RFP Number: QPS – 2015-01

HEALTH RESEARCH, INC.

New York State
Department of Health
Office of Quality and Patient Safety
State Health Innovation Plan / State Innovation Model Initiative

Request for Proposals

Management Consultant

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KEY DATES

RFP Release Date: January 5, 2015
Questions Due: January 12, 2015
RFP Updates Posted: January 16, 2015
Proposals Due: February 2, 2015 by 5:00 pm EST

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I. Introduction

Health Research, Inc. (HRI) is seeking a highly qualified entity to provide assistance to the New York State Department of Health, Innovation Center with implementation of the State’s Health Innovation Plan (SHIP) (available at this link: https://www.health.ny.gov/technology/innovation_plan_initiative/docs/ny_state_health_innovation_plan.pdf). The Management Consultant will work with the Innovation Center Director and Executive agency staff to ensure effective initiative implementation. The Management Consultant is anticipated to include a multidisciplinary team able to offer strategic and analytic guidance, to develop written materials and presentations to guide and support topic-specific workgroups and to provide management expertise to align multiple work streams and workgroups and assure successful completion of activities within established timelines.

The SHIP is New York’s overarching roadmap to achieve health system transformation that results in better health, better care and lower costs. More specifically, New York has proposed a multidisciplinary approach to health system redesign that is inclusive of delivery system reform, payment reform, ensuring access to care without disparity, ensuring a workforce appropriate to health care needs and services in NYS, supportive health information technologies and strong performance management and evaluative analytics to ensure that goals and objectives are obtained. A key facet of the SHIP is development and implementation of an integrated care delivery system with an advanced primary care model as the foundation. This care model will be supported by a value-based payment system, skilled workforce and common set of quality metrics.

To implement the SHIP, HRI received approximately $100 million in grant funding under the State Innovation Model (SIM) funding opportunity from the Centers for Medicare and Medicaid Services (CMS), through the Center for Medicaid and Medicare Innovation (CMMI). This funding will provide resources needed to develop, implement and evaluate the SHIP including the following:

1. A statewide program of integrated care delivery premised on a strong foundation of primary care practice transformation, that is inclusive of all providers and all payers and is responsive to consumer need;
2. A transition from Fee-for-Service to value based reimbursement that supports and incents delivery system reform to result in improved health and well-being and reduced costs for all New Yorkers. At the conclusion of the testing grant, in 2020, 80% of New Yorkers will be receiving value-based care;
3. Expansion of NY’s primary care workforce through innovations in professional education and training;
4. Development of a common scorecard, shared quality metrics and enhanced data/analytics to ensure that delivery system and payment models support Triple Aim objectives;
5. Implementation of leading-edge health information technology, including greatly-enhanced capacities to exchange clinical data and an all payer database; and
6. Rigorous evaluation of the delivery and payment system reforms implemented to inform future policy and program.

II. Contractor Responsibilities

The Management Consultant (Consultant) is being procured competitively to ensure that the entity selected is of the highest quality and offers the greatest value to HRI. The Consultant will be expected to provide cross-functional programmatic, analytic and policy support to assure achievement of overall testing grant goals. More specifically the management consultant will be expected to provide high-level organizational, analytic and policy support for the following:
• Creating and managing a multi-sector governance structure that includes public and private entities, that addresses payers, providers and consumers and that is responsive to emerging trends and initiatives and that is sustainable over the long term;
• Driving multi-payer business designs that support and promote evolving health system delivery initiatives inclusive of integrated care models that span the full spectrum of care from primary and specialty physician care to acute and long-term care and that support an evolving advanced primary care model that is inclusive of population and behavioral health;
• Facilitating consumer engagement in delivery system and payment redesign;
• Facilitating inclusion of evolving health information technologies in care delivery and payment;
• Promoting access to care for all without disparity;
• Promoting and understanding complexities associated with numerous existing and evolving care delivery and payment model initiatives including, but not limited to, Accountable Care Organizations (ACOs), New York Medicaid Delivery System Redesign Incentive Program (DSRIP); Medicare Advanced Primary Care Practice (MAP-CP) and Medicare Comprehensive Primary Care Initiatives (CPCi);
• Developing business and technical requirements for procurements related to practice transformation;
• Promoting health transparency initiatives associated with quality and cost transparency, information collected through an all payer claims data base and evolving health information technologies;
• Developing a common set of quality and cost metrics across payers and providers to inform and support health delivery, payment and quality outcomes;
• Managing and promoting workforce development initiatives; and
• Promoting population health including mechanisms for addressing social determinants of health.

