

DEPARTAMENTO DE
SALUD



Puerto Rico Department of Health
Health Information Technology
Environmental Scan
Request for Proposal (RFP)

2021-PRDoH-SMHP-001

October 30, 2021

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Acronyms

Acronym	Definition
APA	American Psychological Association
ASES	Administración de Seguros de Salud State Health Insurance Administration
CHIP	Children’s Health Insurance Program
CMS	Centers for Medicare
CV	Curriculum Vitae
EH	Eligible Hospital
EHR	Electronic Health Record
EP	Eligible Providers
FQHC	Federally Qualified Health Center
HCBS	Home and Community-Based Services
HIT	Health Information Technology
LTC	Long-Term Care
MCO	Managed Care Organization
MPPIPR	Medicaid Program Promoting Interoperability of Puerto Rico
MS	Microsoft
PM	Project Manager
PMO	Project Management Office
PRDoH	Puerto Rico Department of Health
PRMP	Puerto Rico Medicaid Program
Q&A	Questions and Answers
RFP	Request for Proposal
SMHP	State Medicaid HIT Plan
VA	Veterans Administration
WBS	Work Breakdown Structure

RFP QUICK FACTS SHEET

1.1 Summary of the RFP

The Puerto Rico Department of Health (PRDoH) is seeking proposals from qualified individuals/firms/organizations (vendors) for the provision of consulting services to develop and implement an environmental scan of the state of health information technology (HIT) across diverse groups of healthcare providers in the Commonwealth of Puerto Rico. This project is to complete an assessment of the Puerto Rico healthcare sector to measure changes in HIT adoption and interoperability over the duration of the Medicaid Program to Promote Interoperability of Puerto Rico (MPPIPR) and meet the MPPIPR program closeout requirement.

1.2 Period of Performance

The term of the work is from February 1, 2022, to March 30, 2022, subject to formalization of an agreement between PRDoH and the selected vendor and the availability of funds.

1.3 RFP Process Schedule

- RFP Released: January 15, 2022
- Questions due by: January 28, 2022, 4:30 p.m.
- PRDoH responses due by: February 4, 5:00 p.m.
- Proposals Due: February 7, 2022, 4:30 p.m.
- *Award Decision (tentative): February 14, 2022

1.4 RFP Communications

Vendors must direct communications concerning this RFP to the following person designated as the Solicitation Coordinator and the email address for all solicitation communications:

Vargas.zahira@salud.pr.gov

Only PRDoH's official written responses and communications with vendors are binding with regards to this RFP. Oral communications between a PRDoH official and one or more vendors are unofficial and non-binding.

Vendors must ensure that PRDoH receives all questions and comments via email, including questions and requests for clarification, no later than the questions submission deadline detailed above.

1.5 Proposal Submission

Vendors should submit electronic copies of their proposal (PDF and Microsoft Excel®, as appropriate), using a USBs or other electronic media, and five printed copies of the proposal.

Proposals should be submitted to the below mailing address:

Puerto Rico Department of Health
Medicaid Program, ATTN: Lourdes Arroyo-Lopez
268 Luis Muñoz Riveria Ave.
World Plaza – 12th Floor (Suite 12)
San Juan, Puerto Rico 00918

2. Overview

2.1 Background

PRDoH is responsible for most of Puerto Rico's health and social service programs and services, including the Puerto Rico Medicaid Program (PRMP), the Children's Health Insurance Program (CHIP), public health services and public hospitals. PRDoH is also the single state agency for the Medicaid program, in conjunction with a cooperative agreement with Administración de Seguros de Salud (ASES) which implements and administers the island-wide health insurance system. In October 2019, oversight of the Medicaid Program to Promote Interoperability of Puerto Rico (MPPIPR) and responsibility for the State Medicaid HIT Plan (SMHP) passed from ASES to PRDoH. Refer to Appendix 1 for an estimate of the provider landscape.

The final SMHP is due to the Centers for Medicare & Medicaid Services (CMS) by March 31, 2022; this document must include a final environmental scan of Puerto Rico's HIT landscape to determine the impact of the MPPIPR program.

