Drug Assistance Program (CADAP)**

**Question and Answers (Q &A)**

**Posted June 4, 2024**

1. The Cost Standards specifically state that POS contracts are “not used for the purpose of purchasing administrative or clerical services” such as the services called for under this RFP. Consistent with that direction, would the State consider revising the RFP to remove the budget requirements, including the requirement that such budgets align with the Cost Standards?

**Answer:** *The State considers facilitating the procurement of medications, health insurance premiums, and medication adherence monitoring to fall under the definition of a POS contract. The budget requirements will remain in place.*

2. ADAP support providers have successfully provided precisely the services required by this RFP under fixed-price contracts in Connecticut and numerous other states. Most if not all such providers do not estimate, accumulate, allocate, and report costs in the specific way required by the Cost Standards, as the industry standard is to charge a fixed price for an agreed upon estimated number of members. Requiring offerors to align with the Cost Standards will significantly hamper if not eliminate competition for this contract. Will the State revise the structure of this RFP to contemplate a fixed-price award (and thus support fixed-price proposals)?

**Answer:** *The Department does not have the authority to modify the Cost Standards or procurement guidelines. The Department will evaluate budgets based on the criteria and requirements established in the RFP. Proposers may use the fee structure they determine to be the most competitive within the established parameters. Cost allocation plans are required under all possible budget scenarios, including the proposed fixed fee as they are not mutually exclusive.*

3. Despite referencing the Cost Standards, the RFP does not mention a cost allocation plan (CAP). Does the State intend to require offerors—or the awardee—to submit a CAP?

**Answer:** *A Cost Allocation Plan will be required during the contract negotiations process after the successful proposal has been selected.*

4. Section II.C.2 a. indicates that CADAP applications should be reviewed and approved within 72 hours of receipt of a completed application. This is in conflict with information provided in Section II.B (Program Service Overview) which mentions a 24-hour period for review and approval. Will the contractor be expected to review and approve all complete applications within 24 or 72 hours?

**Answer:** As stated on page 11, “Service Expectations: Eligibility and Enrollment”, proposers must demonstrate how they will process applications within 72 hours. The description included on page 9, “Program Service Overview,” indicating a 24-hour process is the current service delivery level.

5. Will images count towards the page count limitation for the proposer's response?

**Answer:** Images included in the body of the proposal will count toward the page limit. Images included in the attachments indicated on pages 29 and 40 do not count toward the page limit.

6. Would the State extend the procurement for 15 business days (excluding holidays) so that proposals are due on July 10?

**Answer:** Proposals are due June 18, 2024, by 4:30 pm.

7. Does CADAP utilize a real-time or retrospective process to determine active Medicaid coverage?

**Answer:** The current process includes both a real-time and retrospective process to verify Medicaid coverage. Upon processing the application, Medicaid coverage is checked. CADAP also reviews Medicaid coverage on a monthly basis. Applicants are denied and current clients are disenrolled if they are confirmed to have active Medicaid coverage.