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## COOK COUNTY HEALTH (CCH)

### REQUEST FOR PROPOSAL RFP# H21-0003

**TITLE:** Consulting Services for Medicare-Medicaid Alignment Initiative (MMAI) Implementation, CMS Interoperability and Patient Access Final Rule, and Member Growth and Retention

**GENERAL DESCRIPTION:** Health Plan Services is requesting proposals for consulting services to support and assist in developing and executing on a comprehensive plan for implementing the following:

- Medicare-Medicaid Alignment Initiative product
- CMS Interoperability and Patient Access final rule requirements
- Membership acquisition and growth strategy

**DATE ISSUED:** December 17, 2020

**VENDOR QUESTIONS DUE DATE:** December 22, 2020 by 2:00 p.m. CST

**RESPONSE/ PROPOSAL DUE DATE:** January 6, 2021 by 2:00 p.m. CST

Responses to this RFP shall be delivered after 8:00 AM (CST) but no later than 2:00 PM (CST) to:

Cook County Health C/O John H. Stroger, Jr. Hospital  
1969 West Ogden Ave., Lower Level Room # 250A  
Chicago, IL 60612  
Attention: Supply Chain Management Department

***Please note that it takes approximately 20 minutes to pass security and walk to room 250A.***

***Delivery of RFP must include the **RFP Acknowledgement Form** included at the end of this document.***

All questions regarding this RFP should be directed to [purchasing@cookcountyhhs.org](mailto:purchasing@cookcountyhhs.org)

The RFP and related Addenda will be posted at the <http://www.cookcountyhealth.org> website under the "Doing Business with Cook County Health tab.

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## 1. Background

### 1.1 Cook County Health

Cook County Health (CCH) provides a wide range of health care services and operates the John H. Stroger, Jr. Hospital of Cook County, a tertiary, acute care hospital and Provident Hospital of Cook County, a community acute care hospital. Cook County Health is also comprised of:

- 16 community health centers offering primary and specialty care and diagnostic services
- The Cook County Department of Public Health (CCDPH), a certified local public health department serving most of suburban Cook County
- Cermak Health Services of Cook County, which provides health care services to the detainee in the Cook County Sheriff's Department of Corrections and to the residents of Cook County's Juvenile Temporary Detention Center
- The Ruth M. Rothstein CORE Center, a comprehensive care center for care of HIV and other infectious diseases, and
- CCH, the largest Medicaid managed care plan in Cook County and one of the largest in the northeast region of the state.

CCH history and mission to care for all, regardless of the ability to pay, dates back to 1835. In that time, CCH has cared for millions of people, trained thousands of doctors, and conducted important research that has contributed to modern day practices in hospitals. We have centers of excellence in trauma, burn and emergency care, oncology, endocrinology, infectious disease and other areas. We have long been the safety net to the safety net when it comes to caring for the uninsured, a mission that remains today despite the new healthcare environment in which we operate.

CCH is one of the largest public health systems in the United States. As a provider of care, CCH sees approximately 300,000 unique patients annually through more than 1 million outpatient visits and more than 20,000 admissions, including 77,000 detainees at the Cook County Department of Corrections and residents of the Juvenile Temporary Detention Center. We are the largest provider of HIV care in the Midwest and one of the largest in the nation. On an average day, CCH fills nearly 20 times as many outpatient prescriptions than the average commercial pharmacy. The CCDPH is a state and nationally certified public health authority serving the majority of suburban Cook County.

CCH firmly believes that to obtain the true benefits provided by the Patient Protection and Affordable Care Act (ACA) health care transformation must go beyond simply increased access to health insurance and must extend to health practice as well. The launch of CountyCare in fall 2012 under the ACA's Early Enrollment Option set the course for CCH's transformation. In the two years since, CCH has seen a dramatic shift in its Payer mix such that a majority of CCH Patients is now insured – the first time this has been the case in CCH's 180-year history of direct care.

### 1.2 About Health Plan Services

Health Plan Services (HPS) is a Department within CCH that manages two lines of business: CountyCare, an Illinois Medicaid managed care plan, and MoreCare, a portfolio of Medicare Advantage plans including a Medicare Advantage Part D Plan, a Chronic Special Needs Plan (C-SNP) for members with HIV, an Institutional Special Needs Plan, and an Institutional Equivalent Special Needs Plan (IE-SNP).

In 2013, CCH launched CountyCare, as a demonstration project through the Centers for Medicare and Medicaid Services (CMS) 1115 Waiver granted to the state of Illinois Medicaid agency to enroll eligible

low income Cook County adults (ACA adults) into a Medicaid managed care program. In July 2014, CountyCare transitioned from the federal waiver authority and subsequently became a Medicaid managed care plan under the State's County Managed Care Community Network (2018 County MCCN) rules. This transition allowed CountyCare to expand beyond the newly eligible ACA adult population to include traditional Medicaid populations in Family Health Plans (FHP), Managed Long Term Services and Supports (MLTSS), Special Needs Children (SNC), and Integrated Care Program (ICP).

CountyCare receives a capitated per member (enrollee) per month rate for every enrollee in its health plan. Many of the enrollees we enrolled have long been our patients whose costs were previously part of our uncompensated care expenses. The ACA, through CountyCare, has significantly reduced CCH's reliance on local taxpayers. CountyCare currently has over 375,000 Enrollees and over 500 Medicare beneficiaries in Cook County.