2.2 Purpose

The primary purpose of the final environmental scan is to assess the current state of and progress in electronic health record (EHR) adoption, awareness of and participation in the MPPIPR and achieving HIT interoperability among various types of health care providers in Puerto Rico. The environmental scan will identify impacts of the MPPIPR on provider progress in EHR adoption, use, and interoperability and understanding the issues with and barriers to EHR adoption, use, and interoperability among practices that do not currently use an EHR system or electronically exchange health information. This scan will evaluate areas of progress/lack of progress since the program's inception in 2012, identify key barriers to EHRs and electronic exchange that currently exist, and set a new baseline for future automation and interoperability efforts in Puerto Rico. ***The environmental scan survey must be completed by December 31, 2021***

The goals of this project are to accomplish the following:

- Conduct an environmental scan of current HIT capabilities and interoperability in the Puerto Rico healthcare landscape
- Quantify, analyze and visualize the current rate of EHR adoption and interoperability among Puerto Rico hospitals, physicians, and other provider types



- Evaluate EHR adoption and interoperability progress among Puerto Rico hospitals, physicians, and other provider types since the MPPIPR inception
- Identify ongoing barriers to health care automation and interoperability across the Commonwealth

3. Project Requirements

3.1 Scope of Work

PRDOH is seeking to contract with an organization with proven expertise in survey design, administration, and analysis using a variety of survey methods in both English and Spanish to reach a statistically valid sample of respondents.

For this project to be successful the following must be accomplished:

A. Develop survey administration, execution, and analysis plan, to include:

- Survey methodology to assure randomization, validity, and coverage
- Materials and methods for selecting and reaching participants
- Materials and text for describing the survey effort to participants
- Develop and refine survey questions, wording and final tools in both Spanish and English
- Survey administration using multiple methods in both Spanish and English and follow up
- Process for compiling and analyzing responses
- Process for comparative analysis with baseline scan findings as needed.
- Development of tables and graphs for final scan document
- Writing final report content covering the scan process, comparative analysis, and findings
- Schedule for survey administration, follow up, analyses, and write ups
- Lead staff and staffing levels required for each task

B. Define/refine survey target groups and percentages for statistical validity, to include at a minimum:

- All Medicaid/Vital eligible providers (EP) and eligible hospital (EH) types (as applicable), representing both urban and rural areas
- All Medicare EP and EH types (as applicable), representing urban and rural areas
- Other provider types not eligible for either program (e.g., behavioral health, long-term care [LTC], pharmacies, etc.)
- Providers in areas with limited internet access

- Other non-eligible provider groups/types (e.g., public health, Veterans Administration [VA] providers)
- Managed care organizations and other groups with exchange networks

C. Develop survey questions and final survey tools in English and Spanish; conduct survey testing

The survey must gather information to address the following questions, at a minimum, about the current state of HIT and interoperability among various provider types in Puerto Rico, and where possible, compare it to the state of HIT at MPPIPR project inception in 2012 to assess progress made over the duration.

- What is the current extent of EHR adoption by practitioners and by hospitals? How recent is this data?
- Does it provide specificity about the types of EHRs in use by the State's providers?
- Is it specific to just Medicaid or an assessment of overall statewide use of EHRs?
- Does the survey have data or estimates on eligible providers broken out by types of provider?
- Does the survey have data on EHR adoption by types of provider (e.g. children's hospitals, acute care hospitals, pediatricians, nurse practitioners, etc.)?
- To what extent does broadband internet access pose a challenge to HIT/HIE in the Commonwealth's rural areas?
- Does the Commonwealth have VA clinical facilities that are operating EHRs? Please describe.
- To what extent are EHR users engaged in interoperability by sharing electronic health information? How is this being done, and how often are providers exchanging health information in this manner?
- What are the major barriers to EHR adoption or regular use of EHRs and interoperability?

