

<b>REQUEST FOR TASK ORDER PROPOSAL (RFTOP)</b> (THIS IS NOT AN ORDER) <b>OFFEROR TO COMPLETE BLOCKS 6 and 13</b>		1. This Solicitation is: <input type="checkbox"/> SET ASIDE SBE ( _____ SBE Category) <input type="checkbox"/> SET ASIDE DCSS ( _____ Schedule) <input checked="" type="checkbox"/> <b>GSA SCHEDULE</b> <b>(MOBIS Schedule Consulting Services 874-1 Project and Program Management 874-7 Financial Services 520</b>		Page of Pages  <div style="display: flex; justify-content: space-around;"> <span><b>1</b></span> <span><b>48</b></span> </div>		
2. Solicitation Number <b>DCHT-2011-T-0001</b>	3. Caption <b>Health Insurance Exchange Planning</b>		4. Requisition Number	5. Offer Due Date: <b>3-2-11</b>		
6. Offeror's GSA Schedule Contract Number						
7A. Issued By: <b>Department of Health Care Finance Office of the Director – Office of Contracts 899 North Capitol Street, NE 6<sup>th</sup> Floor Washington, DC 20002</b>			7B. Solicitation Contact: <b>Jim Marshall Department of Health Care Finance Office of the Director – Office of Contracts 899 North Capitol Street, NE 6<sup>th</sup> Floor Washington, DC 20002 <a href="mailto:jim.marshall@dc.gov">jim.marshall@dc.gov</a> 202 442-9106</b>			
8A Administered By: <b>Brenda Emanuel Department of Health Care Finance Office of Innovation 899 North Capitol Street, NE 6<sup>th</sup> Floor Washington, DC 20002</b>			8B Submit To: <b>Jim Marshall at <a href="mailto:jim.marshall@dc.gov">jim.marshall@dc.gov</a></b>			
9. Deliverables <b>See Section F.3</b>			10. Payment Will Be Made By: <b>See G.2.1</b>			
11. Offeror <b>To Potential Offerors</b>						
<b>IMPORTANT:</b> If you are unable to provide a response, please so indicate on this form and return it. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contracts for supplies or invoices. Supplies are of domestic origin unless otherwise indicated by the offeror. Any representations and/or certifications attached to this Request for Task order Proposal must be completed by the offeror.						
12. Schedule						
CLIN No.	Supplies/Services		Quantity	Unit	Unit Price	Amount
	<b>See Section B.3</b>					
13. Offeror						
Name		Authorized Individual Name				
Address		Authorized Individual Title				
City, State, Zip		Authorized Individual Signature				
Phone		e-mail		Date		

**SECTION B  
SUPPLIES OR SERVICE AND PRICE/COST**

**B.1 INTRODUCTION**

The Government of the District of Columbia is seeking consulting and technical assistance services to conduct planning tasks related to the development of the District’s Health Insurance Exchange (Exchange).

**B.2 TASK ORDER**

The District contemplates the award of a fixed price task order to be issued against the Contractor’s GSA MOBIS Schedule #874-1.

**B.3 PRICE SCHEDULE – FIXED PRICE**

Contract Line Item No. (CLIN)	Line Item Description	Total Price
0001	Consulting and technical assistance services to conduct planning tasks related to the development of the District’s Health Insurance Exchange (Exchange) as described in C.3	
0001AA	Task 1 – Project Management (C.3.1)	\$_____
0001AB	Task 2 - Stakeholder Engagement and Management (C.3.2)	\$_____
0001AC	Task 3 - Exchange Strategic Plan Development (C.3.3)	\$_____
0001AD	Task 4 - Exchange Operational Plan Development (C.3.4)	\$_____
<b>Total Price</b>		<b>\$_____</b>

## SECTION C SPECIFICATIONS/WORK STATEMENT

### C.1 SCOPE OF WORK

The District of Columbia seeks consulting and technical assistance services to conduct planning tasks related to the development of the District's Health Insurance Exchange (Exchange). The Contractor shall at a minimum develop the following in support of the planning of the District's Exchange:

- a. Exchange Project Management Plan
- b. Stakeholder Engagement Plan
- c. Exchange Strategic Plan
- d. Exchange Operational Plan

#### C.1.1 APPLICABLE DOCUMENTS

The documents that follow are applicable to this procurement and are hereby incorporated by this reference. The Contractor shall maintain compliance with each of the documents including the Affordable Care Act's pertinent provisions (Applicable Document #1), Office of Consumer Information and Insurance Oversight (OCIIO) Grant Funding Announcement (Applicable Document #2), the District's grant application and Notice of Award for State Planning and Establishment Grant (Applicable Document #3), planning guidance to be released by OCIIO (Applicable Document #9). The Contractor shall pay particular attention to the Office of Consumer Information and Insurance Oversight (OCIIO) Grant Funding Announcement (Applicable Document #2).

Item No.	Document Type	Title	Date
1	Federal Law	Affordable Care Act §1311 <a href="http://www.govtrack.us/congress/billtext.xpd?bill=h111-3590">http://www.govtrack.us/congress/billtext.xpd?bill=h111-3590</a> ACA Summary <a href="http://www.govtrack.us/congress/bill.xpd?bill=h111-3590&amp;tab=summary">http://www.govtrack.us/congress/bill.xpd?bill=h111-3590&amp;tab=summary</a>	Most Recent
2	Federal Funding Announcement	Office of Consumer Information and Insurance Oversight (OCIIO) Grant <a href="http://www.hhs.gov/ociio/initiative/index.html">http://www.hhs.gov/ociio/initiative/index.html</a>	Most Recent
3	Federal Grant Application	State Planning and Establishment Grants for the Affordable Care Act's Exchanges DC Project Narrative (Attachment J.7)	Most Recent

Item No.	Document Type	Title	Date
4	Web Site	Department of Health Care Finance <a href="http://dhcf.dc.gov">http://dhcf.dc.gov</a>	Most Recent
5	Web Site	Department of Insurance Securities and Banking <a href="http://disb.dc.gov">http://disb.dc.gov</a>	Most Recent
6	Survey	Health Insurance Coverage in the District Urban Institute	2010
7	Working Paper	Accessing Health and Health Care in the District of Columbia RAND Corporation, Inc.  Phase 1 <a href="http://www.rand.org/pubs/working_papers/WR534.html">http://www.rand.org/pubs/working_papers/WR534.html</a>  Phase 2 <a href="http://www.rand.org/pubs/working_papers/WR579.html">http://www.rand.org/pubs/working_papers/WR579.html</a>	Most Recent
8	Industry Regulations	National Association of Insurance Commissioners <a href="http://www.naic.org/documents/committees_b_exchanges_adopted_health_benefit_exchanges.pdf">http://www.naic.org/documents/committees_b_exchanges_adopted_health_benefit_exchanges.pdf</a>	11-22-10
9	Federal Guidance	Joint OCHIO/CMS Guidance <a href="http://www.hhs.gov/ociio/regulations/index.html">http://www.hhs.gov/ociio/regulations/index.html</a>	Most Recent

## C.1.2 DEFINITIONS

**C.1.2.1 Active Purchasing** refers to a process for plan certification whereby the Exchange actively selects – through procurement or related process – qualified insurance plans to be offered in the Exchange.

**C.1.2.2 Affordable Care Act (ACA)** The comprehensive health care reform law enacted in March 2010. The law was enacted in two parts: The Patient Protection and Affordable Care Act was signed into law on March 23, 2010 and was amended by the Health Care and Education Reconciliation Act on March 30, 2010. The name “Affordable Care Act” is used to refer to the final, amended version of the law. These laws include provisions for the establishment of state-based Health Insurance Exchanges.

**C.1.2.3 Benefits** The health care items or services covered under a health insurance plan. Covered benefits and excluded services are defined in the health insurance plan's coverage documents. In Medicaid or CHIP, covered benefits and excluded services are defined in state program rules.

**C.1.2.4 Benefit Package** is the detailed outline of covered services, benefit limitations, deductibles, co-pays and other co-insurance aspects associated with a health insurance policy.

- C.1.2.5** **Call Center** is a telephone system that allows the District's Exchange entity to receive calls and provide telephone customer service to individuals attempting to purchase insurance through the Exchange.
- C.1.2.6** **Children's Health Insurance Program (CHIP)** The Children's Health Insurance Program is jointly financed by the Federal and State governments and is administered by the States. Within broad Federal guidelines, each State determines the design of its program, eligibility groups, benefit packages, payment levels for coverage, and administrative and operating procedures. CHIP provides a capped amount of funds to States on a matching basis. Federal payments under title XXI to States are based on State expenditures under approved plans effective on or after October 1, 1997.
- C.1.2.7** **DC HealthCare Alliance** (Alliance) is a DC-funded program that provides community-based health care and medical services to DC residents ineligible for Medicaid with household incomes at or below 200 percent of the Federal Poverty level. The Program was established by the Health Care Privatization Amendment Act of 2001, effective July 12, 2001 (D.1.Law 14-18; D.1. Official Code § 7-1401 *et seq*).
- C.1.2.8** **Department of Health Care Finance (DHCF)** is the District of Columbia Government agency responsible for administering publicly-financed medical assistance benefits, including Medicaid services under Title XIX, the Children's Health Insurance Program, the Immigrant Children's Health Program, and the DC HealthCare Alliance.
- C.1.2.9** **Department of Human Services (DHS) Income Maintenance Administration (IMA)** is the District agency responsible for eligibility determination for a number of public benefit programs, including Medicaid, the DC Healthcare Alliance, Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Child Care Subsidy, Burial Assistance, Emergency Rental Assistance, Interim Disability Assistance, and Refugee Cash Assistance.
- C.1.2.10** **Department of Insurance and Securities and Banking (DISB)** is the District agency responsible for regulating financial-service businesses in the District by administering DC's insurance, securities and banking laws, rules and regulations. DISB's primary goal is to ensure residents of the District of Columbia have access to a wide choice of insurance, securities and banking products and services, and residents are treated fairly by the companies and individuals that provide these services.
- C.1.2.11** **District of Columbia (District)** refers to the Government of the District of Columbia

