State of Nebraska
Department of Administrative Services

Response to RFP 6416 Z1
Contact Tracing Services
Technical Proposal

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CORPORATE OVERVIEW

BIDDER IDENTIFICATION AND INFORMATION

Applied Memetics LLC (AM) is submitting this proposal to the State of Nebraska to set-up and manage the Nebraska SARS-CoV-2/COVID-19 (COVID-19) Contact Tracing Call Center. AM is a health and research informatics firm that has been providing public health related, mission-critical solutions to federal, state, and local government clients for over eight years. We specialize in quickly and effectively developing and implementing public health programs, including setting up large-scale call center programs for contact tracing, surveillance, surveys, and more. AM also has a proven track record in the rapid recruitment, onboarding, and training of well-qualified, highly motivated workforce, which reflects the racial, ethnic, cultural, and linguistic make-up of the communities we serve.

The COVID-19 Contact Tracing Center proposed by AM will alleviate the burden of conducting COVID-19 contact tracing and monitoring from the Local Health Departments (LHD) and Nebraska Department of Health and Human Services (DHHS). It will also address the State's priorities and achieve its key performance measures:

1. Quickly hire and onboard a minimum of 25 qualified contact tracing staff who reside in the continental United States and can communicate clearly and knowledgably with individuals who have been diagnosed with COVID-19 or who have been potentially exposed to COVID-19. This includes staff who are bilingual in Spanish. For other language needs, we will use the State's telephonic interpretation Contractor.
2. Oversee and provide documented proof of all contact tracing staff completing the State-provided contact tracing and HIPAA trainings.
3. Rapidly scale up or down contact tracing staff to meet the needs of the State while maintaining quality.
4. Limit data collection only to collect aggregated, anonymized information for the purposes of meeting the Reporting Requirements and using only the reporting systems provided by the State.
5. Ensure that:
    a. All initial calls placed to a case or contact take place within eight hours of assignment from DHHS.
    b. At least five subsequent calls to an assigned case or contact are made, no less than 30 minutes after each prior call, if the staff is unable to reach the individual the first time.
    c. Immediate and timely response to any corrective actions requested by the State.

AM operates COVID-19 contact tracing programs with a focus on quality, integrity, and meeting the key performance goals of our clients. This means that we go beyond the standard "call center" model which is commonly being used many other firms. Unlike the standard "call center" model, our approach is designed to support the level of engagement and monitoring needed to keep people with COVID-19 safe while also notifying others of potential exposure and preventing additional transmission. AM has a greater depth of health knowledge at the corporate level and will bring a higher level of professionalism and more thorough understanding of DHHS needs.

AM's **"Enhanced Engagement and Communications" approach to fielding a Contact Tracing Call Center** is specifically designed for COVID-19 contact tracing and is grounded in public health strategies which emphasize the need for active engagement, advisement and support, and monitoring and tracking of cases and contacts. Special emphasis is placed on HIPAA requirements, confidentiality in all areas of operation, and ensuring the protection of individual health information. Our approach integrates evidence-based, best practices with lessons learned from COVID-19 related projects nationwide, to propose **a more robust, engaging, and effective program that understands the unique challenges and aspects of contact tracing work.**

We take contact tracing to the next level of client engagement - employing the latest in strategic communications, tracking and reporting technologies, and leveraging the expertise of our public health, clinical, and community development professionals to integrate evidence-based best practices and key lessons learned from the field.

In March 2020, recognizing the need for a well-trained contact tracing workforce in the face of the growing COVID-19 pandemic, AM launched a nationwide effort to proactively identify and screen experienced, motivated contact tracing candidates across the United States, focusing on communities that were disproportionately affected by COVID-19. To support this ongoing effort, our network includes a team of nine in-house recruiters who are dedicated solely to recruiting and vetting the most qualified candidates for our current and future COVID-19 control programs. In addition to contact tracing staff, we maintain a team of public health professionals with over 100+ combined years of experience in infectious and communicable disease control, to guide our programs. We also maintain a core team of Project Managers on staff who provide ongoing support to our current programs. As a result, we have been able to quickly launch programs, fully staffed, upon contract start. **We have already vetted more than 890 qualified individuals in the State of Nebraska who meet or exceed our requirements for Contact Tracer and supporting roles.** We have also identified over 5,000 additional qualified individuals from the states surrounding Nebraska. **AM is dedicated to meeting the needs of the State of Nebraska to strengthen and scale up its COVID-19 contact tracing activities, including providing contact tracing staff who are bilingual in Spanish.**

While we understand that we are required to use the State's approved contact tracer training program, we will be happy to share our online contact tracer and HIPAA training programs with DHHS leadership. The curriculum content and competencies taught are based on World Health Organization (WHO) and John Hopkins University (JHU) guidelines for COVID-19. The training is designed to provide contact tracing staff with advanced competencies in such areas as active listening, engaging clients, and building rapport and trust. The training also includes such topics as cultural humility, cultural competency, professional and ethical conduct, diversity and inclusion, and recognizing unconscious bias. Our training goes beyond the standard customer service approach and provides a more specialized workforce focused on completing the key mission and performance goals sought by the State of Nebraska.

The protection of personal and health-related information is crucial for effective contact tracing. We use Twilio Flex, a HIPAA- and HITECH-compliant call center platform. Our secure voice calling system enables our contact tracing staff to conduct phone interviews with cases and contacts, allowing for easy extraction of call logs and performance reports.

These different key components come together to create a well-planned and supported *system* of Contact Tracing that seamlessly incorporates staffing, technology, data privacy, and program management into one solution. We offer a turnkey solution which builds upon existing workflows,

systems, resources, and databases, as needed. Our overall goal is to strengthen our nation's public health infrastructure while minimizing the administrative, systems, and personnel burdens that contact tracing and other disease control measures place on local, county, and state health departments.

Additional Bidder Identification and Information is provided in **Table 1** below.

Proposal Requirements	
A. Bidder Information	
Full Name	AM LLC
Address of Headquarters	161 Fort Evans Rd., NE, Suite 250, Leesburg, VA 20176
Entity Organization	Limited Liability Corporation (LLC)
Incorporation State	Delaware
Year Organized	2011
Name Change	N/A
B. Financial Statements	Financial statements will be provided upon contract award.
Size	19 employees; US Small Business Administration Certified HUBZone Small Business; AM has a network of over 250 full time staff who can be engaged per project, of which 15% are administrators/managers, 15% are subject matter experts (SMEs), and 70% are involved in contact tracing work.
Longevity	AM is committed to supporting and enhancing the nation's public health infrastructure to effectively control, mitigate, and prevent the spread of COVID-19 and other communicable diseases in the future.
Client Base	Government agencies, counties, communities, and local health departments
Areas of Specialization and Expertise	Case investigation and contact tracing, community engagement, testing, vaccination distribution and quality assurance, and public health messaging/consulting
Banking Reference	Chain Bridge Bank, N.A. 1445A Laughlin Ave., McLean, VA 22101; (703) 748-2005
Judgements	None
C. Years in Business	9
D. Change of Ownership	None
E. Office Location	161 Fort Evans Rd., NE, Suite 250, Leesburg, VA 20176
F. Relationships with the State	None
G. Employee Relations with the State	None
H. Contracts Terminated	None

Table 1: Bidder Identification and Information

SUMMARY OF CORPORATE EXPERIENCE

AM meets all minimum and eligibility requirements as outlined in the RFP guidance. Our experience and capacity will provide the State of Nebraska with a complete and comprehensive COVID-19 contact tracing program that is in line with the needs of the State for staffing support, supervision, training, call center, technical assistance, and data analysis and reports.

AM has a strong track-record of success supporting and enhancing the work of federal, state, and local government agencies. Our staff have effectively engaged local residents and collected qualitative data that would be invaluable in informing the development of strategic communication campaigns and materials.

The projects provided in **Table 2** demonstrate our investigation and data acquisition capabilities, as well as our experience **setting up a call center operation and training carefully selected teams to conduct interviews by phone with highly reluctant individuals.**

Summary Matrix

	Project 1: International Audience Research Program	Project 2: Counter Threat Messaging Support Program	Project 3: Continuous Readiness in Information Security Support
Time Period of Project	12/2017 – Present	12/2016 – Present	06/2015 – 11/2019
Schedule Completion	Ongoing	Ongoing	11/2019
Actual Completion	Ongoing	Ongoing	11/2019
Scheduled Budget	$500,000	$1,400,000	$5,513,000
Actual Budget	$500,000	$1,400,000	$5,513,000
Bidder's Responsibilities	Provide research across six designated task areas	Provide field interviews of target audience	Material weakness remediation
Reference	Eulynn Shiu (202) 920-2243 EShiu@usagm.gov	Shawn Chenoweth (720) 988-9623 shawn.chenoweth@ngc.com	Karl Davis Not available karl.davis@asmr.com
Role	Prime	Subcontractor	Prime

Table 2: Summary Matrix

Narrative Project Descriptions

Project 1: International Audience Research Program

AM is currently a prime contractor on the US Agency for Global Media (USAGM)'s International Audience Research Program (IARP) Blanket Purchase Agreement and has been awarded work across all six designated task areas. Tasks under this project have included:

- **Omnibus Survey Qatar -** In 2018, AM was tasked to obtain estimates of the reach of select domestic and foreign media outlets and programming and opinion data from weekly users of

Alhurra TV and Radio Sawa from a probability sample of at least 1,000 adults (15+ years old) that was representative of at least 75% of the national population of Qatar. The interviews were conducted using computer-assisted telephone interviewing (CATI) methodology. AM identified and engaged a local research partner to support the data collection, data review, technical analysis, and presentation.

- **Omnibus Survey Kuwait -** In 2018, AM was tasked to obtain estimates of the reach of select domestic and foreign media outlets and programming and opinion data from weekly users of Alhurra TV and Radio Sawa from a probability sample of at least 1,000 adults (15+ years old) that was representative of at least 75% of the national population of Kuwait. The interviews were conducted using CATI methodology. AM identified and engaged a local research partner to support the data collection, data review, technical analysis, and presentation.
- **National Survey Iran -** In 2019 and 2020 (project is ongoing), the USAGM, Voice of America (VOA) and RFE/RL tasked AM to obtain estimates of media access and habits, the reach of domestic and foreign media outlets, detailed feedback from the audience of VOA and RFE/RL, and selected opinion questions, among a probability sample of at least 1,000 members of the adult population (15+ years old) of Iran. The interviews will be conducted using the CATI methodology. AM identified and engaged a capable implementing partner who is working with AM to plan, design, and conduct the project.
- **Targeted Expert Interviews, Iraq and Levant -** In 2019 and 2020, AM was tasked by the USAGM and the Middle East Broadcasting Networks (MBN) to obtain detailed information on radio programming in Iraq and across the Levant. The research analysis and findings will be used to support MBN's Radio Sawa's launch of new programs in Iraq, Syria, Jordan, Lebanon, and the Palestinian Territories. AM's report provided MBN with a deeper understanding of station content, information programming, use of music, and other features to complement news, scheduling, target audiences, broadcast locations, ownership, longevity, and integration of digital media. AM identified and recruited subject matter experts to interview in each of the target countries. AM's analysts conducted listening exercises of each of the profiled radio stations and produced a competitive review profiling selected prominent and innovative radio stations, provided an overview of their markets, and identified the features that make them appealing to audiences.

Project 2: Counter Threat Messaging Support Program for Defense Logistics Agency (DLA)

AM is currently a subcontractor to Northrop Grumman on the Department of Defense Counter Threat Messaging Support Program (CTMSP) IDIQ. AM has conducted Target Audience Analysis (TAA) research in Iraq, Syria, and Yemen in support of Military Information Support Operations (MISO) for the United States Central Command (CENTCOM) and the United States Special Operations Command (SOCOM).

- **Target Audience Analysis -** Between 2016 and 2017, AM conducted field interviews in Iraq and Syria as part of a TAA program. The objective was to gather primary data from denied and highly restricted areas under the control of violent extremist organizations or from within recently liberated areas. The gathered data was analyzed and used to produce Target Audience Analysis Worksheets (TAAWs) to inform MISO product and campaign planning and provide Measurement of Effect (MOE) feedback related to current campaigns. AM worked with a partner company (necessary to create separation between the customer and the field sources) to establish networks of interviewers and sources in the target locations. Supplemental to the gathering of field data, AM established a multi-lingual open-source intelligence team to conduct manual and

software- enabled searches of open sources and social media channels to identify emerging issues, influencers, or information that could support the field research and other MISO activities. The gathered primary and secondary data was analyzed and presented in narrative and graphic formats in regular reports used to develop TAAWs and information campaigns. The scope of work was conducted at the unclassified level.

- **In-Depth-Interviews (IDIs) -** In 2019, AM was tasked to conduct field research in Yemen. The scope was to conduct a series of focus groups (later changed to targeted IDIs) to obtain TAA data, test MISO products, messages, and concepts in support of CENTCOM and SOCCENT MISO campaign planning and MOE. AM worked with a local partner to develop the instrument and manage the collection, analysis, and presentation of the data.

Project 3: Continuous Readiness in Information Security Support (CRISP) for the Department of Veterans Affairs (VA)

The goal of the Continuous Readiness in Information Security Program (CRISP) Remediation Services Support (RSS) is to improve information technology (IT) security implementation across the cyber architecture and address security management, segregation of duties, access controls, contingency planning, and configuration management. The VA was seeking to eliminate or reduce VA material weakness across its facilities throughout the nation and improve how it manages information security by ensuring that users of VA systems have the appropriate level of access. The VA also wanted to establish clear, documented contingency plans for data breaches and provide accessible and tailored online information security training for all VA employees and contractors

Between 2015 and 2019, AM provided all of the above services via RSS, and its follow-on contracts of TSS (Transformation Support Services) and the CRISP Bridge contract. During that timeframe, a very high level of material weaknesses were resolved across the VA's enterprise. Specific tasks include:

- Participated in vulnerabilities scan and tests to ultimately document any identified risks and vulnerabilities following system upgrades and developed mitigation plan for each risk.
- Provided authentication / authorization research, analysis, and engineering recommendations for integration with VA identify and access management services.
- Developed system security plans, security guides, and security assessments in alignment with the VA requirements.
- Provided ATO artifacts in accordance with VA policy and Federal law.

Experience Managing a Successful Call Center

In March 2020, AM helped launch AM TRACE specifically to strengthen the ability of health departments to control and mitigate the spread of COVID-19 in their communities. **AM TRACE is currently conducting several COVID-19 Contact Tracing programs using our "Enhanced Engagement and Communications" approach to fielding a Contact Tracing Call Center.** For all our Centers, we have dedicated contact tracing staff who were hired and specially trained to perform the many tasks required of this position. Our contact tracing operators know to effectively engage, build rapport, and establish trust with cases and contacts in order to elicit the relevant information they need to collect. Our staff are also trained in dealing with contentious or resistant individuals as well as those who express dismay, high anxiety, and different levels of distress and trauma. Because the impact of becoming positive for COVID-19 affects everyone differently, depending on each individual's physical, financial, and mental situation, it is crucial

that contact training staff be specially trained and made aware of the many scenarios they may encounter.

The following projects highlight our experience providing contact tracing. Many of AM's leadership and staff have worked on these AM TRACE programs, providing AM with additional insight from their experience, knowledge, and lessons learned and will be available to support Nebraska. Throughout these projects, our staff have been able to effectively engage residents and collect qualitative data that would be invaluable in informing the development of strategic communication campaigns and materials.