D. Develop survey methodology and outreach

- Determine all relevant survey methods to achieve maximum engagement and response rates (phone, mail, email, etc.)
- Establish optimum survey administration timeline to achieve maximum engagement and response rates

- Compile current contact information for survey participants
- Identify outreach methods and timing to contact potential participants and obtain interest in/agreement to participate and alert when survey is open/closed
- Plan for extra outreach as needed to obtain responses from under-represented and/or hard to reach provider types/locations (small/rural providers, non-automated providers, providers with no or limited broadband access)

E. Administer the survey using multiple methods

- Conduct a survey using all relevant methods to achieve maximum response rates (phone, mail, email, etc.)
- Maximize survey completion within the provider groups and timelines established
- Conduct multiple follow up contacts as needed to obtain sufficient responses from critical participants
- Process completed surveys promptly (daily/weekly)

F. Compile and analyze survey responses

- Compile survey responses and free text into a format and application for analysis
- Review and clean up survey responses where needed/possible
- Analyze responses and produce overall numbers and figures by provider type and other characteristics (e.g., geography, practice size)
- Review and share findings with the project team
- Conduct any revisions/additional analyses post-review
- Finalize findings

G. Develop charts, graphs, summarize findings and write up process for the final report

- Create charts, tables, graphs and other visuals as needed for inclusion in the final SMHP
- Write up final report content to include survey process, methodology, lessons learned, and findings
- Assist in presenting findings to PRDoH management

Upon award, PRDOH can provide the following resources:

- SMHP Environmental Scan requirements
- Sample survey questions and process used in other states
- Sample survey outcomes/reports from other states
- Project support and oversight from Project Management Office (PMO)

3.2 Project Deliverables

Deliverables identified for this project are as follows:

- A. Project Schedule / Management plan
 - The Project Schedule should be baselined upon initial approval of this deliverable by PRDoH. At minimum, the Project Schedule should be updated bi-weekly and delivered to the PMO in Microsoft (MS) Project® and PDF format on a bi-weekly basis. Submitted with each Project Schedule should be a document that details the changes made to the Project Schedule since the prior submitted version.
 - The detailed schedule must be approved by the State HIT Coordinator and the PMO
 - Weekly status reporting to the PMO
- B. Survey administration, execution, and analysis plan
 - Survey methodology and target group numbers
 - Outreach plan
 - Bilingual survey administrators / outreach to target participants.
 - Bilingual final survey tool(s) (**English and Spanish for Puerto Rico**)
 - Scripts for phone contacts
- C. Survey response findings
 - MS PowerPoint presentation for the PRDoH
 - Charts, graphs, tables, and text for the final SMHP report
- D. Environmental Scan Final Report

3.3 Responsibilities

The vendor’s project staff will work in collaboration with PRDoH and the PMO to plan, manage, and administer project related activities from the start of the project through the contract closing.

Role	Responsibilities
PRDoH	<ul style="list-style-type: none"> ○ Establish a Project Manager/team for project oversight ○ Provide guidance and feedback during the project

Role	Responsibilities
	<ul style="list-style-type: none"> ○ Provide requirements, priorities, concerns, relevant data, among others ○ Assist with project tasks as needed/available
Contractor	<ul style="list-style-type: none"> ○ Assign a Project Manager/Point of Contact to communicate with PRDoH ○ Develop relevant project documents such as: proposed methodology, tools, protocols, among others ○ Conduct data collection activities, analyses, and reporting ○ Sustain constant communication with PRDOH and PM Team to ensure project flows efficiently, risks identified early, and feedback is addressed, among others ○ Keep a Risk and Issue log as part of the Project Management and discuss with the PMO in accordance with PRDoH's project management methodology

3.4 Vendor's Minimum Qualifications and Experience

Vendors shall provide **information regarding the firm/organization** so PRDoH can evaluate the vendor's ability to provide the services requested herein. At its discretion, PRDoH may require vendors to provide additional information and clarify information.