The CountyCare provider network includes all CCH facilities, every Federally Qualified Health Center (FQHC) in Cook County, and more than 60 hospitals. For CountyCare, innovation remains a theme in its development and growth. With a consistent focus on establishing itself as a pioneering provider-led and governed health plan, CountyCare has:

- Provided a real-time, online notification system to its care coordinators and medical homes consisting of real-time information regarding enrollee discharge at over 25 hospitals in Cook County
- Launched high-risk care coordination for special needs children
- Integrated care coordination into provider practices
- Provided application assistance and linkage services for justice-involved enrollees

Recently, CCH also developed a strategy to provide the system's long-standing patients with continuity of care as they age into Medicare. In January 2020, CCH launched its Medicare Advantage Program, MoreCare, a partnership between CCH and Medical Home Network. At present, MoreCare has 500 members and offers the following products to Medicare-eligible residents of Cook County:

- MoreCare for You: A Medicare Advantage plan with prescription drug coverage (MAPD)
- MoreCare+: A chronic conditions special needs plan for residents diagnosed with HIV (C-SNP/HIV-SNP)
- MoreCare Home: An institutional special needs plan for residents living in long-term care facilities/nursing homes (I-SNP)
- MoreCare at Home: An institutional equivalent special needs plan for residents who are receiving or will need nursing facility or skill nursing facility level of care but reside at home or in the community (IE-SNP)

### 1.3 Medicare-Medicaid Alignment Initiative

The Illinois Medicare-Medicaid Alignment Initiative (MMAI) is a demonstration designed to improve health care for dually eligible beneficiaries in Illinois. Jointly administered by the Centers for Medicare & Medicaid Services (CMS) and the Illinois Department of Healthcare and Family Services (HFS), MMAI allows eligible beneficiaries in Illinois to receive their Medicare Parts A and B benefits, Medicare Part D benefits, and Medicaid benefits from a single Medicare-Medicaid Plan, also known as a MMAI plan.

- By integrating and coordinating individuals' health care benefits, the demonstration aims to:
- Improve quality and the beneficiary experience in accessing care;

- Promote person-centered care planning;
- Promote independence in the community;
- Rebalance long-term services and supports (LTSS) to strengthen and promote the community-based systems; and
- Eliminate cost shifting between Medicare and Medicaid

Building off the launch of the Medicare Advantage plan in January of 2020, CCH seeks to offer an MMAI plan for plan year beginning January 1, 2022. Offering an MMAI plan aligns with the organization's core mission to support vulnerable populations in the community, capture revenue for services provided domestically, maximize care by coordinating member's Medicare and Medicaid benefits, and continue to diversify membership beyond the core Medicaid population.

Also, as part of Impact 2023 – Strategic Plan 2020-2022, section 2.3 addresses the need to grow market share in non-traditional CCH populations, specifically to execute a Medicare Advantage strategy that includes the Medicare-Medicaid Alignment Initiative (MMAI).

- 14,000 patients or health plan members age into Medicare each year
- 1,500 current CountyCare members have Medicare FFS coverage that is currently uncoordinated with their Medicaid coverage

#### 1.4 CMS Interoperability and Patient Access Requirements

On March 9, 2020, the Center for Medicare and Medicaid Services (CMS) released final regulations – CMS Interoperability and Patient Access Final Rule or the CMS Final Rule (CMS-9115-F), to implement extensive requirements of health plans serving Medicaid, Medicare Advantage and the Federally Facilitated Exchanges. Beginning July 1, 2021, health plans will be required to share health information – at the direction and approval of enrolled members, with third-party applications in a more accessible and timely manner. The primary goals of the CMS Final Rule are to ensure patients have seamless access to their health information, and that information follows them on their healthcare journey.

CMS is mandating that health plans must have the following:

- An API that:
  - Allows members to access their own administrative and clinical data. At a minimum, the data classes and elements in the US Core Data for Interoperability document
    - Claims: 1 day after the encounter is received
    - Adjudicated claims: 1 day after adjudication
    - Clinical data: 1 day after received
  - Health Plan Provider directory
    - Contracted providers
    - Any changes must be posted within 30 days
  - Drug benefit data
    - Within 1 day of effective date for covered drug list
    - Formulary data
- Routine testing and monitoring
- Accessible API documentation
- Privacy/Security
  - Compliance with HL7 SMART App Launch Framework standards
- The ability to share data with third-party app vendors upon member consent

### 1.5 Membership Acquisition and Growth

CCH Health Plan Services has demonstrated a strong growth within the Medicaid Line of Business and the increase in membership has amplified during COVID-19. However, CCH HPS needs a dedicated strategy to retain existing members through auto-assignment and stronger interventions where needed and tap into existing network and channels within the health system and outside. Additionally, the growth needs to focus on expanding the Medicare Advantage and planned MMAI lines of business in 2021.

## 2. Purpose

Health Plan Services is seeking consulting services to support and assist in developing and implementing the following:

- Medicare-Medicaid Alignment Initiative product
- CMS Interoperability and Patient Access Final Rule requirements
- Membership acquisition and growth strategy

These consulting services will be utilized to design and operationalize a Project Management Office (PMO) and associated governance structure across multiple workstreams, support requirements and plan-related strategic planning activities, and coordinate and support project implementation.

