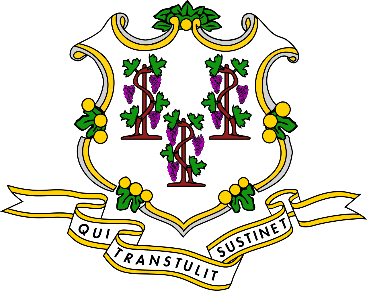
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| **STATE OF CONNECTICUT PROCUREMENT NOTICE** |



Request for Proposals (RFP) #2025-0902 For

Lung Cancer Screening Navigation

Issued By:

Department of Public Health

June 25, 2024

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

<https://portal.ct.gov/DAS/CTSource/BidBoard>

or from the Agency’s Official Contact:

Name: Iris Viruet

Address: 410 Capitol Avenue, MS #11CCC

Phone: 860-509-7804

E-Mail: dph-lungcancerscreening@ct.gov

The RFP is also available on the Agency’s website at <https://portal.ct.gov/DPH/Request-For-Proposals/Request-for-Proposals>

RESPONSES MUST BE RECEIVED NO LATER THAN

August 14, 2024

2:30pm EST

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

The Agency reserves the right to reject any and 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** |

**< A. INTRODUCTION**

1. **RFP Name and Number.** Lung Cancer Screening Navigation Services, RFP# 2025-0902

**2. RFP Summary.**

The Connecticut Department of Public Health (DPH) is seeking proposals from healthcare systems and hospitals in Connecticut to participate in the delivery of lung cancer screening navigation services through the CT Lung Cancer Screening Program (CLCSP). Contractors will be expected to (1) identify and recruit eligible patients and navigate them into lung cancer screening and, if indicated, follow-up treatment and services, and (2) engage in community outreach and education concerning lung cancer and the benefits of lung cancer screening.

**3. RFP Purpose.**

Lung cancer is the second most commonly diagnosed cancer in Connecticut, and incidence rates for lung cancer in the state are 55.2 per 100,000 people compared to the US national average of 54.0 per 100,000 people. (<https://statecancerprofiles.cancer.gov/incidencerates>)

The purpose of this funding opportunity is to foster the early detection and prevention of lung cancer by increasing the lung cancer screening rates for Connecticut residents. Early detection promotes the initiation of treatment at an earlier stage of the disease, when treatment is more likely to be effective, and thereby reduces the risk of death from lung cancer.

**4. Commodity Codes.** The services that the Agency wishes to procure through this RFP are as follows:

* 0600: Services (Professional, Support, Consulting and Misc. Services)
* 1000: Health Service Planning
* 2000: Community and Social Services
* 3000: Education and Training

**< B. INSTRUCTIONS**

1. **Official Contact.** The Agency 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 Agency. Proposers, prospective proposers, and other interested parties are advised that any communication with any other Agency employee(s) (including appointed officials) or personnel under contract to the Agency about this RFP is strictly prohibited. Proposers or prospective proposers who violate this instruction may risk disqualification from further consideration.

Name: Iris Viruet

Address: 410 Capitol Avenue, MS #11CCC

Hartford, CT 06134

Phone: 860-509-7804

E-Mail: dph-lungcancerscreening@ct.gov

Please ensure that e-mail screening software (if used) recognizes and accepts e-mails 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 Agency 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): <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:

* Agency’s RFP Web Page

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

* State Contracting Portal (go to CTsource bid board, filter by “Department of Public Health”

<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 e-mails 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 non-binding target dates only (\*). The Agency may amend the schedule as needed. 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, the Agency’s RFP Web Page.

* RFP Released: June 25 , 2024
* Letter of Intent Due: July 16, 2024
* Deadline for Questions: July 19 2024
* Answers Released: July 31, 2024
* Proposals Due: August 14, 2024, 2:30 PM
* (\*) Proposer Selection: week of August 26, 2024
* (\*) Start of Contract: approximately January 2025

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

* Total Funding Available: $352,475 per year for 2 years
* Number of Awards: Up to 6 awards depending on award amounts and funding available.
* Award Range: Proposers can apply for up to $88,000 per year for 2 years. Contract Term: 1/1/2025-12/31/2026 (anticipated)
* Funding Source: State

**6.** **Eligibility.** Proposals will be accepted from healthcare systems and hospitals in Connecticut with established lung cancer screening programs. Proposers with long-standing, significant unresolved issues on current and/or prior year contracts with the Department may be removed from consideration for funding.

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

Proposers must be a healthcare system or hospital in Connecticut with an existing lung cancer screening program and with the ability to effectively identify, recruit, navigate and follow eligible patients into the proposer’s established lung cancer screening program.

**8. Letter of Intent.** A Letter of Intent (LOI) is required 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 by e-mail by the deadline established in the Procurement Schedule. The LOI must clearly identify the sender, including name, postal address, telephone number, and e-mail address. It is the sender’s responsibility to confirm the Agency’s receipt of the LOI. Failure to submit the required LOI in accordance with the requirements set forth herein shall result in disqualification from further consideration.

**9. Inquiry Procedures.** All questions regarding this RFP or the Agency’s procurement process must be directed, in writing, electronically (by e-mail) to the Official Contact before the deadline specified in the Procurement Schedule. 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(s) will be answered. However, the Agency will not answer questions when the source is unknown (i.e., nuisance or anonymous questions). Questions deemed unrelated to the RFP or the procurement process will not be answered. At its discretion, the Agency may or may not respond to questions received after the deadline. If this RFP requires a Letter of Intent, the Agency reserves the right to answer questions only from those who have submitted such a letter. The Agency may combine similar questions 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 duly noted as such.

