**State** of Nebraska, Department of Health and Human Services, Division of Public Health, Office of Health Disparities and Health Equity

## REQUEST FOR INFORMATION

|  |  |
| --- | --- |
| SOLICITATION NUMBER | RELEASE DATE |
| RFI NAPHA | January 27, 2022 |
| OPENING DATE AND TIME | PROCUREMENT CONTACT |
| February 23, 2022, 2:00 p.m. Central Time | Dana Crawford-Smith/Jennifer Archer |

This form is part of the specification package and must be signed in ink and returned, along with information documents, by the opening date and time specified.

PLEASE READ CAREFULLY!

|  |
| --- |
| SCOPE OF SERVICE |

DHHS of Nebraska, Department of Health and Human Services, Division of Public Health, Office of Health Disparities and Health Equity (DHHS), is issuing this Request for Information RFI NAPHA for the purpose of gathering information to provide educational and public health services to Native Americans.

Written questions are due no later than February 7, 2022, and should be submitted via e-mail to dhhs.procurement@nebraska.gov.

Bidder should submit one (1) original of the entire RFI response. RFI responses should be submitted by the RFI due date and time.

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1. SCOPE OF THE REQUEST FOR INFORMATION

DHHS of Nebraska, Department of Health and Human Services, Division of Public Health, Office of Health Disparities and Health Equity (hereafter known as DHHS), is issuing this Request for Information, RFI NAPHA for the purpose of gathering information to provide educational and public health services for Native Americans in Box Butte, Cherry, Dawes, Sheridan and Scottsbluff counties in Nebraska.

**ALL INFORMATION PERTINENT TO THIS REQUEST FOR INFORMATION CAN BE FOUND ON THE INTERNET AT:** <http://das.nebraska.gov/materiel/purchasing.htm>l

* 1. SCHEDULE OF EVENTS

DHHS expects to adhere to the tentative procurement schedule shown below. It should be noted, however, that some dates are approximate and subject to change.

|  |  |  |
| --- | --- | --- |
| **ACTIVITY** | | **DATE/TIME** |
| 1 | Release Request for Information | January 27, 2022 |
| 2 | Last day to submit written questions | February 4, 2022 |
| 3 | State responds to written questions through Request for Information “Addendum” and/or “Amendment” to be posted to the internet at:  <http://das.nebraska.gov/materiel/purchasing.html> | February 9, 2022 |
| 4 | RFI Opening  WebEx:   |  | | --- | | <https://sonvideo.webex.com/sonvideo/j.php?MTID=m26eba55968787709681af165461a6d0d> | | February 23, 2022  2:00 PM  Central Time |
| 5 | Conduct oral interviews/presentations and/or demonstrations (if required) | To Be Determined |

1. RFI RESPONSE PROCEDURES
   1. OFFICE AND CONTACT PERSON

Responsibilities related to this Request for Information reside with DHHS. The point of contact for the RFI is as follows:

Name: Dana Crawford-Smith /Jennifer Archer

Agency: DHHS

Address: PO Box 94926

Lincoln, NE 68508

Telephone: 402-471-7575

E-Mail: [dhhs.procurement@nebraska.gov](mailto:as.materielpurchasing@nebraska.gov)

* 1. GENERAL INFORMATION

A subsequent Request for Proposal (RFP) may not be issued as a result of this RFI. There will not be a contract as a result of this RFI and DHHS is not liable for any cost incurred by vendors in replying to this RFI. If an RFP is issued, the information provided will assist DHHS of Nebraska in developing the Request for Proposal. This RFI does not obligate DHHS to reply to the RFI responses, to issue an RFP, or to include any RFI provisions or responses provided by vendors in any RFP.

* 1. COMMUNICATION WITH DHHS STAFF

From the date the Request for Information is issued and until RFI opening (as shown in the Schedule of Events), contact regarding this RFI between potential vendors and individuals employed by DHHS should be restricted to written communication with the staff designated above as the point of contact for this Request for Information.

The following exceptions to these restrictions are permitted:

* + 1. Written communication with the person(s) designated as the point(s) of contact for this Request for Information;
    2. contacts made pursuant to any pre-existing contracts or obligations; and
    3. DHHS-requested presentations, key personnel interviews, clarification sessions, or discussions.

