Louisiana Department of Health
Office of Public Health

Request for Information (RFI)

For

The Louisiana Department of Health (LDH) is gathering information to review options to support the shortage of clinical staff in Louisiana hospitals. Through this RFI, LDH is seeking information from hospitals regarding their ability to provide inpatient hospital services, emergency room/department services, and hospital outpatient MAB infusion treatment if additional clinical staff were to be provided to the hospitals by LDH.

RFI #: LDH-RFI-CONTRACT CLINICAL STAFF FOR LA HOSPITALS FOR HOSPITAL SERVICES

RFI Response due date/time: Monday, August 16, 2021, at 3:00 p.m. (CT)

NOTE: This Request for Information (“RFI”) is intended solely for informational and planning purposes and DOES NOT constitute a solicitation. Any and all information received may be reviewed and discussed, as appropriate, and may result in an emergency Cooperative Endeavor Agreement(s) or any other processes resulting in award of a contract or agreement of any type or form, for any or all of the services included in the RFI.

Only information that is in the nature of legitimate trade secrets or non-published financial data may be deemed proprietary or confidential by a proposer. Any material within a response to this
RFI identified as such must be clearly marked and will be handled in accordance with the Louisiana Public Records Law. R.S. 44:1 et seq. and all applicable rules, regulations, and policies. Any response marked as confidential or proprietary in its entirety may be rejected without further consideration or recourse.

RFI Release Date: Thursday, August 12, 2021

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1 GENERAL INFORMATION

1.1 Background

The mission of the Louisiana Department of Health (LDH or Department) is to protect and promote health and to ensure access to medical, preventive, and rehabilitative services for all citizens of the State of Louisiana. LDH 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.

Currently the State of Louisiana is experiencing a significant fourth spike in COVID-19 positive cases, impacting the availability of medical personnel throughout the state. Hospital admissions are at all-time highs and current data indicators project that Louisiana will soon maximize the availability of all staffed and operational hospital inpatient beds. Louisiana hospital Chief Medical Officers (CMO’s) have communicated their inability to provide sufficient clinical (including nursing staff and respiratory therapists) to ensure the adequate provision of hospital services, including treatment for COVID-19.

Previously, on December 22, 2020, LDH issued an RFI entitled “LDH-RFI-CONTRACT MEDICAL STAFF FOR LA HOSPITALS”, addressing staffing needs of hospitals that were able to provide additional medical/surgical inpatient beds and/or ICU beds, above what was currently staffed and available. Based on hospital responses, LDH entered into nine (9) cooperative endeavor agreements (CEAs) with nine (9) eligible hospitals that timely responded to the RFI.

Additionally, on August 6, 2021, LDH issued an RFI entitled “LDH-RFI-CONTRACT MEDICAL STAFF FOR LA HOSPITALS FOR HOSPITAL OUTPATIENT MAB INFUSION TREATMENT FOR COVID-19” which addressed staffing needs of hospitals that could add additional units/bays for Monoclonal Antibodies (MAB) infusion treatment for COVID-19, above what was currently staffed and available. Only seven (7) hospitals timely responded to such RFI.

Considering the current inpatient admission rates and COVID-19 cases in Louisiana, the Department has determined that there may be more benefit to imbed clinical staffing within a hospital to assist with inpatient hospital services, emergency room/department services, and/or outpatient MAB infusion treatment; as such, LDH is now issuing this current RFI, which will address clinical staffing needs (as defined below) for existing capacity and additional capacity in Louisiana hospitals, for the hospital services defined below.

For the purposes of this RFI, “hospital services” is defined as the following services/treatment provided by a licensed and certified hospital in Louisiana: (a) inpatient hospital services (including ICU, Medical/Surgical, Critical Care, Psychiatric Care,); (b) emergency room/department services; and/or (c) hospital outpatient MAB infusion treatment.
For the purposes of this RFI, “clinical staff” will be defined to include registered nurses (RNs), licensed practical nurses (LPNs), and nursing assistants/techs (including psych techs), respiratory therapists, and paramedics. Clinical staff may also include other professional medical staff/personnel, if a specific unmet need is identified by a specific hospital; however, the initial clinical staffing assignments under this RFI will focus on the staffing of RNs, LPNs, nursing assistants/techs (including psych techs), respiratory therapists, and paramedics.