The Agency will release the answers to questions on the date(s) established in the Procurement Schedule. The Agency will publish all amendments to this RFP on the State Contracting Portal and, if available, on the Agency’s RFP Web Page. At its discretion, the Agency may distribute any amendments to this RFP to prospective proposers who submitted a Letter of Intent.

**10. RFP Conference.** No RFP conference will be held.

**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: August 14, 2024, 2:30 PM.

Proposals received after the due date and time will be ineligible and will not be evaluated. The

Agency will send an official letter alerting late respondents of ineligibility.

**An acceptable submission must include the following:**

* One (1) confirming electronic copy of the original proposal.

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

The electronic copy of the proposal must be e-mailed to the Official Contact for this procurement. The subject line of the e-mail must read: **Lung Cancer Screening Navigation**. Required forms and appendices may be scanned and submitted as PDFs at the end of the main proposal document. Please ensure the entire e-mail submission is less than 25MB as this reflects the Agency’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.

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| **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 agency is the center of a comprehensive network of public health providers and is a partner to local health departments for which it provides advocacy, training and certification, technical assistance, consultation, and oversight.

The agency 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 agency is focused on health outcomes, maintaining a balance between assuring quality and administrative functions among personnel, facilities, and programs. DPH is a leader on the national scene through direct input to Federal agencies and the United States Congress.

The mission of the CT DPH 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**

DPH’s Comprehensive Cancer Control Program is looking for healthcare systems and hospitals to provide navigation services for eligible patients with the goals of increasing lung cancer screening rates in Connecticut and decreasing late-stage cancer diagnosis and lung cancer mortality. Contractors must effectively identify and navigate eligible patients into lung cancer screening programs and follow up on the patients’ screening outcomes.

Eligible patients are defined by the U.S. Preventive Services Task Force (USPSTF) as people who:

• Have a 20 pack-year or more smoking history, and

• Smoke now or have quit within the past 15 years, and

• Are between 50 and 80 years old.

A pack-year is smoking an average of one pack of cigarettes per day for one year. For example, a person could have a 20 pack-year history by smoking one pack a day for 20 years or two packs a day for 10 years. USPSTF recommends yearly lung cancer screening with low-dose computed tomography (LDCT) for eligible patients.

DPH is committed to the elimination of health inequities. Racial and ethnic minorities and Connecticut’s disadvantaged residents experience health inequities and therefore do not have the same opportunities as other groups to achieve healthy outcomes. Proposers must address the scope of health disparities and inequities in their communities and explain how the proposed program services and activities will address these discrepancies.

Funds are to be used to enhance an existing lung cancer screening program through navigation services and outreach and cannot be used to establish a new lung cancer screening program. Funds cannot be used for lung cancer screening or cancer treatment. All patients must be navigated into screening and into diagnosis and treatment, if necessary. Patients lacking insurance, and those who are underinsured, must be navigated into screening and provided assistance in gaining entry into other funded programs for diagnosis and treatment.

**< C. SCOPE OF SERVICE DESCRIPTION**

The contractor will be responsible for effectively identifying, recruiting, and navigating eligible patients through the healthcare system to receive lung cancer screening and follow up, if needed.

Proposers must include their specific hospital or healthcare system’s baseline lung cancer screening rates in the proposal.

A patient navigator (PN) who is trained in motivational interviewing, a technique used to elicit the client’s active participation in the process of changing their behavior, must be dedicated to the CLCSP. The PN must dedicate sufficient hours to the program to effectively meet the goals of the CLCSP and increase the contractor’s lung cancer screening rate by at least 15% over the two-year grant period.

The contractor must identify and recruit eligible patients and, upon enrollment into the program, patients must be navigated into lung cancer screening services. Patients must be followed for outcomes of screening and, if necessary, navigated into further treatment and services. Program participants must be screened yearly.

The contractor must recruit eligible patients by means of review of electronic health records (EHR), outreach into the community, referrals from healthcare providers, and other mechanisms to meet the screening goals.

Services must be culturally competent, and information must be provided in multiple languages.

The contractor will be provided with access to a DPH database to collect information such as outreach activities, patient demographics, tobacco use history, insurance, type of navigation services, lung cancer screening outcomes and follow up services and outcomes, if necessary.

1. **Organizational Expectations:**

The proposer must provide a brief overview of the history and structure of the organization, including the organization’s catchment area, hours of operation and the locations where services will be provided. The proposer must explain how the proposal will fit into the organization’s overall mission and meet the intent of this RFP. Proposers must include their current lung cancer screening rate and the proposed lung cancer screening rate to be achieved with the awarded funding. The overview should include the following:

**a**. **Purpose, Mission, Vision, and History of Organization**

The proposer must provide a brief overview of the history and structure of the organization. The proposer must explain how the proposal will fit into the organization’s overall mission, with specific details on patient-centered care, team-based model, medical home model, and community health needs assessment.

**b**. **Entity Type (profit/non-profit, etc.)/Years of Operation**

The proposer must indicate entity type and years of operation. Proposals will be accepted from CT based hospitals and healthcare systems with an established lung cancer screening program. Individuals who are not a duly formed business entity are ineligible to participate in this procurement.

**c**. **Location of Office(s) or Facilities/Hours of Operation**

The proposer must describe all locations where services will be provided and hours of operation, including nontraditional sites and hours. Note – the proposer must offer lung cancer screening navigation services and lung cancer screening services at least one evening per week or one weekend per month to permit access to potential participants who cannot schedule appointments for screening services during regular business hours.