### 2.1 Term of Services

The term of services shall be for thirty-six (36) months with two optional one (1) year extensions. The award agreement may be terminated by CCH for convenience following sixty (60) calendar days' prior written notice of termination.

### 2.2 Basis of Award

The basis of award shall be to a single proposer based on the highest rated proposal offering the best value to CCH that meets the specifications, terms, and conditions as assessed using the evaluation criteria set forth in section 7 of this RFP.

## 3. Schedule

CCH anticipates the following schedule:

Activity	Estimated Date
<b>RFP posted to the website</b>	12/17/2020
<b>Proposer Inquiry Deadline</b>	12/22/2020
<b>CCH response to Vendor Questions-Tentative</b>	12/29/2021
<b>Proposal Due Date</b>	1/06/2021
<b>Evaluation of RFP (Tentative)</b>	1/25/2021
<b>Notification of Decision (Tentative)</b>	2/8/2021

## 4. Scope of Services

### 4.1 Services Overview

HPS plans to select one vendor that offers a solution that offers consulting services to support and assist in developing and executing on a comprehensive plan for implementing the MMAI product, CMS Interoperability requirements, and membership acquisition and growth strategy.

**Health Plan Services is requesting proposals for interoperability that meet the following criteria.**

#### 4.2 Qualifications:

**Applicants must meet the following minimum qualifications:**

Minimum Qualifications		Response (Y/N)
1	Proposer has a minimum of three (3) years of experience providing consulting services for Medicaid and Medicare plans.	
2	Knowledge of and experience with Medicaid managed care	
3	Knowledge of and experience with implementing the Medicare-Medicaid Alignment Initiative product	
4	Knowledge of and experience with Medicare Part D	
5	Knowledge of and experience with health plan membership growth and retention strategies	
6	Knowledge of and experience with CMS Interoperability and Patient Access Final Rule requirements	

**Applicants should explicitly address the above qualifications in their response to this RFP. If the response is “No” to any of the above qualifications, please provide comment and additional detail in less than 3 pages single spaced.**

#### 4.3 Service Requirements and Responsibilities Matrix

Health Plan Services is seeking applicants that will provide the following services. Applicants should include and explicitly address the below Requirements and Responsibilities Matrix in their response to this RFP. If the response is “N” to any of the below required services, please provide comment and additional detail in less than 5 pages single spaced.

MMAI Implementation Service Requirements		Response code (Y/N)
<b>1</b>	<b>Program Management</b>	
1.1	Develop and manage a detailed project plan for specific workstreams within the Health Plan Services Project Management Office.	
1.2	Identify and manage critical path activities and key dependencies to meet milestones.	
1.3	Schedule and conduct appropriate meetings and working sessions to collect status on key items, come to decisions, and mitigate risks and issues.	
1.4	Provide program and project management expertise, to include advisory support as well as development of templates and tools (i.e. communications plans, project charters, risk registers, issue, action and decision trackers, and meeting related documentation).	
1.5	Provide regular status reports and manage issue and risk escalation and reporting process to executive sponsor(s).	
<b>2</b>	<b>Strategy Support</b>	
2.1	Assess the opportunity’s total addressable market, serviceable available market, and service obtainable market	
2.2	Assess the existing Medicare-Medicaid Alignment Initiative (MMAI) market’s plan sponsors, market dynamics, enrollment trends, and geographic markets	



2.3	Develop the business case for MMAI market entry	
2.4	Define requirements and prioritize requirements use cases	
2.5	Develop business plan, financial pro forma, staffing plan, and program budget	
2.6	Engage key stakeholders to consolidate input and facilitate key decisions	
2.7	Develop an enrollment and retention strategy	
<b>3</b>	<b>Implementation Support</b>	
3.1	Coordinate, communicate, and liaise with appropriate CCH leaders and additional stakeholders to facilitate discovery activities for successful execution.	
3.2	Support and coordinate key discovery activities required to close functional, operational, and technology gaps for successful execution.	
<b>4</b>	<b>Operations Support</b>	
4.1	Coordinate, communicate, and liaise with appropriate CCH leaders and additional stakeholders to facilitate discovery activities for successful MMAI launch.	
4.2	Support and coordinate key discovery activities required to close functional, operational, and technology gaps for successful execution.	
4.3	Develop plan for onboarding and training of MMAI staff	
4.4	Support Leadership with CMS and State readiness review	
4.5	Assess readiness for launch and post launch activities	
4.6	Develop policies and procedures according to contractual requirements	
	<b>Interoperability Service Requirements</b>	<b>Response code (Y/N)</b>
<b>5</b>	<b>Program Management</b>	
5.1	Develop and manage a detailed project plan for overarching PMO, and requisite workstreams.	
5.2	Identify and manage critical path activities and key dependencies to meet milestones.	
5.3	Schedule and conduct appropriate meetings and working sessions to collect status on key items, come to decisions, and work through issues.	
5.4	Provide program and project management expertise, to include advisory support as well as development of templates and tools (i.e. communications plans, project charters, risk registers, issue, action and decision trackers, and meeting related documentation).	
5.5	Provide regular status reports and manage issue and risk escalation and reporting process to executive sponsor(s).	
<b>6</b>	<b>Strategy Support</b>	
6.1	Assess the CMS and ONC rules and impact to CCH across all lines of business	
6.2	Develop and support CCH with developing a data integration model in alignment with Interoperability and Patient Access final rule requirements	
6.3	Inventory gaps within the current discovery findings	
6.4	Develop roadmap to close gaps	
6.5	Business case for use cases to optimize medical care	
6.6	Prioritization of gaps and timeline driven by regulatory needs and business case	