Violations of these conditions may be considered sufficient cause to reject a vendor’s response to the RFI. No individual member of DHHS, employee of DHHS, or member of the Interview Committee is empowered to make binding statements regarding this RFI. DHHS of Nebraska will issue any clarifications or opinions regarding this RFI in writing.

* 1. WRITTEN QUESTIONS AND ANSWERS

Any explanation desired by a vendor regarding the meaning or interpretation of any Request for Information provision should be submitted in writing to DHHS and clearly marked “RFI Number NAPHA; Questions”. It is preferred that questions be sent via e-mail to dhhs.procurement@nebraska.gov

It is recommended that Bidders submit questions sequentially numbered, include the RFI reference and page number using the following format.

|  |  |  |  |
| --- | --- | --- | --- |
| Question Number | RFI Section Reference | RFI Page Number | Question |
|  |  |  |  |

Written answers will be provided through an addendum to be posted on the Internet at <http://das.nebraska.gov/materiel/purchasing.html> on or before the date shown in the Schedule of Events.

* 1. ORAL INTERVIEWS/PRESENTATIONS AND/OR DEMONSTRATIONS

DHHS reserves the right to conduct oral interviews/presentations and/or demonstrations if required at the sole invitation of DHHS.

Any cost incidental to the oral interviews/presentations and/or demonstrations shall be borne entirely by the vendor and will not be compensated by DHHS

* 1. SUBMISSION OF RESPONSE

The State is accepting either electronically submitted responses or hard copy, paper responses for this RFI.

* + 1. For bidders submitting electronic responses:
       1. Bidders submitting electronically can upload the response via ShareFile here:

<https://nebraska.sharefile.com/r-rebba53c91b6049459fc43fbf5247fc3d>

* + - 1. ShareFile works with Firefox, Internet Explorer and Chrome. It does not work with Microsoft Edge.
      2. Proprietary information should be uploaded as separate and distinct files. If multiple responses are submitted, the State will retain only the most recently submitted response. It is the bidder’s responsibility to submit the response by the date and time indicated in the Schedule of Events. Electronic responses must be received by DHHS by the date and time of the response opening per the Schedule of Events. No late responses will be accepted

* + - 1. ELECTRONIC RESPONSE FILE NAMES

The bidder should clearly identify the uploaded RFI response files. To assist in identification please use the following naming convention:

* + - * 1. RFI NAPHA ABC Company
        2. If multiple files are submitted for one RFI response, add number of files to file names: RFI NAPHA ABC Company File 1 of 2.
        3. If multiple RFI responses are submitted for the same RFI, add the response number to the file names: RFI NAPHA ABC Company Response 1 File 1 of 2.
    1. For bidders submitting paper/hard copy responses:
       1. Bidders who are submitting a paper response should submit one response marked on the first page: “ORIGINAL”. If multiple responses are submitted, the State will retain one copy marked “ORIGINAL” and destroy the other copies. The Contractor is solely responsible for any variance between the copies submitted. Responses should include the completed Form A, “Vendor Contact Sheet”. Responses must reference the RFI number and be sent to the specified address. Please note that the address label should appear as specified in Section II A on the face of each container or contractor’s response packet. If a recipient phone number is required for delivery purposes, 402-471-7575 should be used. The RFI number should be included in all correspondence. The State will not furnish packaging and sealing materials. It is the contractor’s responsibility to ensure the response is received in a sealed envelope or container and submitted by the date and time indicated in the Schedule of Events. Sealed responses must be received at DHHS by the date and time of the opening per the Schedule of Events. No late responses will be accepted.

United States Postal Services (USPS) delivered responses shall be mailed to:

ATTN: Dana Crawford-Smith/Jennifer Archer RFI NAPHA

DHHS - Central Procurement Services

PO BOX 94926

Lincoln, NE 68509

Hand delivered responses or responses delivered by Federal Express (FedEx), United Parcel Service (UPS), etc. shall be delivered to:

ATTN: Dana Crawford-Smith/Jennifer Archer RFI NAPHA DHHS - 3rd Floor Reception Desk

301 Centennial Mall South

Lincoln, NE 68509

* + - 1. Proprietary Information should be presented in separate sections (loose-leaf binders are preferred) on standard 8 ½” x 11” paper, except that charts, diagrams and the like may be on fold-outs which, when folded, fit into the 8 ½” by 11” format. Pages may be consecutively numbered for the entire response, or may be numbered consecutively within sections. Figures and tables should be numbered consecutively within sections. Figures and tables should be numbered and referenced in the text by that number. They should be placed as close as possible to the referencing text.
    1. The State will not furnish packaging or sealing materials. It is the bidder’s responsibility to ensure the response is received either electronically or in a sealed envelope or container and submitted by the date and time indicated in the Schedule of Events. Sealed responses must be received at DHHS by the date and time of the response opening per the Schedule of Events.