**d. Accreditation/Certification/Licensure (if applicable)**

The proposer must detail any organizational accreditations, certifications, or licensure.

**2. Service Expectations – Scope of Services for Applicant and Any Anticipated Subcontractors**

The following are the services and activities required of the successful proposer. Please discuss in the proposal how these services and activities will occur:

1. **Patient Navigator (PN):**

* A PN must be assigned to the lung cancer screening navigation program.
* The PN’s duties must include helping patients navigate through doctors’ offices, clinics, hospitals, outpatient centers, insurance and payment systems, patient-support organizations, and other healthcare system components. The PN must also navigate patients to agencies in their local community in order to assist patients with social determinant of health issues, such as transportation, food security, childcare and housing. The number of hours the PN dedicates to the program must be sufficient to successfully meet the program deliverables and increase the contractor’s lung cancer screening rate by at least 15% by the end of the two-year contract period.

1. **Outreach:**

* The proposer must describe how it will provide community outreach and education regarding lung cancer, risk behaviors associated with lung cancer, the benefits of lung cancer screening, and eligibility criteria for screening to the public and healthcare providers within the proposer’s service area to assist with recruitment of patients into the program.
* The proposer must describe how it will conduct community outreach at a minimum of four (4) wellness events or other community events each contract year.
* The proposer must describe how it will conduct outreach and education to healthcare providers to assist with recruitment and lung cancer screening goals.
* The proposer must describe how it will gather data regarding outreach activities, including the number of people reached and the number of eligible people enrolled in CLCSP.
* The proposer must describe how they will educate healthcare professionals within the proposer’s agency on lung cancer, screening and referral for lung cancer screening.
* The proposer must identify how and when it will meet these requirements in the proposal.

1. **Identification, Recruitment, and Enrollment:**

* The proposer must describe how recruitment activities will include community-level outreach and education through community events and multiple media channels, with an emphasis on electronic media channels, including social networking sites. The use of EHRs in recruitment is also encouraged.
* The proposer must describe how it will provide information and education to healthcare providers within the organization regarding lung cancer screening, eligibility, and referral of eligible patients. EHR alerts are also encouraged.
* The proposer must describe how it will provide screening reminders for patients and educate them as to what lung cancer screening is, how it is performed, and its benefits.
* The proposer must describe how it will conduct review of patients’ records to determine eligibility prior to patients’ appointments so that healthcare providers can discuss lung cancer screening with eligible patients at their visit.
* The proposer must describe how it will recruit patients identified during outreach events in the CLCSP.
* The proposer must commit to enrolling identified patients in the CLCSP.
* The proposer must describe how it will collect data regarding the number of people identified who are eligible for screening and the number of eligible people enrolled in the CLCSP.
* The proposer must identify how and when it will meet these requirements in the proposal.

1. **Navigation:**

* The proposer must identify in the proposal the protocols used to carry out the provision of patient navigation for lung cancer screening, diagnostic follow-up, and referral services. The CDC has outlined the minimum requirements for navigation as written assessment of individual client social determinant of health issues, individual client education and support, resolution of social determinant of health issues, client tracking and follow-up, and data collection to monitor the outcome of patient navigation.
* The PN must assist eligible patients in lung cancer screening and navigate patients into follow up or treatment services if there is a positive screen or additional follow up is needed.
* Program participants must be screened yearly for lung cancer. The target population eligible for lung cancer screening are people who:
* Have a 20 pack-year or more smoking history, and
* Smoke now or have quit within the past 15 years, and
* Are between 50 and 80 years old.

In addition, the proposer must explain how it will target eligible patients who are people with low socioeconomic status, people of color, and LGBTQ+ (target populations) to offer the screening services.

* The proposer must demonstrate that it will provide lung cancer screening navigation services and lung cancer screening services at least one evening per week and one weekend per month to permit access to patients who cannot schedule appointments for screening services during regular business hours. Service areas and hours should be outlined in the proposal.

* The proposer must provide reminders to patients of appointment times and results of screening.

* The proposer must provide culturally competent services.
* The proposer must assist those patients who are without insurance or who are underinsured in finding or applying for insurance or other financial assistance to cover the cost of screening and follow-up care.
* The proposer must identify how and when it will meet these requirements in the proposal.

1. **Data Collection:**

* The Department will provide contractors with a database and forms to collect patient data and information concerning outreach efforts. Training on the database and collection forms will be provided by the Department.
* The patient data collected must be de-identified by contractors and submitted to the Department quarterly.
* Contractors must collaborate with the Department evaluation contractor in assessing program effectiveness and patient satisfaction.

1. **Sustainability Plan:**

* The proposer must submit a plan to integrate and sustain the tenets of the program within their organization.
* The proposer must identify a staff person or persons who will act as the internal champion(s) for the program and present a letter of agreement from that individual stating their commitment to the program.

1. **Subcontractors, if applicable:**

If subcontractors will be used in the proposed program, specify the following information for each one:

* Legal Name of Entity, Address, FEIN
* Contact Person, Title, Phone, Fax, E-mail
* Services Currently Provided
* Services To Be Provided Under Subcontract
* Subcontractor Oversight
* Subcontract Cost and Term

Note: The proposal must include a completed Subcontractor Schedule A-Detail Form (see Attachments Section – Application Forms) for each subcontractor proposed. If subcontractors are unknown at the time of the application, any subcontractor information must be submitted during contract negotiations.