COVID-19 Contact Tracing, Orange County, California

Since July 24, 2020, we have been conducting a comprehensive Case Investigation and Contact Tracing Program for the Orange County Health Care Agency (OCHCA). Orange County has a highly diverse, multilingual population of over 3.1M people. A large portion of the population is non-English speakers, requiring us to hire and train a contact tracing workforce bilingual in Spanish, Mandarin, Korean, Vietnamese, and eight other languages. The Project Manager works closely with the OCHCA leadership to plan and implement a comprehensive contact tracing program that addresses the unique and diverse populations and communities of the County. By the third month of the program, we had over 167 fully trained, full-time remote contact tracing staff actively working in the County. Since then, in response to the rising numbers of COVID-19 cases in the County, our contact tracing staff has been increased to 327.

Our performance in Orange County is measured by benchmarks determined by the Centers for Disease Control and Prevention (CDC) and the state's public health governing body, the California Department of Public Health (CDPH). We have a data analyst tracking our staff performance and can provide detailed reports. To date, our contact tracing staff have contacted more than 40,000 people in the County.

As a result of the successful efforts of our staff, our Contract Tracing contract has been extended and expanded to include COVID-19 Testing and Vaccine Quality Assurance.

Contact Monitoring and COVID-19 Control Program, Municipality of Anchorage, Alaska

Since the beginning of August 2020, we have been providing COVID-19 clinical coordination and contact monitoring for the Municipality of Anchorage, Alaska (MOA), including five contact monitors and one nurse coordinator. Contact monitoring staff provide their services seven days a week, from 8am-8pm, working in 8-hour shifts. Daily tasks performed by AM include inbound and outbound voice communication and outbound SMS. Monitors communicate with contacts as frequently as twice a day to inquire about COVID-19 symptoms. The team is led by a Nurse Coordinator, who corresponds regularly with MOA to keep them abreast of our activities and progress. The Nurse Coordinator also provides overall leadership and daily supervision to the team of contact monitors.

Case Monitoring, Contact Tracing, and Contact Monitoring, Carbon County, Montana

We are currently providing Carbon County with **digitization of COVID-19 tracking**, which includes: creating fillable PDF files of the CDC PUI intake form; creating a workflow to digitize simple case and contact chart notes; and developing workflows to link a central spread sheet that tracks all contacts and cases. Digitization provides organized and centralized notes and reporting and easier managed caseloads- easier to see what was done when, and allows staff to work remotely and securely

We are working with the local public health division to improve existing processes while maintaining the core functions essential for a local health jurisdiction. The public health team is relatively small due to the rural location and population of the county. Since the arrival of the COVID-19 pandemic, the Carbon County public health nurses have experienced staffing shortages related to quarantine and/or illness.

Due to the paper charting processes in place, workflows were drastically limited when staff members were forced to work remotely or were unexpectedly unavailable to work. These challenges have made digitization of disease investigation processes a high priority for the public health team in Carbon County.

We have been able to collaborate with the Public Health Manager to brainstorm possible solutions to incrementally shift from paper processes to digital processes. This stepwise approach allows time for staff to adjust to new processes and for information technology support to be secured. We have been able to identify technology platforms that are already available to Carbon County that can be more fully utilized to facilitate digitization of public health workflows. In addition, we have been able to outline a pathway for each step forward in the evolution from paper to digital and is available to support Carbon County's progress every step of the way.

PROPOSED PERSONNEL/MANAGEMENT APPROACH

AM's Personnel/Management Approach is structured to provide for the needed flexibility, scalability, and economy, as well as the clear structure, performance expectations, accountability, and careful oversight to ensure the COVID-19 Contact Tracing Program is performing at or above expectations. In addition, AM's personnel provide the **real understanding of public health principals and approaches** that is critical for a successful Contact Tracing program.

Our proposed Project Manager (PM), Olujimisola "Jimi" Adelani, MPH, will serve as the Primary Point of Contact to the Nebraska DHHS. The PM will also serve as the central management and coordinating entity for the project. Supporting the PM and serving as the back-up oversight entity will be a Deputy Project Manager (DPM), Consolata Mogeni, MPH, who will manage and oversee the day-to-day work of all our contact tracing staff. Contact tracers will be divided into small teams, composed of highly experienced and relatively new staff, to support better communication and support between staff.

The PM will serve as the primary communicator to the Nebraska DHHS, to maintain overall management of the project with a focus on performance, quality, and achievement of deliverables. The PM will leverage AM's organizational resources, such as the services of our epidemiologists and data analysts, to support ongoing assessment of the State's COVID-19 prevalence and incidence in order to more accurately plan for scaling up or down of contact tracing and case investigation staff.

The PM and DPM will work together oversee the work of the Contact Tracers and manage their scheduling and daily supervision of contact tracers. This includes the following:

1) Scheduling staff and ensuring coverage between the hours of 10:00am to 7:00pm (Central Time) Monday through Friday as well as weekend coverage (times to be determined by DHHS).
2) Monitoring team performance to ensure each staff members' work is of high quality and entry of program and call-related data is accurate, timely, and logical.
3) Supervision, support, and technical assistance to staff during all operational hours.

The PM will maintain ongoing communication with the State of Nebraska to provide daily progress reports on number of cases investigated and contact traced, coordinate scheduling of staff, and make adjustments to schedules and staffing numbers, in response to changing incidence rates. The PM and DPM will reinforce and ensure staff compliance with privacy and confidentiality laws and facilitate secure access to state systems.

Support for Rapid Program Implementation and Scale-up

As cases of COVID-19 continue to increase in many counties and states throughout the US, there is a pressing need for rapid start-up and scale-up of COVID-19 control programs. AM has responded to this urgency by establishing **Rapid Call Center Start-Up Protocols**, in which we leverage our internal team of public health, research, programming, and IT experts to perform key tasks needed to quickly launch a COVID-19 Contact Tracing Call Center Program. AM has the capacity, systems, and access to key resources.

Additionally, to support **rapid project start-up,** we use a project management tool, Trello™, to ensure that all aspects of our projects are implemented within the appropriate timelines. With the use of this tool, we can build unique action plans on top of our proven successful implementation process and manage progress holistically and granularly. We work with our clients to determine onboard cadence and capacity to ensure both parties are comfortable with the speed of onboarding and that the quality of work is not compromised in the process. AM works to find the balance between scalability and feasibility as to not compromise the integrity of the contact tracing process, referrals process, or charting standards within the client's customer relationship management (CRM) or other reporting systems.

During the first week of training, staff are provided with technology training to all platforms and tools utilized within the digital workspace. Staff also go through work from home training so that they are more productive and efficient within the home workspace. All staff members go through HIPAA training so that they can protect health information while working from a home location. The AM training paradigm is rounded out with input and collaboration from our funders and partners. **For the State of Nebraska, we will use the State-approved Contact Tracing and HIPAA training programs. As needed, AM can build out additional training modules for advanced training for contact tracing staff, if deemed necessary by the State of Nebraska.**

After their first week, AM staff receive ongoing quality assurance and quality improvement (QA/QI) evaluations through a highly specialized group of supervisors. Currently the QA/QI program audits include two daily chart reviews of every single staff member, correcting for any issues with charting resource referrals or any issues that may have come up within the initial interview for a case or contact.

By the end of week three, our contact tracing staff are able to handle an average of 11 unique cases daily, which includes new interviews and cases under monitoring.

Proposed Personnel

Key Personnel

Effective management and support are crucial to the efficient and effective operation of a COVID-19 call center. The ability of the PM and supervisory staff to be actively involved in daily operations and to provide clear and consistent management and communications with contact tracing staff directly translate to the program meeting its performance goals. Our PMs all have over a decade of experience managing disease control programs in the US and internationally. They are supported by a team of human resource, data, research, and epidemiology experts to ensure they have all the resources needed for rapid start-up, implementation of services, effective daily management and supervision of contact tracers, and the ability to track performance.

To support rapid start-up, we have identified a highly experienced and respected PM for the Center - former Air Force Public Health Officer, Olujimisola “Jimi” Adelani, MPH. Ms. Adelani will be supported by a DPM who has also managed several public health programs. Ms. Adelani will also be able to leverage the experience and expertise of all of AM's leadership and organizational resources, ensuring that she

has access to whatever is needed for successful Contact Tracing Center launch and performance. Our team of highly qualified Project Managers and support staff all have current, relevant experience managing COVID-19 call center programs.

Project Manager, Olujimisola "Jimi" Adelani, MPH

Ms. Adelani will serve as AM's Project Manager and the Point of Contact to Nebraska DHHS. She is an award-winning Air Force Public Health Officer with over ten years of combined service on Active Duty and currently in the Texas Air National Guard. In this capacity, she oversees the execution of variety of health programs to include, communicable disease prevention, occupational health, occupational safety compliance, environmental health, and food safety.

As the sole Public Health expert responsible for the health and wellness of 150,000 beneficiaries, Ms. Adelani developed and exercised plans to ensure personnel protection and mission continuation in the event of pandemics or disease outbreaks, resulting in a regional level award win. In 2012, while deployed to the UAE and Djibouti as a Medical Intelligence Officer, she consulted with local health authorities to create blue-prints for the establishment of emergency preparedness and response programs.

As a Communications Specialist with the Harris County Public Health Department, she was mobilized in response to the COVID-19 pandemic, as a Public Information Officer. In this role, she was responsible for ensuring that accurate data, relevant updates and timely recommendations from national, state, and local health experts were conveyed to residents, businesses, and health workers of the country's third most populous county.

Ms. Adelani's experience is in assessing health risks, identifying vulnerabilities, recommending strategies, and implementing policies for mitigation at the individual and population level. She has overhauled processes, programs, and teams to drive desired outcomes and created organization-wide benchmarks. Her unique skillset allows her to evaluate the readiness of any organization to safely function in today's environment.

Ms. Adelani is a certified Air Force International Health Specialist. She holds Bachelor's degree in Biology from Montclair State University and a Master's degree in Public Health with a focus on Epidemiology from Drexel University.

Deputy Project Manager, Consolata Mogeni, MPH

Ms. Mogeni is a mission-driven Public Health professional with more than five years of experience working with community-based organizations, epidemiology, research, and health policy. She aims to be the bridge between access to equitable health care and underserved populations. Ms. Mogeni was a Health and Wellness Program Director at the New York Administration for Children's Services where she implemented a novel health project to serve minorities in New York. She has hands-on field experience working with health systems in Kenya, Senegal, and Cuba. Ms. Mogeni has a Master's in Public Health from New York University with a certificate in Monitoring Learning and Preparedness and Disaster Management.

Additional Organizational Resources

In addition to our Project Staff, AM will provide the services of key leadership and organizational resources to ensure that the State of Nebraska COVID-19 Contact Tracing Center is fully staff and started on time and fully resourced to deliver all required services and deliverables from Day One.

Epidemiologist, Allison Seidel, MPH

Ms. Seidel has nearly ten years of experience in the healthcare industry. Prior to joining our team, she was a COVID-19 team lead for case investigations and contact tracing in the City and County of Denver. She managed a 50-person task force of supervisors, data leads, and interviewers; liaised relationships between local public health and state public health; developed dashboards of metrics; and performed analyses for members of executive leadership and the mayor. As a Public Health Director with the Air Force, she led 21 personnel, managed 14 programs, and implemented policies and provided medical intelligence in support of regional and local units, and 150,000 base beneficiaries.

Director of Knowledge Management, Sarah David, BSN, RN

Ms. David delivers program development, workforce training, and clinical expertise in our COVID-19 contact tracing call center program. She brings over 14 years of community health nursing experience to help maintain clinical quality of our programs and ensure that all our activities are in line with county, state and federal healthcare requirements. Ms. David led one of the first COVID-19 contact tracing programs in Anne Arundel County in Maryland. She has hands-on experience working with local health departments providing disease surveillance, outbreak response, program supervision, and direct patient care in public health clinics. She has trained, oriented, and developed continuing education programs for clinical and nonclinical staff in various settings. Through her experience as a faith community nurse, David has facilitated development of health ministry programs to strengthen accessibility to services and improve continuity of care within the region. Ms. David is a Registered Nurse with a Bachelor of Science in Nursing from The Johns Hopkins University School of Nursing and a Bachelor of Science in Marketing Management from Virginia Tech.

Manager, Data and Analytics Programs, Carla Kent, BS

Ms. Kent is our Lead Data Analyst. She has more than ten years of statistical modeling, analysis and forecasting experience, working with clients of all sizes, from small associations and pharmaceutical companies to multi-national, Fortune 500 corporations. She holds a Bachelor of Science in Applied Mathematics from North Carolina State University. Prior to joining our team, she served as the Advanced Analytics Officer for a consulting firm and while there, at the start of the pandemic in the US, used data collected from previous economic downturns to build predictive models for clients to determine the long-term growth and business stability impact of the pandemic.

Ms. Kent has used these same analysis and modeling principals to determine the efficacy of current efforts to combat the spread of COVID-19, and to help our clients with their future budgetary and programming plans. Her team's thorough analysis quickly determines the success of each implemented program and highlights areas where additional measures can be applied to each effort to increase that success.

Resumes

Resumes are provided as an Appendix.

TECHNICAL APPROACH

PROJECT UNDERSTANDING

AM understands that the State of Nebraska seeks one or more qualified vendors to provide COVID-19 Contact Tracing Call Center services to help stem the increasing rate of infection throughout the populace.

AM will leverage our demonstrated capacity to support US government agencies in accomplishing mission-critical programs as well as the in-depth experience of our leadership, subject matter experts, and project staff in setting up, launching, and scaling up COVID-19 Contact Tracing programs. Drawing from the expertise of our public health subject matter experts, we will work closely with the State and DHHS to implement a comprehensive, well-managed COVID-19 Contact Tracing Call Center that will help accomplish the goal of controlling the spread of COVID-19 in communities throughout the state. Key benefits of working with AM are provided in **Table 3**.

Vendor Requirements	Benefits of Working with AM
Quickly set up and launch a statewide COVID-19 Contact Tracing Call Center	AM has successfully set up and launched three COVID-19 Contact Tracing Centers in that past eight months. **We have developed an efficient set of protocols for Rapid Call Center Start-Up, which activates our organizational resources to ensure that staff hiring, systems set-up, and all other components of the Center take place concurrently, for maximum efficiency and effectiveness.** Throughout the process, the AM Project Manager is in constant communication with the funder to ensure that all requirements are being met, with a focus on achievement of performance measures.
Hiring residents of the US, with a focus on recruiting specifically in the State of Nebraska to support local hiring	We have a dedicated recruiting department. We will not only find people with the right qualifications, skills, and abilities, but we will find them locally and support them. We have already identified over 890 well-qualified individuals in our national staffing database.
Provide 25 qualified individuals to complete the State's training and begin working as Contact Tracers within two weeks of contract start	AM has the capacity to hire, onboard, and train up to 200 staff in a week. From our database of over 32,000 qualified candidates, we have already identified and vetted over 890 individuals from the State of Nebraska who could be quickly hired and onboarded for this program.
Provide 200-400 or more back-up staff to support rapid scale of up Contact Tracing operations	AM is experienced in responding to COVID-19 surges and outbreaks. We can quickly scale up our contact tracing staff by several hundred in a matter of weeks.
Provide active, daily supervision and management of Contact Tracing staff, including ongoing quality assurance	AM will provide staff who can work multiple shifts and work overtime when needed. We recognize that people have different jobs and lifestyles that can make the best time to reach them fall outside of normal business hours. We will interact with them on their schedules.

Vendor Requirements	Benefits of Working with AM
Capacity to help meet project deliverables	AM will ensure compliance with the State, particularly with regard to training and supervision of staff, scheduling to ensure coverage during the week and weekends, collection and reporting of case/contact information, availability of Spanish-speaking contact tracing staff, and communication and reports to DHHS.
Consistent achievement of Key Performance Measures	Protocols and procedures for contact tracing work will be established to ensure that: 1. All initial calls placed to a case or contact take place within 8 hours of assignment from DHHS. 2. At least five subsequent calls to an assigned case or contact are made, no less than 30 minutes after each prior call, if the staff is unable to reach the individual the first time.