The Management Consultant will be expected to operate as a member of a diverse team inclusive of internal and external stakeholders, multiple State and federal agencies and multiple expert contractors and consultants that will comprise the SHIP team. Contractors and consultants anticipated to participate as members of this team include: a logistics coordinator; an evaluation contractor; practice transformation and curriculum adoption contractors; advanced primary care support contractors; and public health consultants.

III. Who May Apply

Eligible applicants must meet the requirements.

Minimum Eligibility Requirements:

At least five years of progressively responsible experience including the following:

• Experience managing, organizing and facilitating workgroup meetings with broad stakeholder perspectives;
• Experience successfully working with public and private payers to support payment reform initiative(s);
• Experience with designing and implementing of primary care models, including familiarity with NCQA standards and other models in the state (i.e. CPCi, MAP-CP, and other demonstrations described in the SHIP);
• Change leadership and management expertise; and
• Experience aligning multiple entities including state agencies, public-private partnerships and projects, and both public (state and federal) and private sector led health care innovations.

The successful applicant will document skills and experience with health care policy, health economics; management and finance; operations; technology development; statistics; and evaluation. Applicants will be
expected to document experience (in New York or other states) with the following:

- Design and implementation of novel payment and service delivery strategies that are state-wide and multi-payer (private and public) to achieve the Triple Aim;
- Work with payers (public and private), providers and consumers including work with commercial and public payers on payment innovation across urban and rural markets;
- Development and implementation of innovative health delivery models inclusive of primary, specialty, acute and long-term care; behavioral and population health;
- Evolving health information technologies;
- Health workforce development;
- Working with public employee health plans on benefit and payment strategies;
- Demonstrated history of successfully supporting state(s) that have received CMMI awards; and
- Development and implementation of statewide multi-payer payment reform model(s).

**Preferred Eligibility Requirements:**

Demonstrated understanding of New York’s health delivery system including experience with:

- The payer market and landscape in New York State, including payer-led innovative payment programs;
- New York State Medicaid initiatives including but not limited to the Delivery System Reform Incentive Program (DSRIP);
- Advanced Primary care and patient centered medical home programs in New York State;
- Health care access including financial, geographic, operational, and cultural barriers;
- Value based insurance design and value based payment initiatives;
- Cost and quality measures used across the State;
- Health Information Technology efforts in New York State including Regional Health Information Organizations (RHIOs), the Statewide Health Information Network of New York (SHIN-NY) and the All Payer Database (APD);
- Transparency initiatives in New York State including open data New York;
- Workforce initiatives;
- Ongoing CMMI-funded initiatives including but not limited to Medicare ACOs, CPCi, the Finger Lakes Health Systems Agency testing grant; and
- Population health programs in New York State including the Prevention Agenda.

**Staff Qualifications:** Applicants must include with their response to this RFP a summary of the qualifications of contractor staff assigned to the project, including the availability of any relevant subject matter experts. In particular, please demonstrate and document how the team and staff proposed have designed evidence-based tools for programs similar to those described above and that address the minimum and preferred eligibility requirements notes above.

For the proposed lead point(s) of contact under this contract, and Project Manager(s) proposed, please provide resumes and three direct references in an appendix of the Proposal. For the remaining staff proposed, please provide resumes.

**IV. Project Narrative/ Work Plan Outcomes**

Over a 36 month period (approximately February 1, 2015 through January 31, 2018), the contractor will work closely with the Innovation Center, other state agencies and external partners to implement the SHIP. Throughout the term of the contract, the contractor will be responsible for supporting, managing and facilitating
all workgroups and work stream activities and deliverables, consistent with state guidance, as described below:

1. Overarching Health Innovation Council - This Council will be charged with review, evaluation and development of recommendations to coordinate, align and implement the work of the individual topic-specific workgroups to achieve the following:
   a. ensure access to cost effective care for all;
   b. develop and promote a health system that focuses on better health outcomes for all including care delivery models, payment systems and policies that support better quality at lower cost
2. Integrated Care
   a. Development of new care delivery models including provider criteria, payment model guidelines and payer and provider milestones
   b. Align Medicaid DSRIP projects, Patient Centered Medical Homes (PCMH) programs, Accountable Care Organization (ACO) development, SIM initiatives and Advanced Primary Care (APC)
   c. Define and develop primary care practice transformation support including curricula, collaborative learning, reporting and evaluation
   d. Develop and implement value-based payment models for cross-sector adoption including NY-SHIP, Medicaid, Medicare, and commercial health plans.
3. Access to Care
   a. Provide guidance on safety net system transformation
   b. Ensure vulnerable populations receive quality care efficiently and in a timely manner
   c. Promote access to care without disparity
4. Workforce
   a. Provide leadership and alignment to statewide activities with regard to health care workforce elements of the State Health Innovation Plan
   b. Assure an adequate and appropriate supply of clinical and non-clinical workers in key geographies
   c. Promote standards and educational programs including medical school training policies
   d. Identify potential primary care-related workforce flexibility opportunities
   e. Develop more robust working data, analytics, and planning capacity
   f. Aid DSRIP projects with workforce strategies and ensure they are consistent with overall state goals
5. Transparency, Evaluation, and Health Information Technology (HIT)
   a. Evaluate the State’s health information technology infrastructure and systems as well as other related plans and projects including but not limited to the All Payer Database (APD), Statewide Health information Network of New York (SHIN-NY) and State Planning and Research Cooperative System (SPARCS)
   b. Develop recommendations for the State to move towards a comprehensive health claims and clinical data base to improve quality of care, efficiency, cost of care and patient satisfaction
   c. Design and implement/manage standardized, consistent approaches to measure cost and quality to support evaluation of the Plan’s impact on system transformation and Triple Aim goals and objectives
   d. Design and support development and implementation of a common scorecard to assure alignment across providers, health systems, payers and governmental entities
   e. Produce APC scorecard for Triple Aim
   f. Design and implement/manage a plan that will shape new IT efforts to best support other initiatives and incentivizes adoption of these efforts.
With respect to these workgroups and the overarching governance structure, the selected entity will be responsible for organizing and preparing materials that include time specific goals and objectives; convening meetings and facilitating discussions to ensure progress in meeting stated objectives; conducting follow up research and analytics as necessary; conducting ongoing evaluation of progress made to date and outstanding questions and concerns and finally ensuring development of recommendations in a format that can be officially conveyed to the Innovation Council and to other state officials as requested.

During **year one**, the selected contractor will be expected to complete the following tasks:

1. Work with Innovation Center staff to create an effective governance structure to ensure long-term initiative success
2. Provide project management and oversight of the governance process, including management and oversight of the specified workgroups including:
   a. Developing a project plan for each workgroup that includes timelines and deliverables; ensures coordination of timelines across multiple workgroups; and identifies cross-workgroup issues;
   b. Defining concrete goals for each meeting, identify opportunities for subject matter experts to participate in meetings and engage them in participating.
3. Facilitate meetings in collaboration with workgroup chairs to ensure goals are met and decisions/recommendations are made.
4. Complete activities between meetings that may require follow up in preparation for the next meeting, or in order to come to the next decision or design point.
5. Facilitate transparency and engagement in model design activities to ensure stakeholders are truly engaged in aspects of design and implementation.
6. Work closely with Innovation Center in establishing goals and targets, and align with state agency activities across all workgroups to ensure cohesive approaches to recommendations.
7. Prepare necessary materials for meeting deliberation including: meeting agendas, presentations, minutes, background materials, and meeting synopses; identify and prepare follow up items, and work with owners of follow up items to ensure their timely completion.
8. Produce resulting deliverables from workgroup activities (i.e. common scorecard, APC requirements, sustainability plan, etc.).
9. Provide guidance and support to the Innovation Center, Department of Financial Services and Civil Service with planning and activities related to value-based purchasing and value based insurance design.

During **years two and three**, the contractor will work with the Innovation Center and workgroups to:

1. Support all implementation efforts across New York State, monitor progress, and overcome challenges and implementation issues that may arise
2. Ensure implementation efforts are successful, using benchmarks and targets to guide implementation
3. Make model refinements as needed
4. Produce reports on the State’s progress and provide feedback and suggestions to continue to produce positive results across the State
5. Provide central oversight and coordination of the Practice Transformation Contractors including:
   a. Coordinating efforts across activities spanning the Innovation Center and state agencies, including DSRIP, and the transformation efforts across all regions of the State;
   b. Convening Practice Transformation entities centrally for learning collaborative and to ensure coordination; and,
   c. Ensuring success from the Practice Transformation entities; reviewing reports from them; ensuring progress is occurring in accordance with roadmaps and projected deliverables; offering guidance for overcoming issues.