**3. Work plan:**

A comprehensive and realistic work plan with SMART objectives describing tasks to be performed, deliverables and timelines, including a project start date, must be provided in the narrative or included in the Attachments. SMART objectives are objectives that are Specific, Measurable, Achievable, Realistic, and Time-bound. The work plan must be consistent with the RFP and the project’s goals and objectives. The project start date will be considered as part of the review criteria. Please use the work plan template included with the RFP to indicate services to be provided.

**4. Staffing Expectations:**

* A PN must be assigned to the lung cancer screening navigation program, as described above under 2a. Service Expectations.
* The PN must be trained in motivational interviewing and risk reduction counseling.
* The proposer must describe the administrative structure and oversight for the program and identify the coordinator/supervisor and the individuals that will comprise the program and the staff assigned, including:
  + Job descriptions, hours per week, and hourly rates must be provided for all staff

assigned to this project on the Staffing Form Position Schedule 2a included in Attachments.

* + Resumes must be provided for all management and professional staff assigned to this project.
  + The proposer must complete and attach an organizational Work Force Analysis included in the Attachments.
  + A current organizational chart for the proposer must be submitted with the application.

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

**5. Data and Technology Expectations:**

The proposer must describe its current technological capacity to:

* Collect and secure data and host web-based and telephone conferencing.
* Access e-mail and the internet for the purposes of data collection and record reporting, as well as for any required or recommended DPH webinars and teleconferences. The proposer must define current capabilities as well as system restrictions.
* Securely maintain data. The proposer must describe how project-related records and data will be securely collected, shared, and stored in a manner that ensures compliance with applicable confidentiality laws and regulations.

**6. Financial Expectations:**

Monthly or triannual expenditure reports will be required, dependent on the type and cost of the program to be provided. Budget basis programs will require expenditure reports that are submitted to the Department through an electronic reporting system, Core-CT.

**7. Budget Expectations:**

The proposal must contain an itemized budget with justification for each line item on the budget forms included in the Application Forms in Section VI. A detailed budget is required for the first year of the grant.

* All costs (salaries, travel, supplies, etc.) must be included in the contract price. Applicants may include media purchases within their budget as it relates to their work plan. Any organization including administrative and general costs as part of the project budget must also provide their cost allocation plan that identifies what categories of costs are included in the plan and how they are allocated. Competitiveness of the budget will be considered as part of the proposal review process.
* 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.
* Use of subcontractors is allowed.  Subcontractor information and details also must be in the itemized budget.  Subcontractor Schedule A – Detail form must be completed. All information required of the contractor must be applied to the subcontractor as well.
* Copies of state set aside certifications for small and/or minority business must also be provided.
* Payments will be negotiated based on time frames and deliverables described in Section V of this RFP.

**< D. PERFORMANCE MEASURES**

The following performance metrics highlight key priorities that will be analyzed with contractors 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 Agency. The Agency looks forward to working with contractors to define additional important performance metrics.

* 7% increase in contractor’s lung cancer screening rate by the end of the first contract year.
* 15% increase in contractor’s lung cancer screening rate over the 2 years of the contract.
* 80% of patients report that the contractor’s services were good or very good.
* Contractor will conduct four outreach events each contract year.
* Program progress reports and program data will be submitted on time and accurately.

**< E. CONTRACT MANAGEMENT/DATA REPORTING**

As part of the State’s commitment to becoming more outcomes-oriented, the Department of Public Health seeks to actively and regularly collaborate with providers/vendors 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 of Public Health reserves the right to request/collect other key data and metrics from providers/vendors.

* Data must be submitted monthly.
* Narrative progress reports must be submitted quarterly.
* Update meetings with the DPH program manager/staff will occur monthly.

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| **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.** The Cover Sheet is Page 1 of the proposal. Proposers must complete and use a Cover Sheet form provided by the Agency in **Section VI Appendix** and must include the information listed in Section IV A.

**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 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:

* THIS IS AN ELECTRONIC SUBMISSION
* Page Limit: 25 pages to include executive summary and proposal, additional pages can be used for budget and workplan.
* Font Size: 12
* Font Type: Times New Roman
* Margins: 1” inch margins
* Line Spacing: 1.5 spaces

**7. Pagination.** The proposer’s name must be displayed in the header of each page. All pages, excluding 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. In subsection IV F of the proposal submission, the proposer must reference where the information labeled CONFIDENTIAL is located 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).

1. **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 averse 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 Agency 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 Agency 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 Agency 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 Agency will designate a Review Committee to evaluate proposals submitted in response to this RFP. The Review Committee will be composed of individuals, Agency staff or other designers 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 order and make recommendations for awards. The DPH 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 Agency will reject any proposal that deviates significantly from the requirements of this RFP.

**4.** **Evaluation Criteria (and Weights).** 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.

|  |  |
| --- | --- |
| **Evaluation Criterion Title** | The examples below are intended to provide guidance and are not an exhaustive list of items to be considered. Proposers should refer to the specific content requirements throughout the RFP to address every criterion. |
| Scope of Services:  Patient Navigator  Outreach  Identification, Recruitment and Enrollment  Navigation  Data Collection  Sustainability Plan  Staffing Plan  Data and Technology  Work plan  Budget and Budget Narrative | * Patient Navigator that will be assigned to the lung cancer screening navigation program. * Patient Navigator that will be working the requisite number of hours to effectively increase the screening rate by 15% and meet deliverables of grant. * Outreach and education regarding lung cancer, risk behaviors associated with lung cancer, lung cancer screening benefits, and eligibility criteria for screening to the public within the proposer’s catchment area to assist with recruitment of patients into the program. * Outreach and education at a minimum of four (4) events a year. * Education to healthcare providers about lung cancer, screening, and referral. * Recruitment activities, including community-level outreach and education through community events. * Review of records to identify eligible patients prior to appointment. * Recruitment and enrollment services of eligible patients. * Patient navigation for lung cancer screening, diagnostic follow-up, and referral services for the target population. * Assistance to patients with barriers to care.   Proposer’s approach to:   * collecting required data and submitting it to the Department. * working with the Department’s evaluator.   Proposer’s approach to:   * recruiting a program champion or champions. * continuing the program once funds are no longer available.   Proposer’s approach to allocating adequate time and trained staff to manage the services to be provided.  Proposer’s approach to:   * + maintaining the provided data collection system and tracking and documenting information.   + providing required data and program required reports as outlined by DPH to meet grant requirements.   Thorough and detailed work plan consisting of SMART objectives and specific, appropriate timelines.   * Use of the funds to effectively provide the services required. * Budget that is cost effective and competitive. |