Table 3: Benefits of Working with AM

APPROACH TO ACHIEVING PROJECT REQUIREMENTS

AM will work closely with DHHS and ensure that all the State's priorities and requirements for contact tracing are met.

Task 1. Establish the Nebraska COVID-19 Contact Tracing Call Center to conduct COVID-19 outbound contact tracing and monitoring of COVID-19 cases and contacts throughout the State of Nebraska. Below are key steps required for the quick and successful set-up and launching of the COVID-19 Contact Tracing Center.

- **Stakeholder Meeting -** AM will meet with DHHS leadership to determine high level and granular needs. Based on this conversation, AM will a customized implementation plan. The initial stakeholder meeting will kick off finalization of AM recruitment, technology teams, project management, etc.
- **Staffing Profiles -** Staffing profiles are used to determine the staffing needs in total quantity as well as technical and soft skill profiles. Through our robust database, staffing partnerships, and network, we can provide the appropriate staff based on the need of the health authority. Not all contact tracers are required to do the same things and because of that AM's goal is to provide employees as specified by the health department.
- **Determining Cadence -** AM wants to move at the speed of DHHS. Determining the speed at which DHHS is comfortable and will be successful is extremely important to the long-term success of the project.
- **Determining Overall Needs -** AM has developed a list of questions that are designed to appropriately vet the needs of DHHS for COVID-19 programming. The PM and our Director of Knowledge Management will meet with the DHHS authorities to review the questions in the survey to ensure all aspects of programming are covered for AM to best support DHHS.
- **Technologies Meeting -** The PM will make appropriate connections with DHHS to set up the appropriate technologies. The goal is to put the majority of the technological lift onto AM and

remove the additional burden of IT set up from the DHHS. In these meetings AM will determine needs of:

- CRM - how to either implement technologies or connect AM employees to the current system in place
- Telephony services
- Digital Compliance
- Data Security protocols

Task 2. Establish Call Center Management and Operations Team.

- **Establishing Standard Operating Procedure (SOP) -** AM and DHHS will establish main points of contact to meet and determine the creation of SOP for all staff connected to the project. This will include charting standards, phone standards, workflows, schedules, etc. This group will be a representative from DHHS and AM project management team.
- We will hold work through meetings to transition workflows and scope of services from DHHS or current vendors to AM. An agreed upon cadence will determine the timeline for transition to ensure that quality and integrity of current programs is upheld.
- **Assessment -** Our PM, supported by AM leadership, will assess the current workflows for gaps in communication, operations, execution, logistics, etc., through a continuous improvements lens and begin to make changes based on the gap assessment.
  - AM staff will continue to run gap assessment or other continuous improvement assessments to the program through the length of the contract.
  - Through our continuous improvement approach, AM works towards operational excellence and works in a collaborative manner to ensure that buy-in and change management are never barriers to success.

Task 3. Staff Hiring, Onboarding, and Training.

- AM will work closely and coordinate appropriately with the Nebraska DHHS Health Authority to implement DHHS policies and practices that support staff onboarding, adherence to DHHS system and workflow protocols, and quality assurance efforts.
- Rapid hiring and onboarding of qualified staff will commence. Staff must reside in the US, preferably in the State of Nebraska. Approximately 10-20% of staff should be bilingual in Spanish and other non-English languages spoken in the state.
- Contact tracing staff will be scheduled to provide coverage throughout operating hours.

Approach to Hiring and Onboarding Contact Tracing Staff

AM has successfully hired, onboarded, and managed hundreds of staff for contact tracing and call center programs as well as our corporate operations and infrastructure. We maintain a diverse core team of experts, data analysts, IT specialists, public health professionals, program managers, and human resource professionals. We can quickly onboard hundreds of contact tracers within a week of contract start and get them set up to begin work immediately for the State of Nebraska.

Interviewing and Assessing Candidates for Relevant Experience and Skills

Our candidate interview process is structured to ensure that we are consistently and fairly evaluating every applicant against the same criteria. This includes:

- Ask questions to gauge candidate competency with communication, managing difficult conversations, teamwork, and responding to a rapidly changing environment.
- Screen candidates to ensure that they are experienced with remote work or have the demonstrated technological acumen to do so.
- Require all candidates to pass a background check and drug test before hire. Our project staff will coordinate with DHHS to ensure that these requirements are met.

Assessing Candidate Communication Capabilities

Applicants complete several interview steps designed to assess their communication capabilities – an initial screening interview, a more in-depth interview, and a third interview is conducted to make final assessments and decisions on the candidate's capabilities and appropriateness for different positions. This not only ensures that candidates have good language fluency but also tests their ability to use technology to communicate with us and ultimately with community members.

Our full interview and assessment process will ensure that candidates have the specific capabilities needed to perform contact tracing and case investigation services. These capabilities include:

- A clear understanding of case and contact confidentiality.
- Excellent interpersonal and interviewing skills to build and maintain trust with cases and contacts.
- Comprehension and ability to articulate principles of exposure, infection, and infectious periods.
- Manage case and contact queues, charting and referrals autonomously.

Task 4. Perform Case Investigation, Contact Tracing, and Monitoring Duties

- Contact tracing staff will complete the training provided by the State.
- Schedule staff to ensure optimum coverage during operating hours.
- Establish streamlined system for recording contact tracing activities and data.

Project Management and Scheduling of Staff

The PM and DPM will work together to oversee the work of the contact tracing staff and manage their scheduling and daily supervision. This includes the following:

- Schedule staff and ensure coverage seven days a week between the hours of 10:00AM and 7:00pm (Central Time).
- Monitor team performance to ensure each staff members' work is of high quality and entry of program and call-related data is accurate, timely, and logical.
- Supervise, support, and provide technical assistance to staff during all operational hours.

The PM will maintain ongoing communication with DHHS to provide daily progress reports on the number of cases investigated, contacts traced, coordinate scheduling of staff, and adjust schedules and staffing numbers, in response to changing incidence rates. The PM and DPM will reinforce and ensure staff compliance with privacy and confidentiality laws and facilitate secure access to state systems.

Task 5. Record Case Investigation and Contact Tracing Data in the State's reporting system.

- The PM will work with AM's IT staff to review the State's disease surveillance system and set up Center systems for proper data reporting.
- Case investigation reports and data on all interactions with cases/contacts will be entered into the Disease Surveillance System.
- Daily reports will be reviewed by the PM or DPM and any issues will be highlighted and addressed immediately.
- Contact tracing staff will complete daily reports on cases/contacts completed

OVERVIEW OF CONTACT TRACING WORK

Investigating Disease

Contact Tracing staff will respond quickly and complete case and contact interviews. Interviews will be conducted by phone, and follow-up daily monitoring will be performed primarily using text and emails. During interviews, staff will collect information on demographics, whereabouts (especially workplaces and public locations), health status and/or symptoms, and names and contact information for close contacts of the individuals who test positive.

Anyone testing positive for COVID-19 will be advised on the proper isolation timeline. Contact tracing staff member will assess the levels of risk for people they have been in contact with and advise them about appropriate quarantining activities and timeline. The contact tracing staff member will contact the individual who tests positive for COVID-19 throughout their isolation period to assure that symptoms do not develop (if initially asymptomatic), symptoms do not progress, and they are remaining in isolation. All information collected and conversations held with individuals who test positive for COVID-19 will be entered into the State's reporting system. Working in partnership with the State and DHHS, AM will ensure that our staff are trained in the reporting system and learn to efficiently navigate it and access multiple screens and tabs. AM will regularly update other DHHS team members with critical information gained from interviews that may assist with case coordination or surveillance.

Case/Contact Notification and Follow-up

Contact Tracing staff will follow HIPAA guidelines to confidentially notify persons who have been named as close contacts to individuals who test positive for COVID-19 that they are a close contact to an individual who tests positive for COVID-19. The initial call will be made within 8 hours of receiving the assignment from DHHS.

The successful collection of key information pertaining to demographics, symptoms, whereabouts (especially workplaces and public locations), or risks to others within the household or public, will be crucial for effective identification and engagement of contacts. Contacts, once identified, will be advised to self-quarantine for 14 days from the approximate date of contact. Contact tracing staff will create appropriate profiles in the reporting system for any person who is named a close contact of an individual who tests positive for COVID-19. We will document any information collected and conversations held with persons named as close contacts in the State of Nebraska. Once identified, the contact tracing staff member will contact the person named as a close contact to an individual who tests

positive for COVID-19 throughout their quarantine period to ensure that symptoms do not develop, and they are remaining in quarantine. We will update other DHHS team members with critical information gained from discussions that may assist with case coordination or surveillance.

Contact Monitoring

Outreach, engagement, and monitoring of cases and contacts will be done through a variety of methods approved by DHHS. Monitoring activities may include checking on an individual's health status and ensuring that the individual remains in isolation. We will document each contact with an individual who tests positive for COVID-19 and enter complete information in the State's reporting system, as appropriate.

Oversight of Contact Tracing Activities

Contact tracing calls will only be made by **full and part-time employees who have completed all required trainings**, including the State-approved Contact Tracing and HIPAA and privacy trainings. We will maintain documentation of each employee's completion of required trainings and provide this documented proof to the DHHS Contract Manager, upon request.

All the people we hire for contact tracing programs **reside in the US.** In fact, AM makes every effort to hire our contact tracing workforce from the local communities being served. Local hires have been found to be better contact tracing staff because they have a higher chance of speaking the languages spoken in the targeted communities and also a stronger knowledge of local cultures, behaviors, and attitudes. We have already identified and vetted over 890 individuals in the State of Nebraska.

Scheduling and Coverage

Either the PM or DPM will be available during all days and hours of operation of the Center. They will oversee scheduling and make sure that enough contact tracing staff are available to provide coverage during the hours of 10:00am through 7:00pm Central Time, Monday through Friday. AM will also arrange for coverage on the weekends, as requested by the State. Additionally, contact tracing staff may be required to make calls outside of these listed work hours, in response to a request from a contacted individual. These are all covered by our standard operating procedures and are tracked and included as part of our quality assurance monitoring.

AM is committed to strengthening the nation's public health infrastructure. Information and data received or created by AM in providing services under this contract shall only be entered into the State's reporting system. AM will ensure that no information and data gathered in providing services under this Contract is entered, stored, or maintained other than in the System. Additionally, such information and data will only be used for the purposes identified in this RFP.

Equipping Staff

Contact tracing staff are required to have their own computer equipment, high speed internet connection, and headset. On occasion, a health department or other health agency will require specific computer and/or specific applications be used. In this case, AM may sometimes provide a computer for everyone in that project. For the Nebraska COVID-19 Contact Tracing Center, contact tracers will be required to own the required computer and other equipment and technologies.

Reach-Back Cell

AM's Reach-back Cell team assists contact tracing operations when traditional interviews are delayed due to unknown details or inaccurate or incomplete information. Using "skip-tracing" technology and data analysis, the Reach-back Cell enables the team to continue contact tracing investigations when traditional interviews are delayed due to unknown contact details or inaccurate/incomplete information. For example, if an index patient is unable to provide basic information for recent contacts, thus delaying the contact tracing process, the Reach-back Cell will provide contact tracing teams with near-immediate phone and contact information for household members, neighbors, relatives, and associates. Additionally, the Reach-back Cell can confirm or provide relevant data the index patient either cannot recall or that is not readily available to tracing teams. To enable these investigations, AM utilizes Thomson Reuters CLEAR®, a powerful AI tool that uses billions of data points and leverages cutting-edge public records technology to bring all key content together in a customizable dashboard. This data, which may be derived from credit bureaus, utility companies, and cell phone carriers, lets our Reach-back Cell locate hard-to-find information that might be vital to the contact tracing process. AM's deployed teams will have direct access to the Reach-back Cell to support contact tracing investigations. As soon as teams are unable to conduct an interview, have missing key information, or require support, a ticket can be created and filtered to the Cell for resolution. The Cell will resolve tickets 24x7 in support of tracing teams. The Cell can also scale up to meet tracing support needs. **Leveraging our Reach-back Cell investigation team, AM can provide scalable locator solutions to rapidly identify and locate people in support of this prevention and preparedness response.**

Technological Tools and Resources

IT Architecture

Twilio, our proposed digital voice technology, is a web-based platform that uses a web-based auto-dialer pad. Therefore, users will not need to download any plug-ins, software, or access a VPN to use the platform; users will not implement any hardware or software based on our technology selections. Twilio Flex is designed to augment the Twilio technology to stand up call centers for large groups of users. As a response to the COVID-19 pandemic, Twilio Flex created COVID-19 workflows and software to be shared with partners in the fight to mitigate the spread of the disease.

Twilio Flex was developed in tandem with Salesforce to facilitate contact tracing operations. Twilio is a HIPAA and HITECH-compliant platform that can be connected to any open API to pull health data. Twilio has provided step-by-step instructions to all clients to seamlessly integrate their contact tracing platform with any CRM but has been specifically designed to partner with Salesforce-based CRMs and data management tools.

Implementation and beyond will be overseen by AM's health informatics specialists dedicated to quality assurance of the call-center rollout and ongoing utilization. Protection of health care data is paramount when establishing a secure connection between the call center technology and the State health data management system.

AM will work with the DHHS to customize optimal workflows for inbound and outbound calls, and SMS preferences. These functions can be directly coded into Twilio using Java programming languages with built in HTML plugins to customize the program, which can be deployed on top of the State's data management system.

Cybersecurity

AM is a mature and established health IT contractor for the Federal Government and has an established Cybersecurity Risk Mitigation Plan that establishes auditing methods, adopted by all our employees. All

AM equipment, including laptop computers and mobile devices, must have controls to prohibit unauthorized access to data. Our teams are trained on HIPAA, PHI, and PII, and provided with additional training to address working from home with access to PHI.

AM has made data protection and security the core of what we do. Our Director of Compliance brings a background and culture of compliance and risk management to our privacy efforts, ensuring that all our software, web, and cloud-based solutions meet the highest possible standards and regulations to protect sensitive data. AM carefully monitors data compliance and proactively addresses any gaps in our system, rather than reactively fixing any breaches.

Successful contact tracing requires the ability to ensure data privacy and regulatory compliance while simultaneously deploying technology in the field via a large, unstructured workforce. The risk to states and Counties for exposure of PII is well recognized, and must be mitigated through established, proven processes.

AM employs a Director of Security and Informatics, whose job is to ensure compliance and regularly vet any third-party technology partnership's data integrity standards. We hold our partners to the highest industry standards to ensure PHI, PII, and other sensitive information is store, shared, and communicated in the most secure ways possible. Protection of sensitive information and data integrity are centric to the values of AM. We understand the value of security, integrity, and the all-around climate and concern for protection of personal data, and our approach reflects our commitment to safeguarding user data.

Data Integrity, Compliance, and Privacy

AM upholds the highest standards of privacy protection and data security that have been outlined by the CDC. The proper safeguarding of PII and PHI is incorporated into all operational processes and is at the core of our corporate culture. All our programming, data sharing, and software is HIPAA and HITECH compliant, and works in partnership with covered entities such as local health departments and other healthcare agencies.

We employ best practices related to privacy and the responsible management of PII and PHI using guidance from the National Institute of Standards and Technology (NIST). Expectations for the handling of PII and PHI are clearly outlined to all employees including the use of "minimum necessary" provisions, data encryption practices, and importance of privacy and confidentiality when working with sensitive information.

AM will employ a dedicated health data analyst to provide guidance and direction on data system structure and integrity of data inputs and outputs. They will work closely with the PM to ensure data is provided to the state in a way that will help make informed decisions and changes to ongoing contact tracing efforts.