Success for this contractor will be measured by the timely execution of the above activities. The ability to
quickly and concisely develop a roadmap for each workgroup work stream will be critical, as well as the ability to quickly and concisely prepare meeting material, capture decisions made, and keep workgroup members actively engaged.

A lead project manager from the contractor will provide at least weekly status updates on achieving deliverables, and should escalate issues as they arise in order to achieve fast resolution. To assist with program monitoring and to support reporting to the funder, the contractor’s project manager shall submit brief written monthly reports on activities achieved, and upcoming activities for the next month.

Upon completion of the contract deliverables the contractor will leave HRI/NYSDOH with electronic copies of all materials developed under the period of performance.

V. Administrative Requirements

A. Issuing Agency

The funding source for this award will be the Center for Medicare and Medicaid Innovation (CMMI) under the State Innovation Models Round Two: Model Testing grant opportunity, with the total Testing grant award amount of $99,999,999. It is anticipated that the full cost of this contract will be funded by this Federal grant. For more information about this funding opportunity and CMMI, see http://innovation.cms.gov/initiatives/State-Innovations-Model-Testing-Round-Two/.

This RFP is issued by the NYS Department of Health Office of Quality and Patient Safety and Health Research, Inc. Funding is provided by Funding Opportunity Number CMS-1GI-14-001 from the U.S Department of Health and Human Services, Centers for Medicare & Medicaid Services. HRI/NYS DOH are responsible for the requirements specified herein and for the evaluation of all proposals.

B. Question and Answer Phase

All substantive questions must be submitted to the following address by the date listed on the cover page of this RFP.

SIM@health.ny.gov

To the degree possible, each inquiry should cite the RFP section and paragraph to which it refers. Written questions will be accepted until the date posted on the cover of this RFP.

Questions of a technical nature can be addressed in writing to the above email or mailing address. Questions are of a technical nature if they are limited to how to prepare your proposal (e.g., formatting) rather than relating to the substance of the proposal.

Prospective applicants should note that all clarification and exceptions, including those relating to the terms and conditions of the contract, are to be raised prior to the submission of a proposal during the question and answer phase, by the date listed on the cover page of this RFP.

This RFP has been posted on HRI’s public website at: http://www.healthresearch.org/funding-opportunities. Questions and answers, as well as any updates and/or modifications, will also be posted on HRI’s website. All such updates will be posted by the date identified on the cover sheet of this RFP.
If prospective applicants would like to receive notification when updates/modifications are posted (including responses to written questions), please complete and submit a letter of interest and send it by email to the address listed above. Prospective applicants may also use the letter of interest to request actual (hard copy) documents containing updated information.

Submission of a letter of interest is not a requirement for submitting a proposal.

C. Applicant Conference

An Applicant Conference will not be held for this project.

D. How to File a Proposal

Proposals must be received at the following address by the date listed on the cover page of this RFP. Late proposals will not be accepted.

SIM@health.ny.gov

Office of Quality and Patient Safety
Attn: Stefanie Pawluk
NYS Department of Health
Corning Tower, Room 1938
Empire State Plaza
Albany, NY 12237

Applicants shall submit 1 original, signed proposal, and 3 copies. Proposal packages should be clearly labeled with the name and number of the RFP as listed on the cover of this RFP document. Proposals will be accepted via e-mail but the original proposal must be sent to the address above.

*It is the applicant’s responsibility to see that proposals are delivered to the address above prior to the date and time specified on the cover page. Late proposals due to documentable delay by the carrier may be considered at HRI’s discretion.

E. THE DEPARTMENT OF HEALTH & HRI RESERVE THE RIGHT TO

1. Reject any or all proposals received in response to this RFP.

2. Withdraw the RFP at any time, at HRI's sole discretion.

3. Make an award under the RFP in whole or in part.

4. Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of the RFP.