- C.1.2.12 Employer-Sponsored or Group Insurance** refers to insurance which is issued to a group of usually no less than three individuals, such as an employer, credit union, or trade association, and which provides coverage for individuals and sometimes their dependents.
- C.1.2.13 Essential Benefits** A set of health care service categories that must be covered by certain plans, starting in 2014. These include doctor office visits, hospitalizations, and prescriptions. Insurance policies must cover these benefits to be certified and offered in Exchanges, and all Medicaid State plans must cover these services by 2014. Starting with plan years or policy years that begin on or after September 23, 2010, health plans can no longer impose a lifetime dollar limit on spending for these services and all plans, except grandfathered individual health insurance policies, must phase out annual dollar spending limits for these services by 2014.
- C.1.2.14 Exchange** See Health Insurance Exchange
- C.1.2.15 Exchange Planning Grant** refers to the State Planning and Establishment Grant for the Affordable Care Act's Exchanges, awarded by the U.S. Department of Health and Human Services.
- C.1.2.16 Federal Poverty Level (FPL)** A measure of income level issued annually by the Department of Health and Human Services. Federal poverty levels are used to determine your eligibility for certain programs and benefits.
- C.1.2.17 Health Insurance Exchange (Exchange)** A new transparent and competitive insurance marketplace where individuals and small businesses can buy affordable and qualified health benefit plans. Exchanges will offer a choice of health plans that meet certain benefits and cost standards.
- C.1.2.18 Internal Revenue Service (IRS)** is the federal agency responsible for administering and enforcing the Treasury Department's revenue laws, through the assessment and collection of taxes, determination of pension plan qualification, and related activities.
- C.1.2.19 Mayor's Health Reform Implementation Committee (HRIC)** refers to the District's committee, established through Mayoral Executive Order on May 14, 2010, responsible for implementing health reform in the District. The HRIC is co-chaired by the Directors of the Department of Health Care Finance (DHCF) and the Department of Insurance, Securities and Banking (DISB) and includes the Directors of the Department of Health (DOH) and Department of Mental Health (DMH) as additional members.
- C.1.2.20 Medicaid** A state-administered health insurance program for low-income families and children, pregnant women, the elderly, people with disabilities, and in some states, other adults. The Federal government provides a portion of the funding for Medicaid and sets guidelines for the program. States also have choices in how

they design their program, so Medicaid varies state by state and may have a different name in your state.

- C.1.2.17 Medicaid Management Information System (MMIS)** refers to a system operated by the District's Fiscal Agent that supports the operation of the Medicaid program. MMIS includes the following types of sub-systems or files: recipient eligibility, Medicaid provider, claims processing, pricing, SURS, MARS, and encounter processing.
- C.1.2.18 Medicare** A Federal health insurance program for people who are age 65 or older and certain younger people with disabilities. It also covers people with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a transplant, sometimes called ESRD). The program provides protection with an acute care focus under four parts: (1) Part A covers inpatient hospital services, post-hospital care in skilled nursing facilities and care in patients' homes; (2) Part B covers primarily physician and other outpatient services; (3) Part C covers Managed Care; and (4) Part D covers prescription drug coverage.
- C.1.2.19 Non-Group Insurance** refers to commercial insurance policies purchased by individuals or families not affiliated with any group.
- C.1.2.20 Office of Consumer Information and Insurance Oversight (OCIO)** office within the U.S. Department of Human Services dedicated to helping the Department implement many of the provisions of the Affordable Care Act that address private health insurance including ensuring compliance with the new insurance market rules, such as the prohibitions on rescissions and on pre-existing condition exclusions for children that take effect this year. The **OCIO** will oversee the new medical loss ratio rules and will assist states in reviewing insurance rates. It will provide guidance and oversight for the state-based insurance exchanges. It will also administer the temporary high-risk pool program and the early retiree reinsurance program, and compile and maintain data for an internet portal providing information on insurance options.
- C.1.2.21 Passive Certification** refers to the process for certifying qualified health plans for inclusion in an Exchange whereby an Exchange establishes benchmark criteria and certifies all plans that meet that standard.
- C.1.2.22 Pre-Existing Condition Insurance Plan (PCIP)** A new program created by the Affordable Care Act that will provide a health coverage option for individuals who have been uninsured for at least six months, have a pre-existing condition, and have been denied coverage (or offered insurance without coverage of the pre-existing condition) by a private insurance company. This program will provide coverage until 2014 when you will have access to affordable health insurance choices through an Exchange.
- C.1.2.23 Quasi-Government Agency** is an agency or instrumentality of the District of Columbia Government with an independent governing body.

- C.1.2.24** **Social Security Administration (SSA)** is the US government agency provides economic assistance to persons faced with unemployment, disability, or agedness, financed by assessment of employers and employees.
- C.1.2.25** **Stakeholder** is an individual or entity with a vested interest in any or all of the policy decisions related to the implementation of a Health Insurance Exchange in the District of Columbia.
- C.1.2.26** **U.S. Department of Health and Human Services (HHS)** the United States federal department that administers all federal programs dealing with health and welfare, including Medicaid and Health Insurance Exchanges.
- C.1.2.27** **US Department of Homeland Security (DHS)** is the US government agency devoted to keeping the US safe from natural and man-made disaster. It includes agencies for citizenship and immigration services, customs and border protection, emergency response and recovery (FEMA), and science and technology research.

## **C.2** **BACKGROUND**

### **C.2.1** **AFFORDABLE CARE ACT**

- C.2.1.1** The District of Columbia continues to make strides to ensure that all residents have access to high quality health care. With over 93% of residents insured, the District is second in the nation for providing health insurance coverage to its residents. Federal health reform legislation, known as the Affordable Care Act of 2010 (ACA) (Applicable Document #1), established a number of provisions for strengthening and expanding federal and state health care programs to increase options for coverage for millions of uninsured Americans. The centerpiece of reform involves the establishment of state Health Insurance Exchanges (Exchange) to create a new entity and provide the foundation for organizing the insurance market into a better-functioning market that improves choice and value for low and moderate income individuals, families, and small businesses. The Exchange is also intended to provide other functions including information on qualified available health plans, a web site and toll-free number, and integration with existing health care programs offered by the state.
- C.2.1.2** The Affordable Care Act authorized State Planning and Establishment Grants to help States establish health insurance exchanges. The grants were awarded by and will be administered by the U.S. Department of Health and Human Services (HHS) Office of Consumer Information and Insurance Oversight (OCII). Information about the grant and the OCII's health insurance exchange initiative can be found in Applicable Document #2.

**C.2.2 DHCF AND THE DISTRICT HEALTH INSURANCE EXCHANGE**

**C.2.2.1** As the District agency responsible for administering the DC Medicaid and CHIP programs and other DC health care programs, DHCP (Applicable Document #4) is the lead agency for Exchange planning and implementation for the District. DHCF in conjunction with the District's Department of Insurance Securities and Banking (Applicable Document #5) responded to the OCIIO's State Planning and Establishment funding opportunity. The District's Project Narrative can be found in Applicable Document #3.

**C.2.2.2** Because federal health reform Exchange legislation establishes novel and unique requirements with few examples in other states, the policy, planning, and implementation activities related to health insurance exchanges will require the availability of or ability to access a full compliment of a new, highly sophisticated expertise including project management, policy development, financial modeling, actuarial assistance, health care industry and insurance expertise, data processing/information technology expertise, knowledge of public health insurance programs) and other relevant subject matter expertise as needed.

**C.2.3 BACKGROUND RESEARCH AND INFORMATION**

The following background research and information is provided to assist the Contractor in the planning of the District's Exchange.

**C.2.3.1** In the fall of 2009, the Urban Institute conducted a health insurance phone survey on behalf of DHCF. Analysis of the 4,000 plus responses revealed the District's rate of uninsured to be approximately 6.2% and identified specific characteristics of both those with and without insurance. The findings of this survey can be found in Applicable Document #6.

**C.2.3.2** The RAND Corporation, Inc. prepared a working paper entitled Assessing Health and Health Care in the District of Columbia (Applicable Document #7). This document describes interim findings from a study of health and the health care service delivery system in the District of Columbia. Part 1 includes a comprehensive health needs assessment for DC and assesses the quality and accessibility of the District's health care delivery system for individuals with urgent or emergent medical needs. Part 2 of the report uses information from those assessments to identify and assess various policy options for improving the health care delivery system.

**C.2.3.3** In November 2010, the Health Committee of the National Association of Insurance Commissioners (NAIC) issued the Health Benefits Exchange Model (Applicable Document #8) to assist states in the evaluation of options associated with Exchanges.

