



**STATE OF CONNECTICUT  
DEPARTMENT OF SOCIAL SERVICES**

**REQUEST FOR QUOTES IN RESPONSE TO  
DAS MASTER AGREEMENT#18PSX0087  
INFORMATION TECHNOLOGY STRATEGIC  
SERVICE RESOURCES  
FOR  
RURAL HEALTH TRANSFORMATION PROGRAM  
GRANTS MANAGEMENT VENDOR**

**ISSUE DATE: 12/5/2025**



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## 1. Information

### 1.1. Authorized Contact Person

The Connecticut (“CT”) Department of Social Services (“DSS” or “Department”) has designated the individual below as the Official Contact (“OC”) for purposes of this Request for Quotes (“RFQ”). The Official Contact is the only authorized contact for this procedure and, as such, handles all related communications on behalf of the Department. All communication must be in writing and addressed via email to the OCs.

NAME: Anila Ceka, Contract Administration Unit  
E-Mail: [DSS.Procurement@ct.gov](mailto:DSS.Procurement@ct.gov)

### 1.2 Proposed Schedule

The Department may amend the following schedule, as needed. Any change shall be made by means of an addendum to this RFQ and shall be notified via email to the vendor participating in this procedure, and through the Department of Social Services’ RFP Web Page at <http://www.ct.gov/dss/rfp>.

Milestones	Ending Dates
RFQ Released	December 5, 2025
Vendor Questions Due	December 11, 2025; 4:00 PM EST
Answers to Vendors Questions Due <sup>1</sup>	December 15, 2025
Response submission Due	December 19, 2025; 4:00 PM EST
Start of Statement of Work (“SOW”) <sup>2</sup>	TBD

### 1.3. Submission Due Date and time for Response:

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<sup>1</sup> Target Date

<sup>2</sup> Upon allocation of federal grant funding award.

The Official Contact is the only authorized recipient of submissions to be submitted in response to this RFQ. The response must be submitted electronically to [DSS.Procurement@ct.gov](mailto:DSS.Procurement@ct.gov) on or before **4:00 PM EST on Friday, December 19, 2025**.

The subject line of the email must read: **RFQ 12.5.2025: Rural Health Transformation Program - Grant Management Vendor**

The State bears no responsibility for the cost of preparing a response to this Request for Quote.

## **2. Background and Overview**

On November 4, 2025, DSS submitted a Rural Health Transformation Program (“RHTP”) Grant Application to the federal Centers for Medicare & Medicaid Services (“CMS”), requesting up to \$1,000,000,000.00 in grant funding over a five-year period beginning on December 31, 2025 and ending on 10/30/2030. The actual grant award amount will likely differ, as the funds shall be allocated among the approved states in accordance with a methodology specified in the federal law. RHTP is a \$50 billion grant program established by federal law in HR1 (Section 71401 of Public Law 119-21) to invest in and transform rural health. The program is administered by CMS. Details are available through the following hyperlink [Rural Health Transformation \(RHT\) Program | CMS](#). CMS shall award the grant funding per each state by December 31, 2025.

DSS shall serve as the lead agency for administering the RHTP Grant funding award for the State of Connecticut (CT). As proposed in the submitted grant application and subject to federal approval, the project includes the following anticipated state agency subrecipients/sub-awardees who shall also carry out the state’s RHTP Plan: CT Office of Rural Health (ORH), Office of Policy and Management (OPM), Office of Health Strategy (OHS), Office of Early Childhood (OEC), Department of Mental Health and Addiction Services (DMHAS), Department of Energy and Environmental Protection (DEEP), Department of Aging and Disability Services (ADS), Department of Public Health (DPH), State Department of Education (SDE), Department of Agriculture (DoAg), and the University of Connecticut Health Center (UCHC). As the recipient of the grant, DSS shall not only receive and manage the entire grant award and projects that shall be awarded to DSS, but also be responsible for distributing funding to other CT state agencies in alignment with the projects awarded by CMS. This distribution shall be carried out in accordance with both state and federal regulation, specifically procurement rules, to facilitate the execution of RHTP work.

The RHTP Plan is a critical mechanism to advance a sustainable, data-driven model of care that enhances access, quality, and outcomes. DSS, as lead agency, is committed to removing barriers to treatment, improving health outcomes, and promoting patient-centered care. The RHTP Plan as proposed in the submitted grant application centers on four coordinated initiatives that collectively include thirty-one (31) targeted projects which, together, address

all of CMS's strategic goals for this grant to transform healthcare for residents in the state's rural areas: make

rural America healthy again by addressing root causes of diseases; strengthen sustainable healthcare access; improve workforce development; promote innovative care; and enhance tech innovation. The initiatives are:

1. Population Health Outcomes – Advance prevention, improve management of chronic diseases, maternal and behavioral health integration, and address root causes of disease.
2. Workforce – Strengthen recruitment, training, and retention of healthcare providers and staff through education partnerships, telehealth support, and career pipelines.
3. Data & Technology – Expand interoperability, health information exchange participation and telehealth infrastructure, and analytics to guide performance and inform policy, as well as improve healthcare providers' ability to coordinate care and improve population health.
4. Care Transformation & Stability – Promote rural healthcare provider capacity to improve quality and population health, including by supporting enhanced care coordination, adoption of value-based models, integrating medical, behavioral, dental, and long-term services, coordinated care teams, and sustainable funding mechanisms for rural healthcare providers.

