REQUEST FOR PROPOSAL

STD/HIV SERVICES

STD/HIV SURVEILLANCE, PREVENTION, AND CARE PROGRAMS

OFFICE OF PUBLIC HEALTH
STD/HIV PROGRAM
DEPARTMENT OF HEALTH AND HOSPITALS

RFP # 305PUR-DHHRFP-STD-HIV-OPH

Proposal Due Date/Time: July 31, 2012
4:00 P.M. CDT

Release Date: June 29, 2012
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Glossary

AIDS: Acquired Immune Deficiency Syndrome

CBO: Community Based Organization

CDC: Federal Center for Disease Control

DHH: Department of Health and Hospitals

HIV: Human Immunodeficiency Virus

HRSA: Health Resources and Services Administration

Must: Denotes a mandatory requirement

Original: Denotes must be signed in ink

OPH: Office of Public Health

PLWH: Person(s) Living with HIV/AIDS

Redacted Proposal: The removal of confidential and/or proprietary information from one copy of the proposal for public records purposes.

Shall: Denotes a mandatory requirement

Should, May, or Can: Denotes a preference, but not a mandatory requirement

SHP: STD/HIV Program

STD: Sexually Transmitted Disease

Will: Denotes a mandatory requirement
I. GENERAL INFORMATION

A. Background

1. The mission of the Department of Health and Hospitals (DHH) is to protect and promote health and to ensure access to medical, preventive, and rehabilitative services for all citizens of the State of Louisiana. The Department of Health and Hospitals is dedicated to fulfilling its mission through direct provision of quality services, the development and stimulation of services of others, and the utilization of available resources in the most effective manner.

2. DHH is comprised of Medical Vendor Administration (Medicaid), Office for Citizens with Developmental Disabilities, Office of Behavioral Health, Office of Aging and Adult Services, and the Office of Public Health. Under the general supervision of the Secretary, these principal offices perform the primary functions and duties assigned to DHH.

3. DHH, in addition to encompassing the program offices, has an administrative office known as the Office of the Secretary, a financial office known as the Office of Management and Finance, and various bureaus and boards. The Office of the Secretary is responsible for establishing policy and administering operations, programs, and affairs.

4. The STD/HIV Program, located within the Office of Public Health (OPH), is responsible for coordinating the state’s response to the STD and HIV epidemics. The program conducts activities to: 1) provide medical and social services to persons with HIV infection and AIDS, 2) provide clinical services and treatment to persons infected with syphilis, chlamydia and/or gonorrhea, 3) prevent new cases of STD and HIV infection, and 4) collect data and compile, analyze and distribute information about the progression of the HIV epidemic in the state.

B. Purpose of RFP

The purpose of this RFP is to solicit proposals from qualified proposers that provide the following activities related to the prevention of STD and HIV infections, the provision of services for HIV-infected persons as well as clinical services and treatment for persons infected with syphilis, chlamydia and/or gonorrhea, and to monitor the STD and HIV epidemics over time. A contract is necessary to conduct management, coordination, technical assistance and training, and data management and analysis activities that support the following components of the STD/HIV Program:

1. Community-Based Organization Monitoring, Technical Assistance, Data Management and Evaluation of Implemented Prevention Interventions and Services. This component provides monitoring, coordination, technical
assistance and data management for activities of approximately 15 community-based organizations (CBOs) conducting publicly-funded STD/HIV prevention programs and approximately 15 organizations providing Ryan White Part B and Housing Opportunities for People With AIDS (HOPWA) services.

2. The Training and Communications Support component maintains the statewide STD/HIV Resource Library, produces program newsletters, and distributes educational materials and supplies to clinics, community-based organizations and other appropriate service providers for the STD/HIV Program. In addition, this component operates the Statewide STD/HIV Infoline and it is responsible for conducting training to assist community-based organizations, health units, and medical providers to conduct prevention interventions, including traditional and rapid HIV testing.

3. STD/HIV Partner Services. The contractor shall be responsible for managing the DHH Office of Public Health’s STD/HIV Program’s Partner Services database, providing technical assistance and training to Disease Intervention Specialists who conduct partner services, and coordinating follow-up on identified partners of confirmed HIV cases.

4. Core Surveillance (Case Ascertainment). This component of the program represents the active statewide system for reporting individual cases of syphilis, gonorrhea, Chlamydia, HIV, and AIDS, as required by Louisiana state law. In this system, contracted Surveillance staff solicits reports from medical providers and other mandated reporters for persons with syphilis, gonorrhea, Chlamydia, or HIV/AIDS, and contacts providers whenever necessary to gather data as required by the Federal Centers for Disease Control and Prevention (CDC) protocols for STD and HIV/AIDS surveillance activities. The primary activities of this component include:
   - Active solicitation and investigation of all potential cases of STDs and HIV/AIDS by field epidemiologists, covering all public health regions, including ascertainment of risk and assessment of progression to AIDS and death for confirmed cases
   - Laboratory surveillance, including the maintenance of electronic reporting to facilitate active reporting from public, private, and national laboratories
   - Data verification with other public health and provider databases to maximize complete reporting and ascertain rates of co-infections
   - Program evaluation activities to ensure compliance with CDC’s required standards for the timeliness, accuracy, and completeness of STD and HIV/AIDS reporting systems
   - Dissemination of reports and provision of epidemiologic technical assistance to facilitate appropriate use of surveillance data in program planning and evaluation activities
5. **Supplemental Surveillance and Emerging Protocols.** The CDC frequently releases announcements for jurisdictions to apply for funds to support supplemental surveillance activities or studies. These awards may be short-term or ongoing. Emerging protocols include activities which are likely to involve, or become a part of, core surveillance activities. Current activities include:

- Perinatal Surveillance, an ongoing project that encompasses CDC protocols and local initiatives to monitor the epidemic among HIV-infected pregnant women and their infants
- The National HIV Behavioral Surveillance project which examines behaviors that place people at risk for HIV
- HIV Incidence projects which include ongoing and developing protocols to assess rates of new infections
- The Viral Resistance Surveillance project which includes protocols to assess the extent of viral resistance in persons with HIV infection
- The STD Surveillance Network project which investigates risk factors and treatment of persons diagnosed with gonorrhea.

6. **HIV Care and Treatment Support:** Through funding received from HRSA, the STD/HIV Program is responsible for supporting and enhancing mechanisms that increase access to medical care for persons living with HIV (PLWH) in Louisiana. Programmatic and administrative support is necessary to ensure that medical and social service systems are efficiently and effectively operating to improve linkage to needed care and treatment. The coordination of needs assessments and community planning activities, as well as collaboration with other service providers are crucial in the overall development, implementation, and improvement of these systems to assure that the service needs of low income persons living with HIV infection are addressed in a high quality, cost efficient and comprehensive manner.

7. **The Program Operations Technical Assistance component** provides financial, administrative, and operational support to all STD/HIV Program components to meet the program goals and the requirements of federal and state funding agencies.

The contractor selected through this RFP must conduct all program components that are described above. In addition, all activities of the contractor must be planned and conducted in close collaboration and coordination with the STD/HIV Program.

Security of HIV/AIDS and STD related data is imperative to the success of the program. The contractor must have a written confidentiality and data security policy that adheres to CDC and State requirements. These policies must be approved by the STD/HIV Program Administrative Director and be consistent with the CDC requirements for security and confidentiality of data. All contracted personnel must adhere to these policies.
DHH/OPH intends to award one contract to an appropriate organization capable of implementing STD and HIV/AIDS prevention, services, and surveillance projects statewide. Specific activities and deliverables are described in Section II.

C. Invitation to Propose
DHH Office of Public Health, STD/HIV Program is inviting qualified proposers to submit proposals for services to conduct STD/HIV Program support services within the State of Louisiana in accordance with the specifications and conditions set forth herein.

D. RFP Coordinator
1. Requests for copies of the RFP and written questions or inquiries must be directed to the RFP coordinator listed below:

D’Ann McGary
Assistant Business Manager
Louisiana OPH STD/HIV Program
Department of Health and Hospitals
1450 Poydras Street, STE 2136
New Orleans, LA  70112
504-568-7474 (Telephone)
504-568-7044 (Fax)
dann.mcgary@la.gov

2. This RFP is available in pdf at the following weblinks:
   http://wwwprd.doa.louisiana.gov/OSP/LaPAC/bidlist.asp?department=4 and
   http://new.dhh.louisiana.gov/index.cfm/newsroom/category/47

3. All communications relating to this RFP must be directed to the DHH RFP contact person named above.  All communications between Proposers and other DHH staff members concerning this RFP shall be strictly prohibited. Failure to comply with these requirements shall result in proposal disqualification.

E. Proposer Inquiries
1. The Department will consider written inquiries regarding the requirements of the RFP or Scope of Services to be provided before the date specified in the Schedule of Events.  To be considered, written inquiries and requests for clarification of the content of this RFP must be received at the above address or via the above fax number or email address by the date specified in the Schedule of Events.  Any and all questions directed to the RFP coordinator will be deemed to require an official response and a copy of all questions and answers will be posted by the date specified in the Schedule of Events to the official state website of the following web link:
   http://wwwprd.doa.louisiana.gov/OSP/LaPAC/bidlist.asp?department=4
and may also be posted at:
http://new.dhh.louisiana.gov/index.cfm/newsroom/category/47

2. Action taken as a result of verbal discussion shall not be binding on the Department. Only written communication and clarification from the RFP Coordinator shall be considered binding.

F. Pre-Proposal Conference
Not required for this RFP.

G. Schedule of Events (DHH reserves the right to deviate from this Schedule of Events)

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H. RFP Addenda
In the event it becomes necessary to revise any portion of the RFP for any reason, the Department shall post addenda, supplements, and/or amendments to all potential proposers known to have received the RFP. Additionally, all such supplements shall be posted at the following web address:
http://wwwprd.doa.louisiana.gov/OSP/LaPAC/bidlist.asp?department=4

The RFP and addendums may also be posted to the following web address:
http://new.dhh.louisiana.gov/index.cfm/newsroom/category/47

It is the responsibility of the proposer to check the DOA website for addenda to the RFP, if any.

II. Scope of Work

A. Project Overview
The purpose of the Louisiana OPH STD/HIV Program is to reduce new STD and HIV
infections in Louisiana, to ensure that persons living with STDs and HIV have access to needed services, and to track the STD and HIV epidemics within the State of Louisiana. The result of this contract will be to provide the following support to the Louisiana OPH STD/HIV Program:

- Management
- Operational
- Database Support
- Surveillance
- Fiscal
- Program Evaluation
- Care and Treatment

Currently, the majority of the STD/HIV Program staff is domiciled in New Orleans. Below are the program components that will be supported by the services provided by the contractor. Specific deliverables required under the contract are in Section II.B.

1. **Community-Based Organization Monitoring, Technical Assistance and Data Management, and Evaluation of Implemented Prevention Interventions and Services.**

   Contractor will collaborate with the STD/HIV Program to provide monitoring, coordination, technical assistance and data management for activities implemented by approximately 15 publicly-funded community-based organizations (CBOs) conducting HIV and STD prevention programs and approximately 15 organizations providing Ryan White Part B and HOPWA services and approximately nine organizations conducting teen pregnancy prevention programs. HIV and STD prevention technical assistance shall be provided for, but not limited to the following HIV and STD prevention activities: recruitment, small group sessions, prevention material availability, HIV counseling and testing, Personal Responsibility Education Program (PREP) interventions, Wellness Center activities, and other Effective Behavioral Interventions (EBIs) in accordance with CDC directives, the Family and Youth Services Bureau/Administration for Youth and Families, and the Louisiana Comprehensive HIV/STD Prevention Plan.

   OPH STD/HIV Program utilizes CAREWare software, a client-level database that tracks utilization of Health Resources and Services Administration (HRSA) and Housing and Urban Development (HUD) funded services. The contractor will be responsible for providing technical assistance to users and data management, which will include developing or revising protocols, organizing and conducting training for CBO staff, collecting and entering data and providing consultation to CBO and OPH staff via phone, video conference technology, web-based resources or in-person trainings.

   Contractor will assist in the development and implementation of the CDC and
HRSA required evaluation plans, quality assurance activities, standardized HIV prevention activity evaluation forms, and monitoring/evaluation systems as required by federal regulations and/or recommendations. Contractor will also be required to maintain numerous STD/HIV Prevention and Services databases, as well as collect related data and enter data into the appropriate databases. Contractor will develop CDC, PREP, and HRSA mandated reports and provide feedback to the STD/HIV Program and community-based organizations on the various STD/HIV prevention and services interventions. Contractor will be responsible for developing and facilitating data management-related trainings for staff from the STD/HIV Program and contracted community-based organizations.

Contractor will provide data management and analysis for Ryan White Part B and HOPWA Programs, CBO Quarterly Reports, CBO Annual Site Visit Summaries, trainings, training evaluations, service planning meetings, Street Outreach/Recruitment Surveys, HIV Counseling and Testing forms, Prevention with Positive Program forms, Teen Pregnancy Prevention documentation, including, applications for Institutional Review Board (IRB), Wellness Center clinical and non clinical activities, and HIV Partner Services forms. Reports produced will include semi-annual and year-end progress reports, statistics needed for the Ryan White Part B and HOPWA applications, the bi-annual Ryan White Services Report (RSR) for HRSA, the Statewide Coordinated Statement of Need (SCSN) and the HIV Comprehensive Plan, statistics needed for the Comprehensive Annual Progress and Evaluation Report (CAPER) and Consolidated Annual Plan for HUD, standardized summary statistics, intervention documentation forms and other reports as required by CDC, Family and Youth Services Bureau/Administration for Youth and Families, HRSA or as requested by STD/HIV Program administration. Contractor will review local, state, and federal statistics in order to determine programmatic appropriateness of HIV and STD interventions and activities. The largest data components are described below:

- **Prevention Material Availability:** Contractor will maintain a current database on distribution sites (approximately 1,700 sites) and shipment of prevention materials to clinics, including collecting reports on orders, shipment receipts, inventories, and distribution sites. Standardized reports, including monthly monitoring logs and monthly invoices, and special reports will be developed as requested.