To be considered for award, a vendor must provide **evidence of their experience, including:**

- Description of the firm/organization and/or personnel assembled to complete the project
- Submit at least two (2) case studies where similar services were rendered and included:
 - Developing and implementing a successful survey administration and execution plan and methodology
 - Conducting a successful large-scale survey
 - Designing, and testing statistically valid survey tools
 - Conducting statistical multivariate analyses
- Provide samples of graphs, charts, and other visuals
- Demonstrate experience working with tight timelines
- Provide evidence of compliance with all requirements by law to operate in Puerto Rico and contract with Puerto Rico Government.
- Show compliance with other relevant Commonwealth and federal regulations.

3.4.1 Qualifications and Experience of Key Personnel

Vendors shall submit resumes for proposed Key Personnel to demonstrate evidence of relevant qualifications and experience necessary according to the scope of this RFP. Some personnel, such as survey administrators, should be fully bilingual so they can communicate effectively and without delay.

3.4.1.1 Staff Qualifications

The Contractor shall warrant that all persons assigned shall be employees of the Contractor (or specified Subcontractor) and shall be fully qualified to perform the work required. The Contractor shall include a similar provision in any contract with any Subcontractor selected to perform work under this contract. Failure of the Contractor to provide qualified staffing at the level required by the contract specifications may result in termination of this contract or damages.

3.4.1.2 Subcontractors

The Contractor shall be the primary vendor for the contract. PRDoH will not subcontract any work under the contract to any other firm and will not deal with any subcontractors. The Contractor is solely responsible for all actions and work performed by its subcontractors. All terms, conditions, and requirements of the contract shall apply without qualification to any services performed or goods provided by any subcontractor.

3.4.1.3 Off-Shore Sourcing

Vendors shall disclose in their proposal the location where the contracted services will be performed and whether or not any of the work necessary to provide the contracted services will be performed at a site outside Puerto Rico or the continental United States. If, during the term of the contract, the Contractor or subcontractor plans to move work previously performed in the United States to a location outside of the United States, the Contractor shall immediately notify PRDoH in writing, indicating the desired new location, the nature of the work to be moved and the percentage of work that would be relocated. PRDoH must approve any changes prior to work being relocated. Failure to obtain PRDoH's approval may be grounds to terminate the contract for cause.

3.4.2 Ownership

PRDoH shall own all data, forms, procedures, and work products developed or accumulated by the Contractor under this contract. The Contractor may not release any materials without the written approval of PRDoH. Upon completion of the project, any printed survey material, including written responses, must be returned to PRDoH.

3.4.3 Proof of Insurance

Upon request, the Contractor shall present an affidavit of Worker's Compensation, Public Liability, and Property Damage Insurance to the Division of Purchases.

3.4.4 Conflict of Interest

The Contractor shall not knowingly employ, during the period of this contract or any extensions to it, any professional personnel who are also in the employ of the Commonwealth and providing services involving this contract or services similar in nature to the scope of this contract to the Commonwealth. Furthermore, the Contractor shall not knowingly employ, during the period of this contract or any extensions to it, any Commonwealth employee who has participated in the making of this contract until at least two years after his/her termination of employment with the State.

3.5 Initial Project Schedule / Work Plan

Vendors should provide an Initial Project Schedule by project phase. This Initial Project Schedule should show all task details with responsibilities, timelines, durations, milestone dates, deliverable dates, and vendor personnel hours by deliverables for each project phase, personnel hours necessary by phase and deliverable, and all critical dependencies for the project's milestones and deliverables. Please provide those tasks that are on the critical path. Please provide the tasks that will require assistance from PRDoH resources. The Initial Project Schedule should be provided as an attachment to the vendor's proposal and tabbed as such in the submission.

At a minimum, the vendor's proposed Initial Project Schedule should include the following:

- Detailed tasks and timelines, outlining the major tasks planned by the vendor
- The Work Breakdown Structure (WBS)
- The project schedule for all project deliverables and milestones

- Identification of resources assigned as the responsible entity for each deliverable within the WBS to the level at which control will be exercised
- Dependencies to task should be identified

4. Proposal Evaluation

4.1 Reference Checks

PRDoH may conduct reference checks to verify and validate the past performance of the vendor and its proposed subcontractors.