## **C.2.4 GOAL AND OBJECTIVES**

The major goal of this solicitation is to conduct a planning process involving key stakeholders that will enable the District to make informed decisions concerning the implementation of the Exchange. It is expected that the services to result from this solicitation will achieve the following objectives in support of the District's goal:

- a. Obtain the project management and other required expertise to conduct the Exchange planning and related activities;
- b. Obtain broad-based stakeholder involvement in the Exchange planning process;
- c. Conduct the research and assessments required to assess the District's population, health insurance marketplace, and related health care factors;
- d. Conduct analysis to identify the advantages and disadvantages, including cost-benefit analysis, for each potential Exchange model available to the District;
- e. Identify the business operations, technical, financial, and legal and policy infrastructure requirements required to implement and operate the Exchange;
- f. Identify requisite modifications to the Medicaid and other related public programs required to effectively integrate the Exchange; and
- g. Identify requirements, timelines and work plans to implement the Exchange.

## **C.3 REQUIREMENTS**

The Contractor shall provide the project management and specialized expertise and incorporate broad based stakeholder in the planning, design, and development of the District's Exchange Strategic Plan and implementation of the Exchange Operational Plan. The Contractor shall provide or perform at a minimum the following:

### **C.3.1 TASK 1 - PROJECT MANAGEMENT**

#### **C.3.1.1 Exchange Detailed Project Management Plan**

The Contractor shall develop and follow a defined project management approach to plan and coordinate the DC Exchange planning project. The Contractor shall prepare an Exchange Detailed Project Management Plan utilizing Microsoft Project or a comparable software to identify and describe the methodology and approach to be used by the Contractor to develop the Exchange Strategic (C.3.2.2) and Operational Plans (C.3.4.2.3). The Exchange Detailed Project Management Plan shall provide at a minimum the following:

- a. Identify the beginning and end date for all project tasks including
  1. Exchange Detailed Project Management Plan (C.3.1.1)
  2. Stakeholder Engagement and Management Plan (C.3.2.2)
  3. Background Research Findings Report (C.3.3.1.2.)
  4. Administration and Governance Decision Memo (C.3.3.1.2.1)
  5. Updated Exchange Detailed Project Management Plan (C.3.1.1.1)
  6. Exchange Strategic Planning Assessment and Analysis (C.3.3.1.3)
    - i. Business Operations Summary Memo (C.3.3.1.3.1)
    - ii. Program Integration (C.3.3.1.3.2)
    - iii. Technical Infrastructure Summary Memo (C.3.3.1.3.3)
    - iv. Financial Sustainability Summary Memo (C.3.3.1.3.4)
    - v. Legal and Policy Summary Memo (C.3.3.1.3.5)
    - vi. Exchange Insurance Market Summary Memo (C.3.3.1.3.6)
  7. Exchange Strategic Plan (C.3.3.2.3)
  8. Exchange Operational Plan (C.3.4.2.3)
- b. Identify due date for all deliverables associated with the project tasks;
- c. Description of the inter-relationships and dependencies of the project tasks including the identification of critical paths to ensure timely and successful delivery of the required services; and
- d. Identify task resource loading including the Contractor, stakeholder, and District resources required to successfully complete the Exchange planning process.

#### **C.3.1.1.1.1 Updated Exchange Detailed Project Management Plan**

Upon completion of tasks outlined in Section C.3.3.1.2, the Contractor shall provide an updated Exchange Project Management Plan including tasks and timelines for all subsequent project management activities to support planning the Administration and Governance model selected by the District.

#### **C.3.1.2 Project Manager and Other Staffing Resources**

##### **C.3.1.2.1 Project Manager**

The Contractor shall designate a Project Manager to serve as the single point of contact for the District throughout the planning and development of the District's Exchange Strategic Plan and the implementation of the Exchange Operational Plan.

##### **C.3.1.2.2 Other Resources**

The Contractor shall provide access to other resources with the technical skills in project management, legal and policy development, financial modeling, actuarial

assistance, health care industry and insurance expertise, data processing/information technology expertise, knowledge of public health insurance programs and other relevant subject matter expertise necessary to perform the required services.

### **C.3.1.3 Weekly Project Status Reports**

The Contractor shall utilize the Exchange Detailed Project Management Plan (C.3.1.1) as the baseline to develop and provide written and oral Weekly Project Status Reports. The Weekly Project Status Reports shall include at a minimum the following:

- a. Identification of project tasks completed during the week and a summary of each project tasks' accomplishments during the prior week;
- b. Identification of and resolution of any issues and risks associated with the project tasks;
- c. Requests for decisions or feedback that requires action from the District;
- d. Project tasks scheduled for the up-coming weeks; and
- e. Proposed updates to the Exchange Preliminary Detailed Project Management Plan.

### **C.3.1.4 Exchange Detailed Project Management Plan Web Site**

The Contractor shall maintain a web site dedicated to providing information and updates concerning the planning process for the District's Exchange. The web site shall promote transparency in the planning process and shall include research findings, deliverables and reports, stakeholder input and other products of the planning process as approved by the District through the Contracting Officer's Technical Representative (COTR) identified in Section G.8.1. The Contractor shall ensure the web site contains the most recent up to date information through at a minimum weekly up dates.

## **C.3.2 TASK 2 - STAKEHOLDER ENGAGEMENT AND MANAGEMENT**

### **C.3.2.1 Stakeholder Analysis**

The Contractor shall work with the COTR and designated District staff, subject matter experts and others, to understand the organizational structure, resources, and stakeholders related to the development and implementation of an Exchange. As the participation of relevant stakeholders is paramount in the Exchange planning process including the development of realistic Exchange Strategic and Operational Plans, the Contractor shall ensure that Exchange planning activities are open, inclusive, participatory, and transparent.

### **C.3.2.2 Stakeholder Engagement and Management Plan**

The Contractor shall develop and provide a Stakeholder Engagement and Management Plan to guide the design and execution of the stakeholder engagement and management program. The Stakeholder Engagement and Management Plan shall provide for or include at a minimum the following:

- a. Participation and contribution to the Health Insurance Exchange Subcommittee of the Mayor's Health Reform Implementation Committee (HRIC), including presentations to and soliciting feedback and comments from subcommittee members to inform research;
- b. Representative of population to utilize the Exchange, marketplace to deliver the Exchange insurance plans, government, advocates, and health and insurance associations;
- c. Conducting meetings and focus groups with stakeholders identified in the Stakeholder Engagement and Management Plan;
- d. Preparing summaries of submissions, statements, or other input provided by stakeholders;
- e. Providing meeting support, including the following functions, as needed:
  1. Meeting coordination
  2. Scheduling and communication
  3. Managing and recording attendance
  4. Preparation and distribution of Meeting minutes
  5. Facilitation of meeting
  6. Meeting agenda and other materials and mailings (as necessary).

### **C.3.3 TASK 3 EXCHANGE STRATEGIC PLAN DEVELOPMENT**

#### **C.3.3.1 Exchange Strategic Plan Analysis**

The Contractor shall develop and provide the District's Exchange Strategic Plan to present a comprehensive strategy for Exchange implementation. The Exchange Strategic Plan shall be aligned with the District's Exchange vision, goals and capacities as well as the particular opportunities and requirements set forth by OCIO. The Contractor shall prepare the District's Exchange Strategic Plan through the completion of following sequential tasks:

##### **C.3.3.1.1 Background Research and Assessment**

###### **C.3.3.1.1.1 Review and Assessment**

The Contractor shall conduct the background research and assessment of the local health insurance market necessary to develop an understanding of the District's uninsured or underinsured population and the various factors associated with health care coverage. The Contractor shall assess, update and expand on existing

information and develop new relevant information in order to produce comprehensive and accurate data fundamental to the District's ability to make informed decisions with respect to planning, developing and implementing the District's Exchange.

#### **C.3.3.1.1.2 Background Research Findings Report**

The Contractor shall provide the findings of the research and assessment in a Background Research Findings Report. The Background Research Findings Report shall detail the Contractor's understanding and findings resulting from a thorough assessment of the local health insurance market. The Background Research Findings Report shall include at a minimum the following:

- a. The demographics of the health insurance status of DC residents, businesses, and individuals working in the District;
- b. Catalogue the existing and projected insurance and uninsurance rates;
- c. Analysis regarding the expected participation in the Exchange;
- d. Collection of information on the uninsured in the District, including but not limited to details regarding employment status, income, age, the types of employer-based and other existing opportunities for coverage;
- a. A projection of rates of uninsured based on current and forecasted economic indicators in the District;
- b. An analysis of individuals covered by public health insurance, including, but not limited to, employment status, income, age, health insurance status (i.e., Medicaid, Children's Health Insurance Program, DC HealthCare Alliance, and/or Medicare);
- c. An analysis of the Employer Sponsored Insurance (ESI) market in the District, including coverage by firm size, employee residency, and industry;
- d. An analysis of small, large, and non-group market health insurance plans, including, but not limited to, premium rates, cost-sharing structures, benefit packages, and plan actuarial value;
- e. Assess the likely interest or participation of private insurers in the District's Exchange;
- f. Quantify the potential market to be served by the District's Exchange
- g. A projection of insurance take up rate among uninsured and small businesses, upon Exchange establishment; and
- h. An analysis of existing exchanges and the national landscape.

#### **C.3.3.1.2 Governance Plan Assessment and Analysis**

##### **C.3.3.1.2.1 Administration and Governance Decision Memo**

The contractor shall conduct the necessary assessments and analysis required for developing recommendations regarding the Administration and Governance of a

District Exchange. The Contractor shall provide the findings of the assessment and analysis in an Administration and Governance Decision Memo. The Administration and Governance Decision Memo shall address at a minimum the following:

#### **C.3.3.1.2.1.1 Administration**

The Contractor shall conduct analysis to identify and recommend a strategy administration of an Exchange in DC. This analysis shall include, but is not limited to:

- a. Identification of Exchange administration options, including a DC-run Exchange, a regionally-administered Exchange, or a federally-operated Exchange and a description of the level of effort required for each;
- b. Identification of the requirements and costs of implementing each governance alternative;
- c. Quantification of the advantages and disadvantages of each administration alternative;
- d. Application of the District's specific circumstances to each administration alternative and the effect on the District of each option; and
- e. Recommendation of the administration option for the District's Exchange based on the findings of the assessments and analysis described above.