It is the responsibility of the contractor to check the website for all information relevant to this Request for Information to include addenda and/or amendments issued prior to the opening date. Website address is as follows: [https://das.nebraska.gov/materiel/bidopps.html](http://das.nebraska.gov/materiel/purchase_bureau/vendor/agency-rfp.html).

The State shall not incur any liability for any costs incurred by contractors in replying to this solicitation, in the demonstrations and/or oral presentations, or in any other activity related to responding on this solicitation.

**A separate sheet must be provided that clearly states which sections have been submitted as proprietary or have copyrighted materials.** RFI responses should reference the request for information number and be sent to the specified address. Please note that the address label should appear as specified on the face of each container. If a recipient phone number is required for delivery purposes, 402-471-7575 should be used. The Request for Information number must be included in all correspondence.

* 1. PROPRIETARY INFORMATION

Data contained in the response and all documentation provided therein, become the property of DHHS of Nebraska and the data become public information upon opening the response. If the vendor wishes to have any information withheld from the public, such information must fall within the definition of proprietary information contained within Nebraska’s public record statutes. All proprietary information the vendor wishes DHHS to withhold must be submitted in a sealed package, which is separate from the remainder of the response. The separate package must be clearly marked PROPRIETARY on the outside of the package. Vendor may not mark their entire Request for Information as proprietary. Failure of the vendor to follow the instructions for submitting proprietary and copyrighted information may result in the information being viewed by other vendors and the public. Proprietary information is defined as trade secrets, academic and scientific research work which is in progress and unpublished, and other information which if released would give advantage to business competitors and serve no public purpose (see Neb. Rev. Stat. § 84-712.05(3)). In accordance with Attorney General Opinions 92068 and 97033, vendors submitting information as proprietary may be required to prove specific, named competitor(s) who would be advantaged by release of the information and the specific advantage the competitor(s) would receive. Although every effort will be made to withhold information that is properly submitted as proprietary and meets DHHS’s definition of proprietary information, DHHS is under no obligation to maintain the confidentiality of proprietary information and accepts no liability for the release of such information.

* 1. REQUEST FOR INFORMATION OPENING

The sealed responses will be publicly opened and the responding entities announced on the date, time, and location shown in the Schedule of Events. Responses will be available for viewing by those present after the opening. Vendors may also contact DHHS to schedule an appointment for viewing RFI responses.

1. PROJECT DESCRIPTION AND SCOPE OF WORK

The bidder should provide the following information in response to this Request for Information.

* 1. PURPOSE AND BACKGROUND
     1. DHHS, Division of Public Health is issuing this RFI for the purposes of providing educational and public health services for Native Americans in Box Butte, Cherry, Dawes, Sheridan and Scottsbluff counties in Nebraska.
     2. Under the Native American Public Health Act (NAPHA), Neb. Rev. Stat. §§ 71-7616 through 71-7622, the Nebraska Legislature has found that “members of Nebraska’s federally recognized Native American tribes are not receiving adequate basic public health services, especially in the areas of education and prevention,” and that “public health infrastructure focusing on health education and preventative health measures for Native Americans must be addressed.” The purpose of the RFI is to meet the goals of the NAPHA.
     3. Applicants for the NAPHA funding must provide educational and public health services to Native American populations. Priority will be given to applications that meet the following criteria:
        1. Impact the well-being of children;
        2. Serve the greatest number of people over the longest period of time;
        3. Are part of a larger plan for strategic planning and implementation;
        4. Have shown demonstrated success in the past or modeled on successful programs; and
        5. Focus on primary prevention and reduce future health care expenditures.
  2. REQUIREMENTS
     1. Contractors must be able to ensure services (or key program activities) are provided to all individuals eligible for services. Under this key program, COVID-19 related activities will **not** qualify for this funding. Activities must fall into at least one (1) of the following categories:  
          