Include at least two (2) references from projects performed within the last five (5) years that demonstrate the vendor’s ability to perform the scope of work described in this RFP. The vendor should provide two (2) different clients/projects in order to demonstrate their experience.

Vendors should include project description, contract dates, and contact information (customer points of contact, addresses, telephone numbers, and email addresses). The vendor should explain whether it performed the work as a prime contractor or as a subcontractor.

The vendor is NOT to change any of the pre-filled cells in the following tables.
The vendor may add additional reference tables as necessary.

Vendor Reference Form

Vendor Information	
Vendor Name:	Contact Name:
	Contact Phone:
Customer Information	
Customer Organization:	Contact Name:
	Contact Title:
Customer Address:	Contact Phone:
	Contact Email:
Project Information	
Total Vendor Staff:	
Project Objectives:	
Project Description:	
Vendor’s Involvement:	
Project Benefits:	
Key Personnel	
Name: (Add more rows as needed)	Role: (Add more rows as needed)
Name: (Add more rows as needed)	Role: (Add more rows as needed)



Project Measurements:				
Estimated one-time costs:		Actual one-time costs:		
Reason(s) for change in one-time cost:				
Original Value of Vendor's Contract:		Actual Total Contract Value:		
Reason(s) for change in value:				
Estimated Start & Completion Dates:	From:		To:	
Actual Start & Completion Dates:	From:		To:	
Reason(s) for difference between Estimated and Actual dates:				
If the vendor performed the work as a Subcontractor, the vendor should describe the scope of subcontracted activities:				

Subcontractor References (if applicable)

If the vendor's proposal includes the use of subcontractor(s), provide one (1) references for each subcontractor. **PRDoH prefers references that demonstrate where the Prime and Subcontractors have worked together in the past.**

Subcontractor Reference Form

Subcontractor Information		
Vendor Name:	Contact Name:	
	Contact Phone:	
Customer Information		
Customer Organization:	Contact Name:	

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		Contact Title:		
Customer Address:		Contact Phone:		
		Contact Email:		
Project Information				
Total Vendor Staff:				
Project Objectives:				
Project Description:				
Vendor's Involvement:				
Project Benefits:				
Key Personnel				
Name: (Add more rows as needed)		Role: (Add more rows as needed)		
Name: (Add more rows as needed)		Role: (Add more rows as needed)		
Project Measurements:				
Estimated one-time costs:		Actual one-time costs:		
Reason(s) for change in one-time cost:				
Original Value of Vendor's Contract:		Actual Total Contract Value:		
Reason(s) for change in value:				
Estimated Start & Completion Dates:	From:		To:	
Actual Start & Completion Dates:	From:		To:	
Reason(s) for difference between Estimated and Actual dates:				

If the vendor performed the work as a Subcontractor, the vendor should describe the scope of subcontracted activities:

4.2 Criteria

Proposals that comply with all requirements will be evaluated by a PRDOH-appointed panel, according to requirements/scoring mentioned in previous sections. Refer to appendix 3 for Proposal Evaluation Rubric. *Attempts to contact or influence selection process will result in disqualification.*

To be evaluated, proposals must be:

- Received by the due date/time
- Meet proposal style requirements
- Follow proposal format
- Be complete and have all supporting documents required

5. Proposal Response Instructions

5.1 Proposal Format

Proposals shall include the following sections Make sure to include in the cover letter the contact person name, title, and contact information.