<b>7</b>	<b>Account Management</b>	
7.1	Coordinate, communicate, and liaise with appropriate CCH leaders and additional stakeholders to facilitate discovery and implementation activities for successful execution of the project.	
7.2	Support and coordinate key discovery activities required to close functional, operational, and technology gaps for successful execution.	
	<b>Membership Growth and Retention</b>	<b>Response code (Y/N)</b>
<b>8</b>	<b>Membership Growth</b>	
8.1	Develop high-level business case, cost, and timeline for Medicaid, Medicare Advantage and MMAI growth expansion	
8.2	Gather requirements and define solution options	
8.3	Outline execution options, explore strategic partnerships, and assess vendor capabilities	
8.4	Define program structure, project timing, and project plan	
8.5	Identify key execution risks and develop mitigation plan	
<b>9</b>	<b>Acquisition Strategy</b>	
9.1	Identify channels for CCH to leverage and support its retention and expansion strategy	
9.2	Develop models that can be leveraged to executed targeted activities among the members, providers and other stakeholders	
9.3	Outline execution options, explore strategic partnerships, and assess vendor capabilities	
9.4	Define program structure, project timing, and high-level project plan	
9.5	Identify key execution risks and develop mitigation plan	
<b>10</b>	<b>Acquisition Strategy</b>	
10.1	Develop key growth areas that contribute to revenue within existing and new lines of business	
10.2	Gather requirements and define solution options	
10.3	Outline execution options, explore strategic partnerships, and assess vendor capabilities	
10.4	Define program structure, project timing, and high-level project plan	
10.5	Identify key execution risks and develop mitigation plan	

### 5. Required Proposal Content

This RFP provides potential proposers with sufficient information to enable a proposer to prepare and submit proposals. CCH is supplying a base of information to ensure uniformity of responses. It must be noted, however, that guidelines are not intended to stifle the creativity of any proposer response.

This RFP also contains the instructions governing the submittal of a Proposal and the materials to be included therein, which must be met to be eligible for consideration. All Proposals must be complete as to the information requested in this RFP in order to be considered responsive and eligible for award. Proposers providing insufficient details will be deemed non-responsive. CCH expects all responses to reflect exceptional quality, reasonable cost and overall outstanding service.

**Any page of a proposal that proposer asserts to contain confidential proprietary information such as trade secrets or proprietary financial information shall be clearly marked "CONFIDENTIAL"**

**PROPRIETARY INFORMATION” at the top of the page. Additionally, the specific portions of the page that are asserted to contain confidential proprietary information must be noted as such. However, note that ONLY pages that are legitimately confidential should be marked Confidential. CCH will return proposals that mark all pages Confidential or are copyrighted. All proposals submitted to CCH are the property of CCH.**

**Further, the proposer is hereby warned that any part of its proposal or any other material marked as confidential, proprietary, or trade secret, can only be protected to the extent permitted by Illinois Statute.**

**Proposals shall not contain claims or statements to which the proposer is not prepared to commit contractually. The information contained in the proposal shall be organized as described in this section.**

#### 5.1 Executive Summary/Cover Letter

Please limit this to one page. The cover letter shall be signed by an authorized representative of the proposer. The letter shall indicate the proposer’s commitment to provide the services proposed at the price and schedule. Do not forget to sign your cover letter.

#### 5.2 Response to Scope of Services

Please insert your response to the Scope of Services, Section 5 in this section.

#### 5.3 Proposer’s Profile and Track Record

Proposer must include a ***description*** of the organization’s track record as follows:

Company Profile	Response
a. Legal Name	
b. Assumed Names if any	
c. Legal Structure (e.g. sole proprietor, partnership, corporation, joint venture)	
d. If a subsidiary, provide the same RFP about the Parent Company as required in this table format.	
e. Date and State where formed.	
f. Proposer's principals/officers including President, Chairman, Vice Presidents, Secretary, Chief Operating Officer, Chief Financial Officer, and related contact RFP.	
g. Point of contact for this RFP including contact information	
h. Proposer Business background and description of current operations	
i. Number of employees	
j. Number of years in business	
k. Total number of years providing the proposed services	
l. Is Proposer a licensed business to perform the work in scope? If so, please specify relevant certifications.	

m. Proposer's Federal Employee Identification Number (or Social Security Number, if a sole proprietorship)	
n. Is proposer authorized to conduct business in Illinois? Provide Registration Number issued by the Illinois Secretary of State, a copy of the Certificate of Good Standing, and include Cook County Assumed Business Name Certificate, if applicable.	