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 Agency Head. The final selection of a successful proposer is at the discretion of the Commissioner or Agency Head. Any proposer selected will be so notified and awarded an opportunity to negotiate a contract with the Agency. 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 e-mail or U.S. mail, at the Agency’s discretion, about the outcome of the evaluation and proposer selection process. The Agency reserves the right to decline to award contracts for activities in which the Commissioner or Agency Head considers there are not adequate respondents.

**6. Debriefing.** Within ten (10) days of receiving notification from the Agency, unsuccessful proposers may contact the Official Contact and request information about the evaluation and proposer selection process. The e-mail 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 Agency 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 Agency may schedule and hold the debriefing meeting within fifteen (15) days of the request. The Agency will not change, alter, or modify the outcome of the evaluation or selection process as a result of any debriefing meeting.

**7. Appeal Process.** Proposers may appeal any aspect of the Agency’s competitive procurement, including the evaluation and proposer selection process. Any such appeal must be submitted to the Agency 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 e-mail 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 Agency 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 as a result of this RFP is subject to the Agency’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 Agency website.

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| **IV. REQUIRED PROPOSAL SUBMISSION OUTLINE AND REQUIREMENTS** |

***A: Cover Sheet***

The Respondent must use the Cover Sheet in Section VI Appendix which captures the following information:

* RFP Name or Number
* Legal Name
* FEIN (not required for currently contracted providers/vendors)
* Street Address
* Town/City/State/Zip
* Contact Person
* Title
* Phone Number
* E-Mail Address
* Authorized Official
* Title
* Signature

*Legal Name* is defined as the name of 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 25 pages** including executive summary, proposal, work plan and budget (all appendices and other attachments should be referred to in section D and then placed in section E).

***E: Attachments***

Attachments other than the required attachments identified are not permitted and will not be evaluated. See the Proposal Checklist in Appendix VI for a list of relevant attachments. Further, the required attachments 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 located 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 Statement of Assurances in Appendix VI.

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| **V. MANDATORY PROVISIONS** |

**< A. STANDARD CONTRACT PROVISIONS**

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 POS contract. 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: <https://portal.ct.gov/OPM/Fin-POS/Standards/POS-Standard-Contract-Part-II> .

**< 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 Agency may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned 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 Agency 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 Agency 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 on the basis of disability in admission to, access to, or operation of its programs, services, or activities.

**2. Preparation Expenses.**Neither the State nor the Agency 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 Agency 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 through 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 Agency may request and authorize proposers to submit written clarification of their proposals, in a manner or format prescribed by the Agency, and at the proposer’s expense.

**6.** **Supplemental Information.** Supplemental information will not be considered after the deadline submission of proposals, unless specifically requested by the Agency. The Agency may ask a 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 and place designated by the Agency. At its sole discretion, the Agency 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 Agency, a 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 Agency may make onsite visits to an operational facility or facilities of a proposer to evaluate further the proposer’s capability to perform the duties required by this RFP. At its discretion, the Agency 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 Agency 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 Agency 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 Agency 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 Agency.

**2. Amending or Canceling RFP.**The Agency reserves the right to amend or cancel this RFP on any date and at any time, if the Agency deems it to be necessary, appropriate, or otherwise in the best interests of the State.

**3. No Acceptable Proposals.** In the event that no acceptable proposals are submitted in response to this RFP, the Agency 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 Agency reserves the right to award in part, to reject any and 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 Agency may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State will be served. The Agency 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 as a result 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 any and all information or reports, or part thereof, shall accrue to the State without recourse.

**6. Contract Negotiation.**The Agency reserves the right to negotiate or contract for all or any portion of the services contained in this RFP. The Agency further reserves the right to contract with one or more proposers for such services. After reviewing the scored criteria, the Agency may seek Best and Final Offers (BFO) on cost from proposers. The Agency may set parameters on any BFOs received.

**7. Clerical Errors in Award.**The Agency 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 Agency is the sole funder of a purchased service, the Agency reserves the right to approve any additions, deletions, or changes in key personnel, with the exception of key personnel who have terminated employment. The Agency also reserves the right to approve replacements for key personnel who have terminated employment. The Agency 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 Agency.

**< 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 into contracts with organizations or businesses that discriminate against protected class persons.

**3. 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 into 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 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 of 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 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. If the Contractor makes a good faith effort to determine whether it has made an investment described in the previous sentence of this subsection, the Contractor shall not be subject to the penalties for 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 shall 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 proposer is awarded an opportunity to negotiate a contract, the proposer must provide the State agency with *written representation* in the resulting contract that certifies that the proposer 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 proposer or vendor refuses to agree to this representation, such proposer 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 proposer or seek new bids or proposals.