In the best efforts of the State to support the staffing shortages of Louisiana hospitals, LDH is seeking information through this RFI to determine the best course of action and to meet the current demand for hospital services as defined in this RFI.

Those facilities meeting the requirements identified in this RFI will be placed on an approved list by which LDH may, at its sole discretion, determine which facilities within which regions would offer the best economies of scale to support this endeavor. LDH will monitor trigger points within all regions to determine strategic activations that will best support the overall demand for hospital services and that will best support capacity of hospital admissions. LDH may, at its sole discretion, enter into a CEA or other agreement with facilities from the approved list that are determined to be in the best interest of the State. LDH, at its sole discretion, will determine when to activate and provide clinical staff to specific hospitals for hospital services as defined in this RFI.

1.2 Purpose of RFI

This RFI is issued for the purpose of gathering information from qualified hospitals in Louisiana, across all nine (9) regions of the state, that can demonstrate their ability to provide hospital services if additional clinical staffing were supported from LDH.

1.3 Project Overview

Hospital Services:
Due to the current surge in COVID-19 in Louisiana and the rise in hospital admissions, and considering the current rate of projection, the state of Louisiana is facing an immediate potential shortage of staffed and operational hospital inpatient beds/services (including ICU, medical, surgical and psychiatric beds), emergency room services, and outpatient MAB infusion treatment capacity. The Department is seeking information on a hospital’s capacity to continue to provide hospital services (as defined in this RFI) and is seeking information on a hospital’s ability to increase capacity to provide additional hospital services, if additional clinical staffing were supported/provided from LDH to the hospital for such hospital services, based on the following criteria:

A. The facility is a licensed and certified hospital in Louisiana, with a license in good standing issued by the Louisiana Department of Health, currently providing hospital services (inpatient hospital services, emergency room/department services, and/or outpatient MAB infusion treatment – or any combination thereof) in Louisiana, as of August 12, 2021.
B. The hospital either:
(1) has existing licensed capacity to provide the hospital services defined in this RFI, but for the lack of clinical staff provides for such services, and is able to receive staff within seventy-two (72) hours; OR
(2) has the ability to add additional licensed capacity to provide hospital services defined in this RFI within ten (10) calendar days, and be able to receive staff within seventy-two (72) hours after the additional capacity is licensed. The Department may, at its sole discretion, grant an extension to the 10 calendar day period, for good cause shown by the hospital.
C. The hospital must have sufficient PPE and supplies to support the hospital services;
D. The hospital will be responsible for training of all clinical staff provided by LDH or its contractors;
E. The hospital must accept referrals from LDH (and its contractors) and other health care professionals for outpatient MAB infusion treatment.
F. The hospital maintains all responsibility for patients; the hospital facility manages and provides all care and services to each patient, and directs, oversees, and manages the care provided to all patients by all medical and support staffing.
G. The hospital provides for electronic medical records and documentation.
H. The facility provides medical oversight to the contracted staff.

Priority Consideration
In order to maximize resources efficiently and effectively, the Department will give priority consideration to submissions/responses as follows:

**Existing Capacity, Ready to Accept Staffing:**

All submissions should bear in mind that one of the goals of the Department is to utilize existing licensed hospital capacity that is ready immediately (within 72 hours) to accept staffing assignments and provide care to patients, in order to address this fourth COVID-19 surge. This type of submission is preferred and will be given priority consideration by the Department.

**Need by Region or Specialty:**

All submissions should bear in mind that another goal of the Department is to provide staff to hospitals to address regional or multi-regional load-leveling, and to address specific areas/specialties needed immediately. This type of submission will be given priority consideration by the Department.

**Psych Hospitals – COVID-19 positive units:**

All submission should bear in mind that another goal of the Department is to provide staff to psych hospitals or hospitals with psych units that open COVID-19 positive psych beds, psych units, or psych facilities. This type of submission will be given priority consideration by the Department.
Contract Staff Payment and Assignments:

If LDH were to determine it to be in the best interest of the State to provide clinical staffing directly to any hospital, LDH would be responsible for payments to the staffing contractor(s). All other costs associated with the care of patients, such as supplies, medicine, oxygen, food and all wrap-around services, would be at the expense of the hospital.