- **Recruitment:** Recruitment is an intervention where persons in high-risk neighborhoods or other venues receive health education information and referrals to needed services, including STD/HIV testing, linkage to medical care, etc. Contractor will maintain a current database on the number of recruitment encounters made and referrals successfully accessed during recruitment activities. Standardized reports, including recruitment activity logs will be developed as requested.
HIV Counseling and Testing: Contractor will collect HIV Counseling and Testing data submitted on forms and electronic data transmissions from testing sites for approximately 90,000 annual HIV testing and/or HIV counseling and testing sessions and enter them into a computerized database provided by OPH. Contractor will conduct quality assurance checks on HIV test data for completeness and accuracy, and will contact testing site staff to resolve identified problems. Contractor will be responsible for maintaining a secure mechanism through which electronic counseling and testing data can be transmitted, as well as the data management and analysis of all counseling and testing data. Standardized quarterly and annual reports will be produced and distributed to testing sites and special reports will be developed as requested. Data will be transferred to the CDC on an ongoing basis via a CDC-provided data transmission system. Contractor will provide training on HIV counseling and testing services and rapid testing and provide technical assistance to clinical settings, including public health units, community clinics, correctional facilities, hospital emergency rooms, and labor and delivery departments, on implementing HIV testing as a routine part of medical care.

Wellness Centers for Gay Men: Contractor will develop and maintain a database that will track the impact of health/wellness outcomes, STD/HIV surveillance data, and clinical and non-clinical activities of approximately five wellness centers throughout the state.

CAREWare: Contractor will receive and enter client-level and aggregate data on HIV infected individuals receiving Ryan White Part B and HOPWA services. Data will be received from approximately 15 medical and social service providers. Contractor will conduct quality assurance checks on data for completeness and accuracy and will provide feedback and training to submitters. Data related to the AIDS Drug Assistance Program (ADAP) will be transmitted to HRSA quarterly. Other service utilization data will be submitted on a bi-annual basis.

Contractor will provide technical assistance and trainings to approximately 15 funded agencies via phone, video conference technology, web-based resources or in-person trainings. Tracking trends in training requests, the Contractor will develop quarterly CAREWare trainings to address common identified technical assistance needs and/or any new programmatic or reporting requirements from federal funders that would impact the quantity, type or quality of data collected at the field level. The CAREWare User Manual will also be updated as necessary by the contractor.

The Contractor will manage CAREWare as an independent Ryan White Part B database, as well as a data collection system that is a component of the cross-Part Louisiana CAREWare Access Network (LaCAN). CAREWare
updates and new reporting requirements will be coordinated with staff at HRSA, as well as with the original program designers/developers. Routine, high level data quality analyses, as well as data matches with other data collection systems at SHP, will be conducted.

All databases must be maintained in accordance with confidentiality requirements of the STD/HIV Program, the Centers for Disease Control and Prevention, and must meet Health Insurance Portability & Accountability Act (HIPAA) guidelines. A HIPAA Business Associate Agreement (see Attachment IV) will be part of any contract entered into as result of this RFP.

2. Training and Communications Support
Contractor will administer the Statewide STD/HIV Infoline and manage the distribution of educational materials in order for resources to be readily available to the public. Contractor will maintain and update all curricula utilized to train community-based organizations to implement prevention interventions. Tasks will include researching, developing and/or soliciting effective prevention interventions and distributing educational materials (audiovisual and printed materials) to organizations and individuals across the State of Louisiana. Infoline services will be offered in English. The resource database, which covers HIV, STDs, TB, Hepatitis, and teen pregnancy prevention related information and referrals, will be updated on a quarterly basis. A web-based resource guide and information will be maintained on a monthly basis. All trainings and distribution of educational materials will be entered into an inventory database provided by OPH. Monthly standardized and special reports will be produced to track distribution. Prior to distribution, all CDC funded materials must be approved by the STD/HIV Program's Review Panel.

Contractor will provide educational and training activities of the STD/HIV Program in collaboration with the Delta Region AIDS Educational and Training Center, DHH Office of Behavioral Health, the Centers for Medicaid and Medicare Services, the Health Resources and Services Administration, the Department of Housing and Urban Development, the OPH Adolescent Health Program, community-based organizations, the Centers for Disease Control and Prevention, and other local, state and federal agencies.

Contractor will coordinate, edit, produce, and distribute reports on the various activities of the STD/HIV Program to approximately 2,000 contacts, including: public health sites, elected officials, media, community-based organizations, universities and research facilities, interested individuals and the Centers for Disease Control and Prevention. Contractor will be responsible for the production of all materials and mailing expenses to accomplish these activities.

Contractor will determine the disposition of HIV positive pregnant women and their infants, maintain a database that tracks the disposition and outcome of each
case, and investigate cases where infants are deemed HIV indeterminate. The contractor will also oversee the Perinatal Work Group (PWG) and serve as the liaison between the OPH STD/HIV Program, Maternal/Child Health Program, Family Planning Program, and appropriate Office of Community Services Programs. This will include a statewide planning process to identify and prioritize effective interventions and coordination for the elimination of perinatal transmission of HIV. Contractor will be responsible for conducting outreach to clinic staff and individual health care providers who care for HIV-infected pregnant women. Outreach activities shall include hospital/clinic visits and presentations regarding current perinatal HIV prevention protocols, statewide perinatal surveillance data, and available federal, state and community resources for HIV-infected women and their exposed or infected children. Contractor will also develop a labor and delivery rapid testing education and training program for targeted hospitals. Contractor will coordinate the development of a statewide public information intervention plan, including social marketing, to address HIV perinatal transmission and congenital syphilis.

3. HIV/Syphilis Partner Services (HSPS) and Internet Partner Services (IPS) known collectively as “Partner Services”
Contractor will manage multiple program elements of a comprehensive statewide Partner Services program to ensure that sex and/or needle sharing partners of persons with HIV and/or syphilis are notified of their possible exposure and to link them to HIV and/or syphilis testing services to determine disease status; to ensure that persons with syphilis are treated; and to link HIV-infected persons to medical care. Activities shall include:
- Produce regular regional line lists for STD Program Managers to conduct partner services;
- Enter data in and maintain the partner services database;
- Work to ensure that all persons with newly diagnosed or reported HIV infection and all persons reported with primary, secondary or early latent syphilis are offered partner services at least once;
- Work with health-care providers who conduct STD/HIV screening or testing, other HIV counseling and testing providers, HIV care providers, and HIV case managers to ensure that clients and patients are offered partner services as soon as possible after diagnosis and on an ongoing basis, as needed;
- Train and offer technical assistance to community-based providers to provide partner elicitation services and work with providers of anonymous HIV testing services to develop strategies for providing partner services to persons who test positive;
- Provide ongoing technical assistance and capacity building assistance to Disease Intervention Specialists who deliver partner services to maximize the number of persons infected with HIV and/or syphilis who are located and offered partner services and to ensure that persons interviewed are referred to medical services and that referrals are documented and followed up;
- Ensure that persons testing positive through partner services are referred to medical services and referrals are documented and followed up;
- Ensure that persons who don’t return for their positive test results are given an opportunity to receive those results.
- Contact persons through the internet for partner services, as requested by DIS;
- Produce reports as requested by the STD/HIV Program Administrative Director, Medical Director, Surveillance and Prevention Managers, and CDC.

4. Core STD/HIV Surveillance (Case Ascertainment, Laboratory Surveillance, Matching with Other Data Sources)

The contractor will follow all CDC protocols for conducting STD/HIV surveillance activities (see http://www.cdc.gov/hiv/topics/surveillance/index.htm and http://www.cdc.gov/std/treatment/2010/default.htm for CDC case definitions of HIV, AIDS, and STDs and related forms). Specifically, the contractor will maintain statewide active case finding systems for both cases of HIV infection and AIDS and reportable STDs which solicit case reports in a timely manner directly from reporting sources. According to the Louisiana Administrative Code, Title 51, Public Health–Sanitary Code, persons responsible for reporting include: physicians, nurses, infection control practitioners, coroners, directors of medical records, social workers, laboratories, dentists, and other health care professionals. At a minimum, the contractor will conduct the following activities:

General Case Ascertainment
- Educate providers on their reporting responsibilities, establish ongoing communication with all reporting sites, conduct routine visits to reporting sources, and establish awareness and support for surveillance activities and studies. Provider education will be accomplished through distribution of materials and visits by Field Staff.
- Conduct active case-finding in all large inpatient and outpatient facilities and physician offices serving persons with STDs and HIV. Contractor will investigate all potential cases utilizing CDC case report forms, and follow standard protocols and CDC case definitions. Ascertainment of risk for HIV cases and assessment of progression to AIDS will also be conducted.
- With guidance from OPH and in accordance with CDC protocols, the contractor will investigate cases of special interest, such as cases without a known mode of infection, transfusion and/or transplant associated cases, cases of HIV-2 infection, or cases with potentially unusual HIV strain variants.

Laboratory Surveillance
- Contractor will educate laboratories conducting tests relating to HIV infection or reportable STDs regarding their reporting responsibilities under the state law. Provider education will be accomplished through distribution of materials and visits by SHP Field Staff.
Contractor must conduct active laboratory-based case finding for persons who are known to be infected with HIV and/or who meet the immunologic criteria for AIDS, for persons who test positive for chlamydia, gonorrhea, or syphilis, and possibly who have been diagnosed with other reportable diseases.

Contractor must rigorously monitor the laboratory surveillance system to ensure that all expected results are reported from each laboratory every month.

Contractor will develop and improve electronic reporting technologies by identifying laboratories that are reporting data electronically and facilitate arrangements to conduct regular transmission of electronic laboratory data to SHP.

Matching with Other Data Sources
- The following activities currently occur on a regular basis or are in the process of being established. The contractor will work closely with SHP and other OPH staff to accomplish these activities.
- Contractor will routinely conduct matching activities with databases from key public health programs and providers to ensure maximal reporting. At a minimum, the contractor will collaborate with providers and match databases with: vital records for birth and death registries, hepatitis program, tuberculosis program, LSU Health Care Services Division (HCSD) LabTracker program, and Ryan White-funded service providers.
- Contractor will collaborate with providers and develop plans for future matches with the state Medicaid program, the Louisiana Public Health Information Network (PHIN), the OPH Laboratory Management Information System (LIMS), and the Louisiana Public Health Information Exchange project (LA PHIE). The contractor will identify and pursue possible linkages with other relevant data sources, to the extent that these sources may improve the completeness of STD and HIV/AIDS reporting.
- Contractor will develop programs and ancillary databases for conducting matches with databases from other public health programs and providers.

Other Activities
- Contractor must manage case report data to maintain an unduplicated registry on all persons with HIV infection, AIDS, syphilis, gonorrhea and chlamydia in Louisiana. The case data must be updated as new information on previously reported cases is obtained from additional case reports or from other data sources. The HIV registry must be maintained utilizing CDC software and must be located within the STD/HIV Program office.
- Contractor must collaborate with the CDC and appropriate Louisiana Office of Public Health programs to develop and improve the STD and HIV/AIDS reporting system database, the Louisiana Public Health Information Exchange, and other electronic surveillance systems.
Contractor must analyze data and produce and disseminate summary reports including: 1) an annual report with tables, graphs, and text summarizing patterns and trends in statewide data; 2) nine regional quarterly reports with tables and graphs summarizing patterns and trends in data in each of the nine health regions in Louisiana; and 3) regional and statewide summary reports for the Louisiana Commission on HIV/AIDS and Hepatitis C, and fact sheets for national awareness days. Additionally, the contractor must respond to requests for data from other community groups, providers, and grantees, as needed.

Contractor will conduct validation studies to evaluate the surveillance system’s compliance with mandatory CDC standards for the timeliness, accuracy, and completeness of STD and HIV reporting.

Contractor will conduct an annual unmet need analysis and use surveillance data to determine progress towards meeting the National HIV/AIDS Strategy goals.

Contractor staff will participate in planning and evaluation groups for STD and HIV/AIDS Prevention and Services programs, providing technical assistance (such as presentations and interpretation of data reports), as needed.

The HIV/AIDS Program Administrative Director will meet with Contractor staff to review progress of activities at least every six months.

5. **Supplemental Surveillance and Emerging Protocols**

The contractor will develop grant applications for funding to participate in supplemental surveillance activities or studies as requested by the STD/HIV Program. Surveillance activities funded by the CDC, in particular supplemental projects and studies, have the potential to change over time. Therefore, the contractor will work under the guidance of the Data Management and Analysis Program Manager and Associate Director to bring some studies to closure and to establish new studies. Current programs include:

**National HIV Behavioral Surveillance (NHBS)**

- Using protocols developed by the CDC and based on data either available through existing sources or collected through contractor’s field-based activities, the contractor will conduct formative research of targeted populations (high-risk heterosexuals, men who have sex with men, and injection drug users) in the New Orleans area.
- Using protocols developed by the CDC, the contractor will implement efforts to collect data from targeted populations to examine behaviors that place people at risk for HIV in identified high-risk areas of the New Orleans metropolitan area.
- Using protocols developed in conjunction with the CDC, the contractor will conduct HIV testing with study participants.