#### 5.4 Key Personnel

- 5.4.1 Provide a table with the following information:
  - 5.4.1.1 Proposed project resources
  - 5.4.1.2 Roles
  - 5.4.1.3 High level skills (project alignment)
  - 5.4.1.4 Proposed work location for each resource (onsite/offsite)
  - 5.4.1.5 Time commitment to the project if awarded
- 5.4.2 Describe internal standards, policies and procedures regarding hiring, training and professional development.
- 5.4.3 Provide copies of each associates current job description

The Chief Procurement Officer reserves the right to reject any key personnel proposed if it is determined not to be in CCH's best interest. The evaluation of proposals includes the qualifications of the personnel proposed; therefore, proposers must name key personnel as part of their response. Key Personnel must not be replaced during the project without the approval of the Chief Procurement Officer.

#### 5.5 MBE/WBE Participation

The Proposer may be comprised of one or more firms as to assure the overall success of the project. The proposer must present a team chart that clearly identifies each team member and specify their role in the project (this should be more detailed than the information provided in the executive summary). For each subcontractor, provide the name of the firm(s), brief company background, level of participation, MBE or WBE if applicable, the type of services each resource, from each firm, will provide. For each MBE/WBE certified firm proposed, provide the appropriate information in the Economic Disclosure Statement Forms (in a separate envelope).

The Chief Procurement Officer reserves the right to accept or reject any of the team members if in The Chief Procurement Officer's sole opinion replacement of the team member, based on skills and knowledge, is in the best interest of the County. Consistent with Cook County, Illinois Code of Ordinances (Article IV, Division 8, and Section 34-267), and CCH has established a goal that MBE/WBE firms retained as subcontractors receive a minimum 35% MBE/WBE of this procurement. **The Office of Contract Compliance has determined that the participation for this specific contract is 35% MBE/WBE participation.**

The Proposer shall make good faith efforts to utilize MBE/WBE certified firms as subcontractors. In the event that the Proposer does not meet the MBE/WBE participation goal stated by CCH for this procurement, the proposer must nonetheless demonstrate that it undertook good faith efforts to satisfy the participation goal. Evidence of such efforts may include, but shall not be limited to, documentation demonstrating that the proposer made attempts to identify, contact, and solicit viable MBE/WBE firms

for the services required, that certain MBE/WBE firms did not respond or declined to submit proposals for the work, or any other documentation that helps demonstrate good faith efforts. Failure by the proposer to provide the required documentation or otherwise demonstrate good faith efforts will be taken into consideration by CCH in its evaluation of the proposer's responsibility and responsiveness.

#### 5.6 Cost Proposal

Proposers must submit pricing RFP in a separate sealed envelope clearly marked with the RFP number and the label "Pricing RFP." Proposers are required to submit one (1) paper copy (original) and one (1) electronic copy emailed to the email addresses specified on the cover page).

The pricing information must include any supplemental options or schedules offered by the proposer. All pricing ***must include all assumptions*** to facilitate Analysis. Proposers should include elements or references to the pricing RFP **only in this section and separate the pricing RFP according to the Instructions above.**

CCH makes no guarantee that the services or products identified in this RFP will be required. The proposer must provide sufficient pricing details to permit CCH to understand the basis for the RFP.

CCH is neither obligated to purchase the full quantities proposed by the proposer, nor to enter into an agreement with any one proposer.

#### 5.7 Financial Status

- A. Provide the audited summary financial statements for the last two fiscal years. State whether the proposer or its parent company has ever filed for bankruptcy or any form of Reorganization under the Bankruptcy Code, and, if so, the date and case number of the filing.
- B. State whether the proposer or its parent company has ever received any sanctions or is currently under investigation by any regulatory or governmental body.

#### 5.8 Conflict of Interest

Provide information regarding any real or potential conflict of interest. Failure to address any potential conflict of interest upfront may be cause for rejection of the RFP.

***If no conflicts of interest are identified, simply state "[Company X] has no conflict of interest."***

#### 5.9 Contract

Sample Contract General Terms and Conditions are available in the Doing Business with CCH website. Execution of the Contract is not required at the time the qualifications are submitted. However, if the proposer disagrees with any Contract provisions, or is proposing alternate language, it shall include the language for consideration by submitting the proposed redlines on the sample Contract General Terms and Conditions document. CCH will not consider any exceptions or proposed alternate language to the Contract General Terms and Conditions if the proposer does not include these objections or alternate language with the proposal. CCH shall not be deemed to have accepted any requested exceptions by electing to engage a Proposer in negotiations of a possible Contract.

#### 5.10 Legal Actions

Provide a list of any pending litigation in which the proposer may experience significant financial settlement and include a brief description of the reason for legal action.

***If no Legal actions are identified, simply state "[Company X] has no pending legal actions in which our firm will experience any significant impact to this Contract."***

History of Legal Actions for the last 36 months:

Action	Date

#### 5.11 Confidentiality of Information

The Selected proposer may have access to confidential RFP, including Protected Health Information (PHI) to perform the functions, activities, or services for, or on behalf of, CCH as specified in this RFP. The Proposer must acknowledge that if awarded there is a high likelihood that the selected proposer may have access to PHI, in paper or electronic form, and thus, it shall sign a Business Associate Agreement with CCH. As a Business Associate, the selected proposer will agree to comply with all federal and state confidentiality and security laws and regulations, including HIPAA, HITECH, the Medicaid Confidentiality Regulations, as defined herein, and all other applicable rules and regulations. The proposer must commit to require all staff, including drivers, Attendants, and other personnel, and Subcontractors to complete HIPAA training upon hire, and no less frequently than annually thereafter. CCH reserves the right to review and accept the training program prior to implementation, or require the selected proposer to use HIPAA materials or training sessions supplied by CCH.