All AM computing devices, including portable equipment such as laptop computers and mobile devices, must have access controls in place to prohibit unauthorized access to the data on the devices. We have training that covers HIPAA, PHI, PII as well as a "Protecting Self, Company, and Data" training that addresses the concerns of having PHI accessible at home on a State-provided computer.

AM Cybersecurity and Employees:

- Our pre-board process for AM staff ensures that we only employ candidates that have been vetted through a rigorous background check. PHI is only trusted to staff that have been carefully

selected to work in roles as contact tracing staff. Training programs have been developed to ensure we cover basic HIPAA requirements, and practical applications of these requirements.

- Only authorized users may use a wireless device to connect to AM and Customer networks, only with the authorization from their manager and a representative of IT, who will ensure adequate and secure technology infrastructure and internet access. We require staff to provide proof of internet bandwidth as part of the onboarding process (must demonstrate 6 Mbps download and 3 Mbps upload speeds).
- All users of AM IT resources must follow AM's Password Policy including formats, frequency of changing the password, and safeguarding the confidentiality of the password.
- All AM computing devices, including portable equipment such as laptop computers and mobile devices, must have access controls in place to prohibit unauthorized access to the data on the devices. AM provides specific training that addresses the concerns of having PHI accessible at home on a State-provided computer.

LANGUAGE CAPABILITIES

AM can provide contact tracing staff capable of communicating in multiple languages. For our Contact Tracing Program in Orange County in Southern California, over one third of our 367 contact tracing staff are Spanish-speakers. We have been remarkably successful in hiring staff who are bilingual in Spanish and other key languages spoken in various communities, such as Mandarin, Cantonese, Vietnamese, Tagalog, French, Italian, Russian, Korean, Arabic, Urdu, and many more. AM makes a strong concerted effort to work with LHDs and local community partners to recruit and hire from the communities targeted for services, particularly communities of color, immigrant and non-English speaking communities, and historically marginalized groups. This ensures that our staff are able to communicate with all community members in a way that is relevant and removes barriers to trust and communication – features that are at risk of being lost when using third-party translation services.

Our approach to ensuring the availability of staff who can speak different languages is as follows:

- AM recruits from specific communities to address vital language skills and obtain and employ cultural insights. Our recruiting plan ensures contact tracing staff come directly from the communities being served. We are ready and eager to partner with existing community groups and organizations to identify, recruit, and hire the most qualified staff that will reflect the values of each community and are capable of communicating in each community's language.
- AM will provide native language speakers to address non-English speaking populations to provide a seamless continuity of care, effectively removing language barriers where possible.
- AM posts job descriptions and requirements in those native languages to vet language proficiency.
- Our iCIMS Applicant Tracking Software (ATS) lets us tailor our teams to address language and cultural considerations. AM retains dedicated Spanish-language recruiters for this purpose, and routinely posts hard-to-fill job requirements in target languages.

EXPERIENCE HANDLING PROTECTED HEALTH INFORMATION

The protection of personal identifying information, particularly health information, is important and AM has made this a priority in our work. We fully understand and are in compliance with the Health

Insurance Portability and Accountability Act (HIPAA) and other laws protecting the health information of patients. Training on HIPAA and protected information is an important part of our virtual Contact Tracing training program and all staff, from contact tracing staff to data analysts, to Project Managers, and beyond, are required to complete our HIPAA training in addition to any other training they receive from another entity. We also provide ongoing supervision to ensure that our Contact Tracing staff remain in compliance with the laws.

As a business associate under HIPAA, AM has not had any security incidents which required notifications to the Office of Civil Rights for any covered entities for which we are a business associate in the last three years.

HIPAA TRAINING

We are prepared and fully capable of supporting the training on the HIPAA that will be provided by the State of Nebraska. As needed, we can provide follow-up technical assistance, ongoing professional development, and booster sessions to ensure that our staff fully understand and practice the active protection of private and protected information. If requested by the State or DHHS, AM will update and revise our virtual training program to support the State's training on HIPAA.

STAFFING AVAILABILITY

As an emergent disease, COVID-19's patterns of transmission are still widely variable. AM's public health expertise and appropriate use of technology enable us to take an epidemiological and data-driven approach to anticipating staff requirements amid infection rate fluctuations. Our senior staff are seasoned subject matter experts with experience scaling staff up (or down) in response to variable incidence rates. Our staffing and recruitment departments are overseen by the AM Manager of Recruitment, who has a wealth of experience maintaining a multi-system candidate sourcing structure.

Our **proposed project staff are available immediately** to support the statewide COVID-19 Contact Tracing Program for the State of Nebraska. From our database of over 32,000 applicants, we have identified and vetted over 890 qualified individuals from the State of Nebraska who meet the minimum qualifications to be Contact Tracers. From this pool, we are prepared to quickly hire, onboard, and manage a team of 25 or more staff to begin providing contact tracing services within the first two weeks of operation. We will staff up our Center and schedule staff to ensure that contact tracing services are provided between the hours of 10:00am through 7:00pm Central Time, Monday through Friday. We can also provide contact tracing services on the weekend, as needed by the State. Because our contract tracer will be working remotely, some calls to cases/contacts may be made outside of operating hours. The PM and/or DPM will be actively supervising and managing staff during all hours of operation.

We have the capacity to provide 400 or more back up staff, in the case of a surge or outbreak. These staff can be available immediately to ensure there is no lapse or delays in providing contact tracing services.

SOURCING AND SCREENING

Locally sourcing staff puts local grant monies back into the community. Staff awareness of local issues, resources, and geography tend to provide a higher level of care. Therefore, we always seek to recruit and hire from the communities in which the services will be provided. We maintain a national database of over 32,000 potential staff with a wide variety of health, technology, and other relevant qualifications and experience. **We have begun to source and identify qualified individuals in Nebraska with relevant**

qualifications and experience to be hired immediately as contact tracing and case investigation staff for this program. To support rapid hiring and surge, we can leverage our partnership with national staffing agencies, such as Randstand, which maintains a national database of over 35,000 potential staff with relevant qualifications for contact tracing and case investigation work.

AM is dedicated to prioritizing local residents and ensuring that all staff we hire are from within the state or counties.

SELECTING

From our national database of over 32,000 candidates, we start by targeting our selection and screening process with candidates who reside in the targeted county or state. As candidates are pared down from our Boolean search and vetting tools in iCIMS, candidates move through the pipeline as follows:

- Candidate is determined to meet pre-screening qualifications.
- Initial contact is made with the candidate to assess interest level.
- Candidate responds affirmatively, interview scheduled through automated email.
- Telephone interview completed by recruitment team.
- Per a pre-selected criterion, candidate is assessed and ranked.

Once all previous steps are completed, the Hiring Team will conduct a project Hiring Kick-Off discussion to review and compare results for the pool of candidates interviewed that met all hiring criteria. At that time, the Hiring Team review all candidates who meet or exceeds all required qualifications.

Candidates that are deemed as a qualified applicant will receive an official offer letter via email. The offer letter is valid for 24 hours after being issued. Signed offer letters prompt commencement of the onboarding process.

APPROACH TO WORKFORCE PLANNING

ABILITY TO MATCH WORKFORCE TO CONTRACT DEMANDS

AM has demonstrated expertise in matching the workforce demands of our contracts. **We can quickly hire, onboard, and train up to 200 qualified Contact Tracing personnel within the first two weeks of project start.** We can also provide a diverse, multilingual workforce that reflects the communities targeted for services; this includes ensuring that we hire enough bilingual staff who can speak at least one of the non-English languages spoken in the targets, such as Kurdish, Arabic, Karen, Vietnamese, Spanish, Mandarin/Cantonese, Russian, French, Hindi, Urdu, and Tagalog. **Our approach and process to scaling staffing up/down is driven by public health data and our lessons learned from managing large, variable workforces for similar COVID-19 contract tracing programs.**

Although the number of personnel assigned to the project is ultimately determined by DHHS, AM can offer the expertise of our senior data analysts and epidemiologists to analyze key data and help project the required workforce needs, based upon the changing COVID-19 case volume in the state. This includes a review of the current positivity numbers, trends in positivity over the previous two weeks, reports on types and levels of “social activities,” and targeted data for at- risk communities. For initial workforce planning purposes, AM begins with the number of current COVID-19 cases in the county or state to determine the number of contact tracing staff needed.

The PM, Ms. Adelani, will be in regular contact with Nebraska DHHS leadership to provide updates and measures on the effectiveness of the program, such as the number of people reached by the contact tracing workforce, success of follow-up, and number of closed cases. In addition to its value for establishing Quality Assurance, this data will help inform our recommendations for scaling up/down the contact tracing workforce and ensure adequate amounts of AM resources can be assigned to the project's dynamic requirements.

Example data (tracked daily) to inform our workforce estimates and projections include:

- Total number of current Contact Tracing Staff
- Number of staff who are State/US residents
- Language capabilities of staff members, reported as both a percentage break down and total number

Project Productivity:

- Sum of cases worked by AM from start of contract
- Sum of contacts worked by AM from start of contract
- Sum of cases worked by AM, last 7 days (previous Sunday-Saturday)
- Sum of contacts worked by AM, last 7 days (previous Sunday-Saturday)
- Percent of initial calls made by contact tracing staff to a case within 8 hours of assignment by DHHS.
- Percent of initial calls made by contact tracing staff to a contact within 8 hours of assignment by DHHS.
- Number and frequency of additional calls made to a case when not reached on first call attempt.
- Number and frequency of additional calls made to a contact when not reached on first call attempt.

Staff Productivity:

- Average call duration in minutes, by user
- Average number of outbound calls by user, by day, with appropriate trend analysis of performance over time
- Number of outbound calls made by AM, by day, for prior week
- Number of calls made utilizing language line (sum for project and trend over time)
- Percent of calls made utilizing language line (aggregated over project period and trend over time)

EQUIPMENT PROVIDED TO STAFF

We employ over 200 contact tracing staff and all of our staff work remotely. Having the proper equipment (computer/laptop, phone, extra monitor, and headset) and infrastructure (high speed internet connection, relevant software, and a quiet place to work) are crucial to their ability to perform contact tracing work and the Center's ability to accomplish key performance measures. Potential hires for contact tracing positions will be required to have adequate technology. During the interview process, potential hires are asked specific questions about the technology, including questions about operating systems, quality of internet speed, and the age of some equipment. We may also ask questions to assess

their ability to use certain applications to ensure they will be able to understand and complete our contact tracing training program and use required applications during their work.

ABILITY TO MEET PROJECT TIMELINES

AM has a proven history of meeting project timelines. As an emergent disease, COVID-19 has presented our nation's public health infrastructure with various, ever-changing challenges. We specialize in helping state, county and local public health authorities to address, resolve or mitigate these challenges in order to launch and manage effective COVID-19 programs. AM has successfully launched COVID-19 contact tracing programs on time, staffed, and performing at or above the needed capacity, and quickly responded to increased needs for staff. We have demonstrated our ability to meet the timelines established in the RFP.

CAPACITY OF IN-HOUSE TRAINERS AND APPROACH TO PROJECT ONBOARDING

AM has several in-house trainers and education specialists on staff who can support the development and delivery of a wide variety of training topics. Our Director of Knowledge Management, Sarah David, developed an extensive Contact Tracer curriculum, which pulls from the CDC, WHO, and JHU resources on COVID-19. This comprehensive curriculum was used to develop our virtual Contact Tracing Training Program.

We understand that our staff will be required to complete the State-approved contact tracing training program. However, we would be happy to exceed this requirement and share our comprehensive, online training program with DHHS. Our specialized, comprehensive curriculum was developed for all levels of our contact tracing workforce. The curriculum was developed by our Director of Knowledge Management, Sarah David, BSN, RN, who has over a decade of experience as a community health nurse including specialized experience in disease surveillance and outbreak response. AM administers its contact tracer training virtually through the cloud-based learning management system (LMS) Digital Chalk. Digital Chalk allows for the use of didactic and interactive learning which supports the absorption of important COVID-19 content material as well as opportunities for skills building and experiential learning as well. The strategic blend of multiple online learning modalities is a recognized best practice for educating adult learners and ensures the virtual training program is accommodating different learning styles.

Digital Chalk gives users access to a curated course database with modules and courses that pertain to their specific role. The LMS enables learners to work at their own pace, leverage a variety of modalities to accommodate a variety of learning preferences, ask questions on a platform embedded in the course material, and attend live and pre-recorded webinars. Our remote training functionality also includes screening, assessment, and certification maintenance.

AM routinely works with State and local public health departments to package and remotely implement training materials and curricula. AM administers its training through the cloud based LMS Digital Chalk. The strategic blend of multiple modalities is the best practice for educating adult learners, and ensures information accommodates all learning styles.

All team members of AM Programs receive comprehensive 12-15-hour training to prepare them to provide a standardized high-level of care, sensitivity, and cultural humility to cases and contacts; successful completion is mandatory for each team member. The training curriculum has been developed to provide the most current and relevant information to best prepare team members to fulfill job duties and ensure that skills-based competencies are met:

- Contact tracing and case investigation activities and procedures
- Psychosocial and social assistance service delivery and referrals

APPROACH TO ONBOARDING

AM's onboarding process is led by an experienced Director of Human Resources and two hiring coordinators who oversee the entire process, which includes:

- Background checks (via HireRight)
- Verification of education, professional licenses and ASTHO training certification
- I-9 Verification
- Establishing employee accounts in ADP

All AM employees will be hired as W-2 employees, and benefit from this industry-leading online payroll, HR, tax, compliance, and benefits administration solution.

Once onboarded, employees will be automatically connected to:

- **MakeShift -** an online scheduling tool embedded within the ADP system
- **Digital Chalk -** Learning Management System
- **ADP -** Benefits Administration solution

Our full interview and assessment process ensures that candidates have the specific capabilities needed to perform contact tracing and case investigation services. These capabilities include:

- A clear understanding of case and contact confidentiality
- Excellent interpersonal and interviewing skills to build and maintain trust with cases and contacts
- Comprehension and ability to articulate principles of exposure, infection, and infectious periods
- Manage case and contact queues, charting and referrals autonomously

ABILITY TO MEET REPORTING REQUIREMENTS

AM has a strong reputation for accomplishing project requirements and reports on time and with quality. We also have the qualifications, capacity, and expertise to support the collection and reporting of accurate data on the Key Performance Indicators (KPIs) as well as reach high-risk and historically marginalized populations and identify and quickly respond to outbreaks and clusters. As a health IT and research analytics company, we have experts on staff with more than 50 combined years of experience in establishing efficient systems to collect, process, check, and report data, including data assurance processes.

We employ automated data quality review and reporting, to ensure program consistency and transparency. We plan to use several products to tailor our approach and scale our efforts to address the State of Nebraska's requirements and the community's changing needs:

We can develop and implement interfaces to bridge the gap between our AM software and that being used in Nebraska. AM's health data analyst and web developer can liaise with the State and relevant stakeholders, as necessary, to create collaborative applications and incorporate new technology.

STANDARD REPORTS

Our Data Analyst will provide support and analysis of ongoing data reporting. Each week, the PM will produce and submit a detailed report on Center performance. The reports will include the following items from the previous business week:

Minimum items included in report include:

- Total number of completed calls
- Date and time of uncompleted calls
- A percentage of contacts (that is, individuals) made that were completed calls
- Total number of calls, either completed or uncompleted, made by Contractor per hour billed

Weekly Reports will be submitted by the PM to the DHHS Contract Manager no later than 12:00 noon CT on Tuesday of every week. Other reports can be submitted more or less frequently, based on the needs of the State. As needed, we can provide enhanced data reports to provide more advanced analysis of individual and overall Center performance.