If LDH were to determine to provide clinical staffing directly to any hospital for hospital services delineated on its submission, such staff would be designed to such hospital services (and not assigned elsewhere, such as to outpatient surgery procedures).

If LDH were to determine to provide clinical staffing directly to any hospital for hospital services, funding would be via FEMA funding; as such, the hospital shall be prohibited from duplicating benefits from other sources; if the hospital receives funding from another source for the same work that is funded by FEMA, then FEMA reduces the eligible costs or de-obligates funding to prevent a duplication of benefits. Accordingly, the hospital shall take all reasonable and customary efforts to identify and secure payment from any and all public and/or private insurer(s) or sources that may provide coverage or payment for the treatment/services rendered to each individual receiving services for hospital treatment. The hospital shall bill the appropriate public and/or private insurer(s) or sources within thirty (30) calendar days after such treatment/services are rendered. For any payments received for treatment/services rendered to the individuals for hospital treatment, the hospital shall remit a portion of such payments to LDH as reimbursement for the clinical staff directly related to patient care provided to the hospital by LDH via the LDH staffing contractors.

LDH reserves the right to determine the type and number of clinical staff, if any, to provide to any licensed hospital in Louisiana; such decisions will be at LDH’s sole discretion and determination; such decisions may consider a multitude of factors including, but not limited to, the need in a particular area or region of the State, economies of scale, experience in treating COVID-19 patients, and best use of limited funding to maximize services.

Projected Timeline:

LDH affirms that such clinical staffing at licensed hospitals would occur if and when there are no (or extremely limited) available, staffed/operational hospital services (as defined in this RFI) in Louisiana or in certain regions of Louisiana; current staffed hospital inpatient and outpatient MAB infusion capacity across regions should be utilized first, before any staffing assignments to hospitals would occur.

LDH will continue to monitor the Control Charts throughout all phases of the response. The Control Charts are the metrics of monitoring ICU and Med Surge bed availability in hospitals across Louisiana, via bed poll data, at the regional level, which gives indication of staffing availability in facilities. The Control Charts are generated daily, and will be used to inform and shape decision-making by LDH when activating and de-activating staffing for hospital sites.

The earliest that LDH would assign staff to hospitals is early to mid-August 2021; any staffing assignments would be approved by LDH through written agreement; LDH currently anticipates no staffing assignments after September 30, 2021; however, the date could be extended depending upon the public health emergency. Please note that these dates are subject to change at LDH’s discretion.
Projected Staffing Needs:

LDH anticipates that it may be necessary to assist hospitals with staffing a minimum of seven hundred clinical staff.

2 ADMINISTRATIVE INFORMATION

2.1 RFI Coordinator.

Requests for copies of the RFI must be directed to the RFI coordinator listed below:

Jeanne Haupt
Louisiana Department of Health
Office of Emergency Preparedness
628 N. 4th Street
Baton Rouge, LA 70802
Jeanne.Haupt@la.gov
Phone: 225-354-3526 or 225-270-6962

This RFI will be sent to all licensed hospitals in Louisiana by the LDH Health Standards Section via electronic transmission or facsimile transmission on Thursday, 12, 2021.

This RFI will also be posted to the LDH website.

2.2 Schedule of Events

<table>
<thead>
<tr>
<th>Activity/Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Release Date of RFI</td>
<td>August 12, 2021</td>
</tr>
<tr>
<td>Teleconference for Questions/Answers to RFI</td>
<td>August 13, 2021, at 1:00 pm CT</td>
</tr>
<tr>
<td>Deadline for receipt of response to RFI</td>
<td><strong>August 16, 2021, at 3:00 pm CT</strong></td>
</tr>
</tbody>
</table>

NOTE: LDH reserves the right to deviate from this Schedule of Events at any time and without notice.
2.3 Response Content

2.3.1 Executive Summary

The summary provided should introduce the scope of the response in as much detail as possible. At a minimum, it should include administrative information including the name of the responder’s point of contact, his/her phone number, email address, and any other pertinent contact information. The summary should also include a brief recitation of the responder’s qualifications and ability and willingness to meet, if not exceed, LDH’s requirements as included herein. The summary must also include responses to the following:

a. Hospital name, address (corporate and physical), and parish for which the staffing is requested. Hospital must indicate the location(s) of the licensed hospital where the clinical staffing will be utilized, and must indicate if this location is on the main campus of the hospital or an offsite licensed location of the hospital.