- Project Proposal – Detailed description of proposed project per Scope of Work, including:
 - Executive summary – High level summary (1-2 pages max.)
 - Firm/organization information
 - Purpose, Mission, and Vision
 - Description of relevant qualifications and experience
 - Evidence of organizational capacity (e.g., leadership CVs, structure)
 - Leadership
 - Key project staff
 - Subcontractors (specify their roles and if offshore) as applicable
 - References
 - Description of proposed survey administration, execution, and analysis process
 - Detailed approach and process model
 - Description of Methodology and approach to survey administration
 - Knowledge of the Puerto Rico health care landscape
 - Work Plan, activities, and milestones
 - Detailed Timeline
 - Level of effort needed to complete each phase within the Dec. 1 timeline
 - Description of work performed during each phase
- Cost/Budget
 - Detailed description of estimated expenses by line item/schedule
- Appendices
 - Statement of Work
 - (2) Case Studies of similar projects
 - Organizational Chart
 - Qualifications of Team / Resumes/CVs of Key Personnel

5.2 Proposal Style Requirements

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- Arial, 12-point font; 1.5 spacing
- One-inch margins
- 8.5' x 11' Letter Paper size/portrait orientation
- No page minimum or maximum

Appendices

Appendix 1 - Estimates of Puerto Rico Providers

The information provided below is meant to assist vendors in their calculations of cost and effort. The following table provides estimates of various types of health care providers in Puerto Rico by provider type as of 2021:

Estimates of Puerto Rico Providers by Provider Type

Type	Estimated Number
Hospitals	63 hospital facilities
Primary Health Centers/ FQHCs	22 FQHC operated in 86 urban and rural locations
Independent Physicians	9,187 active physicians (3,857 are primary care physicians & 7,000 Medicaid providers)
VA Facilities	8 clinics
Physician Assistants	164
Nurse Practitioners	34,478 nurses
Dentists	700 active
Pharmacies	750 independent pharmacies
Ambulatory Care Providers	About 52 ambulatory surgery centers
LTC and Home- and Community-Based Services (HCBS) Providers	Unknown; estimate 6 Skilled Nursing Facilities (Medicare)
Behavioral Health Providers	98 Substance Use Facilities, 67 Mental Health Facilities, 397 Buprenorphine Practitioners 200+ licensed doctoral level psychologists (APA)

The following table provides detail on the number of Medicaid enrolled providers by provider type as of May 2021:

Count of Medicaid Enrolled Approved Providers by Provider Type as of May, 2021

Provider Type	Count
Allied Health Professionals (audiologists, chiropractors, nutritionists, optometrists, occupational, physical and speech therapists)	2,034
Ambulance and Non-Emergency Medical Transport	207
Dentists	1,315
Durable Medical Equipment, Prosthetics and Orthotics	75
Home Health and Hospice	82
Hospital	69
Laboratory and Imaging	1,038
Mental Health Providers	1,368
Pharmacy	1,108
Physicians, midwives, and physician assistants	11,630
Primary/Outpatient Care (FQHCs, clinics, family planning, urgent care, multidisciplinary groups, vaccination centers)	550
Skilled Nursing and Rehabilitation Facilities	25
Specialty Centers (ambulatory surgery, diagnosis and treatment, dialysis, infusion, wound care)	187
Grand Total	19,688

Appendix 2 – Proposal Submission Checklist

I, _____ (name) _____ (title),
submit this proposal on behalf of _____ (company name)
on _____ 2021.

I include the following as part of the vendor’s response to PRDoH’s RFP for the environmental scan:

Submitted		ITEM
YES	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Description of the firm/organization including Organizational Chart
<input type="checkbox"/>	<input type="checkbox"/>	Project Proposal with executive summary
<input type="checkbox"/>	<input type="checkbox"/>	Two (2) case studies where similar services were rendered
<input type="checkbox"/>	<input type="checkbox"/>	Vendor Reference Forms
<input type="checkbox"/>	<input type="checkbox"/>	Subcontractor Reference Forms
<input type="checkbox"/>	<input type="checkbox"/>	Samples of graphs, charts, and other visuals
<input type="checkbox"/>	<input type="checkbox"/>	Evidence of compliance with all requirements by law to operate in Puerto Rico and contract with Puerto Rico Government as well as Compliance with other relevant Commonwealth and federal regulations.
<input type="checkbox"/>	<input type="checkbox"/>	Evidence of organizational capacity (CV, resume of project key personnel)
<input type="checkbox"/>	<input type="checkbox"/>	Initial Project Schedule by project phase
<input type="checkbox"/>	<input type="checkbox"/>	Description of proposed survey administration, execution, and analysis process
<input type="checkbox"/>	<input type="checkbox"/>	Estimated expenses by line item/schedule
<input type="checkbox"/>	<input type="checkbox"/>	Statement of Work
<input type="checkbox"/>	<input type="checkbox"/>	Two (2) Case Studies of similar projects
<input type="checkbox"/>	<input type="checkbox"/>	Samples of graphs, charts, and other visuals