#### **C.3.3.1.2.1.2 Governance**

The Contractor shall conduct analysis to identify and recommend a governance strategy for the operation of the District's Exchange. This analysis shall include, but is not limited to:

- a. Identification of Exchange governance options including consideration of operating an Exchange as a division within an existing state agency, as a new, stand-alone state agency, as a quasi-government entity, or as a non-government not-for-profit organization. For each option, the Contractor shall describe the structure and organizational placement, authorities, responsibilities, lines of accountability and reporting shall be defined. The Contractor shall include multiple alternatives for organizational placement as applicable for each option;
- a. Identification of the requirements and costs of implementing and operating each governance option;
- b. Quantification of the benefits and liabilities of each governance option;
- c. Application of the District's specific circumstances to each governance option;
- d. An assessment of the long term sustainability of each option; and

- e. Recommendation of a governance option for adoption by the District considering all of the foregoing analysis, including legal and resource requirements to result.

### **C.3.3.1.3 Exchange Strategic Planning Assessment and Analysis**

The District through the COTR will provide the Contractor a response to the Administration and Governance Decision Memo described in C.3.3.1.2.1. The Contractor shall, based upon the District's decision, develop an Exchange Strategic Plan (C.3.3.2) that addresses at a minimum the assessment and analysis of following areas critical to the implementation of an Exchange:

#### **C.3.3.1.3.1 Business Operations**

The Contractor shall identify and describe the business operations requirements to provide the basic framework required to support and operate the District's selected Exchange Model in a Business Operations Summary Memo. The Business Operations Summary Memo shall include, but is not limited to:

- a. An outline of operational responsibilities, divided among the District and other participants as applicable to the selected governance structure;
- b. An outline describing the decision making body, including possible structure, requirements for member selection/appointment, and associated authorities;
- c. An organizational chart for the Exchange entity, including staffing levels and corresponding responsibilities;
- d. A plan to recruit and maintain human resources necessary to implement and operate the Exchange;
- e. A strategy for procurement and vendor management; and
- f. A plan outlining the Exchange's needs for office space, equipment, IT, and other business services.

#### **C.3.3.1.3.2 Program Integration**

The Contractor shall assess the program integration requirements related to the Exchange and develop plans for anticipated points of integration with Medicaid and other District health insurance programs. The Contractor shall provide a summary of the findings in a Program Integration Summary Memo. The Program Integration Summary Memo shall include, but is not limited to, analysis of:

- a. The current public health care programs available in DC, including corresponding eligibility, covered benefits, and operations;
- b. The impact on Exchange implementation to the eligibility levels and operations of existing health care programs, including Medicaid, the Children's Health Insurance Program, and the DC HealthCare Alliance;
- c. Models for Medicaid screening under the new Medicaid eligibility guidelines, including maintaining eligibility in IMA/DHS, transferring

- the function to DHCF, transferring function to new Exchange entity (if any), or others models;
- d. The transition of individuals from the Pre-Existing Condition Insurance Plan to the Exchange;
  - e. The transition of members of Congress and Congressional personal office staff from their current insurance plans to the Exchange; and
  - f. The transition of employees from current coverage to Employer Sponsored Insurance purchased through the Exchange.

### **C.3.3.1.3.3 Technical Infrastructure**

The Contractor shall assess and describe the required technical infrastructure components required to compliment the Business Operations (C.3.3.1.3.1) to support the District's Exchange vision and objectives. The Contractor shall provide a summary of the findings in a Technical Infrastructure Summary Memo. The Technical Infrastructure Summary Memo shall address or provide for at a minimum the following:

- a. A web portal for consumers to apply for and evaluate health care options offered in the Exchange;
- b. A process for eligibility determination to screen applicants for programs offered by the Exchange, including DC Medicaid and other District insurance programs;
- c. A secure database management system to store and manage applicant and member information;
- d. A process for secure exchange of data between the Exchange and at a minimum the following entities:
  1. DC Medicaid agency
  2. DC Department of Human Services, Income Maintenance Administration
  3. Internal Revenue Service
  4. Social Security Administration
  5. U.S. Department of Homeland Security
  6. any other relevant local, state, and federal agencies
- e. A process for collecting and publicizing Exchange health plan policies and options;
- f. A process for assigning and collecting premiums from members;
- g. A process for eligible businesses to evaluate and purchase insurance coverage through the Exchange; and
- h. A call center to assist residents seeking information on or who have experienced problems with the Exchange.

### **C.3.3.1.3.4 Financial Sustainability**

The Contractor shall develop a business plan enabling financial sustainability for governance and operation for the District's Exchange, to be summarized in a

Financial Sustainability Summary Memo. The Financial Sustainability Plan shall be capable of supporting Exchange governance and operations beyond any initial planning or implementation funding provided by HHS, with the goal of complete self-sustainability by January 1, 2015. The Financial Sustainability Plan shall include, but is not limited to:

- a. Development of projected operating budgets for the pre-launch, launch, and 2 post-launch years of operations. This shall include, but is not limited to, all component expenditures, such as personnel services, contracted services, IT and equipment, rent/overhead;
- b. Identification of financing models for the Exchange which reflect limited to no reliance on local public funding; and
- c. Liabilities and advantages associated with each model.

#### **C.3.3.1.3.5 Legal and Policy**

**C.3.3.1.3.5.1** The Contractor shall provide legal and policy analysis regarding the Exchange's key policy framework, establishment and authorization vehicles, and policies and procedures, to be summarized in a Legal and Policy Summary Memo. The Legal and Policy Summary Memo analysis shall include at a minimum the following:

- a. A review of existing statutes and regulations that may impact , either positively or negatively, the implementation of the Exchange;
- a. Establishment vehicles including an analysis of all legislative and regulatory actions necessary for the establishment of the Exchange entity, including all short and long term authorities and legal charges, and privacy practices and policies; and
- b. Identification and development of policies and procedures to address all administrative and operational aspects of the Exchange.

#### **C.3.3.1.3.6 Exchange Insurance Market**

The Contractor shall provide analyses and recommendations regarding guidelines for the insurance market in the Exchange, to be summarized in an Exchange Insurance Market Summary Memo. The Exchange Insurance Market Summary Memo shall include, but is not limited to:

- a. Models, and associated benefits, for certification of qualified health plans, including active purchasing, passive certification, and other approaches;
- b. Options and corresponding modeling and actuarial analyses of health plans to be offered in the Exchange, including insurance standards, benefit design, and cost-sharing models for each actuarial level permissible by the ACA;

- c. Actuarial analysis and fiscal impact to the District of including benefits and services in addition to federally mandated benefits to Exchange plans;
- d. Options and corresponding actuarial analyses for insurance standards and eligibility criteria for Exchange options for small businesses;
- e. Actuarial analysis of merging the individual and small-group markets in the Exchange;
- f. Options and corresponding actuarial analysis of adopting Exchange insurance standards for individual and group markets outside of the Exchange; and
- g. Modeling and analysis of potential adverse selection, and recommendations for minimizing adverse selection in the Exchange.

### **C.3.3.2 Exchange Strategic Plan**

The Contractor shall prepare and deliver a Draft Strategic Plan encompassing the Strategic Planning Assessment and Analysis described in C.3.3.1.3.

#### **C.3.3.2.1 Exchange Strategic Plan Outline**

The Contractor shall first prepare an outline of the Strategic Plan for the review and approval of the COTR. The Exchange Strategic Plan Outline shall include the major points identified through the strategic planning and assessment and to be included in the Exchange Strategic Plan.

#### **C.3.3.2.2 Exchange Draft Strategic Plan Draft**

The Contractor shall develop and provide a comprehensive discussion of each of the areas identified in the Exchange Strategic Outline to guide the successful implementation of the District's Exchange. Once approved by the COTR, the Contractor shall solicit comments and feedback on the Exchange Draft Strategic Plan from stakeholders, the health care community, and the public.

#### **C.3.3.2.3 Exchange Final Strategic Plan**

The Contractor shall revise and modify the Exchange Draft Strategic and provide the Exchange Final Strategic Plan.

**C.3.4 TASK 4 EXCHANGE OPERATIONAL PLAN DEVELOPMENT**

The Contractor shall develop and provide an Operational Plan to guide the implementation of the final Exchange Strategic Plan (C.3.3.2.3).

**C.3.4.1 Exchange Operational Plan Analysis**

The Contractor shall conduct and address at a minimum the following areas critical to the implementation of an Exchange Operational Plan (C.3.4.2.3):

**C.3.4.1.1 Governance**

The Contractor shall provide the framework to operationalize the Administration and Governance structures identified in the Exchange Strategic Plan. This shall include the processes associated with developing authorizing legislation, rulemaking, and policies and procedures. The Contractor shall identify milestones, interdependencies and timelines that are relevant to any developmental steps in the Exchange Strategic Plan related to establishing the agreed upon Administration and Governance structures.

**C.3.4.1.2 Business Operations**

The Contractor shall detail how and when the District will implement business operations, in-line with the approaches and strategies described in the Exchange Strategic Plan (C.3.4.2.3) and any applicable decisions made by the District. This shall include, but is not limited to:

- a. Creating of positions and recruitment of staff;
- b. Use of consultants;
- c. Establishing of a procurement processes and timelines; and
- d. Development and implementation of policies and standard operating procedures and participation processes.