**STD Surveillance Network (SSuN)**
Using protocols developed by the CDC, the contractor will implement efforts to collect and manage data from targeted populations to examine behaviors that place people at risk for gonorrhea in the greater New Orleans area.

Perinatal Surveillance
- Contractor will implement surveillance efforts to identify HIV-infected pregnant women and/or infants born to HIV-infected women. Medical record reviews using abstraction forms provided by CDC will be conducted to assess counseling and testing, prenatal care, and treatment for the prevention of perinatal transmission. Longitudinal follow-up on all exposed children will be conducted to determine HIV infection status. Contractor will also conduct surveillance to identify potential congenital syphilis cases, and will review medical records to access prenatal care, mother’s syphilis treatment, and infant outcomes.
- Project staff will collaborate with the STD/HIV Program to develop initiatives to promote maximum reduction of perinatal transmission of HIV and congenital syphilis.

HIV Incidence and Viral Resistance Surveillance Projects
- Contractor will support the coordination of the HIV incidence surveillance system that monitors new HIV infections and the system to monitor medication resistant strains of HIV (see http://www.cdc.gov/hiv/topics/surveillance/index.htm). These new protocols shall require remnant blood specimens from laboratories conducting HIV-related tests for persons newly-diagnosed with HIV. Testing to ascertain recency of infection and resistance will be conducted by CDC-contracted laboratories.
- Contractor will support OPH’s efforts to secure remnant specimens from laboratories and help ensure maximal acquisition of qualifying specimens.
- Contractor will monitor specimen acquisition and follow up with laboratories as directed by OPH.
- Contractor will ensure maximal reporting of resistance results from laboratories conducting such testing.

6. STD/HIV Care and Treatment Support
The Contractor will develop a hierarchy of private and public health coverage benefits to assist Case Managers and clients in accessing the plans that are most beneficial to their comprehensive health needs, as well as establish guidelines for the use of Ryan White Part B resources to “wrap around” the various private and public plans.

The Contractor will oversee: 1) the design and implementation of a statewide consumer Needs Assessment, 2) the collection of data and the writing of the Statewide Coordinated Statement of Need, and 3) a statewide, cross-Part, community-based process to develop a three-year Comprehensive Plan for HIV
disease in Louisiana—all with the goal of assuring that the service needs of low income persons living with HIV infection are addressed in a high quality, cost efficient and comprehensive manner.

The Contractor will also design and implement a program in the greater Baton Rouge metropolitan area to enhance the successful linkage to care for persons who are discharged from State or parish correctional facilities. Additionally, the Contractor will work collaboratively with the Medical and Social Service staff at the East Baton Rouge Parish Prison to meet with HIV-infected prisoners prior to discharge in order to conduct pre-release planning and linkage into care. Follow-up activities will be conducted for no less than 6 weeks on all HIV-infected persons discharged from the East Baton Rouge Parish Prison in order to assure linkage and retention in medical care.

The Contractor will establish and oversee the first private/public partnership to exchange essential medical information between the SHP office and Our Lady of the Lake Regional Medical Center in Baton Rouge, with the goal of increasing medical care for persons who do not know their status, or who know their status but are currently “out of care.” In achieving these goals, a minimum of three staff who shall be dedicated to achieving the program objectives related to the two main project goals stated above, will be required.

Multi-agency, community-based meetings will be convened and facilitated to assure that all program partners are working towards the same goals and objectives, reducing the duplication of services and addressing gaps in available services and programs.

The Contractor will provide peer-to-peer support through phone calls, individual meetings, accompaniment to medical and social service appointments, basic health information and education, health systems/patient navigation and advocacy to HIV-infected individuals discharged from the East Baton Rouge Parish Prison.

7. Program Operations Technical Assistance

Contractor will provide the STD/HIV Program with technical assistance in formulating systems and procedures to plan, execute, and monitor budgetary and contractual control processes. This shall include formulating internal control structures for budget executions, expenditure tracking mechanisms, technical assistance in invoice review processes, purchasing and setting priorities and schedules in direct support of the mission or objectives of the Program. This shall include the development of budgets to be submitted as part of annual and competitive grant applications.

Contractor will provide the STD/HIV Program technical assistance in the design, implementation and/or interpretation of monthly invoices submitted by the CBOs.
and monthly financial status reports.

Contractor will provide administrative oversight and support in the SHP main office to ensure smooth overall operations, including the supervision of clerical staff and carrying out administrative duties (e.g., copying, filing, answering phones, typing documents, etc.).

Contractor will provide administrative support in designated OPH clinics that offer STD/HIV testing and STD treatment, including clerical clinic services, data entry functions, and office administration consisting of greeting clients, scheduling appointments, creating documents, xeroxing and sending out communications, file and database maintenance, and working with confidential clinical health information.

8. For All Components
The contractor must ensure that all databases are secure and located in an area of limited and controlled access. The contractor must have a written confidentiality and data security policy that adheres to CDC and State requirements. These policies must be approved by the STD/HIV Program Administrative Director and be consistent with the CDC requirements for security and confidentiality of data and all contracted personnel must adhere to these policies. All databases must be maintained in accordance with confidentiality requirements of the STD/HIV Services, Surveillance and Prevention sections and the Centers for Disease Control and Prevention and must meet HIPAA guidelines. A HIPAA Business Associate Agreement will be part of any contract entered into as result of this RFP.

Contractor staff will attend CDC, Family and Youth Services Bureau/Administration for Youth and Families, and HRSA meetings and OPH STD/HIV-related meetings as requested by the DHH OPH STD/HIV Program Administration.

The Contractor will generate all written reports required by funders prior to the stated due date and work collaboratively to verify the narrative, tabular and statistical information. In addition, the Contractor will assist in writing grant applications to secure new and/or continued funding resources. Attachment VI is a schedule of current grant applications and reporting requirements. Dependent on future reporting requirements, this schedule may be modified, which may require adjustment of staff resources; if this occurs, the budget shall be reviewed and revised by the Contractor, as needed.

The DHH/OPH STD/HIV Program Administrative Director or designee will meet with contractor staff to review progress of activities every six months (or more frequently if requested by the administrator or designee or the contractor).
B. Deliverables

The contractor shall provide the deliverables 1-8 below. Current staffing for these services shall be provided as described in Attachment VII. The majority of contracted personnel shall be located in New Orleans due to the proximity to other staff and datasets only available in the STD/HIV Program office. Other personnel may be located in other regions of Louisiana, due to their responsibilities and scope of activities that need to be conducted in particular regions.

   - Maintain ACCESS databases for monitoring/evaluating Prevention Program activities; analyze program data; and provide reports on a semi-annual basis.
   - Manage STD PRISM database; run routine QA reports; resolve duplicate records; and provide technical assistance to regional DIS.
   - Collect and enter (manually and through electronic transfer) approximately 22,500 HIV counseling and testing session reports into the provided database on a quarterly basis.
   - Collect and enter approximately 500 Street Outreach/Recruitment Surveys with 26 fields into the provided database on an annual basis.
   - Collect and enter approximately 350 training evaluation forms with 21 fields into the provided database on an annual basis.
   - Collect and enter quarterly reports for approximately 15 publicly funded organizations providing STD/HIV prevention activities with 32 fields into the provided database.
   - Collect and enter quarterly reports for approximately 1,700 STD/HIV Partner Services forms into the provided database.
   - Collect and enter approximately 22,500 HIV counseling and testing session reports into the provided database on a quarterly basis.
   - Collect and enter approximately 500 Street Outreach/Recruitment Surveys with 26 fields into the provided database on an annual basis.
   - Collect and enter approximately 350 training evaluation forms with 21 fields into the provided database on an annual basis.
   - Collect and enter quarterly reports for approximately 15 publicly funded organizations providing STD/HIV prevention activities with 32 fields into the provided database.
   - Collect and enter quarterly reports for approximately 1,700 STD/HIV Partner Services forms into the provided database.
   - Collect and enter quarterly reports for approximately 15 publicly funded organizations providing STD/HIV prevention activities with 32 fields into the provided database.
   - Collect and enter quarterly reports for approximately 1,700 STD/HIV Partner Services forms into the provided database.
   - Collect and enter quarterly reports for approximately 15 publicly funded organizations providing STD/HIV prevention activities with 32 fields into the provided database.
   - Collect and enter quarterly reports for approximately 1,700 STD/HIV Partner Services forms into the provided database.
   - Analyze HIV counseling and testing (CT) data and develop quarterly and annual reports that will be distributed to all active CT sites (approximately 650 reports per year).
   - Maintain and update the existing prevention material database, including entering information on approximately 125 orders and associated receipts for approximately 1,700 distribution sites quarterly.
   - Produce quarterly reports on expenditures and prevention materials distributed by site type and area of the state.
   - Collect and enter approximately 500 Street Outreach/Recruitment Surveys with 26 fields into the provided database on an annual basis.
   - Analyze street outreach/recruitment data and develop bi-annual reports that will be distributed to approximately ten organizations conducting street outreach/recruitment services.
   - Collect and enter approximately 350 training evaluation forms with 21 fields into the provided database on an annual basis.
   - Analyze training evaluation data and produce a summary report that will be provided to the training coordinator and the trainers.
   - Develop annual training evaluation summary reports and provide to the training coordinator.
   - Collect and enter quarterly reports for approximately 15 publicly funded organizations providing STD/HIV prevention activities with 32 fields into the provided database.
   - Enter approximately 1,700 STD/HIV Partner Services forms into the provided database.
   - Analyze CBO quarterly report data and develop summary reports and a presentation each quarter.
   - Update the STD/HIV Prevention and Services Evaluation Plans annually.
• Assist in the development of the STD and HIV Prevention Cooperative Agreements, interim and annual progress reports, and program monitoring and evaluation plans each year.

2. **Training and Communications Support**
   • Distribute approximately 50,000 STD/HIV educational materials per year.
   • Produce monthly reports on the distribution of print educational materials.
   • Produce and disseminate four reports a year on HIV activities occurring in the State.
   • Conduct and support approximately 30 trainings for staff from the STD/HIV Program and contracted community-based organizations each year. These trainings shall be 1-3 days in length and will be held in major cities throughout Louisiana. All logistical meeting arrangements must be conducted by the contractor. Topics shall include HIV counseling and testing, recruitment, linkage to care, case management, or program evaluation, and may include other relevant topics.
   • Facilitate Perinatal Work Group meetings on a quarterly basis to identify and prioritize effective interventions and coordination for the elimination of perinatal HIV transmission.
   • Conduct and support an annual teen pregnancy prevention meeting to approximately 50 participants. All logistical arrangements will be made by the contractor.
   • Develop a labor and delivery rapid testing education and training program and conduct in a minimum of three hospitals per year.
   • Conduct HIV perinatal prevention presentations to a minimum of 20 providers per year.
   • Conduct HIV-specific outreach to OPH-identified Latino communities through the State.

3. **HIV/Syphilis Partner Services**
   • Submit bi-weekly reports to the Louisiana Office of Public Health Regional DIS Managers for follow-up investigation.
   • Collect and enter approximately 450 interview records in the provided database on a quarterly basis.
   • Analyze Partner Services data, produce monthly and annual data reports, and present to relevant STD/HIV Program and STD Program staff.
   • Conduct a minimum of one training per year to community-based providers to provide partner elicitation services.
   • Track and record referrals to medical providers for HIV-infected persons who have contact with Partner Services.
   • Submit an interim progress report and an annual progress report, which shall include objectives and accomplishments of project activities.

4. **Core STD/HIV Surveillance** (Case Ascertainment, Laboratory Surveillance, Matching with Other Data Sources)
• Collect information on an estimated 210 new AIDS cases and 400 HIV cases every quarter.
• Make a minimum of 400 contacts with reporting sites per quarter.
• Import approximately 175,000 HIV-related electronic laboratory reports and manually enter approximately 20,000 paper laboratory reports annually.
• Enter approximately 27,000 chlamydia reports, 8,000 gonorrhea reports, and 1,000 syphilis reports per year into PRISM.
• Match databases with the following public health programs:
  o Vital records birth and death registries (annually)
  o Hepatitis program (as directed by SHP)
  o Tuberculosis program (as directed by SHP)
  o Ryan White service providers (as directed by SHP)
  o Medicaid (as directed by SHP)
  o SHP Counseling/Testing Program (ongoing)
  o SHP Partner Services data systems (weekly)
• Submit data to the CDC on a monthly basis.
• Submit an annual progress report during each contract period, which shall include:
  • Objectives and accomplishments of activities
  • Description of the reported cases
  • Summary of the reporting sites
  • Reports documenting the timeliness, completeness, and accuracy of the Louisiana HIV/AIDS Surveillance system
• Complete the following formal reports for distribution to the medical and general communities:
  • Quarterly HIV surveillance summary reports
  • An annual STD/HIV Program Report
• Produce data for STD and HIV prevention planning as requested by the STD/HIV Program.
• Produce additional data analyses and reports as requested by the STD/HIV Program.