5. Seek clarifications and revisions of proposals.

6. Use proposal information obtained through site visits, management interviews and the state’s investigation of an applicant’s qualifications, experience, ability or financial standing, and any
material or information submitted by the applicant in response to the agency’s request for clarifying information in the course of evaluation and/or selection under the RFP.

7. Prior to application opening, amend the RFP specifications to correct errors or oversights, or to supply additional information, as it becomes available.

8. Prior to proposal opening, direct applicants to submit proposal modifications addressing subsequent RFP amendments.

9. Change any of the scheduled dates.

10. Waive any requirements that are not material.

11. Award more than one contract resulting from this RFP.

12. Conduct contract negotiations with the next responsible applicant, should HRI be unsuccessful in negotiating with the selected applicant.

13. Utilize any and all ideas submitted with the proposals received.

14. Unless otherwise specified in the RFP, every offer is firm and not revocable for a period of 60 days from the bid opening.

15. Waive or modify minor irregularities in proposals received after prior notification to the applicant.

16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer’s proposal and/or to determine an offerer’s compliance with the requirements of the RFP.

17. Negotiate with successful applicants within the scope of the RFP in the best interests of HRI.

18. Eliminate any mandatory, non-material specifications that cannot be complied with by all applicants.

19. Award contracts based on geographic or regional considerations to serve the best interests of HRI.

F. Term of Contract

Any contract resulting from this RFP will be effective only upon approval by Health Research, Inc.

It is expected that the contract resulting from this RFP will have the following project period: February 1, 2015 through January 31, 2018 (36 months) issued in yearly increments. Renewals are dependent upon satisfactory performance and continued funding.

G. Payment & Reporting Requirements

1. HRI may, at its discretion, make an advance payment to not for profit contractors in an amount not to exceed 20 percent of the total budget amount.

2. The contractor shall submit monthly invoices and required reports of expenditures electronically.
3. The contractor shall submit the following periodic reports:

   Monthly progress reports, in addition to weekly status update meetings.

   All payment and reporting requirements will be detailed in Exhibit C of the final contract.

**H. General Specifications**

1. By signing the "Proposal Form" each applicant attests to its express authority to sign on behalf of the applicant.

2. Contractor will possess, at no cost to HRI or the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of this contract will possess the qualifications, training, licenses and permits as may be required within such jurisdiction.

3. Submission of a proposal indicates the applicant's acceptance of all conditions and terms contained in this RFP, including the terms and conditions of the contract. Any exceptions allowed by HRI during the Question and Answer Phase (Section IV.B.) must be clearly noted in a cover letter attached to the proposal.

4. An applicant may be disqualified from receiving awards if such applicant or any subsidiary, affiliate, partner, officer, agent or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts.

5. Provisions Upon Default

   a. The services to be performed by the Applicant shall be at all times subject to the direction and control of HRI as to all matters arising in connection with or relating to the contract resulting from this RFP.

   b. In the event that the Applicant, through any cause, fails to perform any of the terms, covenants or promises of any contract resulting from this RFP, HRI shall thereupon have the right to terminate the contract by giving notice in writing of the fact and date of such termination to the Applicant.

6. Applicants must maintain an active registration in the System for Award Management (SAM) at sam.gov, have no exclusions or delinquent federal debt.

**I. HRI Boilerplate Agreement**

Selected contractor will be expected to sign the below Agreement.

**THIS AGREEMENT**, made as of «Start_Date» (the “Effective Date”), by and between HEALTH RESEARCH, INC., a not for profit corporation organized and existing under the laws of the State of New York, with principal offices located at Riverview Center, 150 Broadway, Ste. 560, Menands, NY 12204,
hereinafter referred to as HRI, and «CONSULTANT_NAME», located at «Address_One»,
«Address_Two»«City», «STATE», «Zip», herein after referred to as the CONSULTANT.

WITNESSETH

WHEREAS, HRI has been awarded a grant from «Sponsor_Name» for the conduct of a project entitled "«Project_Title»"; and,

WHEREAS, HRI desires the Consultant's performance of certain services for HRI in connection with such project; and,

WHEREAS, Consultant has represented to HRI that "he/she/it" is competent, willing and able to perform such services for HRI.