**8.** **Access to Data for State Auditors**. The Contractor shall provide 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 Agency] and the State Auditors of Public Accounts at no additional cost.

**9. State Business-Related Call Center and Customer Service Work:** Pursuant to subsection (h) of section 31-57aa of the Connecticut General Statutes, Grantee shall perform all required state business-related call center and customer service work entirely within the State of Connecticut. If Grantee performs work outside of the State of Connecticut and adds customer service employees who will perform work pursuant to this Contract, then Grantee shall employ such new employees within the State of Connecticut prior to any such employee performing any work pursuant to this Contract.

**10. Compliance with Consumer Data Privacy and Online Monitoring:** Pursuant to section 4 of Public Act 23-16 of the Connecticut General Assembly, Contractor shall at all times comply with all applicable provisions of sections 42-515 to 42-525, inclusive, of the Connecticut General Statutes, as the same may be revised or modified.

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| **VI. APPENDIX** |

**A. ABBREVIATIONS / ACRONYMS / DEFINITIONS**

BFO Best and Final Offer

C.G.S. Connecticut General Statutes

CHRO Commission on Human Rights and Opportunity (CT)

CT Connecticut

DAS Department of Administrative Services (CT)

FOIA Freedom of Information Act (CT)

IRS Internal Revenue Service (US)

LDCT Low-dose computed tomography

LOI Letter of Intent

OAG Office of the Attorney General

OPM Office of Policy and Management (CT)

OSC Office of the State Comptroller (CT)

POS Purchase of Service

P.A. Public Act (CT)

RFP Request for Proposal

SEEC State Elections Enforcement Commission (CT)

U.S. United States

* *contractor:* a private provider organization or CT State agency that enters into a POS contract with the Agency as a result of this RFP.
* *proposer:* a private provider organization or CT State agency that has submitted a proposal in response to this RFP. This term may be used interchangeably with *respondent* throughout the RFP.
* *prospective proposer:* a private provider organization or CT State agency that may submit a proposal to the Agency in response to this RFP but has not yet done so.
* *patient navigator*: a trained, culturally sensitive healthcare worker who provides support and guidance throughout the cancer care continuum.
* *subcontractor*: an individual (other than an employee of the contractor) or business entity hired by a contractor to provide a specific service as part of a POS contract with the Agency as a result of this RFP.

**B. STATEMENT OF ASSURANCES**

**Agency Name**

The undersigned Respondent affirms and declares that:

1. **General**
2. This proposal is executed and signed with full knowledge and acceptance of the terms and conditions stated in the RFP.
3. The Respondent will deliver services to the Agency at the cost proposed in the RFP and within the timeframes specified therein.
4. The Respondent will seek prior approval from the Agency before making any changes to the location of services.
5. The Respondent and its officials, and the Respondent’s subcontractors and the subcontractors’ officials, have not received any notices of debarment or suspension from contracting with the State of Connecticut or the Federal Government.
6. The Respondent and its officials, and the Respondent’s subcontractors and the subcontractors’ officials, have not 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 detail. **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**

|  |  |  |
| --- | --- | --- |
| **Procurement Timetable**  The Agency reserves the right to modify these dates at its sole discretion. | | |
| Item | Action | Date |
| 1 | Letter of Intent | July 16,2024 |
| 2 | Questions submitted | July 19, 2024 |
| 3 | Proposals submitted | August 14, 2024 |

**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**

☐ **Table of Contents**

☐ **Executive Summary**: high-level summary of proposal and cost

☐ **Main proposal body answering all questions with relevant attachments**. *Proposers should use their discretion to determine whether certain required information is sufficiently captured in the body of their proposal or requires additional attachments for clarification*. Additional attachments may include (bullets below are examples only):

* Staffing plan with FTE status
* Agency and program organizational chart detailing reporting structure
* Staff resumes and applicable licensures
* Work plan describing organization’s efforts, progress, or plans to diversify workforce
* Detailed plan on cultural competence and humility in service delivery
* Memoranda of Agreement/Understanding with service partners
* Written financial policies and procedures

☐ **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 ½” 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 and 1 ½ line spacing?

☐ 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)?

**APPLICATION FORMS**

**Services to be Provided**

1. Describe your experience providing the kinds of services described in the “Services to be Provided” section of the RFP.

2. Provide at least two references (with their telephone numbers) that may be contacted to support your description of your experience in providing these services.

3. Briefly describe the approach to the services you will provide as outlined in the “Services to be Provided” section of the RFP. Use the Workplan form to elaborate (see Section E of this application).

4. Briefly state the hours of operation of your organization and indicate the suitability of these hours to the Services and Deliverables required in this proposal.

**APPLICATION FORMS**

**NOTIFICATION TO BIDDERS**

The contract to be awarded is subject to contract compliance requirements mandated by Sections 4a-60 and 4a-60a of the Connecticut General Statutes; and, when the awarding agency is the State, Sections 46a-71 (d) and 46a-81i (d) of the Connecticut General Statutes. There are Contract Compliance Regulations codified at Section 46a-68j-21 through 46a-68j-43 of the Regulations of Connecticut State agencies, which establish a procedure for the awarding of all contracts covered by Sections 4a-60 and 46a-71 (d) of the Connecticut General Statutes.