5. **Supplemental Surveillance and Emerging Protocols**

   **National HIV Behavioral Surveillance Project**
   • Conduct formative research of targeted populations in the New Orleans area by reviewing secondary data sources, interviewing a minimum of twelve community members and other key informants, and conducting a minimum of three focus groups.
   • Map the targeted populations in the New Orleans area to identify venues for possible data collection sites.
   • Recruit and administer the National HIV Behavioral Surveillance System (NHBS) survey instrument to 500 individuals living in high-risk areas in the New Orleans area.
   • Provide OraQuick ADVANCE rapid HIV 1/2 antibody tests to all 500 eligible respondents.
Data will be submitted to CDC monthly under the guidance of the STD/HIV Program.
Data analysis and reports will be produced as requested by the STD/HIV Program.

**STD Surveillance Network (SSuN)**
- Collect data from 100% of visits to the Delgado Personal Health Clinic for patients diagnosed with gonorrhea.
- Using CDC protocols, contact and interview via phone at least 240 patients diagnosed with gonorrhea in Orleans and Jefferson Parishes.
- Enter or merge and clean data into SSuN database.
- Submit data to CDC quarterly under the guidance of the STD/HIV Program.
- Produce data analysis and reports as requested by the STD/HIV Program.
- Collaborate with SSuN partners on protocols and data dissemination by participating on monthly conference calls.

**Perinatal Surveillance**
- Complete a standardized abstraction and follow-up form for approximately 45 pregnant women with HIV and their infants each quarter.
- Complete CDC case report forms for approximately 45 potential congenital syphilis cases each quarter.
- Produce data analysis and reports as requested by the STD/HIV Program.
- Review and summarize issues with 20 cases of HIV perinatal exposure for case review team.

**HIV Incidence and Viral Resistance Surveillance Projects**
- Oversee processing of an estimated 1,000 specimens annually by a CDC-contracted laboratory using the Serologic Testing Algorithm for Recent HIV Seroconversion (STARHS) assay according to the CDC protocol.
- Establish and oversee reporting of HIV genotype results from all laboratories conducting such testing.
- Participate in all CDC-required activities in the development and implementation of the program.
- Submit an annual progress report as directed by CDC which shall include:
  - Objectives and accomplishments of project activities
  - Summary data from specimens processed
  - Data analysis and reports produced as requested by the STD/HIV Program

6. **STD/HIV Care and Treatment Support**
- Triage all phone calls and e-mails from contracted agencies requesting technical support and training for CAREware.
- Track trends in training requests, develop quarterly CAREWare trainings to address common identified technical assistance needs and/or any new programmatic or reporting requirements from federal funders that would
impact the quantity, type or quality of data collected at the field level.

- Oversee the monthly review of client level data that is reported from contracted agencies; share irregularities and discrepancies with Supervisor and the Services unit for analysis and potential corrective action.
- Design and implement a monthly and quarterly “data cleaning” protocol to assure the highest degree of accuracy in the CAREWare data collected and reported.
- Assist in the preparation of all required reports that are generated from client level data, especially the annual Ryan White Services Report (RSR), the ADAP Data Report (ADR) and the Ryan White Implementation Tables.
- Prepare data that populates required fields in the Comprehensive Annual Progress and Evaluation Report (CAPER) and the Consolidated Plan that are submitted to HUD annually.
- Manage CAREWare as an independent Ryan White Part B database, as well as a data collection system that is a component of the cross-Part Louisiana CAREWare Access Network (LaCAN).
- Coordinate CAREWare updates and new reporting requirements with staff at HRSA, as well as with the original program designers/developers, JProg.
- Conduct routine, high level, data quality analyses as well as data matches with other data collection systems at SHP.
- Update and revise the CAREWare User Manual as necessary.
- Respond in a timely manner to all data requests for the purposes of program planning, trending regional or program specific client service utilization, quality, management, program evaluation, required client level or aggregate data reporting and other data needs as appropriate.
- Reconcile orders for ADAP formulary medications that are placed from each of the ten LSU Medical Centers with the invoices that are submitted to SHP from the current State Pharmaceutical Vendor.
- Address any discrepancies in ordering between those two entities, as well as any irregularities in pricing with the State Pharmaceutical Vendor staff.
- Enter all verified information into the State ISIS system to assure timely and accurate “draw downs” of federal funds.
- Oversee the design and implementation of a statewide consumer Needs Assessment.
- Oversee the collection of data and the writing of the Statewide Coordinated Statement of Need.
- Oversee a statewide, cross-Part, community-based process to develop a three-year Comprehensive Plan for HIV disease in Louisiana, assuring that the service needs of low income persons living with HIV infection are addressed in a high quality, cost efficient and comprehensive manner.
- Outline a curriculum and teaching/learning goals and objectives for a variety of training opportunities. These will include, but not be limited to:
  - New Hire Trainings for staff domiciled in the field (at least 4 per year);
  - Case Management Trainings with a focus on the new HRSA Monitoring Standards (at least 2 per year);
- Overview of Health Care Reform and the impact on Persons Living with HIV (PLHA) (at least two per year);
- Overview of Medicare Parts A – D, BAYOU Health (Louisiana Medicaid Managed Care program), Louisiana ADAP, the Pre-existing Condition Insurance Plan (PCIP), the main commercial insurance carriers in Louisiana any other health care safety net programs for low income persons (at least 2 per year); and
- Other training needs as identified by SHP staff or funded providers (up to 6 per year).

- Coordinate speakers/presenters for each of these trainings and oversee all logistical aspects of hosting a training (training room reservation, A/V needs, food/beverage, training supplies and accessories, etc.).
- Devise and implement an evaluation process to determine the success of the trainer in assisting each attendee in reaching their learning goals and objectives.
- Work closely with the Treatment Access and Benefits (TAB) Coordinator to develop a hierarchy of private and public health coverage benefits and/or a “Decision Tree” to assist Case Managers and clients in accessing the plans and programs that are most beneficial to their comprehensive health needs.
- In conjunction with the TAB Coordinator, establish guidelines for the use of Ryan White Part B resources to “wrap around” the various private and public health coverage benefits.
- Provide case conferencing opportunities for Case Managers to discuss the most complex and/or complicated client health coverage scenarios.

Special Project: HIV Systems Improvement/Linkage to Care
- Design and implement a program in the greater Baton Rouge metropolitan area to enhance the successful linkage to care for persons who are discharged from State or parish correctional facilities.
- Establish and oversee the first private/public partnership to exchange essential medical information between the SHP office and Our Lady of the Lake in Baton Rouge, with the goal of increasing medical care for persons who do not know their status, or who know their status but are currently “out of care.”
- Provide a minimum of three staff who shall be dedicated to achieving the program objectives related to the two main project goals stated above.
- Generate all written reports that are required for this grant funding prior to the stated due date, and work collaboratively to verify the narrative, tabular and statistical information included within.
- Convene and facilitate cross-Part, multi-agency, community-based meetings to assure that all program partners are working towards the same goals and objectives, are reducing the duplication of services and are addressing gaps in available services and programs.
- Work collaboratively with the Medical and Social Service staff at the East Baton Rouge Parish Prison to meet with HIV-infected prisoners prior to
discharge in order to conduct pre-release planning and linkage into care.

- Conduct follow up activities for no less than 6 weeks on all HIV-infected persons discharged from East Baton Rouge Parish Prison in order to assure linkage and maintenance in medical care.
- Document all interactions and outcomes in paper format, as well as through data entry into CAREWare, and contribute narrative and tabular information to all required reports and documents.
- Provide peer-to-peer support through phone calls, individual meetings, accompaniment to medical and social service appointments, basic health information and education, health systems/patient navigation and advocacy to HIV-infected individuals discharged from East Baton Rouge Parish Prison.
- Provide routine feedback to program staff regarding barriers to care for previously incarcerated persons and/or potential causes of recidivism. If this feedback generates action items for further review and implementation, the Contractor shall review and implement changes as directed by OPH staff.

7. Program Operations and Technical Assistance

- Review monthly invoices from CBOs contracted to provided CDC, HRSA, PREP, or HOPWA funded services to determine the fiscal accuracy and appropriateness of all charges.
- Provide technical assistance to Program Managers and Provider contractors in the interpretation and implementation of the Federal and State contracting and fund utilization guidelines.
- Provide Technical Assistance to Program Managers in the development, submission and follow-up of approximately 100 provider contracts annually.
- Produce monthly reports to summarize the budgets and expenditures of contracted CBOs.
- Conduct budget analysis and produce a minimum of four (4) monthly reports (one for each component of the STD/HIV Program) related to the status of funds, expenses, obligations, FTE, and workload.
- Convene quarterly budget meetings with Program Managers and Administrative Director to review expenditures and status of funds.
- Provide a minimum of twelve (12) budgets a year to submit with continuing grant applications and an average of two to four budgets to submit with new competitive applications.
- Provide technical assistance to the Program Director in the development and submission of the annual Organization Budget.
- Conduct all HIV rapid testing and HIV prevention material purchases and all STD related purchases, including the processing of orders, payment of invoices, and maintenance of the related budgets.
- Monitor the physical storage, inventory and distribution of all time- and temperature-sensitive HIV testing materials, STD testing supplies, and related educational materials.
• Provide adequate administrative and clerical support to ensure smooth program operations occur in SHP’s main office in New Orleans. Duties shall include, but are not limited to:
  • Managing the front office and greeting clients/visitors
  • Sorting and distributing mail, including pick up, transporting, and delivery
  • Composing and managing correspondence
  • Reviewing memos and emails for distribution
  • Scheduling appointments, conference calls, and arranging travel
  • Xeroxing, scanning, handling electronic transmissions, and organizing files
  • Creating documents, presentations, and spreadsheets
  • Preparing meeting agendas, organizing events, and overseeing projects
  • Recording minutes of meetings
  • Providing supervision of clerical staff.
• Provide adequate administrative and clerical support in designated OPH clinics that provide STD/HIV testing and STD treatment.
• Attend quarterly meetings with Program Managers and Administrative Director to review human resource services, including the process for hiring, payroll, and travel.

8. Deliverables for all Program Components
• Contractor shall demonstrate certification of compliance with required confidentiality standards. This will include documentation that all newly hired personnel receive appropriate confidentiality standards training and that all staff are re-trained on an annual basis. The CDC confidentiality standards may be reviewed at http://www.cdc.gov/hiv/surveillance.htm#tools.
• Contractor shall document compliance with all requirements for Protection of Human Subjects, when necessary. These requirements are overseen by the DHH Institutional Review Board (IRB) and can be reviewed on the following website: http://www.dhh.louisiana.gov/offices/publications/pubs-87/irbdoc.pdf.

Transition Plan: Contractor must have a task-specific and time-limited transition plan that will successfully implement Contractor responsibilities upon initiation of the contract, and transfer Contractor activities upon termination of the contract without interrupting Program operations.

C. Liquidated Damages
1. In the event the Contractor fails to meet the performance standards specified within the contract, the liquidated damages defined below may be assessed. If assessed, the liquidated damages will be used to reduce the Department’s payments to the Contractor or if the liquidated damages exceed amounts due from the Department, the Contractor will be required to make cash payments for the amount in excess.
   a. Late submission of any required report - $50 per working day, per report.
b. Failure to fill vacant contractually required key staff positions within 90 days - $500 per working day from 91st day of vacancy until filled with an employee approved by the Department.

c. Failure to maintain all client files and perform all file updates according to the requirements in the contract, as evidenced in client files when reviewed during monitoring site visit - $100 per client.

d. Late submission of invoices beginning 10 business days after the stated due date - $50 per working day per invoice.

2. The decision to impose liquidated damages may include consideration of some or all of the following factors:
   a. The duration of the violation;
   b. Whether the violation (or one that is substantially similar) has previously occurred;
   c. The Contractor's history of compliance;
   d. The severity of the violation and whether it imposes an immediate threat to the health or safety of the consumers;
   e. The “good faith” exercised by the Contractor in attempting to stay in compliance.

D. Fraud and Abuse
   1. The Contractor shall have internal controls and policies and procedures in place that are designed to prevent, detect, and report known or suspected fraud and abuse activities.

   2. Such policies and procedures must be in accordance with state and federal regulations. Contractor shall have adequate staffing and resources to investigate unusual incidents and develop and implement corrective action plans to assist the Contractor in preventing and detecting potential fraud and abuse activities.

E. Technical Requirements
   The Contractor must maintain hardware and software compatible with current DHH requirements which are as follows:
   - IBM compatible PC
   - Intel Core i5 or equivalent (or compatible successors)
   - 4 Gig of RAM memory (minimum)
   - Enough spare USB ports to accommodate thumb drives, etc.
   - 250GB Hard Drive (minimum)
   - Ethernet LAN interface for laptop and desktop PCs
   - 19” WXGA Digital Flat Panel LCD monitor with DVI (minimum)
   - Printer compatible with hardware and software required
   - High speed internet with email
   - DVD\CD ROM
   - Windows XP, SP3 or later version of operating system (minimum)
Windows Internet Explorer 8.0 (or later)
Microsoft Office 2007 or later
Appropriate firewalls for internet security
Compliant with industry-standard physical and procedural safeguards for confidential information (NIST 800-53A, ISO 17788, etc.).

F. Subcontracting
The contractor shall not contract with any other party for furnishing any of the work and professional services required by the contract without the express prior written approval of the Department. The contractor shall not substitute any subcontractor without the prior written approval of the Department. For subcontractor(s), before commencing work, the contractor will provide letters of agreement, contracts or other forms of commitment which demonstrates that all requirements pertaining to the contractor will be satisfied by all subcontractors through the following:
1. The Contractor subcontractor(s) will provide a written commitment to accept all contract provisions.
2. The subcontractor(s) will provide a written commitment to adhere to an established system of accounting and financial controls adequate to permit the effective administration of the contract.