#### 5.12 Economic Disclosure Statement

Execute and submit the Economic Disclosure Statement ("EDS"). The EDS form can be found at <https://cookcountyhealth.org/about/doing-business-with-cook-county-health/>. The EDS must be submitted with the pricing proposal in a separate envelope.

#### 5.13 Addenda

Since all Addenda become a part of the proposal, all Addenda must be signed by an authorized proposer representative and returned with the proposal. Failure to sign and return any and all Addenda acknowledgements shall be grounds for rejection of the proposal. Addenda issued prior to the proposal due date shall be made available via Cook County Health website:

<http://www.cookcountyhealth.org/about-Cook County Health/doing-business-with-Cook County Health/>

### 6. Evaluation and Selection Process

An Evaluation Committee comprised of the CCH and County personnel will evaluate all responsive Proposals in accordance with the selection process detailed below.

#### 6.1 Proposal Assessment

The Evaluation Committee will review all Submittals to ascertain that they are responsive to all submission requirements.

##### 6.1.1 Proposal Evaluation

The RFP provides requirements and data, which will be used as a basis for a written presentation of qualifications of the firm(s) and proposed staff, project approach, systems and methodologies for delivery of the Project. CCH will evaluate the Proposals to establish a list of qualified Proposer for Shortlist.

### 6.1.2 Shortlist Proposer Presentation

The Evaluation Committee, at its option, may invite one or more proposers to make presentations and/or demonstrations. The Evaluation Committee may request that all or a shortlisted group of proposers engage in proactive pricing feedback, submit clarifications, schedule a site visit of their premises (as appropriate), provide additional references, respond to questions, or consider alternative approaches.

### 6.2 Right to Inspect

CCH reserves the right to inspect and investigate thoroughly the establishment, facilities, equipment, business reputation, and other qualification of the proposer and any proposed subcontractors and to reject any RFP regardless of price if it shall be administratively determined that in CCH's sole discretion the proposer is deficient in any of the essentials necessary to assure acceptable standards of performance. CCH reserves the right to continue this inspection procedure throughout the life of the Contract that may arise from this RFP.

### 6.3 Consideration for Contract

Any proposed contract including all negotiations shall be subject to review and approval of CCH management, CCH Legal and CCH's Board of System Board. Proposed Contracts are also subject to review by the Cook County Office of Contract Compliance.

Following finalization of Contract documents to the satisfaction of CCH executive management, CCH shall secure appropriate reviews and may approve the proposed Contract for execution in its sole discretion. The identity of the successful proposer shall be posted on the website.

## 7. Evaluation Criteria

### 7.1 Responsiveness of Proposal

The Proposal(s) will be reviewed for compliance with and adherence to all submittal requirements requested in this RFP. Proposal(s) which are incomplete and missing key components necessary to fully evaluate the RFP may, at the discretion of the Chief Procurement Officer or designee, be rejected from further consideration due to "Non-Responsiveness" and rated Non-Responsive.

Proposer must be compliant with all the submission requirements of the RFP. The evaluation committee will evaluate all responsive Proposal in accordance with the evaluation criteria detailed below.

#### 7.1.1 Proposal Criteria

Proposals will be reviewed and selected based on qualifications of the Proposer to successfully perform the Services for the County throughout the course of the contract as evidenced by the following criteria:

- 7.1.1.1 Ability to achieve the CCH's business goals, objectives, and Scope of Work described in this RFP, by providing a succinct and feasible description of the proposed implementation approach.
- 7.1.1.2 Qualifications and experience of the proposer to successfully perform and provide the services described in this RFP, as evidenced by the successful provision of similar services in similar environments and in compliance with all applicable laws.
- 7.1.1.3 Relevant Experience
- 7.1.1.4 Reasonableness of Overall Price

7.1.1.5 Price will be evaluated separately for overall reasonableness and competitiveness.

#### 7.1.2 Supplemental Criteria

In addition, the Evaluation Committee may review and consider the information and evidence Proposer's responsiveness to the following categories:

- 7.1.2.1 MWBE Utilization Plan (EDS forms);
- 7.1.2.2 Financial Status;
- 7.1.2.3 Conflict Interest;
- 7.1.2.4 Insurance Requirements;
- 7.1.2.5 Contract Terms and Conditions (objections and/or suggested alternate language);
- 7.1.2.6 Legal Actions;
- 7.1.2.7 Addenda acknowledgement (See Addenda Section)

#### 8. Instructions to Proposers

These instructions to proposers contain important RFP and should be reviewed carefully prior to submitting the Required RFP Content. Failure to adhere to the procedures set forth in these instructions, failure to provide positive acknowledgement that the proposers will provide all services and products or failure to provide acceptable alternatives to the specified requirements may lead to disqualification of the submitted RFP.