**C.3.4.1.3 Program Integration**

The Contractor shall describe how the District will implement changes to existing health care programs, in-line with the approaches described in the Exchange Strategic Plan and any applicable decisions made by the District. This shall include, but is not limited to:

- a. Implementing changes to Medicaid eligibility levels;
- b. Implementing any changes or upgrades to the process for Medicaid and Alliance eligibility determination; and
- c. Implementing the transition of individuals newly eligible for the Exchange from prior insurance.

**C.3.4.1.4 Technical Infrastructure**

The Contractor shall develop detailed timelines, milestones, interdependencies, for implementing the technical infrastructure outlined in the Exchange Strategic Plan (C.3.3.2.3) and any applicable decisions made by the District. This shall include, but is not limited to:

- a. A framework for decision making regarding the selection and use of appropriate technologies, including strategies for either the acquisition or disposal of technology solutions that address the web, database, information exchange functions outlined in the Exchange Strategic Plan (C.3.3.2.3);
- b. Developing all necessary Data Use Agreements (DUAs) between the Exchange and government and non-government entities with whom information shall be shared; and
- c. Establishing the infrastructure for a call center.

**C.3.4.1.5 Financial Sustainability**

The Contractor shall develop detailed cost estimates, timelines and operational plans for implementing sustainable business plan aligned with the Exchange Strategic Plan and any applicable decisions made by the District. This shall include, but is not limited to:

- a. High level budget outline;
- b. Timelines, milestones, activities related to developing and implementing a sustainable financing plan and business model;
- c. Processes, timelines and milestones for achieving operational status related to financial management; and
- d. Processes and infrastructure necessary to implement a decided upon sustainability plan.

**C.3.4.1.6 Legal and Policy**

The Contractor shall describe the steps to be taken, timeline, interdependencies, for developing and implementing the legal, regulatory, and policy steps outlined in the Exchange Strategic Plan and any applicable decisions made by the District. This shall include but is not limited to:

- a. Steps necessary to develop and pass authorizing legislation for the Exchange entity;
- b. Steps necessary to develop and adopt policies and procedures for the Exchange entity; and

- c. Steps necessary to develop and pass legislation or rulemaking outlining standards for insurance coverage in the Exchange or any other changes to the insurance marketplace outlined in the Exchange Strategic Plan.

### **C.3.4.1.7 Other General Components**

#### **C.3.4.1.7.1 Project Schedule**

The Contractor shall develop an overall timeline for the activities, milestones and tasks associated with implementing the District's Exchange Strategic Plan (C.3.3.2.3). The Contractor shall detail utilize the Exchange Operational Plan Analysis (C.3.4.1) to identify the distinct tasks, events that contribute to the District's progress in establishing and maintaining an Exchange. This shall include but not be limited to:

- a. Timelines with sufficient granularity to demonstrate consideration of the level of effort needed to successfully execute the plan and associated tasks and milestones presented in the Exchange Strategic Plan;
- b. Identification of interdependencies within the project including specific dependencies that are part of the critical pathway to success in meeting milestones;
- c. Identify possible issues and risks and their relative potential impact on the District's Exchange plan's progress, stability and sustainability; and
- d. Identification The Contractor shall address contingency plans and avoidance strategies for identified risks and unexpected circumstances that would trigger a cascade of subsequent potential negative impacts on the Plan's success.

### **C.3.4.2 Exchange Operational Plan**

#### **C.3.4.2.1 Exchange Operational Plan Outline**

The Contractor shall first prepare an outline of the Operational Plan for the review and approval of the COTR. The Exchange Operational Plan Outline shall include the major points identified through the exchange operational planning and assessment (C.3.4.1) and to be included in the Exchange Operational Plan.

#### **C.3.4.2.2 Exchange Draft Operational Plan**

The Contractor shall prepare and deliver an Exchange Draft Operational Plan for the implementation encompassing all of the foregoing analysis. The Contractor shall first prepare an outline of the Operational Plan which shall receive approval prior to the presentation of the Plan draft.

**C.3.4.2.3 Exchange Operational Plan (Final)**

The Contractor shall work with the District to develop a Final Operational Plan for Exchange Implementation based on receipt of input and comments from District staff and project stakeholders and the wider health care community and public as applicable.

**SECTION D  
PACKAGING AND MARKING**

See Contractor's GSA Schedule 874-1 Contract, as applicable.

**SECTION E**  
**INSPECTION AND ACCEPTANCE**

See Contractor's GSA Schedule 874-1 Contract, as applicable.

**SECTION F**  
**DELIVERIES OR PERFORMANCE**

**F.1 TERM OF TASK ORDER**

The term of the task order shall be for the period date of award through September 30, 2011.

**F.2 DELIVERABLES**

<b>Deliverable No.</b>	<b>Deliverable Name</b>	<b>Due Date</b>
1	Exchange Detailed Project Management Plan (C.3.1.1)	Within 10 days from date of award
2	Weekly Progress Report (C.3.1.3)	Weekly beginning 1 week from date of award
3	Exchange Detailed Project Management Plan Web Site Updates (C.3.1.4)	Weekly beginning 2 weeks from date of award
4	Stakeholder Engagement Plan (3.2.2)	Within 10 days from date of award
5	Background Research Report (C.3.3.1.1.2)	Within 30 days from date of award
6	Administration and Governance Memorandum (C.3.3.1.2.1)	As defined in Deliverable No. 1 (C.3.1.1)
7	Updated Detailed Project Management Plan (C.3.1.1.1)	As defined in Deliverable No. 1 (C.3.1.1)
8	Business Operations Summary Memorandum (C.3.3.1.3.1)	As defined in Deliverable No. 1 (C.3.1.1.1)
9	Program Integration Summary Memorandum (C.3.3.1.3.2)	As defined in Deliverable No. 1 (C.3.1.1.1)
10	Technical Infrastructure Summary Memorandum (C.3.3.1.3.3)	As defined in Deliverable No. 1 (C.3.1.1.1)
11	Financial Sustainability Summary Memorandum (C.3.3.1.3.4)	As defined in Deliverable No. 1 (C.3.1.1.1)
12	Legal and Policy Summary Memorandum (C.3.3.1.3.5)	As defined in Deliverable No. 1 (C.3.1.1.1)

<b>Deliverable No.</b>	<b>Deliverable Name</b>	<b>Due Date</b>
13	Exchange Insurance Marketplace Summary Memorandum (C.3.3.1.3.6)	As defined in Deliverable No. 1 (C.3.1.1.1)
14	Exchange Strategic Plan Outline (C.3.3.2.1)	As defined in Deliverable No. 1 (C.3.1.1.1)
15	Exchange Strategic Plan Draft (C.3.3.2.2)	As defined in Deliverable No. 1 (C.3.1.1.1)
16	Exchange Strategic Plan Final (C.3.3.2.3)	As defined in Deliverable No. 1 (C.3.1.1.1)
17	Exchange Operational Plan Outline (C.3.4.2.1)	As defined in Deliverable No. 1 (C.3.1.1.1)
18	Exchange Operational Plan Draft (C.3.4.2.2)	As defined in Deliverable No. 1 (C.3.1.1.1)
19	Exchange Operational Plan Final (C.3.4.2.3)	As defined in Deliverable No. 1 (C.3.1.1.1)

**SECTION G  
CONTRACT ADMINISTRATION****G.1 INVOICE PAYMENT**

**G.1.1** The District will make payments to the Contractor, upon the submission of proper invoices, at the prices stipulated in this contract, for supplies delivered and accepted or services performed and accepted, less any discounts, allowances or adjustments provided for in this contract.

**G.1.2** The District will pay the Contractor on or before the 30<sup>th</sup> day after receiving a proper invoice from the Contractor.

**G.2 INVOICE SUBMITTAL**

**G.2.1** The Contractor shall submit proper invoices on a monthly basis or as otherwise specified in Section G.4. Invoices shall be prepared in duplicate and submitted to the agency Chief Financial Officer (CFO) with concurrent copies to the Contracting Officer's Technical Representative (COTR) specified in Section G.9 below. The address of the CFO is:

Office of the Controller/Agency Fiscal Officer  
64 New York Avenue, NE  
Washington, DC 20001

**G.2.2** To constitute a proper invoice, the Contractor shall submit the following information on the invoice:

**G.2.2.1** Contractor's name, federal tax ID and invoice date (Contractors shall date invoices as of the date of mailing or transmittal);

**G.2.2.2** Contract number and invoice number;

**G.2.2.3** Description, price, quantity and the date(s) that the supplies or services were delivered or performed;

**G.2.2.4** Other supporting documentation or information, as required by the Contracting Officer;

**G.2.2.5** Name, title, telephone number and complete mailing address of the responsible official to whom payment is to be sent;

**G.2.2.6** Name, title, phone number of person preparing the invoice;

**G.2.2.7** Name, title, phone number and mailing address of person (if different from the person identified in G.2.2.6) above to be notified in the event of a defective invoice; and

**G.2.2.8** Authorized signature.

### **G.3 PAYMENT**

**G.3.1** Unless otherwise specified in this task order, payment will be made on partial deliveries of goods and services accepted by the District if:

- a. The amount due on the deliveries warrants it; or
- b. Payments based upon Section B (Price Schedules) and Section F (Deliverables).

**G.3.1.1** A payment error discovered by the District will be subject to repayment or adjustment by the District making a corresponding decrease in a current Contractor's payment or by making an additional payment by the District to the Contractors Provision for Adjustment of Payment.