According to Section 46a-68j-30 (9) of the Contract Compliance Regulations, every agency awarding a contract subject to the contract compliance requirements has an obligation to “aggressively solicit the participation of legitimate minority business enterprises as bidders, contractors, subcontractors and suppliers of materials.” “Minority Business Enterprise” is defined in Section 4a-60 of the Connecticut General Statutes as a business wherein fifty-one percent or more of the capital stock, or assets belong to a person or persons: “(1) Who are active in the daily affairs of the enterprise; (2) Who have the power to direct the management and policies of the enterprise; and, (3) Who are members of a minority, as such term is defined in subsection (a) of Section 32-9n.” “Minority” groups are defined in Section 32-9n of the Connecticut General Statutes as “(1) Black Americans ... (2) Hispanic Americans ... (3) Women ... (4) Asian Pacific Americans and Pacific Islanders; or (5) American Indians.” The above definitions apply to the contract compliance requirements by virtue of Section 46a-68j-21 (11) of the Contract Compliance Regulations.

The awarding agency will consider the following factors when reviewing the bidder’s qualifications under the contract compliance requirements.

1. the bidder’s success in implementing an affirmative action plan;
2. the bidder’s success in developing an apprenticeship program complying with Sections 46a-68-1 to 46a-68-18 of the Connecticut General Statutes, inclusive;
3. the bidder’s promise to develop and implement a successful affirmative action plan;
4. the bidder’s submission of EEO-1 data indicating the composition of its workforce is at or near parity when compared to the racial and sexual composition of the workforce in the relevant labor market area; and,
5. the bidder’s promise to set aside a portion of the contract for legitimate minority business enterprises. See Section 46a-68j-30 (10) (E) of the Contract Compliance Regulations.

**INSTRUCTION**: Bidder must sign acknowledgment below line and return acknowledgment to Awarding Agency along with the bid proposal.

The undersigned acknowledges receiving and reading a copy of the “Notification to Bidders” form.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

On behalf of:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REQUEST FOR PROPOSAL RFP DPH Log# 2025-0902**

**D. APPLICATION FORMS**

**COVER SHEET**

**CONNECTICUT DEPARTMENT OF PUBLIC HEALTH**

**Applicant Information**

Applicant Agency: \_ \_ \_

Legal Name

\_ \_ \_

Address

\_ \_ \_\_

City/Town State Zip Code

\_ \_

Telephone No. FAX No. Email Address

Contact Person: \_ \_ Title: \_

Telephone No: \_

##### 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:

* Full legal name of the organization or corporation as it appears on the corporate seal and as registered with the Secretary of State
* Mailing address
* Main telephone number
* Fax number, and email address, if any
* Principal contact person for the application (person responsible for developing application)

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-Profit | | | |
| **Federal Employer I.D. Number:** |  |  | **Town Code No:** |
| **Medicaid Provider Status:** YES NO | | | **Medicaid Number:** |
| **Minority Business Enterprise (MBE):** YES NO | | |  |
| **Women Business Enterprise (WBE):** YES NO | | |  |

### Budget Summary Instructions

* 1. **Position Schedule #2a**

#### Complete the schedule for all positions to be funded even if currently vacant.

* + 1. Complete one Position Schedule #2a for each Program/Fund to be included in the Budget.
  1. **Personnel** (lines #1 - #2)

#### Line #1 Salary and Wages: Enter the total salary charged, as listed on Position Schedule 2a.

* + 1. Line #2 **Fringe Benefits Line:** Enter the total fringe benefits charged, as listed on Position Schedule 2a.
  1. Line #8 **Contractual (Subcontracts):** Provide the total of all subcontracts and complete Subcontractor Schedule.

#### Lines #3 - #7, #9, and #10: Complete categories as appropriate,

* 1. Line #11: Other Expenses are any other types of expense that do not fit into the categories listed.

For example: Equipment. Please note that the state’s definition of equipment is tangible personal property with a normal useful life of at least one year and a value of at least $5,000 or more.

* 1. **Audit Costs:** The cost of audits made in accordance with OMB Circular A133 (Federal Single Audit) are allowable charges to Federal awards. The cost 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.**
  2. **Administrative and General Costs,** Line Item #12

#### 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: <http://www.opm.state.ct.us/finance/pos_standards/coststandards.htm>.

* + 1. **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.
  1. **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 Budget Justification.
  2. **Multiple Funding Period Contracts:** Please complete a full budget for each Funding Period of the contract, clearly indicating the Period on each form. Absent other instructions, assume level funding for the second year.

1. **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** | $730 | 1,659 miles @ .44 = $730.00 outreach workers going to meetings and site visits. |

* 1. 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.*

1. **Subcontractor Schedule A--Detail**
   1. 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. (Submit the actual detail when it is available). A separate subcontractor schedule must be completed for each program included in the contract. For example: The contract is providing both a Needle Exchange program and an AIDS Prevention Education Program and Subcontractor “A” is providing services to both program there must be a separate budget for Subcontractor “A” for each.
   2. Detail of Each Subcontractor:
      1. Choose a category below for each subcontract using the basis by which it is paid:
         1. Budget Basis B. Fee for Service C. Hourly Rate.
      2. Choose whether the subcontractor is a minority or woman owned a business:
      3. MBE WBE Neither
      4. 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

**Applicant’s Organization Name FUNDING PERIOD 1: 9/1/2024 to 6/30/2025**

**Contract Period: 9/1/2024 to 6/30/2026 Budget Summary**



|  |  |  |
| --- | --- | --- |
| **/Program:** | **Name** | Total |
|  |  |  |
|  |  |  |
| **1. Salaries & Wages** |  |  |
| **2. Fringe Benefits** |  |  |
| **3. Travel** |  |  |
| **4. Training** |  |  |
| **5. Educational Materials** |  |  |
| **6. Office Supplies** |  |  |
| **7. Medical Materials** |  |  |
| **8. Contractual**  **(Sub-Contracts)\*\*** |  |  |
| **9. Telephone** |  |  |
| **10. Advertising** |  |  |
| **11. Other Expenses (list)** |  |  |
| **a.** |  |  |
| **b.** |  |  |
| **c.** |  |  |
| **d.** |  |  |
| **e.** |  |  |
| **f.** |  |  |
| **g.** |  |  |
| **h.** |  |  |
| **i.** |  |  |
| **12. Administrative and General Costs** |  |  |
| **Total DPH Grant** |  |  |
|  |  |  |
| **Other Program Income** |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