##### 8.1 Questions and Inquiries

Questions regarding this RFP will be submitted in writing to the contact(s) email listed on the cover page of this RFP no later than the date stated in the [Schedule](#).

Question must be submitted in the following format, **in MS Excel**, and the subject of the email should reference the RFP#, Title and Proposer's Name.

ID	Vendor Name	RFP Section	Question
1.			
2.			
3.			

Should any proposer have questions concerning conditions and specifications, or find discrepancies in or omissions in the specifications, or be in doubt as to their meaning, they should notify the Supply Chain Management Office via the email provided on the cover sheet no later than the date stated on the [Schedule](#) and obtain clarification prior to submitting a RFP. Such inquiries must reference the RFP due date and CCH RFP number.

##### 8.2 Number of Copies

Proposers are required to submit one (1) original hard copy, and one (1) electronic copy (emailed to the email addressed on the cover page) and no later than the time and date indicated in the RFP.

NOTE: One (1) paper copy of the pricing proposal and one (1) EDS copy must be submitted separate from the rest of the response.

Each submission must then be separated as follows:

1. One (1) technical hard copy - the original - excluding Pricing and EDS forms;
2. One (1) Pricing and EDS hard copies in a separate envelope;



3. One (1) complete electronic response package (including excel pricing file and EDS) emailed to the email addresses on the cover page. The technical response must be a single electronic file (do not submit a file per RFP section). The email must clearly indicate the RFP Number and Title.

Please see the RFP Receipt Acknowledgement form at the end of this file for the form required at delivery time.

#### 8.3 Format

**Hardcopies of the RFPs should be submitted in a separate envelope (or electronic file) except pricing which may be submitted in a separate envelope.** Material should be organized following the order of the Required RFP Content Section separated by **labeled tabs**. Expensive paper and bindings are discouraged since no materials will be returned. **Numbered titles and pages are required.**

CCH reserves the right to waive minor variances.

#### 8.4 Time for submission

RFP shall be submitted no later than the date and time indicated on the cover page of this RFP. **Late submittals will not be considered.**

#### 8.5 Packaging and Labeling

The outside wrapping/envelope shall clearly indicate the RFP title, proposer's Name, proposers address, and point of contact RFP. **The Price RFP and EDS shall be submitted in a separate sealed envelope.** The envelope shall clearly identify the content as "Price RFP". All other submission requirements shall be included with the Technical RFP.

#### 8.6 Timely delivery of RFP

The RFP(s) must be either delivered by hand or sent to CCH through U.S. Mail or other available courier services to the address shown on the cover sheet of this RFP. Include the RFP number on any package delivered or sent to CCH and on any correspondence related to the RFP. If using an express delivery service, the package must be delivered to the designated building and drop box. Packages delivered by express mail services to other locations might not be re-delivered in time to be considered. CCH assumes no responsibility for any RFP not so received.

#### 8.7 Availability of Documents

CCH publishes competitive bid, RFP, and other procurement notices, as well as award RFP, at [www.CookCountyheath.org](http://www.CookCountyheath.org) under the "Doing Business with CCH" tab. Proposers intending to respond to any posted solicitation are encouraged to visit the web site above to ensure that they have received a complete and current set of documents.

#### 8.8 Alteration/Modification of Original Documents

The proposer certifies that no alterations or modifications have been made to the original content of this Bid/RFP or other procurement documents (either text or graphics and whether transmitted electronically or hard copy in preparing this RFP). Any alternates or exceptions (whether to products, services, terms, conditions, or other procurement document subject matter) are apparent and clearly noted in the offered RFP. Proposer understands that failure to comply with this requirement may result in the RFP being disqualified and, if determined to be a deliberate attempt to misrepresent the RFP, may be considered as sufficient basis to suspend or debar the submitting party from consideration from future competitive procurement opportunities.

#### 8.9 Cost of Proposer Response

All costs and expenses in responding to this RFP shall be borne solely by the proposer regardless of whether the proposer's RFP is eliminated or whether CCH selects to cancel the RFP or declines to pursue a Contract for any reason. The cost of attending any presentation or demonstration is solely the proposer's responsibility.

#### 8.10 Proposer's Responsibility for Services Proposed

The proposer must thoroughly examine and read the entire RFP document. Failure of proposers fully to acquaint themselves with existing conditions or the amount of work involved will not be a basis for requesting extra compensation after the award of a Contract.

#### 8.11 RFP Interpretation

Interpretation of the wording of this document shall be the responsibility of CCH and that interpretation shall be final.

#### 8.12 Specifications and Special Conditions

The specifications in this document provide sufficient RFP for proposers to devise a plan and provide pricing. Minor variations from those specifications will be considered as long as proposers identify any instance in which their services specifications differ from those set forth in the RFP documents.

#### 8.13 Errors and Omissions

The proposer is expected to comply with the true intent of this RFP taken as a whole and shall not avail itself of any errors or omission to the detriment of the services or CCH. Should the proposer suspect any error, omission, or discrepancy in the specifications or instructions, the proposer shall immediately notify CCH in writing, and CCH will issue written corrections or clarifications. The proposer is responsible for the contents of its RFP and for satisfying the requirements set forth in the RFP. Proposer will not be allowed to benefit from errors in the document that could have been reasonably discovered by the proposer in the process of putting the RFP together.