AD HOC REPORTING CAPABILITIES

AM can provide standardized reports of varying frequency (daily, weekly, monthly, other), as well as ad-hoc reports that detail staffing, performance, call attempts and outcomes, and other standard disease investigation metrics related to case and contact data, clinical outcomes and clearance, referrals, loss to longitudinal follow-up, data quality, and other topics as directed by DHSS in order to ensure and improve quality and productivity. We will work with the State to produce the reports from the data management system and will support any additional requests for information. An example of the reports we have submitted on similar programs include:

- Daily situational reports
- Weekly surveillance reports
- Percentage of cases reached by phone or in-person within 24 hours of positive lab report (goal 90%)
- Percentage of contacts reached by phone or in-person within 48 hours of positive lab report (goal 80%)
- Percentage of contacts being traced daily (goal is 80%)

AM's approach to performance management is to apply our formal and structured processes to ensure we achieve project objectives defined in project or study plan on time, within budget, and with high-quality performance exceeding client expectations. AM's approach is comprised of five phases: initiation, planning, execution, monitoring, and control. Our approach is based on the Project Management Institute's (PMI) Project Management Body of Knowledge (PMBOK). AM's performance management approach considers all aspects of contract delivery that affect resources, budget, and schedule to deliver a unified view of organization and program performance metrics, providing complete transparency to our partners and funders.

Olujimisola M. Adelani, MPH

Project Manager

Exceptional leader and project manager offering successful executive-level administrative and managerial experience in the healthcare industry. First-rate personal, analytical, communications and public relations skills. Outstanding ability to manage multiple large-scale projects, tasks and priorities effectively in a global environment. Superior communicator who readily distills the most complex of materials into easily-understood, compelling reports and presentations.

SKILLS & ABILITIES:

- Public Health Education & Promotion
- Project & Program Management
- Process Improvement & Analysis
- Community Health & Education Planning
- Strategic Vision & Planning
- Coaching & Leadership
- Health Administration
- Workforce Development

EXPERIENCE

Project Manager, AM LLC
November 2020 to Present

Implementation and program oversight, ensuring goals and objectives are met.
Performs research, applies appropriate analytical methodologies and project management concepts to support prioritization and implementation of strategic Initiatives and programmatic activities.
Maintains compliance with federal, state and local guidelines.
Works with government organizations to mitigate long-term impacts of COVID-19.
Serves as the direct point of contact between local health authority and contact tracing teams.
Performs meeting management activities including scheduling, coordinating administrative and logistical needs.
Develops supporting materials, summary reports, action items, and tailored briefing materials
Communicates concepts, analysis results, and recommendations to a diverse group of stakeholders.

Communications Specialist, Harris County Public Health (A-1 Personnel)
2020

Created communication tools including, fact sheets, brochures, handouts, PSAs, social media and website content to support HCPH COVID-19 communication initiatives
Liaison to HCPH internal committees, external committees, and community partners.
Mobilized as Public Information Officer at NRG Medical Shelter to disseminate COVID-19-related messages in conjunction with the Office of Emergency Management
Led COVID-19 “It’s Just a Mask Campaign” to promote mask use in Harris County

Major (O4) Operations Manager, United States Air Force
May 2010 to July 2019
Public Health Director – 81st Aerospace Medicine Squadron (AMDS), Keelser AFB
2017 to 2019

Effectively led 21 personnel, managed 14 programs, and implemented policies and provided medical intelligence in support of regional and local units, and 150K base beneficiaries.
Managed Medical Employee Health Program, enforced CDC and OSHA standards in the 2nd largest AF Medical Center.

Governed Occupational Health programs; oversaw 1.8K medical evaluations and 18-industrial work centers; enabled C-130 aircraft operations.
Liaison to Mississippi and local county health departments fighting the Sexually Transmitted Infection (STI) epidemic in state with the third highest illness rate; educated and protected 31K base population.

016 to 2017
Force Health Management Program Director, 87th AMDS, Joint Base McGuire-Dix, NJ
2016 to 2017
Directed 28-personnel and 4-programs delivering Public Health services at the only Tri-Service Joint Base to 42K beneficiaries across 5-agencies.
Advised installation leadership on mitigating and regulating disease, occupational health, immunizations, medical intelligence, and Individual Medical Readiness rates.
Planned, developed, and implemented Public Health activities, exercises, and policies, analyzed data, and created reports.
Served as the Installation Medical Intelligence Officer; provided medical intelligence to members deploying to exercises and contingencies to reduce disease incidence and promote mission effectiveness.

2016
Medical Group Executive Officer, 87th Medical Group, Joint Base McGuire-Dix, NJ
2015 to 2016
Provided a full range of executive support to the Medical Director and Assistant Director at DoD's only tri-service Joint Base.
Liaison to 5-Senior Directors, the Expeditionary Center, and 88-Joint mission partners.
Processed executive staff correspondence, tracked deadlines for 4-agencies, 400-personnel, and 68K beneficiaries.
Provided oversight for high-level protocol functions; implemented, directed, and coordinated executive functions, services, activities, and special projects.

Public Health Officer, 87th AMDS, Joint Base McGuire-Dix, NJ
2014 to 2015
Managed the Public Health Operations at DoD's only tri-service installation support 5-agencies and 38K beneficiaries.
Guided 26-personnel, responsible for $120M in 114-facilities, and 10.6K workers in 146 occupational shops
Administrator of Aeromedical Service Information Management System; managed medical readiness of 4K personnel.
Promoted public health through epidemiological surveillance of health and disease trends in populations, as well as monitoring food safety practices, and sanitation levels in public and food service facilities.

Public Health Director, 23rd AMDS, Moody AFB, GA
2011 to 2014
Managed 18-personnel in administering 15-health surveillance and force protection programs protecting 11K beneficiaries.
Monitored Individual Medical Readiness and deployment health requirements for 5K personnel.
Coordinated disease surveillance programs with civilian and military Public Health agencies.
Directed occupational health examination compliance for 1.8K workers.
Served as an Emergency Support Function representative and base medical intelligence officer.
Oversaw food safety and sanitation inspections for 40 facilities and medical employee health programs for 317 personnel.

EDUCATION
MPH, Drexel University, Philadelphia, PA, 2009
Bachelor of Science, Biology, Monteclair University, Upper Montclair, NJ, 2007

CONTINUING EDUCATION AND TRAINING
Public Health Officer Advanced Course

Emergency Preparedness Response Course
Public Health Emergency Management Course
Air Command & Staff College (graduate-level)
Squadron Officer School (graduate-level)

REFERENCES

Michael Blowers
7219 North Litchfield Road, Building #1130
Luke Air Force Base, AZ 85039
(520) 591-5381

Stephanie Harley
7219 North Litchfield Road, Building #1130
Luke Air Force Base, AZ 85039
(617) 650-6617

Yvette Rose
941 Success Ave
Lakeland FL, 33803
(419) 217-1461

Consolata Mogeni, MPH

Deputy Project Manager

A dynamic Public Health professional seeking to bring an accomplished combination of education and 5+ years of progressive experience to a leading organization. Proven record of designing, implementing, and managing programs to improve individual and community health outcomes. Certified with relevant MPH and BS degrees. Able to coordinate with a wide range of colleagues and stakeholders to facilitate program success. Driven and goal oriented, with the skills and experience to make an immediate positive impact in any fast-paced team.

SKILLS & ABILITIES:

- Program development and design
- Management of health programs
- Quality Assurance
- Budget creation
- Orientation of new employees
- Strong communication
- Disease monitoring/tracking

EXPERIENCE

Deputy Project Manager, AM LLC, Arlington, VA
September 2020 to Present

Daily distribution of cases and contacts to strike team members. Assesses gaps and provide training guidelines from our training support team. Ensures proper protocols are followed in making, logging and charting calls according to project standards. Provides insight and feedback to Case Navigators using quality assurance audits and weekly meetings. Manages team schedules, and approves time off requests. Lead orientation of new staff and provide guidelines. Current on updated COVID information and guidance from national sources.

Epidemiologist, Texas Department of Health and Human Services
July - September 2020

Conduct and document COVI D-19 cluster and outbreak investigations. Conduct case patient interviews and tracking COVID-19 test results for patients. Tracking and reporting suspected and confirmed COVID-19 cases and deaths. Medical record tracking and reviews. Follow-up with external organizations for additional information as appropriate. Develop protocols and identify strategies for improving and/enhancing surveillance data collection, management and monitoring processes. Collaborate with DC Health epidemiologists and use DC Health Guidelines to facilitate testing for patients and healthcare workers through Texas Health Department.

Health and Wellness Program Director, Administration for Children's Services, New York, NY
October 2017 to March, 2020

Managed the NYC community and employee health and wellness program funded by WorkWell NYC. Creation of the program budget, monitored expenditures and mitigated the risks of stock-outs through supply planning. Monitored disease trends and provided public health advice to leadership on preventing the spread of communicable diseases. Assessed monitoring and evaluation reports to identify bottlenecks and guide sustainable development tracking. Developed and updated the health communications strategies. Used quantitative/qualitative community needs assessments data to mobilize resources in unmet areas. Improved health outcomes for 7,000+ employees by implementing a new employee wellness program. Drafted proposals, briefs and policy papers to attract funding. Developed and fostered relationships with NGOs, nationals, clients and stakeholders to promote health initiatives. Conducted field visits, built the team capacity and performed annual staff reviews

Community Health Coordinator, Montefiore Medical Center, New York, NY
July 2015 to September 2017
Managed the community-based health, nutrition and WASH program for public-school based health clinics. Delivered community education on preventive health strategies through new training materials. Managed office and clinic supplies and ensured their purchase and timely distribution. Interviewed and screened at-risk children to refer cases to local health services. Designed, formulated, and implemented health programs for children. Provided technical guidance and operational support to government partners, NGO's and represented Montefiore in national meetings. Ensured the medical program is in line with the public health policies and frameworks. Monitored for efficacy Worked with MEAL teams to design research, profiled potential donors, and maintained databases.

EDUCATION
Master of Public Health, Global Health - New York University, New York, NY 2018
Bachelor of Science, Biology - Rutgers State University, Piscataway, NJ 2015

CONTINUING EDUCATION AND TRAINING
Emergency Response and Disaster Preparedness - Rutgers University, Piscataway, NJ 2015

REFERENCES
Phoebe Rubenstein
Chief of Staff to the First Deputy Commissioner
Office of the First Deputy Commissioner
(212) 676-9512

Sakara Bey
Program Director, WorkWell NYC
NYC Mayor's Office of Labor Relations
22 Cortlandt St
New York, NY 10007
(347) 683-1157

Lana Tu
Project Coordinator
150 William Street
New York, NY 10038
(917) 415-7130

Allison Seidel, MPH

Project Manager

Exceptional leader and project manager offering successful executive-level administrative and managerial experience in the healthcare industry. First-rate personal, analytical, communications and public relations skills. Outstanding ability to manage multiple large-scale projects, tasks and priorities effectively in a global environment. Superior communicator who readily distills the most complex of materials into easily-understood, compelling reports and presentations.

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- Project & Program Management
- Process Improvement & Analysis
- Community Health & Education Planning
- Strategic Vision & Planning
- Coaching & Leadership
- Health Administration
- Workforce Development

EXPERIENCE

Project Manager, AM LLC
December 2020 to Present

Implementation and program oversight, ensuring goals and objectives are met.
Performs research, applies appropriate analytical methodologies and project management concepts to support prioritization and implementation of strategic Initiatives and programmatic activities.
Maintains compliance with federal, state and local guidelines.
Works with government organizations to mitigate long-term impacts of COVID-19.
Serves as the direct point of contact between local health authority and contact tracing teams.
Performs meeting management activities including scheduling, coordinating administrative and logistical needs.
Develops supporting materials, summary reports, action items, and tailored briefing materials
Communicates concepts, analysis results, and recommendations to a diverse group of stakeholders.

Epidemiologist, Denver Public Health
March 2019 to December 2020

COVID-19 team lead for case investigations and contact tracing in the City and County of Denver; manage 50 person task force of supervisors, data leads, and interviewers; liaison of relationships between local public health and state public health; develop dashboards of metrics and perform analyses for members of executive leadership and the mayor.
Conduct surveillance of adverse events related to cannabis use through multiple different data sources including electronic medical records, syndromic surveillance systems, poison center calls, consumer complaints, etc.
Assess the amount of contaminants in cannabis products at point-of-sale and the potential for adverse events related to the same contaminants when consumed. Develop online system to conduct surveillance of consumer reports of adverse events related to cannabis use. Led epidemiologic response to hepatitis A outbreak in Denver's population of people experiencing homelessness and persons who inject drugs; operations section chief for vaccination deployment to affected populations.

Major (O4) Operations Manager, United States Air Force
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2017 to 2019
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CONTINUING EDUCATION AND TRAINING
Public Health Officer Advanced Course
Emergency Preparedness Response Course
Public Health Emergency Management Course
Air Command & Staff College (graduate-level)
Squadron Officer School (graduate-level)

REFERENCES
Casey Hawkins, BSN, MPH
1050 5th St
Berthoud, CO 80513
(720) 725-8727

Abigail Steiner, MPH
601 Broadway
Denver, CO 80203
(303) 522-1038

Laura Podewils, MS, PhD
601 Broadway
Denver, CO 80203
(443) 831-5678

SARAH DAVID, BSN, RN

Director of Knowledge Management

Registered nurse with over 14 years of experience providing public health nursing services and administration in the community health setting. Experience working with local and state health departments, community hospitals, major teaching medical centers, government agencies, and community partners. Proficient at supervision of clinical and nonclinical team members, community-based patient care (remote and in-person), patient and healthcare provider education and training, infection prevention and control measures, communicable disease surveillance, outbreak response and management.

SKILLS & ABILITIES:

- Case investigation, communicable disease
- Community-based care coordination
- Infection control & outbreak response
- Health care provider education
- Nursing management
- Education programming
- Program management
- Training program design

EXPERIENCE

Director of Knowledge Management, AM LLC, Arlington, VA
2020 to Present

Develop education and training curriculum for staff, supervise education and training program and team, and ensure compliance with project-specific regulations and contracts.
Provide clinical and subject matter expertise and support to project leadership, education and training team and proposal writing team.
Implement new projects with project staff, tailor education and training program to meet project-specific needs, and provide implementation support to project leadership and first-line staff as needed.
Oversee occupational health and safety program for all staff members.

Community Health Nurse, Anne Arundel County Department of Health, Annapolis, MD
2019 to Present

Provide core public health nursing services for the Bureau of Disease Prevention and Management, including the Infectious Disease Prevention and Control program and the Public Health Emerging Pathogens Response program.
Provide direct patient care in community-based immunizations clinics, as well as provide care coordination, referrals, and health education for Immunizations program.
Perform surveillance activities and interventions for reports of reportable communicable diseases/conditions and participate in continuous improvement of management of high volume of cases for Epidemiology program.
Assign COVID-19 cases, serve as a resource to teams of nurse case investigators and contact tracers, assist with ongoing training of staff, and perform case investigations and outbreak response for COVID-19.

Registered Nurse Consultant, Calvert County Health Department, Prince Frederick, MD
2019 to 2020

Provide nursing services for the Disease Surveillance and Response program, including administering immunizations for school-based influenza vaccine program.

Community Health Educator, CalvertHealth Medical Center, Prince Frederick, MD
2019 to 2020
Facilitate planning and operations for the CalvertHealth Ministry Team Network (a team of regional health ministry staff).
Assist with other Community Wellness programs including Rock Steady Boxing Calvert, a local affiliate of an evidence-based exercise program developed for Parkinson's Disease patients.