b. Information on how the facility meets the criteria in Section 1.3 of this RFI.

c. Identify information on the number of each type of clinical staffing that the hospital is requesting from LDH, per each 8-hour or 12-hour shift; information must include the locations/areas (emergency department, ICU, Med/Surgical, operating room, Critical Care, telemetry, psych beds/unit, outpatient MAB infusion unit, etc.) where the contracted staff would be utilized. For psych hospitals or hospitals operating psych units, the hospital shall provide the ages of population served and confirm that the hospital will admit medically stable COVID-19 positive patients. The hospital shall include a proposed staffing matrix for the hospital services for the units where these clinic staff will be utilized.

d. Include the current staff matrix of medical staff provided by hospital for currently staffed and operational inpatient beds, emergency room beds/bays, and MAB infusion units, as of August 12, 2021.

e. Measures that have been put in place to maximize use of current staff.

f. Measures that have been taken to obtain additional contract staff and issues with contracting.

g. Information confirming that the hospital will accept referrals from LDH (and its contractors) and other health care professionals for inpatient services and outpatient MAB infusion treatment.

h. Confirmation that the hospital will be ready to accept any staffing assignments within 72 hours of notification.

i. Identify how these hospital services will advance regional or multi-regional load-leveling.
2.3.2 Corporate Background and Experience

Responders should give a brief description of its history, organizational structure, and number of years in business. Responders should also specifically describe their experience with admitting and treating COVID-19 patients.

2.3.3 Approach and Methodology

Responders should provide the approach and methodology that it will use to provided continued and/or additional hospital services, if additional staff detailed in this RFI were provided.

2.4 Response Instructions

2.4.1 Response Submittal

Responders interested in providing information requested by this RFI must submit responses containing the information specified no later than the deadline for response to RFI as stated herein. The response to the RFI must be delivered at the responder’s expense to the RFI coordinator at the email address provided in section 2.1 of the RFI.

The responses must be received by electronic copy only to Jeanne.Haupt@la.gov on or before the date and time specified herein. Email submissions are the only acceptable method of delivery. Fax, mail, and courier delivery shall not be acceptable. Responders should allow sufficient time to ensure receipt of their e-mailed proposal by the time specified herein.

Responses received after the deadline, corrupted files, and incomplete submissions (e.g., Part 1 and Part 2 of 3 are received, but Part 3 is not) may not be considered.

Virtual Teleconference for Questions and Inquiries regarding the RFI

LDH will host a virtual teleconference for questions, inquiries, and requests for clarification of the content of this RFI. The virtual teleconference will be held on Friday, August 13, 2021, at 1:00 p.m. (CT). Any interested hospital that desires to participate in the virtual teleconference must send notification by email to Jeanne.Haupt@la.gov by 12:00 pm (CT) on Friday, August 13, 2021. Access/link information to the virtual teleconference will be provided to all interested hospitals that send a timely email to Jeanne.Haupt@la.gov.

LDH is not accepting written questions, inquiries, or requests for clarification to this RFI; rather, the virtual teleconference is the only available mechanism for questions, inquiries, or requests for clarification to this RFI.
Official responses and answers to all inquiries, questions, and requests for clarification will be handled in the virtual teleconference. A summary of such responses/answers may be posted on the LDH website by the RFI Coordinator after the virtual teleconference. Only the RFI Coordinator has the authority to post such official summary; any communications from any other individuals shall not be binding on LDH or the state.

Additional Instructions and Notifications to Responders

2.4.2 RFI Addendum(a)/Cancellation

LDH reserves the right to revise any part of the RFI by issuing an addendum(a) to the RFI at any time. Issuance of this RFI, or subsequent addendum(a), if any, does not constitute a commitment by LDH or the State to issue an RFP or any other process resulting in award of a contract of any type or form. In addition, LDH may cancel this informal process at any time, without incurring any liability from responders or potential responders.

2.4.3 Ownership of Response

Any and all materials submitted in response to this RFI shall become the property of the State.

2.4.4 Cost of Preparation

LDH shall not be liable to any responders, or potential responders, for any costs incurred that are associated with developing a response, preparing for discussions, if any are held, or any other costs, that may be incurred by a responder or potential responder due to responding to this RFI.