\*\*Complete Sub-contractor Schedule A



##### Budget Justification Schedule B\*

**Applicant’s Organization Name FUNDING PERIOD 1: 9/1/2024 to 6/30/2025**

**Contract Period: 9/1/2024 to 6/30/2026**

**Budget Justification Schedule B Program/Site:**

|  |  |  |
| --- | --- | --- |
| **Line Item (Description)** | **Amount** | **Justification including Breakdown of Costs** |
|  |  |  |
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##### Position Schedule #2a

**Applicant’s Organization Name FUNDING PERIOD 1: 9/1/2024 to 8/30/2025**

**Contract Period: 9/1/2024 to 8/30/2026**

**Position Schedule #2a Program/Fund:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **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: |  | / |  |  | % |  |
| 13.Position: Name: |  | / |  |  | % |  |
| 14.Position: Name: |  | / |  |  | % |  |
| 15.Position: Name: |  | / |  |  | % |  |
| 16.Position: Name: |  | / |  |  | % |  |
| **Totals** |  |  |  |  |  |  |

**\*Attach resumes and job descriptions for all Professional Staff**



### Subcontractor Schedule A-Detail

#### Subcontractor Name: Address:

**Applicant’s Organization Name FUNDING PERIOD 1: 9/1/2024 to 8/30/2025**

### #1

#### Telephone: ( ) ( - )

Select One: **A** Budget Basis **B** Fee-for-Service **C** Hourly Rate

Indicate One: MBE WBE Neither

|  |  |  |
| --- | --- | --- |
| **Program:** | **Name** | **Total** |
| **Fund:** |  |  |
| Line Item(s) |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total Subcontract Amount:** |  |  |

**#2**

Subcontractor Name: Address:

Telephone: ( ) ( - )

Select One: **A** Budget Basis **B** Fee-for-Service **C** Hourly Rate Indicate One: MBE WBE Neither

|  |  |  |
| --- | --- | --- |
| **Program:** | **Name** | **Total** |
| **Fund:** |  |  |
| Line Item(s) |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total Subcontract Amount:** |  |  |

**#3**

Subcontractor Name: Address:

Telephone: ( ) ( - )

Select One: **A** Budget Basis **B** Fee-for-Service **C** Hourly Rate Indicate One: MBE WBE Neither

|  |  |  |
| --- | --- | --- |
| **Program:** | **Name** | **Total** |
| **Fund:** |  |  |
| Line Item(s) |  |  |
|  |  |  |
|  |  |  |
| **Total Subcontract Amount:** |  |  |

STATE OF CONNECTICUT, DPH RFP Log#: 2025-0902

##### Work Plan Form

Year 1

(Duplicate as needed and for subsequent years.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Services to be Provided** | **Activities** | **Staff Responsible** | **Deliverables / Expected Outcomes and Measures of Success** | **Time Frame (Quarter 1,2,3**  **or 4)** |
|  |  |  |  |  |
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**WORKFORCE ANALYSIS**

Contractor Name: Total Number of CT employees:

Address: Full Time: Part Time:

Complete the following Workforce Analysis for employees on Connecticut worksites who are:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Job Catego ries | Overall Totals (sum of all cols. male & female) | White  (not of Hispanic Origin) | | Black  (not of Hispanic Origin) | | Hispanic | | | Asian or Pacific Islander | | American Indian or Alaskan Native | | | | People with Disabilities | |
|  | | Male | Female | Male | Female | Male | | Female | Male | Female | Male | Female | | | Male | Female |
| Officials & Managers | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| Professionals | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| Technicians | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| Office & Clerical | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| Craft Workers (skilled) | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| Operatives (semi-skilled) | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| Laborers (unskilled) | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| Service Workers | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| Totals Above | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| Totals 1 year Ago | |  |  |  |  |  | |  |  |  |  |  | | |  |  |
| FORMAL ON-THE-JOB TRAINEES (Enter figures for the same categories as are shown above) | | | | | | | | | | | | | | | | |
| Apprentices | |  |  |  |  |  | |  |  |  |  |  | |  | |  |
| Trainees | |  |  |  |  |  | |  |  |  |  |  | |  | |  |
| EMPLOYMENT FIGURES WERE OBTAINED FROM: | | | | | | | Visual Check: | | | Employment Records | | | Other: | | | |

1. Have you successfully implemented an Affirmative Action Plan? YES NO

Date of implementation: If the answer is “No”, explain.

1. a) Do you promise to develop and implement a successful AffirmativeAction? YES NO Not Applicable Explanation:
2. Have you successfully developed an apprenticeship program complying with Sec. 46a-68-1 to 46a-68-18 of the Connecticut Department of Labor Regulations, inclusive: YES NO Not Applicable Explanation:
3. According to EEO-1 data, is the composition of your work force at or near parity when compared with the racial and sexual composition of the work force in the relevant labor market area? YES NO Explanation:
4. If you plan to subcontract, will you set aside a portion of the contract for legitimate minority business enterprises? YES NO Explanation:

\_ \_ \_ \_

Contractor’s Authorized Signature Date