### **G.4 ASSIGNMENT OF TASK ORDER PAYMENTS**

**G.4.1** In accordance with 27 DCMR 3250, the Contractor may assign funds due or to become due as a result of the performance of this task order to a bank, trust company, or other financing institution.

**G.4.2** Any assignment shall cover all unpaid amounts payable under this task order, and shall not be made to more than one party.

**G.4.3** Notwithstanding an assignment of task order payments, the Contractor, not the assignee, is required to prepare invoices. Where such an assignment has been made, the original copy of the invoice must refer to the assignment and must show that payment of the invoice is to be made directly to the assignee as follows:

Pursuant to the instrument of assignment dated \_\_\_\_\_,  
make payment of this invoice to \_\_\_\_\_  
(name and address of assignee).

### **G.5 THE QUICK PAYMENT CLAUSE**

#### **G.5.1 INTEREST PENALTIES TO CONTRACTORS**

**G.5.1.1** The District will pay interest penalties on amounts due to the Contractor under the Quick Payment Act, D.C. Official Code §2-221.01 et seq., for the period beginning on the day after the required payment date and ending on the date on which payment of the amount is made. Interest shall be calculated at the rate of 1% per month. No

interest penalty shall be paid if payment for the completed delivery of the item of property or service is made on or before:

- a. the 3<sup>rd</sup> day after the required payment date for meat or a meat product;
- b. the 5<sup>th</sup> day after the required payment date for an agricultural commodity; or
- c. the 15<sup>th</sup> day after the required payment date for any other item.

**G.5.1.2** Any amount of an interest penalty which remains unpaid at the end of any 30-day period shall be added to the principal amount of the debt and thereafter interest penalties shall accrue on the added amount.

## **G.5.2 PAYMENTS TO SUBCONTRACTORS**

**G.5.2.1** The Contractor must take one of the following actions within 7 days of receipt of any amount paid to the Contractor by the District for work performed by any subcontractor under a contract:

- a. Pay the subcontractor for the proportionate share of the total payment received from the District that is attributable to the subcontractor for work performed under the contract; or
- b. Notify the District and the subcontractor, in writing, of the Contractor's intention to withhold all or part of the subcontractor's payment and state the reason for the nonpayment.

**G.5.2.2** The Contractor must pay any lower-tier subcontractor or supplier interest penalties on amounts due to the subcontractor or supplier beginning on the day after the payment is due and ending on the date on which the payment is made. Interest shall be calculated at the rate of 1% per month. No interest penalty shall be paid on the following if payment for the completed delivery of the item of property or service is made on or before:

- a. the 3<sup>rd</sup> day after the required payment date for meat or a meat product;
- b. the 5<sup>th</sup> day after the required payment date for an agricultural commodity; or
- c. the 15<sup>th</sup> day after the required payment date for any other item.

**G.5.2.3** Any amount of an interest penalty which remains unpaid by the Contractor at the end of any 30-day period shall be added to the principal amount of the debt to the subcontractor and thereafter interest penalties shall accrue on the added amount.

**G.5.2.4** A dispute between the Contractor and subcontractor relating to the amounts or entitlement of a subcontractor to a payment or a late payment interest penalty under the Quick Payment Act does not constitute a dispute to which the District of Columbia is a party. The District of Columbia may not be interpleaded in any judicial or administrative proceeding involving such a dispute.

**G.6 CONTRACTING OFFICER (CO)**

Contracts and Task Orders will be entered into and signed on behalf of the District only by Contracting Officers. The name, address and telephone number of the Contracting Officer is:

James H. Marshall  
Contracts Compliance Officer  
Department of Health Care Finance  
899 North Capitol Street, NE Suite 6037  
Washington, DC 20002  
Voice: 202 442-9106  
e-mail: [jim.marshall@dc.gov](mailto:jim.marshall@dc.gov)

**G.7 AUTHORIZED CHANGES BY THE CONTRACTING OFFICER**

**G.7.1** The Contracting Officer is the only person authorized to approve changes in any of the requirements of this task order.

**G.7.2** The Contractor shall not comply with any order, directive or request that changes or modifies the requirements of this task order, unless issued in writing and signed by the Contracting Officer.

**G.7.3** In the event the Contractor effects any change at the instruction or request of any person other than the Contracting Officer, the change will be considered to have been made without authority and no adjustment will be made in the task order price to cover any cost increase incurred as a result thereof.

**G.8 CONTRACTING OFFICER'S TECHNICAL REPRESENTATIVE (COTR)**

**G.8.1** The COTR is responsible for general administration of the task order and advising the Contracting Officer as to the Contractor's compliance or noncompliance with the task order. In addition, the COTR is responsible for the day-to-day monitoring and supervision of the task order, of ensuring that the work conforms to the requirements of this task order and such other responsibilities and authorities as may be specified in the task order. The COTR for this task order is:

Brenda Emanuel  
Chief Administrative Officer  
Department of Health Care Finance  
899 North Capitol Street, NE Suite 6037  
Washington, DC 20002  
Phone: 202 442-5988  
e-mail: [brenda.emanuel@dc.gov](mailto:brenda.emanuel@dc.gov)

**G.8.2** The COTR shall not have authority to make any changes in the specifications or scope of work or terms and conditions of the task order.

**G.8.3** The Contractor may be held fully responsible for any changes not authorized in advance, in writing, by the Contracting Officer; may be denied compensation or other relief for any additional work performed that is not so authorized; and may also be required, at no additional cost to the District, to take all corrective action necessitated by reason of the unauthorized changes.

**SECTION H  
SPECIAL CONTRACT REQUIREMENTS****H.1 DEPARTMENT OF LABOR WAGE DETERMINATIONS**

The Contractor shall be bound by the Wage Determination No.: 2005-2103 Rev. No 10, dated June 15, 2010, issued by the U.S. Department of Labor in accordance with the Service Contract Act (41 U.S.C. 351 et seq.) and incorporated herein as Attachment J.3 of this solicitation. The Contractor shall be bound by the wage rates for the term of the contract. If an option is exercised, the Contractor shall be bound by the applicable wage rate at the time of the option. If the option is exercised and the Contracting Officer obtains a revised wage determination, the revised wage determination is applicable for the option periods and the Contractor may be entitled to an equitable adjustment.

**H.2 PUBLICITY**

The Contractor shall at all times obtain the prior written approval from the Contracting Officer before it, any of its officers, agents, employees or subcontractors, either during or after expiration or termination of the contract, make any statement, or issue any material, for publication through any medium of communication, bearing on the work performed or data collected under this contract.

**H.3 DISTRICT RESPONSIBILITIES**

**H.3.1** The District through the COTR will identify known stakeholders to be included in the Exchange planning process.

**H.3.2** The District through the COTR will provide the Contractor a written decision as described in C.3.3.1.3 regarding the District's Administration and Governance decision.

**H.3.3** The District through the COTR will provide feedback regarding required Deliverables. The COTR will review and provide approval or disapproval

**H.3.4** The District through the COTR will provide on-going oversight and monitoring of the Contractor's performance.

**H.3.5** The District, through the COTR, will maintain adequate liaison and cooperation with the Contractor.

**H.3.6** The District will attend required meetings with the Contractor to discuss issues, changes, deliverables' status, and other specific agenda items.

**H.3.7 REVIEW AND APPROVAL OF SUBCONTRACT(S)**

**H.3.7.1** The Contracting Officer will notify the Contractor, in writing, of its approval or disapproval of a proposed model subcontract for service providers within fifteen (15) business days of receipt of the proposed subcontract and supporting documentation required by the District. The District will specify the reasons for any disapproval, which shall be based upon review of the provisions of this Contract, the Contractor's proposal, and District or federal law or regulations.

**H.3.7.2** The District may require the Contractor to furnish additional information relating to the ownership of the subcontractor, the subcontractor's ability to carry out the proposed obligations under the subcontract, and the procedures to be followed by the Contractor to monitor the execution of the subcontract.

**H.4 CONTRACTOR RESPONSIBILITIES****H.4.1 STAFFING AND SUPERVISION**

The Contractor shall provide the Project Manager (C.3.1.2.1) and Other Resources (C.3.1.2.2) required to successfully perform the required services.

**H.4.2 SUBCONTRACTS**

The Contractor hereunder shall not subcontract any of Contractor's work or services to any subcontractor without the prior written consent of the Contracting Officer. Any work or service so subcontracted shall be performed pursuant to a subcontract agreement, which the District will have the right to review and approve prior to its execution by Contractor. Any such subcontract shall specify that Contractor and the subcontractor shall be subject to every provision of this contract. Notwithstanding any such subcontract approved by the District, Contractor shall remain liable to the District for all Contractor's work and services required hereunder.

**H.4.2 Allowable Subcontracting Requirements**

**H.4.2.1** The Contractor shall ensure that all activities carried out by any subcontractor conforms to the provisions of this Contract.

**H.4.2.2** It is the responsibility of the Contractor to ensure its subcontractors are capable of meeting the reporting requirements under this Contract and, if they cannot, the Contractor is not relieved of the reporting requirements.

**H.4.2.3 Termination of Subcontract**

The Contractor shall notify the District Contracting Officer, in writing, of the termination of any subcontract for the provision of services, including the

arrangements made to ensure continuation of the services covered by the terminated subcontract, not less than forty-five (45) days prior to the effective date of the termination, unless immediate termination of the contract is necessary to protect the health and safety of Enrollees or prevent fraud and abuse. In such an event, the Contractor shall notify CA immediately upon taking such action.

**H.4.2.4** If the District determines that the termination or expiration of a subcontract materially affects the ability of the Contractor to carry out its responsibility under this contract; the District may terminate this Contract.