#### 8.14 Proposal Material

The material submitted in response to the RFP becomes the property of CCH upon delivery to the Supply Chain Management Office and may become part of a Contract.

#### 8.15 Confidentiality and Response Cost and Ownership

All information submitted in response to this RFP shall be confidential until CCH has executed a Contract with the successful proposer or has terminated the RFP process and determined that it will not reissue the RFP in the near future. Following such actions, the contents of RFP submitted in response to this RFP may be disclosed in response to requests made pursuant to the provisions of the Illinois Freedom of Information Act ("FOIA"). If a proposer wishes to preserve the confidentiality of specific proprietary information set forth in its RFP, it must request that the RFP be withheld by specifically identifying such information as proprietary in its RFP. CCH shall have the right to determine whether it shall withhold RFP upon receipt of a FOIA request, and if it does so pursuant to a proposer request, the proposer requesting confidential treatment of the RFP shall bear the costs of asserting that there is a proper exemption justifying the withholding of such information as proprietary in any court proceeding which may result. This notwithstanding, proposer is on notice that the CCH is subject to the FOIA and that any documents submitted to the CCH by the proposer may be released pursuant to a request under the FOIA.

#### 8.16 Awards

CCH may, at its discretion evaluate all responsive proposals. CCH reserves the right to make the award on an all or partial basis or split the award to multiple proposers based on the highest rated Proposer and best value to CCH meeting the specifications, terms and conditions in accordance with the evaluation criteria set for in this RFP. If a split award impacts the outcome of the project it must be so stated in the proposal.

#### 8.17 CCH Rights

CCH reserves the right to reject any and all offers, to waive any informality in the offers and, unless otherwise specified by the proposer, to accept any item in the offer. CCH also reserves the right to accept or reject all or part of your RFP, in any combination that is in the best interest of CCH.

#### 8.18 Cancellation of RFP; Requests for New or Updated Information

CCH, in its sole discretion, may cancel the RFP at any time and may elect to reissue the RFP later. CCH may also issue an Addendum modifying the RFP and may request supplemental RFP or updated or new RFP.

## 9 Definitions

**Abuse** means (i) a manner of operation that results in excessive or unreasonable costs to the Federal or State health care programs, generally used in conjunction with Fraud; or (ii) the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain or mental anguish, generally used in conjunction with Neglect.

**“Appeal”** means a request for review of a decision made by proposer with respect to an Action, the following definitions shall apply to this RFP:

**“Addendum”** or **“Addenda”** shall refer to a one or more documents posted to the website by which modifies this Request for Proposal or provides additional information.

**“Board”** or **“Cook County Health”** shall refer to the Board of Directors of the Cook County Health or Cook County Health and Hospitals System.

**“Contract”** shall mean a properly executed Contract that has been negotiated between CCH and a proposer for some or all of the Deliverables described in this RFP.

**“Contractor(s)”** and **“Selected Proposer”** shall mean the individuals, businesses, or entities that have submitted a Proposal and have negotiated a Contract that has been properly executed on behalf of the Contractor and CCH.

**“County”** shall mean the County of Cook, Illinois, a body politic and corporate.

**“Deliverables”** shall refer to the items, supplies, equipment, or services that will be provided pursuant to any Contract entered into as a result of this RFP.

**“Fraud”** means knowing and willful deception, or a reckless disregard of the facts, with the intent to receive an unauthorized benefit.

**“General Conditions”** shall mean the terms and conditions posted to the website. **“Proposal”** shall mean the document(s) submitted by Proposer(s) in response to this RFP that constitute a Proposer's offer to enter into contract with CCH under terms consistent with this RFP, subject to the negotiation of a contract and approval by the Board.

**“Procurement Director”** or **“System SCM Director”** shall mean the System Director of Supply Chain Management who serves as chief procurement officer for the CCH.

**“Proposer(s)”** shall mean the individuals or business entities, if any, submitting a Proposal in response to this RFP.

**“Request for Proposals”** or **“RFP”** shall refer to this solicitation of proposals by CCH that may lead to the negotiation of a Contract

## 10 Appendix A – RFP Receipt Acknowledgement Form

### RFP Receipt Acknowledgement Form

This acknowledgement of receipt should be signed by a representative of Supply Chain Management located at Stroger Hospital, 1969 W. Ogden Avenue, lower level (LL) Room 250A, Chicago IL, 60612.

The outside wrapping shall clearly indicate the RFP Number and Title, Proposer's Name, Proposers Address, and Point of Contact RFP. **Prefill the first two lines prior to submission.**

Solicitation Number and Title:		
Vendor Name:		
Accepted By:		
Date:		
Time (if time machine is not available, hand write the time):	A.M	P.M

RFP shall be submitted no later than the date and time indicated on the cover page of the RFP. **Late submittals will not be considered.** Proposers must cut this sheet in two. SCM will time-stamp top and bottom sections. SCM will keep one section and the proposer will keep the other section.



### RFP Receipt Acknowledgement Form

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**Proposers must cut this sheet in two. SCM will time-stamp top and bottom sections. SCM will keep one section and the proposer will keep the other**

Time Stamp Here

Time Stamp Here