G. Insurance Requirements
Insurance shall be placed with insurers with an A.M. Best's rating of no less than A-:
1. Contractor's Insurance
   The Contractor shall not commence work under this contract until it has obtained all insurance required herein. Certificates of Insurance, fully executed by officers of the Insurance Company shall be filed with the Department for approval. The Contractor shall not allow any subcontractor to commence work on subcontract until all similar insurance required for the subcontractor has been obtained and approved. If so requested, the Contractor shall also submit copies of insurance policies for inspection and approval of the Department before work is commenced. Said policies shall not be canceled, permitted to expire, or be changed without thirty (30) days notice in advance to the Department and consented to by the Department in writing and the policies shall so provide.

2. Compensation Insurance
   Before any work is commenced, the Contractor shall obtain and maintain during the life of the contract, Workers' Compensation Insurance for all of the Contractor's employees employed to provide services under the contract. In case any work is sublet, the Contractor shall require the subcontractor similarly to provide Workers' Compensation Insurance for all the latter's employees, unless such employees are covered by the protection afforded by the Contractor.

30
case any class of employees engaged in work under the contract at the site of
the project is not protected under the Workers' Compensation Statute, the
Contractor shall provide for any such employees, and shall further provide or
cause any and all subcontractors to provide Employer's Liability Insurance for the
protection of such employees not protected by the Workers' Compensation
Statute.

3. Commercial General Liability Insurance
The Contractor shall maintain during the life of the contract such Commercial
General Liability Insurance which shall protect Contractor, the Department, and
any subcontractor during the performance of work covered by the contract from
claims or damages for personal injury, including accidental death, as well as for
claims for property damages, which may arise from operations under the
contract, whether such operations be by the Contractor or by a subcontractor, or
by anyone directly or indirectly employed by either of them, or in such a manner
as to impose liability to the Department. Such insurance shall name the
Department as additional insured for claims arising from or as the result of the
operations of the Contactor or its subcontractors. In the absence of specific
regulations, the amount of coverage shall be as follows: Commercial General
Liability Insurance, including bodily injury, property damage and contractual
liability, with combined single limits of $1,000,000.

4. Insurance Covering Special Hazards
Special hazards as determined by the Department shall be covered by rider or
riders in the Commercial General Liability Insurance Policy or policies herein
elsewhere required to be furnished by the Contractor, or by separate policies of
insurance in the amounts as defined in any Special Conditions of the contract
included therewith.

5. Licensed and Non-Licensed Motor Vehicles
The Contractor shall maintain during the life of the contract, Automobile Liability
Insurance in an amount not less than combined single limits of $1,000,000 per
occurrence for bodily injury/property damage. Such insurance shall cover the
use of any non-licensed motor vehicles engaged in operations within the terms of
the contract on the site of the work to be performed there under, unless such
coverage is included in insurance elsewhere specified.

6. Subcontractor's Insurance
The Contractor shall require that any and all subcontractors, which are not
protected under the Contractor's own insurance policies, take and maintain
insurance of the same nature and in the same amounts as required of the
Contractor.

H. Resources Available to Contractor
The Louisiana OPH STD/HIV Program will have an assigned staff member who will
be responsible for primary oversight of the contract. This individual will schedule meetings to discuss progress of activities and problems identified.

I. **Contact Personnel:**
All work will be performed by the contractor will be monitored by:

DeAnn Gruber, PhD, LCSW
Administrative Director
Department of Health and Hospitals
Louisiana OPH STD/HIV Program
1450 Poydras Street, Suite 2136
New Orleans, LA 70112
Phone: 504-568-7474
FAX: 504-568-7044
Email: deann.gruber@la.gov

J. **Term of Contract**
The contract shall commence on or near the date approximated in the Schedule of Events. The term of this contract shall be for a period of up to 36 months. The continuation of this contract is contingent upon the appropriation of funds by the legislature to fulfill the requirements of the contract.

K. **Payment**
The contractor shall submit deliverables in accordance with established timelines and shall submit itemized invoices monthly or as defined in the contract terms. Payment of invoices is subject to approval of STD/HIV Program Administrative Director.

III. **PROPOSALS**

A. **General Information**
This section outlines the provisions which govern determination of compliance of each Proposer's response to the RFP. The Department shall determine, at its sole discretion, whether or not the requirements have been reasonably met. Omissions of required information shall be grounds for rejection of the firm's proposal by the Department.

B. **Contact After Solicitation Deadline**
After the date for receipt of proposals, no proposer initiated contact relative to the solicitation will be allowed between the proposers and DHH until an award is made.

C. **Code of Ethics**
Proposers are responsible for determining that there will be no conflict or violation of the Ethics Code if their company is awarded the contract. The Louisiana Board of
Ethics is the only entity which can officially rule on ethics issues.

D. Rejection and Cancellation
Issuance of this solicitation does not constitute a commitment by DHH to award a contract or contracts. The Department reserves the right to reject all proposals received in response to this solicitation.

In accordance with the provisions of R.S. 39:2182, in awarding contracts after August 15, 2010, any public entity is authorized to reject a proposal or bid from, or not award the contract to, a business in which any individual with an ownership interest of five percent or more, has been convicted of, or has entered a plea of guilty or nolo contendere to any state felony or equivalent federal felony crime committed in the solicitation or execution of a contract or bid awarded under the laws governing public contracts under the provisions of Chapter 10 of Title 38 of the Louisiana Revised Statutes of 1950, professional, personal, consulting, and social services procurement under the provisions of Chapter 16 of this Title, or the Louisiana Procurement Code under the provisions of Chapter 17 of this Title.

E. Award Without Discussion
The Secretary of DHH reserves the right to make an award without presentations by proposers or further discussion of proposals received.

F. Assignments
Any assignment, pledge, joint venture, hypothecation of right or responsibility to any person, firm or corporation should be fully explained and detailed in the proposal. Information as to the experience and qualifications of proposed subcontractors or joint ventures should be included in the proposal. In addition, written commitments from any subcontractors or joint ventures should be included as part of the proposal.

G. Proposal Cost
The proposer assumes sole responsibility for any and all costs associated with the preparation and reproduction of any proposal submitted in response to this RFP, and shall not include this cost or any portion thereof in the proposed contract price.

H. Errors and Omissions
The State reserves the right to make corrections due to minor errors of proposer identified in proposals by State or the proposer. The State, at its option, has the right to request clarification or additional information from proposer.

I. Ownership of Proposal
All proposals become the property of the Department and will not be returned to the proposer. The Department retains the right to use any and all ideas or adaptations of ideas contained in any proposal received in response to this solicitation. Selection or rejection of the offer will not affect this right. Once a contract is awarded, all proposals will become subject to the Louisiana Public Records Act.
J. Procurement Library/Resources Available To Proposer
Department program manuals and pertinent Federal and State regulations, as well as other materials, are available for review include: Louisiana Travel Guide (PPM 49, http://www.doa.louisiana.gov/osp/travel/travelOffice.htm), previous reports to CDC, the Louisiana Statewide Comprehensive HIV/STD Prevention Community Plan, HIV Prevention Contractor Guidelines, and HIV Prevention training manuals and protocols. Many of these documents may be viewed on the following website: http://new.dhh.louisiana.gov/index.cfm/page/928.

Request for an appointment to view hard copies of these documents and others that are not available on the website must be made through the STD/HIV Program by contacting D’Ann McGary at 504-568-7474 or dann.mcgary@la.gov. Work space is available to review materials. Items may not be removed, but copies may be made for 25 cents per page. Cash is not acceptable. Checks must be made payable to: Louisiana Department of Health and Hospitals.

K. Proposal Submission
1. All proposals must be received by the due date and time indicated on the Schedule of Events. Proposals received after the due date and time will not be considered. It is the sole responsibility of each proposer to assure that its proposal is delivered at the specified location prior to the deadline. Proposals which, for any reason, are not so delivered will not be considered.

2. Proposer shall submit one (1) original hard copy (the Certification Statement must have an original signature signed in ink) and should submit one (1) electronic copy (cd or flash drive) of the entire proposal, and ten (10) hard copies of the proposal. No facsimile or emailed proposals will be accepted. Proposer may provide one electronic copy of the Redacted proposal (cd or flash drive). The cost proposal and financial statements should be submitted separately from the technical proposal; however, for mailing purposes, all packages may be shipped in one container.

3. Proposals must be submitted via U.S. mail, courier or hand delivered to:

   If courier mail or hand delivered:
   Mary Fuentes
   Department of Health and Hospitals
   Division of Contracts and Procurement Support
   628 N 4th Street, 5th Floor
   Baton Rouge, LA 70802

   If delivered via US Mail:
   Mary Fuentes
   Department of Health and Hospitals
L. Proprietary and/or Confidential Information
   1. Pursuant to the Louisiana Public Records Act (La. R.S. 44.1 et. seq.), all public proceedings, records, contracts, and other public documents relating to this RFP shall be open to public inspection. Proposers should refer to the Louisiana Public Records Act for further clarification.

M. Proposal Format
   1. An item-by-item response to the Request for Proposals is requested.

   2. There is no intent to limit the content of the proposals, and proposers may include any additional information deemed pertinent. Emphasis should be on simple, straightforward and concise statements of the proposer's ability to satisfy the requirements of the RFP.

N. Requested Proposal Outline:
   • Introduction/Administrative Data
   • Work Plan/Project Execution
   • Relevant Corporate Experience
   • Personnel Qualifications
   • Additional Information
   • Corporate Financial Condition
   • Cost and Pricing Analysis

O. Proposal Content
   1. Proposals should include information that will assist the Department in determining the level of quality and timeliness that may be expected. The agency shall determine, at its sole discretion, whether or not the RFP provisions have been reasonably met. The proposal should describe the background and capabilities of the proposer, give details on how the services will be provided, and shall include a breakdown of proposed costs. It should also include information that will assist the Department in determining the level of quality and timeliness that may be expected. Work samples may be included as part of the proposal.

   2. Proposals should address how the proposer intends to assume complete responsibility for timely performance of all contractual responsibilities in accordance with federal and state laws, regulations, policies, and procedures. All components described in this RFP should be addressed in its entirety.
3. Proposals should define proposer’s functional approach in providing services and identify the tasks necessary to meet the RFP requirements of the provision of services, as outlined in Section II.

4. Introduction/Administrative Data

a. The introductory section should contain summary information about the proposer's organization. This section should state proposer’s knowledge and understanding of the needs and objectives of DHH Office of Public Health, STD/HIV Program as related to the scope of this RFP. It should further cite its ability to satisfy provisions of the Request for Proposal.

b. This introductory section should include a description of how the proposer's organizational components communicate and work together in both an administrative and functional capacity from the top down. This section should contain a brief summary setting out the proposer's management philosophy including, but not limited to, the role of Quality Control, Professional Practices, Supervision, Distribution of Work and Communication Systems. This section should include an organizational chart displaying the proposer's overall structure.

c. This section should also include the following information:
   i. Location of Active Office with Full Time Personnel, include all office locations (address) with full time personnel.
   ii. Name and address of principal officer;
   iii. Name and address for purpose of issuing checks and/or drafts;
   iv. For corporations, a statement listing name(s) and address(es) of principal owners who hold five percent interest or more in the corporation.
   v. If out-of-state proposer, give name and address of local representative; if none, so state;
   vi. If any of the proposer's personnel named is a current or former Louisiana state employee, indicate the Agency where employed, position, title, termination date, and social security number;
   vii. If the proposer was engaged by DHH within the past twenty-four (24) months, indicate the contract number and/or any other information available to identify the engagement; if not, so state; and
   viii. Proposer's state and federal tax identification numbers.
   ix. Veteran/Hudson Initiative: Proposer should demonstrate participation in Veteran Initiative and Hudson Initiative Small Entrepreneurships or explanation if not applicable. (See Attachment I)

d. The following information must be included in the proposal:
   i. Certification Statement: The proposer must sign and submit an original Certification Statement (See Attachment II).
5. Work Plan/Project

The proposer should articulate an understanding of, and ability to effectively implement services as outlined within Section II of the RFP. In this section, the proposer should state the approach it intends to use in achieving each objective of the project as outlined, including a project work plan and schedule for implementation. In particular, the proposer should:

a. Provide a written explanation of the organizational structures of both operations and program administration, and how those structures will support service implementation. Individual components should include plans for supervision, training, technical assistance, as well as collaboration as appropriate.

b. Provide a strategic overview including all elements to be provided.

c. Demonstrate an ability to hire staff with the necessary experience and skill set that will enable them to effectively meet the needs of consumers served.

d. Demonstrate an understanding of, and ability to implement, the various types of organizational strategies to be integrated within the day to day operations, which are critical in organizing their functioning and maximizing productivity.

e. Demonstrate knowledge of services to be provided and effective strategies to achieve objectives and effective service delivery.

f. Describe approach and strategy for project oversight and management.

g. Articulate the need for, and the ability to implement, a plan for continuous quality improvement; this includes (but is not limited to) reviewing the quality of services provided and staff productivity.

h. Demonstrate an understanding of and ability to implement data collection as needed.

i. Explain processes that will be implemented in order to complete all tasks and phases of the project in a timely manner, as outlined within Section II.

j. Articulate the ability to develop and implement an All Hazards Response plan in the event of an emergency event.

k. Refer to specific documents and reports that can be produced as a result of completing tasks, to achieve the requested deliverables.

l. Identify all assumptions or constraints on tasks.
m. Discuss what flexibility exists within the work plan to address unanticipated problems which might develop during the contract period.

n. If the proposer intends to subcontract for portions of the work, the proposer should include specific designations of the tasks to be performed by the subcontractor.

o. Document procedures to protect the confidentiality of records in DHH databases, including records in databases that may be transmitted electronically via e-mail or the Internet.