Fitness and Health Educator, CalvertHealth Medical Center, Prince Frederick, MD
2018 to 2019
Instruct evidence-based fitness classes for specific patient populations.
Provided class planning and instruction for Rock Steady Boxing Calvert, an evidence-based exercise therapy for Parkinson's disease patients.

Health Ministry Coordinator, Friendship United Methodist Church, Friendship, MD
2017 to Present
Serve as Faith Community Nurse, including health education, screening services, and patient advocacy.

Private Duty Nurse, Client Confidential, Alexandria, VA
2010 to 2014
Provide post-surgical direct patient care, provide in-home and telephonic patient education, and escort to medical appointments/procedures.

Community Health Nurse Program Supervisor, Epidemiology, Anne Arundel County Department of Health, Annapolis, MD
2009 to 2010
Maintain compliance with local, state, and federal guidelines and regulations for investigations of communicable diseases and outbreaks within county jurisdiction.
Supervise and train a team of nurses and administrative staff in the Epidemiology program.

Community Health Nurse, Anne Arundel County Department of Health, Annapolis, MD
2007 to 2009
Investigate and manage cases of communicable diseases and outbreaks by interviewing patients, perform concurrent medical record reviews, and provide infection control recommendations.
Serve as Acting Community Health Nurse Supervisor in 2009.

Nurse Clinician, Johns Hopkins Hospital, Baltimore, MD
2006 to 2007
Provide direct patient care in Children's Medical Surgical Center, Adolescent Medical-Surgical unit.

EDUCATION
Johns Hopkins University School of Nursing, Baltimore, MD
Bachelor of Science in Nursing, May 2006 (Master's-level coursework completed in Inferential Biostatistics and Forensic Nursing)

Virginia Tech, Pamplin College of Business, Blacksburg, VA
Bachelor of Science in Marketing Management, August 2002

REFERENCES
Julie Paradissis, BSN, RN

Nursing Supervisor
6701 Baymeadow Drive
Glen Burnie, MD 21060
(410) 222-2689

Sara McKelvey Wittig, MPH
Epidemiologist/Infection Preventionist
2001 Medical Pkwy
Annapolis, MD 21401
(240) 422-0887

Suzanne Podrazik, RN
Program Supervisor
1 Harry S. Truman Pkwy
Annapolis, MD 21401
(410) 222-4800

CARLA KENT

Manager, Data and Analytics Programs

Experienced data analyst and team lead who moves fluidly between internal team members and interfacing with customers. Solid foundation in analytics and visualization, delivering solutions for business stakeholders and executive management. Guides team of analysts in processes related to modeling, facilitating their professional development and skill growth. Uses statistical and modeling processes to design intuitive dashboards which answer complex operations-level challenges for clients. Focuses on identifying client needs, defining expectations, and isolating solutions which improve retention and satisfaction

SKILLS & ABILITIES:

- Data Analytics
- Data Visualization
- Data Modeling
- Team Leadership
- Team Member Training
- Coaching and Mentoring
- Alteryx Designer Certified
- Tableau Certified
- API Integration
- Forecasting
- Research
- Qualitative Methodology
- Quantitative Methodology
- Resource Management
- Customer Relations
- Interactive Dashboarding
- Predictive Analytics
- Predictive Analytics
- Python
- R

EXPERIENCE

Data Analyst, AM LLC

October, 2020 to Present

Utilize analysis and modeling principals to determine the efficacy of current efforts to combat the spread of COVID-19 and to help our clients with their future budgetary and programming plans.

Determines the success of each implemented program and highlights areas where additional measures can be applied to each effort to increase that success.

Senior Analyst and Advanced Analytics Team Lead, Icimo, Cary, NC

2017 to October 2020

Took ownership over leading the analytics team, lending expertise to ensuring consistency of approach to protect data integrity.

Delivered performance reviews and evaluations, offering constructive feedback relative to areas for improvement to support professional growth.

Carefully listened to client requests and specifications, then take information and incorporate into the design process to create intuitive products which exceed client expectations.

Engage in resource management to allocate resources appropriately and ensure cost control through diligent stewardship.

Held responsibility for training clients on processes, based on in-depth understanding of Alteryx, and run internal training center for clients to come and learn in-house how to use appropriate software.

Performed high-level tasks with software which demonstrates ability to learn and become subject matter expert on different, proprietary databases.

Compiled reports, breaking down complex information into an easy-to-understand format, leading to more informed decision making based on relevant data.

Trained associate team members on software systems to promote skill acquisition and consistency of processes, which benefits accuracy of data collection.
Delivered presentations to members at all levels with clearly-laid out reports which include functional and well-documented information for technical and non-technical end-users.

Data Analytics Specialist, Durham Technical Community College, Durham, NC
2011 to 2017
Collaborated with multi-functional teams to identify reporting needs in order to ensure the Center's ability to meet student needs and positively impact graduation rates.
Partnered to collect and then analyze data, preparing supporting documentation to submit for grant funding requests, adhering to protocols and deadlines.
Analyzed large data sets to identify contributing factors for student success and program completion.
Created new policy recommendations for adjustments to college procedures, based on data results, delivering real-world implications which benefited end-users.
Presented research findings to high-level decision makers on the College's board, persuasively communicating discoveries and recommendations and successfully swaying them to make policy-level changes based on data.
Trained multiple levels of staff and personnel in newly-designed processes to facilitate implementation as well as consistency and efficiency of procedures.

EDUCATION
Bachelor of Applied Science, Mathematics, North Carolina State University, Raleigh, NC

CONTINUING EDUCATION AND TRAINING
Alteryx Designer, Highly Proficient Trainer
Tableau Desktop, Highly Proficient Trainer

REFERENCES
Melissa Oakley Ockert, MS, CCRA, CCRP
Dean and Department Head, Health Technologies at Durham Technical Community College
1637 Lawson Street, Durham, NC 27703
(919) 536-7233

Dr. Manju Shah
Enterprise System Integration Architect and Data Scientist for the NC Community College System
200 West Jones St., Raleigh, NC 27603
(919) 807-7152

Julie Thacker
Business Analysis Manager, Cisco, Inc.
7025 Kit Creek Road
RTP, NC 27709
(919) 909-2337

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II. TERMS AND CONDITIONS

Bidders should complete Sections II through VI as part of the proposal. Bidder should read the Terms and Conditions and should initial either accept, reject, or reject and provide alternative language for each clause. The bidder should also provide an explanation of why the bidder rejected the clause or rejected the clause and provided alternate language. By signing the solicitation, bidder is agreeing to be legally bound by all the accepted terms and conditions, and any proposed alternative terms and conditions submitted with the proposal. The State reserves the right to reject or negotiate the bidder's rejected or proposed alternative language.

If the State and bidder fail to agree on the final Terms and Conditions, the State reserves the right to reject the proposal. The State of Nebraska reserves the right to reject proposals that attempt to substitute the bidder's commercial contracts and/or documents for this RFP.

Bidders should submit with their proposal any license, user agreement, service level agreement, or similar documents that the bidder wants incorporated in the Contract. The State will not consider incorporation of any document not submitted with the bidder's proposal. These documents shall be subject to negotiation and will be incorporated as addendums if agreed to by the Parties.

If a conflict or ambiguity arises after the Addendum to Contract Award have been negotiated and agreed to, the Addendum to Contract Award shall be interpreted as follows:

1. If only one Party has a particular clause then that clause shall control;
2. If both Parties have a similar clause, but the clauses do not conflict, the clauses shall be read together;
3. If both Parties have a similar clause, but the clauses conflict, the State's clause shall control.

A. GENERAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The contract resulting from this solicitation shall incorporate the following documents:

1. Request for Proposal and Addenda;
2. Amendments to the solicitation;
3. Questions and Answers;
4. Bidder's proposal (Solicitation and properly submitted documents);
5. The executed Contract and Addendum One to Contract, if applicable; and,
6. Amendments/Addendums to the Contract.

These documents constitute the entirety of the contract.

Unless otherwise specifically stated in a future contract amendment, in case of any conflict between the incorporated documents, the documents shall govern in the following order of preference with number one (1) receiving preference over all other documents and with each lower numbered document having preference over any higher numbered document: 1) Amendment to the executed Contract with the most recent dated amendment having the highest priority, 2) Addendum One to Contract, 3) the Request for Proposal and any attached Addenda, 3) Amendments to solicitation and any Questions and Answers, 4) the original solicitation document and any Addenda, and 5) the bidder's submitted Proposal.

Any ambiguity or conflict in the contract discovered after its execution, not otherwise addressed herein, shall be resolved in accordance with the rules of contract interpretation as established in the State of Nebraska.

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B. NOTIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Contractor and State shall identify the contract manager who shall serve as the point of contact for the executed contract.

Communications regarding the executed contract shall be in writing and shall be deemed to have been given if delivered personally, electronically, or mailed. All notices, requests, or communications shall be deemed effective upon receipt, unless mailed and in such case, notices, requests, and communications will be deemed effective within five (5) calendar days following deposit in the mail.

C. BUYER'S REPRESENTATIVE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The State reserves the right to appoint a Buyer's Representative to manage [or assist the Buyer in managing] the contract on behalf of the State. The Buyer's Representative will be appointed in writing, and the appointment document will specify the extent of the Buyer's Representative authority and responsibilities. If a Buyer's Representative is appointed, the Contractor will be provided a copy of the appointment document, and is required to cooperate accordingly with the Buyer's Representative. The Buyer's Representative has no authority to bind the State to a contract, amendment, addendum, or other change or addition to the contract.

D. GOVERNING LAW (Statutory)

Notwithstanding any other provision of this contract, or any amendment or addendum(s) entered into contemporaneously or at a later time, the parties understand and agree that, (1) the State of Nebraska is a sovereign state and its authority to contract is therefore subject to limitation by the State's Constitution, statutes, common law, and regulation; (2) this contract will be interpreted and enforced under the laws of the State of Nebraska; (3) any action to enforce the provisions of this agreement must be brought in the State of Nebraska per state law; (4) the person signing this contract on behalf of the State of Nebraska does not have the authority to waive the State's sovereign immunity, statutes, common law, or regulations; (5) the indemnity, limitation of liability, remedy, and other similar provisions of the final contract, if any, are entered into subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity; and, (6) all terms and conditions of the final contract, including but not limited to the clauses concerning third party use, licenses, warranties, limitations of liability, governing law and venue, usage verification, indemnity, liability, remedy or other similar provisions of the final contract are entered into specifically subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity.

The Parties must comply with all applicable local, state and federal laws, ordinances, rules, orders, and regulations.

E. BEGINNING OF WORK

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The bidder shall not commence any billable work until a valid contract has been fully executed by the State and the awarded bidder. The awarded bidder will be notified in writing when work may begin.

F. AMENDMENT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

This Contract may be amended in writing, within scope, upon the agreement of both parties.

G. CHANGE ORDERS OR SUBSTITUTIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The State and the Contractor, upon the written agreement, may make changes to the contract within the general scope of the solicitation. Changes may involve specifications, the quantity of work, or such other items as the State may find necessary or desirable. Corrections of any deliverable, service, or work required pursuant to the contract shall not be deemed a change. The Contractor may not claim forfeiture of the contract by reasons of such changes.

The Contractor shall prepare a written description of the work required due to the change and an itemized cost sheet for the change. Changes in work and the amount of compensation to be paid to the Contractor shall be determined in accordance with applicable unit prices if any, a pro-rated value, or through negotiations. The State shall not incur a price increase for changes that should have been included in the Contractor's proposal, were foreseeable, or result from difficulties with or failure of the Contractor's proposal or performance.

No change shall be implemented by the Contractor until approved by the State, and the Contract is amended to reflect the change and associated costs, if any. If there is a dispute regarding the cost, but both parties agree that immediate implementation is necessary, the change may be implemented, and cost negotiations may continue with both Parties retaining all remedies under the contract and law.

H. VENDOR PERFORMANCE REPORT(S)

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The State may document any instance(s) of products or services delivered or performed which exceed or fail to meet the terms of the purchase order, contract, and/or solicitation specifications. The State Purchasing Bureau may contact the Vendor regarding any such report. Vendor performance report(s) will become a part of the permanent record of the Vendor.

I. NOTICE OF POTENTIAL CONTRACTOR BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

If Contractor breaches the contract or anticipates breaching the contract, the Contractor shall immediately give written notice to the State. The notice shall explain the breach or potential breach, a proposed cure, and may include a request for a waiver of the breach if so desired. The State may, in its discretion, temporarily or permanently waive the breach. By granting a waiver, the State does not forfeit any rights or remedies to which the State is entitled by law or equity, or pursuant to the provisions of the contract. Failure to give immediate notice, however, may be grounds for denial of any request for a waiver of a breach.

J. BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Either Party may terminate the contract, in whole or in part, if the other Party breaches its duty to perform its obligations under the contract in a timely and proper manner. Termination requires written notice of default and a thirty (30) calendar day (or longer at the non-breaching Party's discretion considering the gravity and nature of the default) cure period. Said notice shall be delivered by Certified Mail, Return Receipt Requested, or in person with proof of delivery. Allowing time to cure a failure or breach of contract does not waive the right to immediately terminate the contract for the same or different contract breach which may occur at a different time. In case of default of the Contractor, the State may contract the service from other sources and hold the Contractor responsible for any excess cost occasioned thereby. The State may recover from the Contractor as damages the difference between the costs of covering the breach. Notwithstanding any clause to the contrary, the State may also recover the contract price together with any incidental or consequential damages, but less expenses saved in consequence of Contractor's breach.

The State's failure to make payment shall not be a breach, and the Contractor shall retain all available statutory remedies and protections.

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K. NON-WAIVER OF BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Allowing time to cure or the acceptance of late performance with or without objection or reservation by a Party shall not waive any rights of the Party, including, but not limited to the right to immediately terminate the Contract for the same or a different breach, or constitute a waiver of the requirement of timely performance of any obligations remaining to be performed.

L. SEVERABILITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

If any term or condition of the contract is declared by a court of competent jurisdiction to be illegal or in conflict with any law, the validity of the remaining terms and conditions shall not be affected, and the rights and obligations of the parties shall be construed and enforced as if the contract did not contain the provision held to be invalid or illegal.

M. INDEMNIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

1. GENERAL

The Contractor agrees to defend, indemnify, and hold harmless the State and its employees, volunteers, agents, and its elected and appointed officials ("the indemnified parties") from and against any and all third party claims, liens, demands, damages, liability, actions, causes of action, losses, judgments, costs, and expenses of every nature, including investigation costs and expenses, settlement costs, and attorney fees and expenses ("the claims"), sustained or asserted against the State for personal injury, death, or property loss or damage, arising out of, resulting from, or attributable to the willful misconduct, negligence, error, or omission of the Contractor, its employees, Subcontractors, consultants, representatives, and agents, resulting from this contract, except to the extent such Contractor liability is attenuated by any action of the State which directly and proximately contributed to the claims.

2. INTELLECTUAL PROPERTY

The Contractor agrees it will, at its sole cost and expense, defend, indemnify, and hold harmless the indemnified parties from and against any and all claims, to the extent such claims arise out of, result from, or are attributable to, the actual or alleged infringement or misappropriation of any patent, copyright, trade secret, trademark, or confidential information of any third party by the Contractor or its employees, Subcontractors, consultants, representatives, and agents; provided, however, the State gives the Contractor prompt notice in writing of the claim. The Contractor may not settle any infringement claim that will affect the State's use of the Licensed Software without the State's prior written consent, which consent may be withheld for any reason.

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If a judgment or settlement is obtained or reasonably anticipated against the State's use of any intellectual property for which the Contractor has indemnified the State, the Contractor shall, at the Contractor's sole cost and expense, promptly modify the item or items which were determined to be infringing, acquire a license or licenses on the State's behalf to provide the necessary rights to the State to eliminate the infringement, or provide the State with a non-infringing substitute that provides the State the same functionality. At the State's election, the actual or anticipated judgment may be treated as a breach of warranty by the Contractor, and the State may receive the remedies provided under this solicitation.