NOW THEREFORE, in consideration of the promises, mutual covenants, and agreements contained herein, it is mutually agreed by and between the respective parties as follows:

1. Consultant agrees to perform, as an independent contractor and not as an employee or agent of HRI, all the services set forth in Exhibit "A", appended hereto and made a part hereof, to the satisfaction of HRI's Principal Investigator, «PI_Name».

2. The Agreement shall be effective and allowable costs may be incurred by the Consultant from the Effective Date and shall continue until «End_Date» (the “Term”) unless terminated sooner as hereinafter provided or extended by written agreement of the parties.

3. In full and complete consideration of Consultant's performance hereunder, HRI agrees to compensate Consultant pursuant to the breakdown in Exhibit "A" attached. Final invoices are due within 60 days of the termination date of this Agreement. Requests received after this 60-day period may not be honored. Any reimbursement payable hereunder by HRI to the Consultant shall be subject to retroactive reductions and/or repayment for amounts included therein which are identified by HRI, on the basis of any review or audit, to not constitute an allowable cost or charge hereunder.

4. The Scope of Work and Budget in Exhibit "A" may be modified as conditions warrant by mutual agreement between HRI and Consultant, and confirmed in writing. In no event shall the total consideration under this Agreement exceed «Total Contract Amount Typed Out» Dollars ($«Total_Contract_Amt_In_Numbers»).

5. Consultant acknowledges and agrees that all work products, deliverables, designs, writings, inventions, discoveries, and related materials, (collectively “Works”) made, produced or delivered by Consultant in the performance of its obligations hereunder will be owned exclusively by HRI. All copyrightable Works are "works made for hire." Consultant will assign, and hereby assigns and transfers, to HRI all intellectual property rights in and to Works, including without limitation, copyrights, patent rights, trademark rights, and trade secret rights. Consultant further agrees that "he/she/it" shall not claim or assert any proprietary interest in any of the data or materials required to be produced or delivered by Consultant in the performance of its obligation hereunder. Consultant warrants that all Works shall be original except for such portion from copyrighted works as may be included with Consultant’s advance permission of the copyright owner(s) thereof, that it shall contain no libelous or unlawful statements or materials, and will not infringe
upon any copyright, trademark or patent, statutory or other proprietary rights of others. Consultant further agrees that "he/she/it" will not publish, permit to be published, or distribute for public consumption, any information, oral or written, concerning the results or conclusions made pursuant to this Agreement without the prior written consent of HRI.

6. Neither party shall use the name of the other or any adaptation, abbreviation or derivative of any of them, whether oral or written, without the prior written permission of the other party.

7. It is understood and agreed that the services to be rendered by Consultant are unique and that Consultant shall not assign, transfer, subcontract or otherwise dispose of its rights or duties hereunder, in whole or in part, to any other person, firm or corporation, without the advance written consent of HRI.

8. The nature of the relationship which the Consultant shall have to HRI pursuant to this Agreement shall be that of an independent contractor. Under no circumstance shall the Consultant be considered an employee or agent of HRI. This Agreement shall not be construed to contain any authority, either express or implied, enabling the Consultant to incur any expense or perform any act on behalf of HRI.

9. Consultant is solely responsible for complying with all applicable laws and obtaining, at Consultant’s sole expense, any and all licenses, permits, or authorizations necessary to perform services hereunder. Without limiting the generality of the foregoing, Consultant acknowledges and agrees, to the extent required by Article 15 of the New York State Executive Law (also known as the Human Rights Law) and all other State and Federal statutory and constitutional non-discrimination provisions, that Consultant will not discriminate against any employee or applicant for employment because of race, creed, color, sex, national origin, sexual orientation, age, disability, genetic predisposition or carrier status, or marital status. Furthermore, in accordance with Section 220-e of the Labor Law, Consultant agrees that neither it nor its authorized subcontractors, if any, shall, by reason of race, creed, color, disability, sex, or national origin: (a) discriminate in hiring against any New York State citizen who is qualified and available to perform the work; or (b) discriminate against or intimidate any employee hired for the performance of work under this Contract. Consultant is subject to fines of $50.00 per person per day for any violation of Section 220-e or Section 239 as well as possible termination of this Contract and forfeiture of all moneys due hereunder for a second or subsequent violation. Consultant further agrees to the related terms and conditions set forth in Appendix A.

10. This Agreement shall be void and no force and effect unless Consultant shall provide and maintain coverage during the life of this Agreement for the benefit of such employees as are required to be covered by the provisions of Workers’ Compensation Law.