Among the four initiatives are 31 distinct CT proposed projects, each of which shall be implemented by a state agency, either through DSS or one of the other subrecipient/sub-awardee state agencies listed above. CT sought stakeholder input through various channels (webpage forms, in person and virtual public meetings, and key stakeholder meetings). CT's final grant submission to CMS can be accessed on the DSS website here: [Rural Health Transformation Program--Documents](#).

The state's RHTP Plan shall leverage partnerships with state and local agencies, tribal partners, healthcare providers, and community organizations to ensure locally responsive solutions. By aligning investments with evidence-based projects, the RHTP Plan shall improve chronic disease management, expand healthcare access, reduce avoidable hospitalizations, and strengthen the long-term health of rural residents through sustainable solutions. This program shall modernize electronic and logistical infrastructure, strengthen community-to-clinician connections, and further integrate healthcare and community-based services across settings and types of care.

The requested \$1,000,000,000 provides the investment needed to build a more resilient system that emphasizes prevention, supports providers, and ensures high-quality care that transcends distance barriers.

### **3. RFQ**

#### **3.1 RFQ Solicitation**

RFQ is being solicited pursuant to Department of Administrative Services (“DAS”) Master Agreement (“MSA”) 18PSX0087, and the resulting Statement of Work (“SOW”) shall be subject to begins the terms and conditions of that MSA. Upon close out of the submission for this RFQ, DSS shall select one (1) vendor from the responses received and shall negotiate a SOW with that vendor to support Grant Management for Rural Health Transformation Program upon award. The negotiated SOW shall have to be approved and executed by DSS and, to the extent applicable, approved by DSS’s federal partners before any work.

The awarded vendor shall directly support the newly established DSS Rural Health Transformation Division within the Commissioner’s Office and shall be responsible for supporting a range of grant start-up activities. Support shall be for a limited time and shall taper off significantly after the first RHTP budget period. As grant-hired staff take over duties, the vendor shall need to transfer knowledge, duties and products to such staff before the end of the contract.

#### **3.2 Grants Management Vendor’s Responsibilities**

- a. Supporting DSS in taking on a leadership role related to planning, launching, and actively project managing the Rural Health Transformation Program Grant, including, as applicable, assisting with the launch, implementation, and oversight of all grant activities and projects and leveraging existing project management and grants management resources as much as possible.
- b. Supporting DSS in ongoing communications with CMS. Comprehensively identify reporting requirements and develop procedures to support and ensure timely reporting, including using electronic tools or platforms to facilitate efficient reporting.
- c. Establishing collaborative structures and communications procedures within DSS and among RHTP participating state agencies, including frequent interagency meetings and ongoing interagency communication, including collecting all information, data, and metrics from RHTP participating agencies necessary for DSS to manage RHTP in compliance with grant terms and conditions.
- d. Setting up schedules and procedures to collect and manage all data, information, and documentation necessary to meet RHTP grant terms and conditions. Working with applicable staff at DSS and other agencies, preparing progress reports and other required documentation.

- e. Working with the DSS Fiscal team, developing and implementing a proactive plan to review and monitor grant-related expenses, including all required financial reporting across all RHTP participating agencies and, as applicable, assisting with updates to budgeting, reporting, and related tasks.
- f. Supporting grant-related procurements and contracts including establishing MOUs, MOAs, RFPs and contracts, including, as applicable, supporting procurement and contracting for all RHTP participating agencies.
- g. Supporting activities related to recruitment, hiring and onboarding of RHTP-funded staff, including, as applicable, supporting hiring for all RHTP participating agencies.
- h. Supporting stakeholder input planning and engagement, which may include providing leadership, staffing, set-up and administrative support for the planned RHTP Advisory Council and all other public and stakeholder engagement.
- i. Accessing and providing subject matter expertise and advice as needed to assist with all aspects of RHTP implementation, including, but not limited to, project management, financial analysis and reporting, clinical evaluation and monitoring, and other tasks relevant to RHTP.
- j. Per Public Law 119-21, sec. 71401, RHTP has an aggressive claw-back provision in that any dollars unspent at the end of each budget period shall be reclaimed by the federal government. From a grants management perspective, the vendor shall assess how the proposed projects can launch quickly, efficiently and in full compliance with state and local laws and guidelines such that awarded funds can begin to be drawn down with minimal delay.
- k. The RHTP grant allows for the hiring of administrative staff to manage the grant for the lifecycle. In coordination with DSS and leveraging existing project management and grants management resources to the full extent possible, the vendor shall set up systems, process and protocols that can be handed off to DSS staff before the end of the contract period including but not limited to support for hiring, onboarding, and training staff.
- l. The RHTP grant requires extensive interagency collaboration and coordination, particularly each agency partner needs to clearly understand their role(s) and requirements in relation to the grant. Each agency also faces competing priorities. The vendor shall efficiently and effectively engage state agency partners such that there is strong ownership and responsibility to the work, as well as a sense of collective mission to transform rural health.