6. Relevant Corporate Experience
   a. The proposal should indicate the firm has a record of prior successful experience in the design and implementation of the services sought through this RFP. Proposers should include statements specifying the extent of responsibility on prior projects and a description of the projects scope and similarity to the projects outlined in this RFP. All experience under this section should be in sufficient detail to allow an adequate evaluation by the Department. The proposer should have, within the last 24 months completed a similar type project. Proposers should give at least two customer references for projects completed in at least the last 24 months. References should include the name, email address and telephone number of each contact person.

   b. In this section, a statement of the proposer’s involvement in litigation that could affect this work should be included. If no such litigation exists, proposer should so state.

7. Personnel Qualifications
   a. The purpose of this section is to evaluate the relevant experience, resources, and qualifications of the proposed staff to be assigned to this project. The experience of proposer’s personnel in implementing similar services to those to be provided under this RFP will be evaluated. The adequacy of personnel for the proposed project team will be evaluated on the basis of project tasks assigned, allocation of staff, professional skill mix, and level of involvement of personnel. The Proposer should refer to Attachment VII when proposing staff for this contract.

   b. Proposers should state job responsibilities, workload and lines of supervision. An organizational chart identifying individuals and their job titles and major job duties should be included. The organizational chart should show lines of responsibility and authority.

   c. Job descriptions, including the percentage of time allocated to the project and the number of personnel should be included and should indicate minimum
education, training, experience, special skills and other qualifications for each staff position as well as specific job duties identified in the proposal. Job descriptions should indicate if the position will be filled by a sub-contractor.

d. Key personnel and the percentage of time directly assigned to the project should be identified.

e. Résumés of all known personnel should be included. Resumes of proposed personnel should include, but not be limited to:
   - Experience with proposer,
   - Previous experience in projects of similar scope and size.
   - Educational background, certifications, licenses, special skills, etc.

f. If subcontractor personnel will be used, the proposer should clearly identify these persons, if known, and provide the same information requested for the proposer’s personnel.

8. Additional Information
   As an appendix to its proposal, if available, proposers should provide copies of any policies and procedures manuals applicable to this contract, inclusive of organizational standards or ethical standards. This appendix should also include a copy of proposer’s All Hazards Response Plan, if available.

9. Corporate Financial Condition
   a. The organization’s financial solvency will be evaluated. The proposer’s ability to demonstrate adequate financial resources for performance of the contract or the ability to obtain such resources as required during performance under this contract will be considered.

   b. Proposal should include for each of the last three (3) years, copies of financial statements, preferably audited, including at least a balance sheet and profit and loss statement, or other appropriate documentation which would demonstrate to the Department the proposer’s financial resources sufficient to conduct the project.

10. Cost and Pricing Analysis
   a. Proposer shall specify costs for performance of tasks. Proposal shall include all anticipated costs of successful implementation of all deliverables outlined. An item by item breakdown of costs shall be included in the proposal.

   b. Proposers shall submit the breakdown in a similar format to the attached sample cost template form (See Attachment V) for each year of the contract to demonstrate how cost was determined.

P. Evaluation Criteria
The following criteria will be used to evaluate proposals:

1. Evaluations will be conducted by a Proposal Review Committee.

2. Evaluations of the financial statements will be conducted by a member of the DHH Fiscal Division.

3. Scoring will be based on a possible total of 100 points. The proposal with the highest total score will be recommended for award.

4. Cost Evaluation:
   a. The proposer with the lowest total cost for all three years shall receive 25 points. Other proposers shall receive points for cost based upon the following formula:

   \[ CPS = (LPC/PC) \times 25 \]

   CPS = Cost Proposal Score
   LPC = Lowest Proposal Cost of all proposers
   PC = Individual Proposal Cost

   b. The assignment of the 25 points based on the above formula will be calculated by a member of the DHH Contracts Office staff.

5. Evaluation Criteria and Assigned Weights:

<table>
<thead>
<tr>
<th>Evaluation Criteria</th>
<th>Assigned Weight</th>
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<tbody>
<tr>
<td>Introduction/Understanding of RFP</td>
<td>5</td>
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<tr>
<td>Work Plan/Project Execution</td>
<td>20</td>
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<tr>
<td>Corporate Experience</td>
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<tr>
<td>Qualification of Personnel</td>
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<tr>
<td>Financial Statements</td>
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</tr>
<tr>
<td>Cost</td>
<td>25</td>
</tr>
<tr>
<td>Veterans/Hudson Initiatives</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Q. On-Site Presentations/Demonstrations
   Not Required for this RFP.

R. Announcement of Award
   The Department will award the contract to the proposer with the highest graded proposal and deemed to be in the best interest of the Department. All proposers will be notified of the contract award. The Department will notify the successful proposer and proceed to negotiate contract terms.
IV. CONTRACTUAL INFORMATION

A. The contract between DHH and the Contractor shall include the standard DHH contract form (CF-1/attached) including a negotiated scope of work, the RFP and its amendments and addenda, and the Contractor’s proposal. The attached CF-1 contains basic information and general terms and conditions of the contract to be awarded.

B. Mutual Obligations and Responsibilities: The state requires that the mutual obligations and responsibilities of DHH and the successful proposer be recorded in a written contract. While final wording will be resolved at contract time, the intent of the provisions will not be altered and will include all provisions as specified in the attached CF-1 (Attachment III).

C. Retainage - the Department shall secure a retainage of 10% from all billings under the contract as surety for performance. On successful completion of contract deliverables, the retainage amount may be released on an annual basis. Within ninety (90) days of the termination of the contract, if the contractor has performed the contract services to the satisfaction of the Department and all invoices appear to be correct, DHH shall release all retained amounts to the contractor.

D. In addition, to terms of the CF-1 and supplements, the following will be incorporated into the contract awarded through this RFP:

1. Personnel Assignments: The Contractor’s key personnel assigned to this contract may not be replaced without the written consent of the Department. Such consent shall not be unreasonably withheld or delayed provided an equally qualified replacement is offered. Key personnel for these purposes will be determined during contract negotiation.

2. Force Majeure: The contractor and the Department are excused from performance under contract for any period they may be prevented from performance by an Act of God, strike, war, civil disturbance, epidemic or court order.

3. Order of Precedence: The contract shall, to the extent possible, be construed to give effect to all provisions contained therein; however, where provisions conflict, the intent of the parties shall be determined by giving a first priority to provisions of the contract excluding the RFP and the proposal; second priority to the provisions of the RFP; and third priority to the provisions of the proposal.

4. Entire Agreement: This contract, together with the RFP and addenda issued thereto by the Department, the proposal submitted by the contractor in
response to the Department’s RFP, and any exhibits specifically incorporated herein by reference constitute the entire agreement between the parties with respect to the subject matter.

5. Board Resolution/Signature Authority: The contractor, if a corporation, shall secure and attach to the contract a formal Board Resolution indicating the signatory to the contract is a corporate representative and authorized to sign said contract.

6. Warranty to Comply with State and Federal Regulations: The contractor shall warrant that it shall comply with all state and federal regulations as they exist at the time of the contract or as subsequently amended.

7. Warranty of Removal of Conflict of Interest: The contractor shall warrant that it, its officers, and employees have no interest and shall not acquire any interest, direct or indirect, which conflicts in any manner or degree with the performance of services hereunder. The contractor shall periodically inquire of its officers and employees concerning such conflicts, and shall inform the Department promptly of any potential conflict. The contractor shall warrant that it shall remove any conflict of interest prior to signing the contract.

8. If the contractor is a corporation, the following requirement must be met prior to execution of the contract:
   a. If a for-profit corporation whose stock is not publicly traded-the contractor must file a Disclosure of Ownership form with the Louisiana Secretary of State.
   b. If the contractor is a corporation not incorporated under the laws of the State of Louisiana-the contractor must obtain a Certificate of Authority pursuant to R.S. 12:301-302 from the Louisiana Secretary of State.
   c. The contractor must provide written assurance to the agency from contractor’s legal counsel that the contractor is not prohibited by its articles of incorporation, bylaws or the laws under which it is incorporated from performing the services required under the contract.

Attachments:
I. Veterans and Hudson Initiatives
II. Certification Statement
III. DHH Standard Contract Form (CF-1)
IV. HIPAA BAA
V. Sample Cost Breakdown Template
VI. Sample Schedule of Grant Applications and Reports
VII. Sample Staffing Positions and Key Personnel
VIII. Sample Out-of-State Staff Travel Per Year
Minimum Required Language - Request For Proposal (RFP)  
Veteran-Owned and Service-Connected Small Entrepreneurships (Veteran Initiative) and Louisiana Initiative for Small Entrepreneurships (Hudson Initiative) Programs

**Participation of Veteran Initiative and Hudson Initiative small entrepreneurship will be scored as part of the technical evaluation.**

The State of Louisiana Veteran and Hudson Initiatives are designed to provide additional opportunities for Louisiana-based small entrepreneurship (sometimes referred to as LaVet’s and SE’s respectively) to participate in contracting and procurement with the state. A certified Veteran-Owned and Service-Connected Disabled Veteran-Owned small entrepreneurship (LaVet) and a Louisiana Initiative for Small Entrepreneurships (Hudson Initiative) small entrepreneurship are businesses that have been certified by the Louisiana Department of Economic Development. All eligible vendors are encouraged to become certified. Qualification requirements and online certification are available at [https://smallbiz.louisianaforward.com/index_2.asp](https://smallbiz.louisianaforward.com/index_2.asp).

Ten percent (10%) of the total evaluation points on this RFP are reserved for proposers who are themselves a certified Veteran or Hudson Initiative small entrepreneurship or who will engage the participation of one or more certified Veteran or Hudson Initiatives small entrepreneurships as subcontractors.

Reserved points shall be added to the applicable proposers’ evaluation score as follows:

**Proposer Status and Reserved Points**
- Proposer is a certified small entrepreneurship: Full amount of the reserved points
- Proposer is not a certified small entrepreneurship but has engaged one or more certified small entrepreneurships to participate as subcontractors or distributors. Points will be allocated based on the following criteria:
  - the number of certified small entrepreneurships to be utilized
  - the experience and qualifications of the certified small entrepreneurship(s)
  - the anticipated earnings to accrue to the certified small entrepreneurship(s)

If a proposer is not a certified small entrepreneurship as described herein, but plans to use certified small entrepreneurship(s), proposer shall include in their proposal the names of their certified Veteran Initiative or Hudson Initiative small entrepreneurship subcontractor(s), a description of the work each will perform, and the dollar value of each subcontract.

During the term of the contract and at expiration, the Contractor will also be required to report Veteran-Owned and Service-Connected Disabled Veteran-Owned and Hudson Initiative small entrepreneurship subcontractor or distributor participation and the dollar amount of each.

The statutes (R.S 39:2171 *et. seq.*) concerning the Veteran Initiative may be viewed at

A current list of certified Veteran-Owned and Service-Connected Disabled Veteran-Owned and Hudson Initiative small entrepreneurship may be obtained from the Louisiana Economic Development Certification System at https://smallbiz.louisianaforward.com/index_2.asp. Additionally, a list of Hudson and Veteran Initiative small entrepreneurship, which have been certified by the Louisiana Department of Economic Development and who have opted to register in the State of Louisiana LaGov Supplier Portal https://lagoverpvendor.doa.louisiana.gov/irj/portal/anonymous?guest_user=self_reg may be accessed from the State of Louisiana Procurement and Contract (LaPAC) Network http://wwwprd.doa.louisiana.gov/osp/lapac/vendor/srchven.asp. When using this site, determine the search criteria (i.e. alphabetized list of all certified vendors, by commodities, etc.) and select SmallE, VSE, or DVSE.

Rev. 12/1/11
CERTIFICATION STATEMENT

ATTACHMENT II

The undersigned hereby acknowledges she/he has read and understands all requirements and specifications of the Request for Proposals (RFP), including attachments.

OFFICIAL CONTACT. The State requests that the Proposer designate one person to receive all documents and the method in which the documents are best delivered. Identify the Contact name and fill in the information below: (Print Clearly)

<table>
<thead>
<tr>
<th>Date</th>
<th></th>
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<tbody>
<tr>
<td>Official Contact Name</td>
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<tr>
<td>Email Address</td>
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<tr>
<td>Fax Number with Area Code</td>
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<tr>
<td>Telephone Number</td>
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<td>Street Address</td>
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<tr>
<td>City, State, and Zip</td>
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</tbody>
</table>

Proposer certifies that the above information is true and grants permission to the Department to contact the above named person or otherwise verify the information I have provided.

By its submission of this proposal and authorized signature below, proposer certifies that:
1. The information contained in its response to this RFP is accurate;
2. Proposer accepts the procedures, evaluation criteria, contract terms and conditions, and all other administrative requirements set forth in this RFP.
3. Proposer accepts the procedures, evaluation criteria, mandatory contract terms and conditions, and all other administrative requirements set forth in this RFP.
4. Proposer's technical and cost proposals are valid for at least 120 days from the date of proposer’s signature below;
5. Proposer understands that if selected as the successful Proposer, he/she will have ten (10) business days from the date of delivery of initial contract in which to complete contract negotiations, if any, and execute the final contract document. The Department has the option to waive this deadline if actions or inactions by the Department cause the delay.
6. Proposer certifies, by signing and submitting a proposal for $25,000 or more, that their company, any subcontractors, or principals are not suspended or debarred by the General Services Administration (GSA) in accordance with the requirements in OMB Circular A-133. (A list of parties who have been suspended or debarred can be viewed via the internet at www.epls.gov).