**H.4.2.5** The Contractor shall ensure subcontracts contain a provision that requires subcontracts to contain all provisions of the Contractor's contract with the District and that the subcontractor look solely to Contractor for payment for services rendered.

## **H.5 ORDER OF PRECEDENCE**

A conflict in language shall be resolved by giving precedence to the document in the highest order of priority that contains language addressing the issue in question. The following documents are incorporated into the contract by reference and made a part of the contract in the following order of precedence:

- a. Task Order
- b. Task Order Attachments
- c. Contractor's GSA Contract document
- d. RFTOP, as amended
- e. Contractor's Technical and Price Proposal

**SECTION I  
STANDARD CONTRACT CLAUSES**

See Contractor's GSA Schedule 874-1 Contract as applicable.

**SECTION J  
ATTACHMENTS**

The following list of attachments are incorporated by this reference and made a part of the resulting contract in the order of priority described in H.4.

<b>Attachment Number</b>	<b>Document</b>
J.1	Contractor's GSA Schedule Contract
J.2	US Department of Labor Wage Determination Schedule Rev. No. 10 dated June 15, 2010
J.3	Tax Certification Affidavit
J.4	Cost/Price Data Requirement Package
J.5	Past Performance Evaluation Forms
J.6	OCHIO Guidance
J.7	State Planning and Establishment Grants for the Affordable Care Act's Exchanges DC Project Narrative

**SECTION K  
REPRESENTATIONS, CERTIFICATIONS AND  
OTHER STATEMENTS OF OFFEROR**

Not Applicable to this Task Order.

**SECTION L**  
**INSTRUCTIONS, CONDITIONS AND NOTICES TO OFFERORS**

**L.1 REQUEST FOR TASK ORDER PROPOSAL AWARD**

**L.1.1 Most Advantageous to the District**

The District intends to award a single Task Order resulting from this solicitation to the responsible Offeror(s) whose offer conforming to the solicitation will be most advantageous to the District, cost or price, technical and other factors, specified elsewhere in this solicitation.

**L.1.2 Initial Offers**

The District may award a Task Order on the basis of initial offers received, without discussion. Therefore, each initial offer should contain the Offeror's best terms from a standpoint of cost or price, technical and other factors.

**L.2 REQUEST FOR TASK ORDER PROPOSAL FORM, ORGANIZATION AND CONTENT**

One original and six (6) copies of the written proposals shall be submitted in two parts, titled "Technical Proposal" and "Price Proposal". Proposals shall be typewritten in 12 point font size on 8.5" by 11" bond paper. Telephonic and telegraphic proposals will not be accepted. Each proposal shall be submitted in a sealed envelope conspicuously marked:

"Proposal in Response to Solicitation No. DCHT-2011-T-0001  
Health Insurance Exchange Planning"

The Offeror's proposal(s) shall be organized and presented in the two separate volumes, Volume I, Technical Proposal, and Volume II, Price Proposal.

Offerors are directed to the specific proposal evaluation criteria found in Section M of this solicitation, **EVALUATION FACTORS FOR AWARD**. The Offeror shall respond to each factor in a way that will allow the District to evaluate the Offeror's response. The offeror shall submit information in a clear, concise, factual and logical manner providing a comprehensive description of program services and service delivery. The information requested below for the technical proposal shall facilitate evaluation and best value source selection for all proposals. The technical proposal must contain sufficient detail to provide a clear and concise representation of the requirements in Section C.

## **L.2.1 Technical Proposal Instructions**

The Offeror's Technical Proposal shall include the following:

### **L.2.1.1 Project Technical Approach and Methodology**

The offeror shall provide the following to demonstrate the Offeror's understanding, approach, and methodology to successfully complete the required services:

- a. A discussion of the Offeror's overall understanding of the ACA and specifically the role of health insurance exchanges in health care reform;
- b. The Offeror shall include a comprehensive draft Exchange Detailed Project Management Plan (C.3.1.1) to set forth in detail the Offeror's plans and approach for completing all tasks required by the scope of work and identified below. The draft Exchange Detailed Project Management Plan shall include a Gantt chart at the task level with critical paths identified.
  1. Exchange Detailed Project Management Plan (C.3.1.1)
  2. Weekly Progress Report (C.3.1.3)
  3. Stakeholder Engagement Plan (3.2.2)
  4. Background Research Report (C.3.3.1.1.2)
  5. Administration and Governance Memorandum (C.3.3.1.2.1)
  6. Updated Detailed Project Management Plan (C.3.1.1.1)
  7. Business Operations Summary Memorandum (C.3.3.1.3.1)
  8. Program Integration Summary Memorandum (C.3.3.1.3.2)
  9. Technical Infrastructure Summary Memorandum (C.3.3.1.3.3)
  10. Financial Sustainability Summary Memorandum (C.3.3.1.3.4)
  11. Legal and Policy Summary Memorandum (C.3.3.1.3.5)
  12. Exchange Insurance Marketplace Summary Memorandum (C.3.3.1.3.6)
  13. Exchange Strategic Plan Outline (C.3.3.2.1)
  14. Exchange Strategic Plan Draft (C.3.3.2.2)
  15. Exchange Strategic Plan Final (C.3.3.2.3)
  16. Exchange Operational Plan Draft (C.3.4.2.1)
  17. Exchange Operational Plan Final (C.3.4.2.3)
- c. A discussion of the Offeror's approach to developing A Stakeholder Engagement Plan (3.2.2) including the identification and mapping of stakeholder interests and concerns and facilitating stakeholder input and dialogue and developing consensus and management of stakeholder meetings and events;
- d. A discussion of the Offeror's approach to conducting Background Research including the use of existing data and information and the accessing of additional relevant data;

- e. A discussion of the Offeror's approach to Governance Plan Assessment and Analysis and determining and assessing Exchange governance and administration models
- f. A discussion of the Offeror's approach to Exchange Strategic Planning Assessment and Analysis including at a minimum a discussion of
  1. Business Operations (C.3.3.1.3.1)
  2. Program Integration (C.3.3.1.3.2) and planning for integration with Medicaid eligibility systems, policies and procedures and the development, financial management, oversight and management of health insurance programs.
  3. Technical Infrastructure (C.3.3.1.3.3) and the integration of technology supporting multiple programs and development of public facing, high volume, web-based technology systems
  4. Financial Sustainability (C.3.3.1.3.4), the development of financial and budget models design,
  5. Legal and Policy (C.3.3.1.3.5) issues and developing laws and regulations pertaining to the development, implementation and operation of the Exchange
  6. Exchange Insurance Marketplace (C.3.3.1.3.6) including the development of insurance standards
- g. A discussion of the Offeror's approach to Exchange Operational Assessment and Analysis
- h. The Offeror shall describe any innovative, unique features proposed, and additional deliverables to be provided and the expected benefit of each and contribution to the success of the project and the achievement of the District's objectives.

#### **L.2.1.2 Corporate Capabilities and Project Staff**

- a. The Offeror shall provide a description of the Offeror's Project Management techniques, controls, and tools the Project Manager will utilize in the execution of the required services. The description shall address at a minimum the following items:
  1. Identification and description of Project Management methods/techniques such as CPM, PERT, or similar methods to ensure successful and timely completion of the required services in the time frame required
  2. Tools to be utilized in the Project Management approach and their expected benefit to the overall Project Management methodology
  3. Approach to liaison with the District's COTR, including communications, project coordination, status meetings and reports
  4. Deliverable development
  5. Quality assurance
  6. Change Control/Problem Reporting Methodology/Techniques.
- b. The Offeror shall provide a project organizational chart, showing the individuals (including subcontractor's personnel) to be assigned to the

project. The organizational chart shall include at a minimum the following:

1. Identify the Project Manager (C.3.1.2.1)
  2. Other Resources (C.3.1.2.2)
  3. Name, Labor category, and Title for each individual named
  4. Reporting Lines and Lines of Accountability
- c. The Offeror shall provide a detailed resume for each individual staff and subcontractors identified in the project organizational chart. Staff and subcontractor resumes shall be constructed to emphasize relevant qualifications and experience of the individuals assigned and their successful completion projects similar size and scope to those described in Section C. Resumes shall include the following data:
1. Name
  2. Skill Category(ies) for this project
  3. Education, for each school list the school name and mailing address, dates attended, major(s), degree(s) conferred and date(s)
  4. Employment History with dates and descriptions of previous projects demonstrating how the individual's role and work on current and/or completed projects relates to the individual's ability to contribute to the successful completion of the following required services
    - i. Stakeholder Engagement (3.2.2)
    - ii. Background Research Report (C.3.3.1.1.2)
    - iii. Administration and Governance (C.3.3.1.2.1)
    - iv. Business Operations Summary (C.3.3.1.3.1)
    - v. Program Integration Summary (C.3.3.1.3.2)
    - vi. Technical Infrastructure Summary (C.3.3.1.3.3)
    - vii. Financial Sustainability Summary (C.3.3.1.3.4)
    - viii. Legal and Policy Summary (C.3.3.1.3.5)
    - ix. Exchange Insurance Marketplace Summary (C.3.3.1.3.6)

### **L.2.1.1 Corporate Qualifications, Experience and Past Performance**

The Offeror shall provide at a minimum the following:

- a. Describe the offeror's experience in areas similar in size and scope as those described in Section C.3. The Offeror shall also include discussion of any subcontractors relevant experience with projects similar in size and scope as those described in Section C.3.
- b. The Offeror shall submit at a minimum the name and address of three (3) professional references who have experience with the Offeror's delivery of services similar in size and scope as those described in Section C.3. The information to be provided for each reference shall include at a minimum:
  1. Customer Name
  2. Contact Person
  3. Contact person's e-mail address and phone number

4. Description of work performed by the offeror (including period of performance)
  5. Identification of the Offeror's staff that project worked on the project for the reference company
- c. The Offeror shall provide a list of **all** contracts and subcontracts the Offeror has performed similar in size and scope as the required services described in Section C.3 within the past five (5) years. The Offeror's list shall include the following information for each contract or subcontract:
1. Name of contracting entity;
  2. Contract number;
  3. Contract type;
  4. Contract duration (or Period);
  5. Total contract value;
  6. Description of work performed;
  7. Contact Person name, phone, and e-mail address
- d. The Offeror shall provide the information described above in c for each subcontractor;
- e. The Offeror shall provide at a minimum three (3) completed past Performance Evaluation forms (Attachment J.5) for entities identified in c above.
- f. The Offeror shall provide at a minimum two (2) completed past Performance Evaluation forms (Attachment J.5) for each subcontractor entities identified in d above.