- m. As with other grants, resources allocated to RHTP may only be spent on RHTP activities, so the vendor shall assist all involved agencies in ensuring that staff and other resources are efficiently and fully utilized in supporting RHTP and ensuring full compliance with limitations on working on the grant.

### **3.3 Grant Management Vendor’s Experience and Qualifications**

- a. Detailed experience and familiarity and demonstrated capacity with managing federal grants and related reporting requirements, particularly CMS and other Health & Humans Services (“HHS”) projects.
- b. Experience and demonstrated capacity leading and managing large and complex projects in the health or health policy sector.
- c. Demonstrated agility, flexibility, and ability to work in high-level executive environment and managing tight deadlines.
- d. Experience and demonstrated capacity coordinating multi-agency projects.
- e. Expertise and high competence in financial and other reporting for federal and other grants.

### **3.4 Submission Requirements**

The submission should comply with the following outline (sequence, naming and numbering):

- a. No more than twenty pages, excluding the following documents submission as outlined per the following sections 3.4.b.iii. Resumes and 3.4.d Cost Proposal.
- b. Detailed experience and expertise in providing Grants Management Services. To comply with this requirement, the vendor must submit the following:
  - i. A narrative detailing experience and expertise in managing federal grants and related reporting requirements, particularly CMS and other HHS projects.
  - ii. Specific examples of similar projects performed in other states in managing federal grants and related reporting requirements, particularly CMS and other HHS projects. To comply with this requirement, the vendor must submit the following:
    - ✓ A list of contracts for services like those sought by this RFQ that the Respondent has provided to other governmental entities.
  - iii. Resumes of the vendor’s staff (and, if applicable, vendor subcontractor’s staff) and a detailed description of roles and responsibilities of the Key Personnel proposed for this project, included as Appendix A.
- c. Proposed approach to providing Grants Management Services for CT’s RHTP Plan in accordance with the scope of services listed above and based on the vendor’s review of

CT's submitted RHTP grant application.

- d. Cost Proposal: All vendors must include a detailed cost proposal, included as Appendix B, which shall be no more than five pages. The proposed budget can be submitted either in an excel spreadsheet or table format, including a Budget Narrative.

### **3.5. Evaluation Criteria**

Responses meeting the Submission Requirements (Refer to Section 3.4) shall be evaluated according to the established criteria. The criteria are the objective standards that the Evaluation Committee shall use to evaluate the technical and financial merits of the vendor's submission. The weights of all requirements are disclosed. Only the criteria listed below shall be used to evaluate response submission.

1. Detailed experience and expertise in providing Grants Management Services. Provide specific examples of similar projects performed in other states in managing federal grants and related reporting requirements, particularly CMS and other HHS projects (50 points).
2. Proposed approach to providing Grants Management Services for CT's RHTP Plan in accordance with the scope of services listed above and based on the vendor's review of CT's submitted RHTP grant application (25 points).
3. Cost proposal (25 points).

At its sole discretion, the Department may invite vendor(s) for an interview and/or for an oral presentation of their response submission. Any such interview or oral presentation may be done virtually or in person at a day and time selected, and in a place provided by the Department.

## **4. Key Information**

### **4.1 Length of Engagement**

This is a limited engagement that shall require the selected vendor to provide grant management services as outlined in this RFQ until October 31, 2026, with the DSS option to extend up to an additional twelve (12) months. The length of the engagement and services provided under this RFQ is contingent upon the availability of funding that is contingent upon the State of CT being awarded and receiving federal funding through the RHTP sufficient to support these services, including all applicable federal approvals.

### **4.2 Pricing and Payment**

Payments shall be made monthly, based on actual hours worked as reported by the vendor through a weekly status report. All of the time worked shall be subject to verification by the

Department. The Contractor shall keep true and accurate records of the time worked. The hourly rate paid shall be in accordance with Exhibit B. Price Schedule for the vendor attached to DAS Master Agreement 18PSX0087.

Payment to the Contractor shall be made only after the submission of a properly completed itemized invoice, in a form approved by DSS. Invoices must be submitted on a monthly basis. Invoices must contain, at a minimum, a detailed description of the work performed, the date of performance, the actual time spent performing the work, the name and position of the person(s) rendering the Service and the rate charged for that Service, funds withheld, if any, and any other applicable details.

### **4.3 State Resources and Oversight**

The State shall provide support and guidance to the vendor(s) selected for this project. A manager shall be responsible for coordination of resources and services with the vendor.

### **4.4 Security/Privacy Considerations**

Information accessible by the vendor(s) may be sensitive, confidential, or subject to the Privacy Act and/or HIPAA. The vendor(s) must be familiar with and comply with the provisions of appropriate regulations and/or instructions. Signing of a confidentiality agreement and taking the mandatory DSS security and compliance online training shall be required. The display of an access badge shall be always required when the vendor(s) is present in the facility. Contractor Personnel shall not attend training courses at the expense of the Department, unless training is included within the SOW.