Authorized Signature: ________________________________
(Original signature only. No electronic or photocopy accepted.)

Typed or Printed Name: ________________________________

Title: ________________________________

Company Name: ________________________________
CONTRACT BETWEEN STATE OF LOUISIANA
DEPARTMENT OF HEALTH AND HOSPITALS

AND

FOR

☐ Personal Services  ☐ Professional Services  ☐ Consulting Services  ☐ Social Services

1) Contractor (Legal Name if Corporation)  5) Federal Employer Tax ID# or Social Security # (11 digits)

2) Street Address  6) Parish(es) Served

City and State  Zip Code  7) License or Certification #

3) Telephone Number  8) Contractor Status
   Subrecipient: ☐ Yes  ☐ No
   Corporation: ☐ Yes  ☐ No
   For Profit: ☐ Yes  ☐ No
   Publicly Traded: ☐ Yes  ☐ No

4) Mailing Address (if different)  8a) CFDA# (Federal Grant #)

City and State  Zip Code

9) Brief Description Of Services To Be Provided:
Include description of work to be performed and objectives to be met; description of reports or other deliverables and dates to be received (when applicable). In a consulting service, a resume of key contract personnel performing duties under the terms of the contract and amount of effort each will provide under terms of contract should be attached.

10) Effective Date  11) Termination Date

12) This contract may be terminated by either party upon giving thirty (30) days advance written notice to the other party with or without cause but in no case shall continue beyond the specified termination date.

13) Maximum Contract Amount

14) Terms of Payment
If progress and/or completion of services are provided to the satisfaction of the initiating Office/Facility, payments are to be made as follows: (stipulate rate or standard of payment, billing intervals, invoicing provisions, etc.). Contractor obligated to submit final invoices to Agency within fifteen (15) days after termination of contract.

<table>
<thead>
<tr>
<th>PAYMENT WILL BE MADE ONLY UPON APPROVAL OF:</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Title</td>
</tr>
</tbody>
</table>

15) Special or Additional Provisions which are incorporated herein, if any (IF NECESSARY, ATTACH SEPARATE SHEET AND REFERENCE):
During the performance of this agreement, the Contractor hereby agrees to the following terms and conditions:

1. Contractor hereby agrees to adhere as applicable to the mandates dictated by Titles VI and VII of the Civil Rights Act of 1964, as amended; the Vietnam Era Veterans' Readjustment Assistance Act of 1974; Americans with Disabilities Act of 1990 as amended; the Rehabilitation Act of 1973 as amended; Sec. 202 of Executive Order 11246 as amended, and all applicable requirements imposed by or pursuant to the regulations of the U. S. Department of Health and Human Services. Contractor agrees not to discriminate in the rendering of services to and/or employment of individuals because of race, color, religion, sex, age, national origin, handicap, political beliefs, disabled veteran, veteran status, or any other non-merit factor.

2. Contractor shall abide by the laws and regulations concerning confidentially which safeguard information and the patient/client confidentiality. Information obtained shall not be used in any manner except as necessary for the proper discharge of Contractor’s obligations. (The Contractor shall establish, subject to review and approval of the Department, confidentiality rules and facility access procedures.)

3. The State Legislative Auditor, Office of the Governor, Division of Administration, and Department Auditors or those designated by the Department shall have the option of auditing all accounts pertaining to this contract during the contract and for a three year period following final payment. Contractor grants to the State of Louisiana, through the Office of the Legislative Auditor, Department of Health and Hospitals, and Inspector General's Office, Federal Government and/or other such officially designated body the right to inspect and review all books and records pertaining to services rendered under this contract, and further agrees to guidelines for fiscal administration as may be promulgated by the Department. Records will be made available during normal working hours.

Contractor shall comply with federal and state laws and/or DHH Policy requiring an audit of the Contractor’s operation as a whole or of specific program activities. Audit reports shall be sent within thirty (30) days after the completion of the audit, but no later than six (6) months after the end of the audit period. If an audit is performed within the contract period, for any period, four (4) copies of the audit report shall be sent to the Department of Health and Hospitals, Attention: Division of Fiscal Management, P.O. Box 91117, Baton Rouge, LA 70821-3797 and one (1) copy of the audit shall be sent to the originating DHH Office.

4. Contractor agrees to retain all books, records and other documents relevant to the contract and funds expended thereunder for at least four (4) years after final payment or as prescribed in 45 CFR 74:53 (b) whichever is longer. Contractor shall make available to the Department such records within thirty (30) days of the Department’s written request and shall deliver such records to the Department’s central office in Baton Rouge, Louisiana, all without expense to the Department.
Contractor shall allow the Department to inspect, audit or copy records at the contractor’s site, without expense to the Department.

5. Contractor shall not assign any interest in this contract and shall not transfer any interest in the same (whether by assignment or novation), without written consent of the Department thereto, provided, however, that claims for money due or to become due to Contractor from the Department under this contract may be assigned to a bank, trust company or other financial institution without advanced approval. Notice of any such assignment or transfer shall be promptly furnished to the Department and the Division of Administration, Office of Contractual Review.

6. Contractor hereby agrees that the responsibility for payment of taxes from the funds received under this contract shall be Contractor’s. The contractor assumes responsibility for its personnel providing services hereunder and shall make all deductions for withholding taxes, and contributions for unemployment compensation funds, and shall maintain, at Contractor’s expense, all necessary insurance for its employees, including but not limited to automobile insurance, workers’ compensation and general liability insurance.

7. Contractor shall obtain and maintain during the contract term all necessary insurance including automobile insurance, workers’ compensation insurance, and general liability insurance. The required insurances shall protect the Contractor, the Department of Health and Hospitals, and the State of Louisiana from all claims related to Contractor’s performance of this contract. Certificates of Insurance shall be filed with the Department for approval. Said policies shall not be canceled, permitted to expire, or be changed without thirty (30) days advance written notice to the Department. Commercial General Liability Insurance shall provide protection during the performance of work covered by the contract from claims or damages for personal injury, including accidental death, as well as claims for property damages, with combined single limits prescribed by the Department.

8. In cases where travel and related expenses are required to be identified separate from the fee for services, such costs shall be in accordance with State Travel Regulations. The contract contains a maximum compensation which shall be inclusive of all charges including fees and travel expenses.

9. No funds provided herein shall be used to urge any elector to vote for or against any candidate or proposition on an election ballot nor shall such funds be used to lobby for or against any proposition or matter having the effect of law being considered by the legislature or any local governing authority. This provision shall not prevent the normal dissemination of factual information relative to a proposition or any election ballot or a proposition or matter having the effect of law being considered by the legislature or any local governing authority. Contracts with individuals shall be exempt from this provision.
10. Should contractor become an employee of the classified or unclassified service of the State of Louisiana during the effective period of the contract, Contractor must notify his/her appointing authority of any existing contract with State of Louisiana and notify the contracting office of any additional state employment. This is applicable only to contracts with individuals.

11. All non-third party software and source code, records, reports, documents and other material delivered or transmitted to Contractor by State shall remain the property of State, and shall be returned by Contractor to State, at Contractor's expense, at termination or expiration of this contract. All non-third party software and source code, records, reports, documents, or other material related to this contract and/or obtained or prepared by Contractor in connection with the performance of the services contracted for herein shall become the property of State, and shall be returned by Contractor to State, at Contractor's expense, at termination or expiration of this contract.

12. Contractor shall not enter into any subcontract for work or services contemplated under this contract without obtaining prior written approval of the Department. Any subcontracts approved by the Department shall be subject to conditions and provisions as the Department may deem necessary; provided, however, that notwithstanding the foregoing, unless otherwise provided in this contract, such prior written approval shall not be required for the purchase by the contractor of supplies and services which are incidental but necessary for the performance of the work required under this contract. No subcontract shall relieve the Contractor of the responsibility for the performance of contractual obligations described herein.

13. No person and no entity providing services pursuant to this contract on behalf of contractor or any subcontractor is prohibited from providing such services by the provisions of R.S. 42:1113 as amended in the 2008 Regular Session of the Louisiana Legislature.

14. No claim for services furnished or requested for reimbursement by Contractor, not provided for in this contract, shall be allowed by the Department. In the event the Department determines that certain costs which have been reimbursed to Contractor pursuant to this or previous contracts are not allowable, the Department shall have the right to set off and withhold said amounts from any amount due the Contractor under this contract for costs that are allowable.

15. This contract is subject to and conditioned upon the availability and appropriation of Federal and/or State funds; and no liability or obligation for payment will develop between the parties until the contract has been approved by required authorities of the Department; and, if contract exceeds $20,000, the Director of the Office of Contractual Review, Division of Administration in accordance with La. R.S. 39:1502.
16. The continuation of this contract is contingent upon the appropriation of funds from the legislature to fulfill the requirements of the contract. If the Legislature fails to appropriate sufficient monies to provide for the continuation of the contract, or if such appropriation is reduced by the veto of the Governor or by any means provided in the appropriations act to prevent the total appropriation for the year from exceeding revenues for that year, or for any other lawful purpose, and the effect of such reduction is to provide insufficient monies for the continuation of the contract, the contract shall terminate on the date of the beginning of the first fiscal year for which funds are not appropriated.

17. Any alteration, variation, modification, or waiver of provisions of this contract shall be valid only when reduced to writing, as an amendment duly signed, and approved by required authorities of the Department; and, if contract exceeds $20,000, approved by the Director of the Office of Contractual Review, Division of Administration. Budget revisions approved by both parties in cost reimbursement contracts do not require an amendment if the revision only involves the realignment of monies between originally approved cost categories.

18. Any contract disputes will be interpreted under applicable Louisiana laws and regulations in Louisiana administrative tribunals or district courts as appropriate.

19. Contractor will warrant all materials, products and/or services produced hereunder will not infringe upon or violate any patent, copyright, trade secret, or other proprietary right of any third party. In the event of any such claim by any third party against DHH, the Department shall promptly notify Contractor in writing and Contractor shall defend such claim in DHH’s name, but at Contractor’s expense and shall indemnify and hold harmless DHH against any loss, expense or liability arising out of such claim, whether or not such claim is successful. This provision is not applicable to contracts with physicians, psychiatrists, psychologists or other allied health providers solely for medical services.

20. Any equipment purchased under this contract remains the property of the Contractor for the period of this contract and future continuing contracts for the provision of the same services. Contractor must submit vendor invoice with reimbursement request. For the purpose of this contract, equipment is defined as any tangible, durable property having a useful life of at least (1) year and acquisition cost of $1000.00 or more. The contractor has the responsibility to submit to the Contract Monitor an inventory list of DHH equipment items when acquired under the contract and any additions to the listing as they occur. Contractor will submit an updated, complete inventory list on a quarterly basis to the Contract Monitor. Contractor agrees that upon termination of contracted services, the equipment purchased under this contract reverts to the Department. Contractor agrees to deliver any such equipment to the Department within 30 days of termination of services.
21. Contractor agrees to protect, indemnify and hold harmless the State of Louisiana, DHH, from all claims for damages, costs, expenses and attorney fees arising in contract or tort from this contract or from any acts or omissions of Contractor's agents, employees, officers or clients, including premises liability and including any claim based on any theory of strict liability. This provision does not apply to actions or omissions for which LA R.S. 40:1299.39 provides malpractice coverage to the contractor, nor claims related to treatment and performance of evaluations of persons when such persons cause harm to third parties (R.S. 13:5108.1(E)). Further it does not apply to premises liability when the services are being performed on premises owned and operated by DHH.

22. Any provision of this contract is severable if that provision is in violation of the laws of the State of Louisiana or the United States, or becomes inoperative due to changes in State and Federal law, or applicable State or Federal regulations.

23. Contractor agrees that the current contract supersedes all previous contracts, negotiations, and all other communications between the parties with respect to the subject matter of the current contract.

**THIS CONTRACT CONTAINS OR HAS ATTACHED HERETO ALL THE TERMS AND CONDITIONS AGREED UPON BY THE CONTRACTING PARTIES. IN WITNESS THEREOF, THIS CONTRACT IS SIGNED ON THE DATE INDICATED BELOW.**

<table>
<thead>
<tr>
<th>STATE OF LOUISIANA</th>
<th>DEPARTMENT OF HEALTH AND HOSPITALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>SIGNATURE</td>
<td>DATE</td>
</tr>
<tr>
<td>SIGNATURE</td>
<td>DATE</td>
</tr>
<tr>
<td>NAME</td>
<td>NAME</td>
</tr>
<tr>
<td>TITLE</td>
<td>Secretary, Department of Health and Hospitals or Designee</td>
</tr>
<tr>
<td>TITLE</td>
<td></td>
</tr>
</tbody>
</table>
HIPAA Business Associate Addendum:

This Business Associate Addendum is hereby made a part of this contract in its entirety as Attachment__ to the contract.

1. The U. S. Department of Health and Human Services has issued final regulations, pursuant to the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), governing the privacy of individually identifiable health information. See 45 CFR Parts 160 and 164 (the "HIPAA Privacy Rule"). The Department of Health and Hospitals, ("DHH"), as a “Covered Entity” as defined by HIPAA, is a provider of health care, a health plan, or otherwise has possession, custody or control of health care information or records.