3. PERSONNEL

The Contractor shall, at its expense, indemnify and hold harmless the indemnified parties from and against any claim with respect to withholding taxes, worker's compensation, employee benefits, or any other claim, demand, liability, damage, or loss of any nature relating to any of the personnel, including subcontractor's and their employees, provided by the Contractor.

4. SELF-INSURANCE

The State of Nebraska is self-insured for any loss and purchases excess insurance coverage pursuant to Neb. Rev. Stat. § 81-8,239.01 (Reissue 2008). If there is a presumed loss under the provisions of this agreement, Contractor may file a claim with the Office of Risk Management pursuant to Neb. Rev. Stat. §§ 81-8,829 – 81-8,306 for review by the State Claims Board. The State retains all rights and immunities under the State Miscellaneous (Section 81-8,294), Tort (Section 81-8,209), and Contract Claim Acts (Section 81-8,302), as outlined in Neb. Rev. Stat. § 81-8,209 et seq. and under any other provisions of law and accepts liability under this agreement to the extent provided by law.

5. ALL REMEDIES AT LAW

Nothing in this agreement shall be construed as an indemnification by one Party of the other for liabilities of a Party or third parties for property loss or damage or death or personal injury arising out of and during the performance of this contract. Any liabilities or claims for property loss or damages or for death or personal injury by a Party or its agents, employees, contractors or assigns or by third persons, shall be determined according to applicable law.

6. The Parties acknowledge that Attorney General for the State of Nebraska is required by statute to represent the legal interests of the State, and that any provision of this indemnity clause is subject to the statutory authority of the Attorney General.

N. ATTORNEY'S FEES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

In the event of any litigation, appeal, or other legal action to enforce any provision of the contract, the Parties agree to pay all expenses of such action, as permitted by law and if ordered by the court, including attorney's fees and costs, if the other Party prevails.

O. LIQUIDATED DAMAGES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Failure to initiate contact with an individual upon receiving notification from DHHS within three (3) business days may result in an assessment of liquidated damages due the State of $1,000 (one thousand dollars) per day, per individual that is to be contacted until contact is initiated. Contractor will be notified in writing when liquidated damages are assessed. Damages will be assessed against Contractor's subsequent submitted invoice(s).

P. ASSIGNMENT, SALE, OR MERGER

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Either Party may assign the contract upon mutual written agreement of the other Party. Such agreement shall not be unreasonably withheld.

The Contractor retains the right to enter into a sale, merger, acquisition, internal reorganization, or similar transaction involving Contractor's business. Contractor agrees to cooperate with the State in executing amendments to the contract to allow for the transaction. If a third party or entity is involved in the transaction, the Contractor will remain responsible for performance of the contract until such time as the person or entity involved in the transaction agrees in writing to be contractually bound by this contract and perform all obligations of the contract.

Q. CONTRACTING WITH OTHER NEBRASKA POLITICAL SUB-DIVISIONS OF THE STATE OR ANOTHER STATE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The Contractor may, but shall not be required to, allow agencies, as defined in Neb. Rev. Stat. §81-145, to use this contract. The terms and conditions, including price, of the contract may not be amended. The State shall not be contractually obligated or liable for any contract entered into pursuant to this clause. A listing of Nebraska political subdivisions may be found at the website of the Nebraska Auditor of Public Accounts.

The Contractor may, but shall not be required to, allow other states, agencies or divisions of other states, or political subdivisions of other states to use this contract. The terms and conditions, including price, of this contract shall apply to any such contract, but may be amended upon mutual consent of the Parties. The State of Nebraska shall not be contractually or otherwise obligated or liable under any contract entered into pursuant to this clause. The State shall be notified if a contract is executed based upon this contract.

R. FORCE MAJEURE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Neither Party shall be liable for any costs or damages, or for default resulting from its inability to perform any of its obligations under the contract due to a natural or manmade event outside the control and not the fault of the affected Party ("Force Majeure Event"). The Party so affected shall immediately make a written request for relief to the other Party, and shall have the burden of proof to justify the request. The other Party may grant the relief requested; relief may not be unreasonably withheld. Labor disputes with the impacted Party's own employees will not be considered a Force Majeure Event.

Consistent with the purpose of this Agreement – to obtain from the Contractor contact tracing services to combat the COVID-19 pandemic – the Parties agree that default or delay in the performance of obligations caused by the COVID-19 pandemic shall not constitute a Force Majeure Event.

S. CONFIDENTIALITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

All materials and information provided by the Parties or acquired by a Party on behalf of the other Party shall be regarded as confidential information. All materials and information provided or acquired shall be handled in accordance with federal and state law, and ethical standards. Should said confidentiality be breached by a Party, the Party shall notify the other Party immediately of said breach and take immediate corrective action.

It is incumbent upon the Parties to inform their officers and employees of the penalties for improper disclosure imposed by the Privacy Act of 1974, 5 U.S.C. 552a. Specifically, 5 U.S.C. 552a (i)(1), which is made applicable by 5 U.S.C. 552a (m)(1), provides that any officer or employee, who by virtue of his/her employment or official position has possession of or access to agency records which contain individually identifiable information, the disclosure of which is prohibited by the Privacy Act or regulations established thereunder, and who knowing that disclosure of the specific material is prohibited, willfully discloses the material in any manner to any person or agency not entitled to receive it, shall be guilty of a misdemeanor and fined not more than $5,000.

All information entered into the State's Systems or otherwise collected while performing services under this agreement shall not be sold by Contractor. This provision shall survive the termination or expiration of this contract.

All information entered into the State's Systems or otherwise collected while performing services under this Agreement shall not be shared or disclosed by Contractor with any other entity or individual, unless (a) required by applicable law, or (b) authorized by the State in writing, prior to such disclosure or sharing. This provision shall survive the termination or expiration of this contract.

T. OFFICE OF PUBLIC COUNSEL (Statutory)

If it provides, under the terms of this contract and on behalf of the State of Nebraska, health and human services to individuals; service delivery; service coordination; or case management, Contractor shall submit to the jurisdiction of the Office of Public Counsel, pursuant to Neb. Rev. Stat. §§ 81-8,240 et seq. This section shall survive the termination of this contract.

U. LONG-TERM CARE OMBUDSMAN (Statutory)

Contractor must comply with the Long-Term Care Ombudsman Act, per Neb. Rev. Stat. §§ 81-2237 et seq. This section shall survive the termination of this contract.

V. EARLY TERMINATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The contract may be terminated as follows:

1. The State and the Contractor, by mutual written agreement, may terminate the contract at any time.

2. The State, in its sole discretion, may terminate the contract for any reason upon thirty (30) calendar day's written notice to the Contractor. Such termination shall not relieve the Contractor of warranty or other service obligations incurred under the terms of the contract. In the event of termination the Contractor shall be entitled to payment, determined on a pro rata basis, for products or services satisfactorily performed or provided.

3. The State may terminate the contract immediately for the following reasons:

- **a.** if directed to do so by statute;
- **b.** Contractor has made an assignment for the benefit of creditors, has admitted in writing its inability to pay debts as they mature, or has ceased operating in the normal course of business;
- **c.** a trustee or receiver of the Contractor or of any substantial part of the Contractor's assets has been appointed by a court;
- **d.** fraud, misappropriation, embezzlement, malfeasance, misfeasance, or illegal conduct pertaining to performance under the contract by its Contractor, its employees, officers, directors, or shareholders;
- **e.** an involuntary proceeding has been commenced by any Party against the Contractor under any one of the chapters of Title 11 of the United States Code and (i) the proceeding has been pending for at least sixty (60) calendar days; or (ii) the Contractor has consented, either expressly or by operation of law, to the entry of an order for relief; or (iii) the Contractor has been decreed or adjudged a debtor;
- **f.** a voluntary petition has been filed by the Contractor under any of the chapters of Title 11 of the United States Code;
- **g.** Contractor intentionally discloses confidential information;
- **h.** Contractor has or announces it will discontinue support of the deliverable; and,
- **i.** In the event funding is no longer available.

W. CONTRACT CLOSEOUT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

No later than 30 days after termination or expiration of the contract, the Contractor shall, unless stated otherwise herein:

1. Transfer all completed or partially completed deliverables to the State;
2. Transfer ownership and title to all completed or partially completed deliverables to the State;
3. Return to the State all information and data, unless the Contractor is permitted to keep the information or data by contract or rule of law. Contractor may retain one copy of any information or data as required to comply with applicable work product documentation standards or as are automatically retained in the course of Contractor's routine back up procedures;
4. Cooperate with any successor Contactor, person or entity in the assumption of any or all of the obligations of this contract;
5. Cooperate with any successor Contactor, person or entity with the transfer of information or data related to this contract;
6. Return or vacate any state owned real or personal property; and,
7. Return all data in a mutually acceptable format and manner.

Nothing in this Section should be construed to require the Contractor to surrender intellectual property, real or personal property, or information or data owned by the Contractor for which the State has no legal claim.

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III. CONTRACTOR DUTIES

A. INDEPENDENT CONTRACTOR / OBLIGATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

It is agreed that the Contractor is an independent contractor and that nothing contained herein is intended or should be construed as creating or establishing a relationship of employment, agency, or a partnership.

The Contractor is solely responsible for fulfilling the contract. The Contractor or the Contractor's representative shall be the sole point of contact regarding all contractual matters.

The Contractor shall secure, at its own expense, all personnel required to perform the services under the contract. The personnel the Contractor uses to fulfill the contract shall have no contractual or other legal relationship with the State; they shall not be considered employees of the State and shall not be entitled to any compensation, rights or benefits from the State, including but not limited to, tenure rights, medical and hospital care, sick and vacation leave, severance pay, or retirement benefits.

By-name personnel commitments made in the Contractor's proposal shall not be changed without the prior written approval of the State. Replacement of these personnel, if approved by the State, shall be with personnel of equal or greater ability and qualifications.

All personnel assigned by the Contractor to the contract shall be employees of the Contractor or a subcontractor, and shall be fully qualified to perform the work required herein. Personnel employed by the Contractor or a subcontractor to fulfill the terms of the contract shall remain under the sole direction and control of the Contractor or the subcontractor respectively.

With respect to its employees, the Contractor agrees to be solely responsible for the following:

1. Any and all pay, benefits, and employment taxes and/or other payroll withholding;
2. Any and all vehicles used by the Contractor's employees, including all insurance required by state law;
3. Damages incurred by Contractor's employees within the scope of their duties under the contract;
4. Maintaining Workers' Compensation and health insurance that complies with state and federal law and submitting any reports on such insurance to the extent required by governing law;
5. Determining the hours to be worked and the duties to be performed by the Contractor's employees; and,
6. All claims on behalf of any person arising out of employment or alleged employment (including without limit claims of discrimination alleged against the Contractor, its officers, agents, or subcontractors or subcontractor's employees)

If the Contractor intends to utilize any subcontractor, the subcontractor's level of effort, tasks, and time allocation should be clearly defined in the bidder's proposal. The Contractor shall agree that it will not utilize any subcontractors not specifically included in its proposal in the performance of the contract without the prior written authorization of the State.

The State reserves the right to require the Contractor to reassign or remove from the project any Contractor or subcontractor employee.

Contractor shall insure that the terms and conditions contained in any contract with a subcontractor does not conflict with the terms and conditions of this contract.

The Contractor shall include a similar provision, for the protection of the State, in the contract with any Subcontractor engaged to perform work on this contract.

B. EMPLOYEE WORK ELIGIBILITY STATUS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The Contractor is required and hereby agrees to use a federal immigration verification system to determine the work eligibility status of employees physically performing services within the State of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program authorized by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, 8 U.S.C. 1324a, known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of an employee.

If the Contractor is an individual or sole proprietorship, the following applies:

1. The Contractor must complete the United States Citizenship Attestation Form, available on the Department of Administrative Services website at http://das.nebraska.gov/materiel/purchasing.html

2. The completed United States Attestation Form should be submitted with the solicitation response.

3. If the Contractor indicates on such attestation form that he or she is a qualified alien, the Contractor agrees to provide the US Citizenship and Immigration Services documentation required to verify the Contractor's lawful presence in the United States using the Systematic Alien Verification for Entitlements (SAVE) Program.

4. The Contractor understands and agrees that lawful presence in the United States is required and the Contractor may be disqualified or the contract terminated if such lawful presence cannot be verified as required by Neb. Rev. Stat. §4-108.

C. COMPLIANCE WITH CIVIL RIGHTS LAWS AND EQUAL OPPORTUNITY EMPLOYMENT / NONDISCRIMINATION (Statutory)

The Contractor shall comply with all applicable local, state, and federal statutes and regulations regarding civil rights laws and equal opportunity employment. The Nebraska Fair Employment Practice Act prohibits Contractors of the State of Nebraska, and their Subcontractors, from discriminating against any employee or applicant for employment, with respect to hire, tenure, terms, conditions, compensation, or privileges of employment because of race, color, religion, sex, disability, marital status, or national origin (Neb. Rev. Stat. §48-1101 to 48-1125). The Contractor guarantees compliance with the Nebraska Fair Employment Practice Act, and breach of this provision shall be regarded as a material breach of contract. The Contractor shall insert a similar provision in all Subcontracts for goods and services to be covered by any contract resulting from this solicitation.

D. COOPERATION WITH OTHER CONTRACTORS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Contractor may be required to work with or in close proximity to other contractors or individuals that may be working on same or different projects. The Contractor shall agree to cooperate with such other contractors or individuals, and shall not commit or permit any act which may interfere with the performance of work by any other contractor or individual. Contractor is not required to compromise Contractor's intellectual property or proprietary information unless expressly required to do so by this contract.

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E. PERMITS, REGULATIONS, LAWS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The contract price shall include the cost of all royalties, licenses, permits, and approvals, whether arising from patents, trademarks, copyrights or otherwise, that are in any way involved in the contract. The Contractor shall obtain and pay for all royalties, licenses, and permits, and approvals necessary for the execution of the contract. The Contractor must guarantee that it has the full legal right to the materials, supplies, equipment, software, and other items used to execute this contract.

F. OWNERSHIP OF INFORMATION AND DATA / DELIVERABLES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The State shall have the unlimited right to publish, duplicate, use, and disclose all information and data developed or obtained by the Contractor on behalf of the State pursuant to this contract.

The State shall own and hold exclusive title to any deliverable developed as a result of this contract. Contractor shall have no ownership interest or title, and shall not patent, license, or copyright, duplicate, transfer, sell, or exchange, the design, specifications, concept, or deliverable.

G. INSURANCE REQUIREMENTS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The Contractor shall throughout the term of the contract maintain insurance as specified herein and provide the State a current Certificate of Insurance/Acord Form (COI) verifying the coverage. The Contractor shall not commence work on the contract until the insurance is in place. If Contractor subcontracts any portion of the Contract the Contractor must, throughout the term of the contract, require each subcontractor to have equivalent insurance and provide written notice to the State that the Contractor has verified that each subcontractor has the required coverage.

The Contractor shall not allow any Subcontractor to commence work until the Subcontractor has equivalent insurance. The failure of the State to require a COI, or the failure of the Contractor to provide a COI or require subcontractor insurance shall not limit, relieve, or decrease the liability of the Contractor hereunder.

In the event that any policy written on a claims-made basis terminates or is canceled during the term of the contract or within two (2) years of termination or expiration of the contract, the contractor shall obtain an extended discovery or reporting period or a new insurance policy, providing coverage required by this contract for the term of the contract and two (2) years following termination or expiration of the contract.