        The following educational and public health services will be considered by DHHS for awards:  
        1. Identification and enrollment of children in state and federal programs providing access to health insurance or health care;
        2. Efforts to educate children and adults about the health risks associated with smoking and tobacco use, alcohol abuse, and other substances that threaten health and well-being and other activities designed to reduce the rate of substance abuse;
        3. Prenatal care education for women and notification of programs that improve prenatal care;
        4. Education focusing on proper diet and the importance of physical activity to good health;
        5. Blood pressure and cholesterol screenings;
        6. Support of efforts to identify children and adults at risk for depression and other mental health conditions and provide mental health counseling to prevent suicide;
        7. Parenting classes and the promotion of such programs;
        8. Efforts to discourage drinking and driving and to encourage the use of seat belts;
        9. Tests and education for acquired immunodeficiency syndrome and other sexually transmitted diseases;
        10. Tests for pregnancy and referrals to prenatal care when directed;
        11. Educational efforts aimed at reducing teen pregnancies and other unintended pregnancies;
        12. Case management for pregnant women, children, or adults with special health care needs;
        13. Efforts to make health care prevention services more affordable or accessible;
        14. Matching funds for state and federal programs designed to address public health needs;
        15. Staffing needs for public health services or education including the recruitment and training of Native American providers;
        16. Cervical and breast cancer detection services and other prevention components of comprehensive women’s health services;
        17. Education to prevent and reduce the occurrence of diabetes; and/or
        18. Other prevention or educational activities or programs that address the health, safety, or self-sufficiency of Native American persons.
  3. REPORTING REQUIREMENTS  
     Reporting for each quarter will be required thirty (30) days after last day of the quarter and must include:  
     1. An invoice that identifies the work completed and the rate per activity approved by the Department;
     2. Required verification of completion of activity as determined by the Department; and
     3. Completed reporting forms provided by DHHS by the due dates identified by the Department.

Reporting forms must be provided by the Office of Health Disparities and Health Equity. Reports must be submitted electronically through a portal identified and supported by DHHS.

* 1. PROJECT OVERVIEW
     1. Project period  
        The project period for this RFI is July 1, 2022 – June 30, 2023. At DHHS’ discretion, any award may be renewed for a period of twelve (12) months for the period of July 1, 2023 – June 30, 2024.  
          
        All costs for this project period must be invoiced to DHHS by August 31, 2023. These dates are dependent on DHHS’ own ability to timely process payments. They may be subject to change; final dates will be included in the final award between the parties. Contractor must meet the deadlines provided above.
     2. Eligible Entities  
        Only the following entities will be deemed eligible to submit responses under this RFI:
        1. Indian health organizations – An organization physically located in Nebraska that is responsible for providing public health services to Native Americans; and
        2. Other public health organizations that have a substantial Native American clientele – An organization physically located in Nebraska that promotes and improves the health of Native American community members through education, disease prevention, and injury prevention.

Organizations must be registered with the Nebraska Secretary of State.

* 1. RFI Responses

Please complete Attachment 1. “Services and Priorities” Tab is for information purposes only. Complete each activity tab, as applicable for your organization. Additional activity tabs may be added as needed. The “Budget” tab must be completed for each activity. Add additional columns as necessary. Vendor must also complete the “Budget Questions” for each activity. Add additional columns as needed.

* 1. Contract Addendums

If awarded a contract, Addendum A, B, and C. are applicable. They have been provided for informational purposes only.

# Form AVendor Contact Sheet

Request for Information Number NAPHA

Form A should be completed and submitted with each response to this solicitation document. This is intended to provide DHHS with information on the vendor’s name and address, and the specific persons who are responsible for preparation of the vendor’s response.

|  |  |
| --- | --- |
| Preparation of Response Contact Information | |
| Vendor Name: |  |
| Vendor Address: |  |
| Contact Person & Title: |  |
| E-mail Address: |  |
| Telephone Number (Office): |  |
| Telephone Number (Cellular): |  |
| Fax Number: |  |

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

|  |  |
| --- | --- |
| Communication with DHHS Contact Information | |
| Vendor Name: |  |
| Vendor Address: |  |
| Contact Person & Title: |  |
| E-mail Address: |  |
| Telephone Number (Office): |  |
| Telephone Number (Cellular): |  |
| Fax Number: |  |