2. “Protected health information” ("PHI") means individually identifiable health information including all information, data, documentation and records, including but not limited to demographic, medical and financial information that relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual or payment for health care provided to an individual; and that identifies the individual or which DHH believes could be used to identify the individual.

   “Electronic protected health information” means PHI that is transmitted by electronic media or maintained in electronic media.

   “Security incident” means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system.

3. Contractor is considered a Business Associate of DHH, as contractor either: (A) performs certain functions on behalf of or for DHH involving the use or disclosure of protected individually identifiable health information by DHH to contractor, or the creation or receipt of PHI by contractor on behalf of DHH; or (B) provides legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, financial or social services for DHH involving the disclosure of PHI.

4. Contractor agrees that all PHI obtained as a result of this contractual agreement shall be kept confidential by contractor, its agents, employees, successors and assigns as required by HIPAA law and regulations and by this contract and addendum.

5. Contractor agrees to use or disclose PHI solely (A) for meeting its obligations under this contract, or (B) as required by law, rule or regulation or as otherwise permitted under this contract or the HIPAA Privacy Rule.

6. Contractor agrees that at termination of the contract, or upon request of DHH, whichever occurs first, contractor will return or destroy (at the option of DHH) all PHI received or created by contractor that contractor still maintains in any form and retain no copies of such information; or if such return or destruction is not feasible, contractor will extend the confidentiality protections of the contract to the information and limit further uses and disclosure to those purposes that make the return or destruction of the information infeasible.

7. Contractor will ensure that its agents, employees, subcontractors or others to whom
it provides PHI received by or created by contractor on behalf of DHH agree to the same restrictions and conditions that apply to contractor with respect to such information. Contractor also agrees to take all reasonable steps to ensure that its employees’, agents’ or subcontractors’ actions or omissions do not cause contractor to breach the terms of this Addendum. Contractor will use all appropriate safeguards to prevent the use or disclosure of PHI other than pursuant to the terms and conditions of this contract and Addendum.

8. Contractor shall, within 3 days of becoming aware of any use or disclosure of PHI, other than as permitted by this contract and Addendum, report such disclosure in writing to the person(s) named in section 14 (Terms of Payment), page 1 of the CF-1.

9. Contractor shall make available such information in its possession which is required for DHH to provide an accounting of disclosures in accordance with 45 CFR 164.528. In the event that a request for accounting is made directly to contractor, contractor shall forward such request to DHH within two (2) days of such receipt. Contractor shall implement an appropriate record keeping process to enable it to comply with the requirements of this provision. Contractor shall maintain data on all disclosures of PHI for which accounting is required by 45 CFR 164.528 for at least six (6) years after the date of the last such disclosure.

10. Contractor shall make PHI available to DHH upon request in accordance with 45 CFR 164.524.

11. Contractor shall make PHI available to DHH upon request for amendment and shall incorporate any amendments to PHI in accordance with 45 CFR 164.526.

12. Contractor shall make its internal practices, books, and records relating to the use and disclosure of PHI received from or created or received by contractor on behalf of DHH available to the Secretary of the U. S. DHHS for purposes of determining DHH’s compliance with the HIPAA Privacy Rule.

13. Compliance with Security Regulations:
   In addition to the other provisions of this Addendum, if Contractor creates, receives, maintains, or transmits electronic PHI on DHH’s behalf, Contractor shall, no later than April 20, 2005:
   (A) Implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the electronic protected health information that it creates, receives, maintains, or transmits on behalf of DHH;
   (B) Ensure that any agent, including a subcontractor, to whom it provides such information agrees to implement reasonable and appropriate safeguards to protect it; and
   (C) Report to DHH any security incident of which it becomes aware.

14. Contractor agrees to indemnify and hold DHH harmless from and against all liability and costs, including attorneys’ fees, created by a breach of this Addendum by contractor, its agents, employees or subcontractors, without regard to any limitation or exclusion of damages provision otherwise set forth in the contract.

15. Notwithstanding any other provision of the contract, DHH shall have the right to terminate the contract immediately if DHH determines that contractor has violated
any material term of this Addendum.
## Attachment V
Sample Cost Template

Note: Use this sample template to prepare a cost breakdown for each year of the contract.

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Annual Salary</th>
<th>% FTE</th>
<th>Total</th>
</tr>
</thead>
</table>
| Administrative Staff  
(list by position) |               |       |       |
| Direct Services Staff  
(list by position) |               |       |       |
| Benefits |               |       |       |
| Operating Costs: |               |       |       |
| Rent |               |       |       |
| Utilities |               |       |       |
| Telephone |               |       |       |
| Insurance |               |       |       |
| Other (List): |               |       |       |
| Travel (in state) |               |       |       |
| Travel (out of state) |               |       |       |
| Office Supplies (List) |               |       |       |
| Professional Services (list) |               |       |       |
| Other Direct Costs (list) |               |       |       |
| Administrative/Indirect Costs |               |       |       |
| Total |               |       | $     |


Note: Use this sample template to prepare a cost breakdown for each year of the contract

<table>
<thead>
<tr>
<th>Year 2</th>
<th>Annual Salary</th>
<th>% FTE</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative Staff (list by position)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct Services Staff (list by position)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benefits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating Costs:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rent</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utilities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephone</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (List):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel (in state)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel (out of state)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Supplies (List)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional Services (list)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Direct Costs (list)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative/Indirect Costs</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Total | | | $
### Attachment V
### Sample Cost Template

**Note:** Use this sample template to prepare a cost breakdown for each year of the contract.

<table>
<thead>
<tr>
<th>Year 3</th>
<th>Administrative Staff (list by position)</th>
<th>Direct Services Staff (list by position)</th>
<th>Benefits</th>
<th>Operating Costs:</th>
<th>Administrative/Indirect Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Annual Salary</td>
<td>% FTE</td>
<td>Total</td>
<td>Rent</td>
<td>Utilities</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Sample Schedule of Grant Applications and Reports

<table>
<thead>
<tr>
<th>Agency</th>
<th>Grant/Report</th>
<th>Estimated Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDC</td>
<td>HIV Surveillance Interim Progress Report and Proposal for Following Year</td>
<td>8/2012</td>
</tr>
<tr>
<td>CDC</td>
<td>National HIV Behavioral Surveillance Interim Progress Report and Proposal for Following Year</td>
<td>8/2012</td>
</tr>
<tr>
<td>CDC</td>
<td>STD Comprehensive STD Prevention Services Interim Progress Report and Proposal for Following Year</td>
<td>8/2012</td>
</tr>
<tr>
<td>HRSA</td>
<td>RW Part B Annual Progress Report</td>
<td>8/2012</td>
</tr>
<tr>
<td>CDC</td>
<td>HIV Prevention Interim Progress Report and Proposal for Following Year</td>
<td>9/2012</td>
</tr>
<tr>
<td>HRSA</td>
<td>RW Part B Grant Application</td>
<td>1/2013</td>
</tr>
<tr>
<td>CDC</td>
<td>HIV Prevention Annual Progress Report</td>
<td>3/2013</td>
</tr>
<tr>
<td>CDC</td>
<td>HIV Surveillance Annual Progress Report</td>
<td>3/2013</td>
</tr>
<tr>
<td>CDC</td>
<td>STD Comprehensive STD Prevention Services Annual Progress Report</td>
<td>3/2013</td>
</tr>
<tr>
<td>HRSA</td>
<td>RW Part B Supplemental Grant Application</td>
<td>4/2013</td>
</tr>
<tr>
<td>HRSA</td>
<td>RW SPNS Linkages Non-Competitive Continuation Application</td>
<td>6/2013</td>
</tr>
<tr>
<td>HRSA</td>
<td>RW ADAP Emergency Relief Funds Application</td>
<td>6/2013</td>
</tr>
</tbody>
</table>
## Required Staffing
### Based on Current Staffing Resources

<table>
<thead>
<tr>
<th>Program</th>
<th>Personnel</th>
<th>FTE</th>
<th>Qualifications</th>
<th>Key Personnel</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBO Management, Technical Assistance, Data Mgmt, and Evaluation of Implemented Prevention Interventions</td>
<td>Special Projects Supervisor</td>
<td>1.0</td>
<td>1</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Wellness Center Coordinator</td>
<td>1.0</td>
<td>3</td>
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</tr>
<tr>
<td></td>
<td>Regional Prev. Coordinator</td>
<td>3.0</td>
<td>3</td>
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<tr>
<td></td>
<td>Adolescent Health Coordinator</td>
<td>1.0</td>
<td>2</td>
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<tr>
<td></td>
<td>HIV Testing Counselor</td>
<td>3.0</td>
<td>3</td>
<td></td>
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<tr>
<td></td>
<td>HIV Testing Lab Tech</td>
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<td>3</td>
<td></td>
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<tr>
<td>Training and Communications Support</td>
<td>Quality Assurance Specialist</td>
<td>1.0</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>STD/HIV Training Specialist</td>
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<td>2</td>
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<tr>
<td>Partner Services</td>
<td>Field Operations Manager</td>
<td>1.0</td>
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<td>X</td>
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<tr>
<td></td>
<td>Program Monitor</td>
<td>1.0</td>
<td>3</td>
<td>X</td>
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<tr>
<td></td>
<td>Internet Partner Services Coord</td>
<td>.50</td>
<td>3</td>
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</tr>
<tr>
<td></td>
<td>Disease Intervention Specialist</td>
<td>3.0</td>
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<tr>
<td>Core STD/HIV Surveillance/Information Exchange</td>
<td>Field Epid. Supervisor</td>
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<tr>
<td></td>
<td>Field Epidemiologist</td>
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<td>Laboratory Surveillance</td>
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<td>Information Sys. Developer</td>
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<td>Electronic Data Manager</td>
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<td>IT Administrator</td>
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<td>Network Support</td>
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<tr>
<td>Supplemental Surveillance and Emerging Protocols</td>
<td>Perinatal Surv Coordinator</td>
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<td>Surveillance Data Manager</td>
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<td>Data Assistant/Interviewer</td>
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<td></td>
<td>Interviewers</td>
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<td>Lead Data Entry</td>
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<td>4</td>
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</tr>
<tr>
<td></td>
<td>Data Entry Staff</td>
<td>5.0</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Care and Treatment Support and Linkages</td>
<td>Special Projects Coordinator</td>
<td>1.0</td>
<td>3</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Corrections Specialist</td>
<td>2.0</td>
<td>3</td>
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<tr>
<td></td>
<td>Peer Navigator</td>
<td>1.0</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Program Planner</td>
<td>1.0</td>
<td>3</td>
<td></td>
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<tr>
<td></td>
<td>ADAP Pharmacy Benefits Assistant</td>
<td>1.0</td>
<td>5</td>
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<tr>
<td></td>
<td>Treatment Benefits Specialist</td>
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</tr>
<tr>
<td>Program Operations Technical Assistance</td>
<td>Business/Administrative Manager</td>
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<td>1</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Business Operations Coordinator</td>
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<td>3</td>
<td></td>
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<tr>
<td></td>
<td>Operations Supply Coordinator</td>
<td>1.0</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Office Manager</td>
<td>1.0</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clerical Support/Receptionist</td>
<td>4.0</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

1 = Masters degree required, minimum of 3 years experience in public health setting
2 = Bachelors degree required, Masters degree preferred, minimum of 3 years experience in public health setting
3 = Bachelors degree required, minimum of 3 years related experience
4 = High school or equivalent required, Bachelors degree preferred, minimum of 3 years related experience
5 = High school or equivalent required, minimum of 3 years related experience
### Sample Out-of-State Staff Travel Per Year

<table>
<thead>
<tr>
<th>Program</th>
<th>Out of State Trips</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBO Management, Technical Assistance, Data Mgmt, and Evaluation of Implemented Prevention Interventions</td>
<td>4 meetings with 2 staff per mtg in Atlanta, GA</td>
</tr>
<tr>
<td></td>
<td>4 meetings with 2 staff per mtg in Washington, DC</td>
</tr>
<tr>
<td>Training and Communications Support</td>
<td>3 meetings with 1 staff in Atlanta, GA</td>
</tr>
<tr>
<td>STD/HIV Partner Services</td>
<td>2 meetings with 1 staff in Atlanta, GA</td>
</tr>
<tr>
<td></td>
<td>1 meeting with 1 staff in Washington, DC</td>
</tr>
<tr>
<td>Core Surveillance</td>
<td>4 meetings with 4 staff in Atlanta, GA</td>
</tr>
<tr>
<td></td>
<td>2 meetings with 2 staff in Washington, DC</td>
</tr>
<tr>
<td>Supplemental Surveillance</td>
<td>2 meetings with 4 staff in Atlanta, GA</td>
</tr>
<tr>
<td></td>
<td>2 meetings with 2 staff in Washington, DC</td>
</tr>
<tr>
<td>Care and Treatment Support</td>
<td>4 meetings with 3 staff in Washington, DC</td>
</tr>
<tr>
<td>Program Operations Technical Assistance</td>
<td>2 meetings with 1 staff in Atlanta, GA</td>
</tr>
</tbody>
</table>

Travel costs should include airfare, lodging, per diem, parking, and airport transfers.

In addition to out-of-state travel expenses, it is expected that contracted staff will be required to travel in-state for regional meetings, trainings, monitoring activities, and other relevant meetings. Contracted staff will be reimbursed according to State of Louisiana travel policies. The proposer shall include estimated costs in the proposed travel expense budget.