## L.2.2

### VOLUME II – PRICE PROPOSAL INSTRUCTIONS

The Offeror's Price Proposal shall include the following:

The section titled "**Price Proposal**" shall include the total price for the entire project broken down by task. Pricing shall be a firm fixed price and shall include all costs. The price proposal shall, at a minimum include:

- a. Completed Price Schedule Section B.3 – The Offeror's total price shall be provided per task and shall include the supporting documentation to describe exactly how the per task and therefore the total price were derived. Specifically, each task price shall include a description of the labor rate (consistent with or lower than the Offeror's GSA Schedule contract and labor position, consistent with the Offeror's organizational chart.
- b. Copy of the Offeror's GSA Schedule contract including labor rates and description of labor positions; and
- c. Narrative to describe or explain the Offeror's price proposal, as applicable.

**L.3 PROPOSAL SUBMISSION DATE AND TIME, AND LATE SUBMISSIONS, LATE MODIFICATIONS, AND LATE WITHDRAWALS****L.3.1 PROPOSAL SUBMISSION**

Proposals must be submitted no later than **2:00 pm March 2, 2011**.

Modifications to proposals, or requests for withdrawals that are received after the exact local time specified above, are "late" and will be considered only if they are received before the award is made and one (1) or more of the following circumstances apply:

- a. The proposal or modification was sent by registered or certified mail not later than the fifth (5th) calendar day before the date specified for receipt of offers; or
- b. The proposal or modification was sent by mail and it is determined by the Contracting Officer that the late receipt at the location specified in the solicitation was caused solely by mishandling by the District; or
- c. The proposal is the only proposal received.

**L.4 RESERVED****L.5 EXPLANATION TO PROSPECTIVE OFFERORS**

If a prospective Offeror has any questions relative to this solicitation, the prospective offeror shall submit the question in writing to the Contact Person, identified on page one, in writing. The prospective Offeror shall submit questions no later than February 22, 2011. The District will not consider any questions received later than February 22, 2011. The District will furnish responses promptly to all prospective Offerors. An amendment to the solicitation will be issued if that information is necessary in submitting offers, or if the lack of it would be prejudicial to any other prospective Offerors. Oral explanations or instructions given before the award of the Request for Proposal will not be binding.

**L.6 RESERVED****L.7 SIGNING OF OFFERS**

The Contractor shall sign the offer and print or type its name on the offer. Erasures or other changes must be initialed by the person signing the offer. Offers signed by an agent shall be accompanied by evidence of that agent's authority, unless that evidence has been previously furnished to the Contracting Officer.

**L.8 ACKNOWLEDGMENT OF AMENDMENTS**

The offeror shall acknowledge receipt of any amendment to this solicitation by (a) signing and returning the amendment; (b) by identifying the amendment number and date or (c) by letter or telegram including mailgrams. The District must receive the acknowledgment by the date and time specified for receipt of offers. Offerors' failure to acknowledge an amendment may result in rejection of the offer.

## **L.9 STANDARDS OF RESPONSIBILITY**

The prospective Contractor must demonstrate to the satisfaction of the District the capability in all respects to perform fully the Request for Proposal requirements, therefore, the prospective Contractor must submit the documentation listed below, within five (5) days of the request by the District.

- L.9.1** Furnish evidence of adequate financial resources, credit or the ability to obtain such resources as required during the performance of the Request for Proposal.
- L.9.2** Furnish evidence of the ability to comply with the required or proposed delivery or performance schedule, taking into consideration all existing commercial and governmental business commitments.
- L.9.3** Furnish evidence of the necessary organization, experience, accounting and operational control, technical skills or the ability to obtain them.
- L.9.4** Furnish evidence of compliance with the applicable District licensing, tax laws and regulations.
- L.9.5** Furnish evidence of a satisfactory performance record, record of integrity and business ethics.
- L.9.6** Furnish evidence of the necessary production, construction and technical equipment and facilities or the ability to obtain them.
- L.9.7** If the prospective Contractor fails to supply the information requested, the Contracting Officer shall make the determination of responsibility or non-responsibility based upon available information. If the available information is insufficient to make a determination of responsibility, the Contracting Officer shall determine the prospective Contractor to be non-responsible.

## **L.10 TAX CERTIFICATION**

Each offeror must submit with its offer, a sworn Tax Certification Affidavit, incorporated herein as Attachment J.3.

## SECTION M EVALUATION FACTORS FOR AWARD

### M.1 EVALUATION FOR AWARD

A Task Order will be awarded to the responsible offeror(s) whose offer is most advantageous to the District, based upon the evaluation criteria specified below. Thus, while the points in the evaluation criteria indicate their relative importance, the total scores will not necessarily be determinative of the award. Rather, the total scores will guide the District in making an intelligent award decision based upon the evaluation criteria.

### M.2 TECHNICAL RATING

The Technical Rating Scale is as follows:

Numeric Rating	Adjective	Description
0	Unacceptable	Fails to meet minimum requirements, e.g., no demonstrated capacity, major deficiencies which are not correctable; offeror did not address the factor.
1	Poor	Marginally meets minimum requirements; major deficiencies which may be correctable.
2	Minimally Acceptable	Marginally meets minimum requirements; minor deficiencies which may be correctable.
3	Acceptable	Meets requirements; no deficiencies
4	Good	Meets requirements and exceeds some requirements; no deficiencies
5	Excellent	Exceeds most, if not all requirements; no deficiencies.

For example, if a sub factor has a point evaluation of 0 to 6 points, and (using the Technical Rating Scale) the District evaluates as "good" the part of the proposal applicable to the sub factor, the score for the sub factor is 4.8 (4/5 of 6). The sub factor scores will be added together to determine the score for the factor level.

### M. 3 EVALUATION CRITERIA

The objective of the source selection process is to identify and select the Offeror that has successfully demonstrated the ability to successfully meet the District's needs in the manner most advantageous to the District, all factors considered.

- M.3.1** The technical evaluation criteria set forth below have been developed by agency technical personnel and have been tailored to the requirements of this particular solicitation. The Contractor is informed that these criteria will serve as the standard against which all proposals will be evaluated and serve to establish the evaluation criteria including the evaluation factors and significant sub factors which the Contractor should specifically address in complying with the requirements of the solicitation as described in Section C and Proposal Format and Content described in Section L.2.
- M.3.2** The relative probabilities of the Offeror to accomplish the requirements of the solicitation will be evaluated based on the specific information requested in L.2 in accordance with the evaluation factors described below. The Contractor should respond to each factor and significant sub factor in a way that will allow the District to evaluate the Contractor's response. The scoring for each evaluation factor will be based on the District's determination of the degree to which the Offeror satisfies the requirements within the evaluation factor and significant sub factors. Deficiencies and weaknesses identified in the proposal as well as the District's risk will also be considered. The evaluation factors and significant sub factors, point value and relative importance follows.
- M.3.3** **EVALUATION FACTORS**
- M.3.3.1** **Technical Evaluation**
- M.3.3.1.1** **Project Technical Approach and Methodology (0 – 40 Points)**
- The content of this section of the Offeror's proposal shall be evaluated to determine if the Offeror's approach and methodology is realistic, attainable and appropriate and that the proposed plan, methodology, and approach will lead to successful provision of the required services. The Offeror's overall understanding of the project, ACA and health insurance exchanges will also be evaluated.
- M.3.3.1.2** **Project Staff and Corporate Capabilities (0 – 20 Points)**
- The content of this section of the Offeror's proposal shall be evaluated to determine if the Offeror's proposal provides a detailed picture of the Offeror's staff and organizational structure as well as the Offeror's plans to manage, control and supervise the delivery of the required services in order to insure satisfactory contract performance. This section will also examine the Offeror's project staff and corporate capabilities and the contribution of each to the successful and timely completion of the required services.
- M.3.3.1.3** **Corporate Qualifications, Experience, and Past Performance (0 – 20 Points)**
- The content of this section of the Offeror's proposal shall evaluate pertinent information relating to the offeror's qualifications, experience, and past

performance providing services similar, in size, scope as those described in Section C. Information provided on past/current projects should demonstrate how the Offeror's involvement on previous projects relates to the Offeror's ability to successfully complete the scope of work specified in Section C.3

**M.3.3.2 PRICE EVALUATION (0 – 20 Points)**

The price evaluation will be objective. The offeror with the lowest cost/price will receive the maximum price points. All other proposals will receive a proportionately lower total score. The following formula will be used to determine each offeror's evaluated cost/price score:

$$\frac{\text{Lowest price proposal}}{\text{Price of proposal being evaluated}} \times 20 = \text{Evaluated price score}$$