11. Unless otherwise agreed by HRI, Consultant shall maintain, or cause to be maintained, during the Term of this Agreement, insurance or self-insurance equivalents of the following types and amounts: a) Commercial General Liability (CGL) with limits of insurance of not less than $1,000,000 each occurrence and $2,000,000 annual aggregate; b) HRI shall be included as Additional Insureds on the Consultant’s CGL, using ISO Additional Insured Endorsement CG 20 10 11 85 or an endorsement providing equivalent coverage to the Additional Insureds. The CGL insurance for the Additional Insureds shall be as broad as the coverage provided for the Named Insured Consultant. It shall apply as primary and non-contributing insurance before any insurance maintained by the Additional Insureds; c) other such insurance as may be specified by HRI, depending on the project and services provided by Consultant.

12. Consultant shall establish and maintain complete and accurate books, records, documents, accounts and other evidence directly pertinent to performance of the services under this Agreement (collectively,
"Records"). The Records must be kept for the balance of the calendar year in which they are created and for six years thereafter. HRI shall have reasonable access to such records as necessary for the purposes of inspection, audit, and copying. Records shall be maintained as Confidential Information and protected from public disclosure.

13. This Agreement, including all applicable attachments and appendices thereto, represents the entire Agreement and understanding of the parties hereto and no prior writings, conversations or representations of any nature shall be deemed to vary the provisions hereof. This Agreement may not be amended in any way except by a writing duly executed by both parties hereto.

14. HRI may terminate this Agreement with or without cause at any time by giving advance notice, when, in its sole discretion, HRI determines that it is in the best interests of HRI to do so, or as directed by the project sponsor. Such termination shall not affect any commitments which, in the judgment of HRI, have become legally binding prior to the effective date of termination. Upon termination of the Agreement by either party for any reason, Consultant shall immediately turn over to HRI any works in progress, materials, and deliverables (whether completed or not) related to the services performed up to the date of termination. It is understood and agreed, however, that in the event that Consultant is in default upon any of its obligations hereunder at the time of such termination, such right of termination on the part of HRI shall expressly be in addition to any other rights or remedies which HRI may have against Consultant by reason of such default.

15. Consultant acknowledges and agrees that, during the course of performing services for HRI, it may receive information of a confidential nature, whether marked or unmarked ("Confidential Information"). Consultant agrees to protect such Confidential Information with the same degree of care it uses to protect its own confidential information of similar nature and importance, but with no less than reasonable care. Consultant will not use Confidential Information for any purpose other than to facilitate the provision of services under this Agreement, and Consultant will not disclose Confidential Information to any third party without HRI’s advance written consent.

16. Consultant represents and warrants that: a) it has the full right and authority to enter into and perform under this Agreement; b) it will perform the services set forth in Exhibit A in a workmanlike manner consistent with applicable industry practices; c) the services, work products, and deliverables provided by Consultant will conform to the specifications in Exhibit A; d) there is no pending or threatened claim or litigation that would have a material adverse impact on its ability to perform as required by this Agreement.

17. Consultant shall have no interest, financial or otherwise, direct or indirect, or engage in any business, transaction, or professional activity, that may create a conflict with the proper discharge of Consultant’s duties under this Agreement. In the event any actual or potential conflict arises, Consultant agrees to notify HRI in writing within ten (10) days to allow HRI to evaluate any potential impact on Consultant’s performance under this Agreement.

18. Consultant agrees to defend, indemnify and hold HRI, its agents and employees, harmless from any losses, claims, damages, expenses, and liabilities (including reasonable attorneys’ fees arising out of: (i) any act or omission by Consultant in connection with the performance of services constituting negligence, willful misconduct, or fraud; (ii) the breach of the confidentiality obligations set forth herein; (iii) any claim for compensation or payment asserted by any employee or agent of Consultant; (iv) Consultant’s failure to carry out Consultant’s responsibilities under this Agreement; (v) any intellectual property infringement or misappropriation by Consultant in connection with the services provided under this Agreement.
19. Should any provision of this Agreement be proven to be invalid or legally ineffective, the overall validity of this Agreement shall not be affected. Unless the parties agree on an amended provision, the invalid provision shall be deemed to be replaced by a valid provision accomplishing as far as possible the purpose and intent of the parties at the date of the Agreement.