If by the terms of any insurance a mandatory deductible is required, or if the Contractor elects to increase the mandatory deductible amount, the Contractor shall be responsible for payment of the amount of the deductible in the event of a paid claim.

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Notwithstanding any other clause in this Contract, the State may recover up to the liability limits of the insurance policies required herein.

1. WORKERS' COMPENSATION INSURANCE

The Contractor shall take out and maintain during the life of this contract the statutory Workers' Compensation and Employer's Liability Insurance for all of the contactors' employees to be engaged in work on the project under this contract and, in case any such work is sublet, the Contractor shall require the Subcontractor similarly to provide Worker's Compensation and Employer's Liability Insurance for all of the Subcontractor's employees to be engaged in such work. This policy shall be written to meet the statutory requirements for the state in which the work is to be performed, including Occupational Disease. **The policy shall include a waiver of subrogation in favor of the State. The COI shall contain the mandatory COI subrogation waiver language found hereinafter**. The amounts of such insurance shall not be less than the limits stated hereinafter. For employees working in the State of Nebraska, the policy must be written by an entity authorized by the State of Nebraska Department of Insurance to write Workers' Compensation and Employer's Liability Insurance for Nebraska employees.

2. COMMERCIAL GENERAL LIABILITY INSURANCE AND COMMERCIAL AUTOMOBILE LIABILITY INSURANCE

The Contractor shall take out and maintain during the life of this contract such Commercial General Liability Insurance and Commercial Automobile Liability Insurance as shall protect Contractor and any Subcontractor performing work covered by this contract from claims for damages for bodily injury, including death, as well as from claims for property damage, which may arise from operations under this contract, whether such operation be by the Contractor or by any Subcontractor or by anyone directly or indirectly employed by either of them, and the amounts of such insurance shall not be less than limits stated hereinafter.

The Commercial General Liability Insurance shall be written on an **occurrence basis**, and provide Premises/Operations, Products/Completed Operations, Independent Contractors, Personal Injury, and Contractual Liability coverage. **The policy shall include the State, and others as required by the contract documents, as Additional Insured(s). This policy shall be primary, and any insurance or self-insurance carried by the State shall be considered secondary and non-contributory**. **The COI shall contain the mandatory COI liability waiver language found hereinafter.** The Commercial Automobile Liability Insurance shall be written to cover all Owned, Non-owned, and Hired vehicles.

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REQUIRED INSURANCE COVERAGE	
COMMERCIAL GENERAL LIABILITY	
General Aggregate	$2,000,000
Products/Completed Operations Aggregate	$2,000,000
Personal/Advertising Injury	$1,000,000 per occurrence
Bodily Injury/Property Damage	$1,000,000 per occurrence
Medical Payments	$5,000 any one person
Damage to Rented Premises (Fire)	$300,000 each occurrence
Contractual	Included
Independent Contractors	Included
If higher limits are required, the Umbrella/Excess Liability limits are allowed to satisfy the higher limit.	
WORKER'S COMPENSATION	
Employers Liability Limits	$500K/$500K/$500K
Statutory Limits- All States	Statutory - State of Nebraska
Voluntary Compensation	Statutory
UMBRELLA/EXCESS LIABILITY	
Over Primary Insurance	$1,000,000 per occurrence
CYBER LIABILITY	
Breach of Privacy, Security Breach, Denial of Service, Remediation, Fines and Penalties	$3,000,000
MANDATORY COI SUBROGATION WAIVER LANGUAGE	
"Workers' Compensation policy shall include a waiver of subrogation in favor of the State of Nebraska."	
MANDATORY COI LIABILITY WAIVER LANGUAGE	
"Commercial General Liability & Commercial Automobile Liability policies shall name the State of Nebraska as an Additional Insured and the policies shall be primary and any insurance or self-insurance carried by the State shall be considered secondary and non-contributory as additionally insured."	

3. EVIDENCE OF COVERAGE

The Contractor shall furnish the Contract Manager, with a certificate of insurance coverage complying with the above requirements prior to beginning work at:

State of Nebraska
State Purchasing Bureau
Attn: Connie Heinrichs
RFP: 6416 Z1
Email: connie.heinrichs@nebraska.gov

These certificates or the cover sheet shall reference the RFP number, and the certificates shall include the name of the company, policy numbers, effective dates, dates of expiration, and amounts and types of coverage afforded. If the State is damaged by the failure of the Contractor to maintain such insurance, then the Contractor shall be responsible for all reasonable costs properly attributable thereto.

Reasonable notice of cancellation of any required insurance policy must be submitted to the contract manager as listed above when issued and a new coverage binder shall be submitted immediately to ensure no break in coverage.

4. DEVIATIONS

The insurance requirements are subject to limited negotiation. Negotiation typically includes, but is not necessarily limited to, the correct type of coverage, necessity for Workers' Compensation, and the type of automobile coverage carried by the Contractor.

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H. ANTITRUST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The Contractor hereby assigns to the State any and all claims for overcharges as to goods and/or services provided in connection with this contract resulting from antitrust violations which arise under antitrust laws of the United States and the antitrust laws of the State.

I. CONFLICT OF INTEREST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

By submitting a proposal, bidder certifies that no relationship exists between the bidder and any person or entity which either is, or gives the appearance of, a conflict of interest related to this Request for Proposal or project.

Bidder further certifies that bidder will not employ any individual known by bidder to have a conflict of interest nor shall bidder take any action or acquire any interest, either directly or indirectly, which will conflict in any manner or degree with the performance of its contractual obligations hereunder or which creates an actual or appearance of conflict of interest.

If there is an actual or perceived conflict of interest, bidder shall provide with its proposal a full disclosure of the facts describing such actual or perceived conflict of interest and a proposed mitigation plan for consideration. The State will then consider such disclosure and proposed mitigation plan and either approve or reject as part of the overall bid evaluation.

J. SITE RULES AND REGULATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The Contractor shall use its best efforts to ensure that its employees, agents, and Subcontractors comply with site rules and regulations while on State premises. If the Contractor must perform on-site work outside of the daily operational hours set forth by the State, it must make arrangements with the State to ensure access to the facility and the equipment has been arranged. No additional payment will be made by the State on the basis of lack of access, unless the State fails to provide access as agreed to in writing between the State and the Contractor.

K. ADVERTISING

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The Contractor agrees not to refer to the contract award in advertising in such a manner as to state or imply that the company or its goods or services are endorsed or preferred by the State. Any publicity releases pertaining to the project shall not be issued without prior written approval from the State.

L. NEBRASKA TECHNOLOGY ACCESS STANDARDS (Statutory)

Contractor shall review the Nebraska Technology Access Standards, found at http://nitc.nebraska.gov/standards/2-201.html and ensure that products and/or services provided under the contract are in compliance or will comply with the applicable standards to the greatest degree possible. In the event such standards change during the Contractor's performance, the State may create an amendment to the contract to request the contract comply with the changed standard at a cost mutually acceptable to the parties.

M. DISASTER RECOVERY/BACK UP PLAN

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

The Contractor shall have a disaster recovery and back-up plan, of which a copy should be provided upon request to the State, which includes, but is not limited to equipment, personnel, facilities, and transportation, in order to continue delivery of goods and services as specified under the specifications in the contract in the event of a disaster.

N. DRUG POLICY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Contractor certifies it maintains a drug free work place environment to ensure worker safety and workplace integrity. Contractor agrees to provide a copy of its drug free workplace policy at any time upon request by the State.

O. WARRANTY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Despite any clause to the contrary, the Contractor represents and warrants that its services hereunder shall be performed by competent personnel and shall be of professional quality consistent with generally accepted industry standards for the performance of such services and shall comply in all respects with the requirements of this

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Agreement. For any breach of this warranty, the Contractor shall, for a period of ninety (90) days from performance of the service, perform the services again, at no cost to the State, or if Contractor is unable to perform the services as warranted, Contractor shall reimburse the State all fees paid to Contractor for the unsatisfactory services. The rights and remedies of the parties under this warranty are in addition to any other rights and remedies of the parties provided by law or equity, including, without limitation actual damages, and, as applicable and awarded under the law, to a prevailing party, reasonable attorneys' fees and costs.

IV. PAYMENT

A. PROHIBITION AGAINST ADVANCE PAYMENT (Statutory)
Neb. Rev. Stat. §§81-2403 states, "[n]o goods or services shall be deemed to be received by an agency until all such goods or services are completely delivered and finally accepted by the agency."

B. TAXES (Statutory)
The State is not required to pay taxes and assumes no such liability as a result of this solicitation. The Contractor may request a copy of the Nebraska Department of Revenue, Nebraska Resale or Exempt Sale Certificate for Sales Tax Exemption, Form 13 for their records. Any property tax payable on the Contractor's equipment which may be installed in a state-owned facility is the responsibility of the Contractor.

C. LATE PAYMENT (Statutory)
The Contractor may charge the responsible agency interest for late payment in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2401 through 81-2408).

D. SUBJECT TO FUNDING / FUNDING OUT CLAUSE FOR LOSS OF APPROPRIATIONS (Statutory)
The State's obligation to pay amounts due on the Contract for a fiscal years following the current fiscal year is contingent upon legislative appropriation of funds. Should said funds not be appropriated, the State may terminate the contract with respect to those payments for the fiscal year(s) for which such funds are not appropriated. The State will give the Contractor written notice thirty (30) calendar days prior to the effective date of termination. All obligations of the State to make payments after the termination date will cease. The Contractor shall be entitled to receive just and equitable compensation for any authorized work which has been satisfactorily completed as of the termination date. In no event shall the Contractor be paid for a loss of anticipated profit.

E. RIGHT TO AUDIT (First Paragraph is Statutory)
The State shall have the right to audit the Contractor's performance of this contract upon a thirty (30) days' written notice. Contractor shall utilize generally accepted accounting principles, and shall maintain the accounting records, and other records and information relevant to the contract (Information) to enable the State to audit the contract. (Neb. Rev. Stat. §84-304 et seq.) The State may audit and the Contractor shall maintain, the Information during the term of the contract and for a period of five (5) years after the completion of this contract or until all issues or litigation are resolved, whichever is later. The Contractor shall make the Information available to the State at Contractor's place of business or a location acceptable to both Parties during normal business hours. If this is not practical or the Contractor so elects, the Contractor may provide electronic or paper copies of the Information. The State reserves the right to examine, make copies of, and take notes on any Information relevant to this contract, regardless of the form or the Information, how it is stored, or who possesses the Information. Under no circumstance will the Contractor be required to create or maintain documents not kept in the ordinary course of contractor's business operations, nor will contractor be required to disclose any information, including but not limited to product cost data, which is confidential or proprietary to contractor.

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DS DG			

The Parties shall pay their own costs of the audit unless the audit finds a previously undisclosed overpayment by the State. If a previously undisclosed overpayment exceeds one-half of one percent (0.5%) of the total contract billings, or if fraud, material misrepresentations, or non-performance is discovered on the part of the Contractor, the Contractor shall reimburse the State for the total costs of the audit. Overpayments and audit costs owed to the State shall be paid within ninety (90) days of written notice of the claim. The Contractor agrees to correct any material weaknesses or condition found as a result of the audit.

F. INVOICES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Invoices for payments must be submitted by the Contractor to the agency requesting the services with sufficient detail to support payment. Invoices shall be sent bi-weekly to:

Department of Health and Human Services
ATTN: Director of Contact and Care
301 Centennial Mall S.
Lincoln, NE 68509
An email address will be provided upon contract execution.

Invoices shall include itemization of training hours, active hours, back-up capacity headcount with tier, and total amount due. Invoice shall also include documentation log of hours per rep each week.

The terms and conditions included in the Contractor's invoice shall be deemed to be solely for the convenience of the parties. No terms or conditions of any such invoice shall be binding upon the State, and no action by the State, including without limitation the payment of any such invoice in whole or in part, shall be construed as binding or estopping the State with respect to any such term or condition, unless the invoice term or condition has been previously agreed to by the State as an amendment to the contract.

G. INSPECTION AND APPROVAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
DS DG			

Final inspection and approval of all work required under the contract shall be performed by the designated State officials.

The State and/or its authorized representatives shall have the right to enter any premises where the Contractor or Subcontractor duties under the contract are being performed, and to inspect, monitor or otherwise evaluate the work being performed. All inspections and evaluations shall be at reasonable times and in a manner that will not unreasonably delay work.

H. PAYMENT (Statutory)

Payment will be made by the responsible agency in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2403). The State may require the Contractor to accept payment by electronic means such as ACH deposit. In no event shall the State be responsible or liable to pay for any goods and services provided by the Contractor prior to the Effective Date of the contract, and the Contractor hereby waives any claim or cause of action for any such services.

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Form A
Bidder Point of Contact
Request for Proposal Number 6416 Z1

Form A should be completed and submitted with each response to this solicitation. This is intended to provide the State with information on the bidder's name and address, and the specific person(s) who are responsible for preparation of the bidder's response.

Preparation of Response Contact Information	
Bidder Name:	AM LLC
Bidder Address:	161 Fort Evans Rd., NE, Suite 250 Leesburg, VA 20176
Contact Person & Title:	Dan Gabriel, CEO
E-mail Address:	Dan@amllc.co
Telephone Number (Office):	(571) 225-9854
Telephone Number (Cellular):	(571) 225-9854
Fax Number:	N/A

Each bidder should also designate a specific contact person who will be responsible for responding to the State if any clarifications of the bidder's response should become necessary. This will also be the person who the State contacts to set up a presentation/demonstration, if required.

Communication with the State Contact Information	
Bidder Name:	AM LLC
Bidder Address:	161 Fort Evans Rd., NE, Suite 250 Leesburg, VA 20176
Contact Person & Title:	Dan Gabriel, CEO
E-mail Address:	Dan@amllc.co
Telephone Number (Office):	(571) 225-9854
Telephone Number (Cellular):	(571) 225-9854
Fax Number:	N/A

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REQUEST FOR PROPOSAL FOR CONTRACTUAL SERVICES FORM

BIDDER MUST COMPLETE THE FOLLOWING

By signing this Request for Proposal for Contractual Services form, the bidder guarantees compliance with the procedures stated in this Solicitation, and agrees to the terms and conditions unless otherwise indicated in writing and certifies that bidder maintains a drug free work place.

Per Nebraska's Transparency in Government Procurement Act, Neb. Rev Stat § 73-603 DAS is required to collect statistical information regarding the number of contracts awarded to Nebraska Contractors. This information is for statistical purposes only and will not be considered for contract award purposes.

N/A NEBRASKA CONTRACTOR AFFIDAVIT: Bidder hereby attests that bidder is a Nebraska Contractor. "Nebraska Contractor" shall mean any bidder who has maintained a bona fide place of business and at least one employee within this state for at least the six (6) months immediately preceding the posting date of this Solicitation.

N/A I hereby certify that I am a Resident disabled veteran or business located in a designated enterprise zone in accordance with Neb. Rev. Stat. § 73-107 and wish to have preference, if applicable, considered in the award of this contract.

N/A I hereby certify that I am a blind person licensed by the Commission for the Blind & Visually Impaired in accordance with Neb. Rev. Stat. §71-8611 and wish to have preference considered in the award of this contract.

FORM MUST BE SIGNED USING AN INDELIBLE METHOD OR DOCUSIGN

FIRM:	AM LLC
COMPLETE ADDRESS:	161 Fort Evans Rd., NE, Suite 250, Leesburg, VA 20176
TELEPHONE NUMBER:	(571) 225-9854
FAX NUMBER:	N/A
DATE:	December 16, 2020
SIGNATURE:	DocuSigned by: Dan Gabriel E962F9C3009E42D...
TYPED NAME & TITLE OF SIGNER:	Dan Gabriel, CEO