THIS CHECKLIST MUST BE COMPLETED AND SUBMITTED WITH THE PROPOSAL.

Appendix 3 – Proposal Evaluation Rubric

Company Name	Unsatisfactory 0-7 points <input type="checkbox"/>	Below Average 8-12 points <input type="checkbox"/>	Average 13-18points <input type="checkbox"/>	Above Average 19-25 points <input type="checkbox"/>
<p><i>Vendor Qualifications and Experience (25)</i></p> <p>Information and/or documentation regarding the organization</p> <p>Key personnel resumes</p> <p>Executive Summary</p> <p>organizational charts</p>	<ul style="list-style-type: none"> • None or insufficient information and/or documentation regarding the organization is provided. • None or insufficient information and/or documentation regarding key personnel is provided. • None or insufficient evidence of experience providing similar services is provided. 	<ul style="list-style-type: none"> • No clear link between the organization’s qualifications/ experience and the current project are explicit. • No clear link between the personnel’s qualifications/ experience and the current project are explicit. 	<ul style="list-style-type: none"> • Information and/or documentation regarding the organization is provided from limited sources and/or a link between organization’s qualifications / experience is moderately established. • Information and/or documentation regarding key personnel is provided from limited sources and/or a link between key personnel’s qualifications/ experience is moderately established. 	<ul style="list-style-type: none"> • Relevant, detailed information/ documentation from multiple reliable sources effectively shows the organization’s and key personnel’s: • Proven record working in public health, government context, • Extensive experience providing similar services, • Overall capacity to successfully implement project.

Company Name	Unsatisfactory 0-7 points <input type="checkbox"/>	Below Average 8-16 points <input type="checkbox"/>	Average 17-25 points <input type="checkbox"/>	Above Average 26-35 points <input type="checkbox"/>
<p><i>Project Proposal (35)</i></p> <ul style="list-style-type: none"> • Executive Summary • rationale/concept model for the project, • methodology and approach to scope of services • Work plan and timeline <ul style="list-style-type: none"> ○ Initial Project Schedule by project phase 	None, incomplete, or limited information is provided.	Basic information is provided.	Some elaboration is provided.	In-depth/detailed elaboration is provided.

Company Name	Unsatisfactory 0-7 points <input type="checkbox"/>	Below Average 8-11 points <input type="checkbox"/>	Average 12-16 points <input type="checkbox"/>	Above Average 17-20 points <input type="checkbox"/>
<i>Cost proposal (25)</i> Estimated expenses by line item / schedule	None or limited information is provided regarding the project's budget. Proposed budget's feasibility and/or reasonableness is not demonstrated / supported.	Basic budget information is provided.	Some elaboration of budget information and justification is provided	Detailed overall project budget, including estimates by line item and justification for expenses. Budget's feasibility and reasonableness are explicit.

Company Name	Unsatisfactory 0-7 points <input type="checkbox"/>	Below Average 8-11 points <input type="checkbox"/>	Average 12-16 points <input type="checkbox"/>	Above Average 17-20 points <input type="checkbox"/>
<i>Supporting information (20)</i> <ul style="list-style-type: none"> • sample graphs • statement of work • case studies showcasing the organization's capacity / experience 	None, incomplete, or limited supporting documentation is included with the proposal. No case studies are included.	Some supporting documentation is included.	All required supporting documentation is included with some elaboration	All required supporting documentation is included.