20. The failure of HRI to assert a right hereunder or to insist on compliance with any term or condition of this Agreement shall not constitute a waiver of that right of HRI, or other rights of HRI under the Agreement, or excuse a subsequent failure to perform any such term or condition by Consultant.

21. This Agreement shall be governed and construed in accordance with the laws of the State of New York. The jurisdictional venue for any legal proceedings involving this Agreement shall be in the State of New York. Disputes involving this Agreement may not be submitted to binding arbitration.

22. In addition to the methods of process allowed by the State Civil Practice Law & Rules (CPLR), in any litigation arising under or with respect to this Agreement, Consultant hereby consents to the service of process upon it by registered or certified mail, return receipt requested, and will promptly notify HRI in writing in the event there is any change of address to which service of process can be made.

23. This Agreement may be executed in two or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument. Delivery of an executed signature page to the Agreement by facsimile transmission or PDF shall be as effective as delivery of a manually signed counterpart.

   Consultant agrees to abide by the terms and conditions of Appendix "A" attached hereto and made a part hereof, including the provisions required for federally funded projects, if applicable.

**APPENDIX A to CONSULTANT AGREEMENT**

The parties to the attached Agreement further agree to be bound by the following terms, which are hereby made a part of said Agreement:

1. During the performance of the Agreement, the Consultant agrees as follows:

   (a) The Consultant will not discriminate against any employee or applicant for employment because of race, creed, color, sex, national origin, age, disability or marital status.

   (b) If directed to do so by the Commissioner of Human Rights, the Consultant will send to each labor union or representative of workers within which the Consultant has or is bound by a collective bargaining or other agreement or understanding, a notice, to be provided by the State Commissioner of Human Rights, advising such labor union or representative of the Consultant's agreement under clauses (a) through (g) (hereinafter called "non-discrimination clauses"). If the Consultant was directed to do so by the contracting agency as part of the bid or negotiation of this Agreement, the Consultant shall request such labor union or representative to furnish a written statement that such labor union or representative will not discriminate because of race, creed, color, sex, national origin, age, disability or marital status and that such labor union or representative will cooperate, within the limits of its legal and contractual authority, in the implementation of the policy and provisions of these non-discrimination clauses and that it consents and agrees that recruitment, employment, and the terms and conditions of employment under this Agreement shall be in accordance with the purposes and provisions of these nondiscrimination clauses. If such labor union or representative fails or refuses to comply with such a
request that it furnishes such a statement, the Consultant shall promptly notify the State Commissioner of Human Rights of such failure or refusal.

(c) If directed to do so by the Commissioner of Human Rights, the Consultant will post and keep posted in conspicuous places, available to employees and applicants for employment, notices to be provided by the State Commissioner of Human Rights setting forth the substance of the provisions of Clauses (a) and (b) and such provisions of the State's laws against discrimination as the State Commissioner of Human Rights shall determine.

(d) The Consultant will state, in all solicitations or advertisement for employees placed by or on behalf of the Consultant, that all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, sex, national origin, age, disability or marital status.

(e) The Consultant will comply with the provisions of Sections 290-299 of the Executive Law and with the Civil Rights Law, will furnish all information and reports deemed necessary by the State Commissioner of Human Rights under these non-discriminatory clauses and such actions of the Executive Law, and will permit access to the Consultant's books, records, and accounts by the State Commissioner of Human Rights, the Attorney General, and the Industrial Commissioner for the purposes of investigation to ascertain compliance with these non-discrimination clauses and such sections of the Executive Law and Civil Rights Law.

(f) This Agreement may be forthwith canceled, terminated or suspended, in whole or in part, by the contracting agency upon the basis of a finding made by the State Commissioner of Human Rights that the Consultant has not complied with these non-discrimination clauses, and the Consultant may be declared ineligible for future agreements made by or on behalf of HRI, the State or a public authority or agency of the State, until the Consultant satisfies the State Commissioner of Human Rights that the Consultant has established and is carrying out a program in conformity with the provisions of these non-discrimination clauses. Such finding shall be made by the State Commissioner of Human Rights after conciliation efforts by the Commissioner have failed to achieve compliance with these non-discrimination clauses and after a verified complaint has been filed with the Commissioner, notice thereof has been afforded to the Consultant, and an opportunity has been afforded to the Consultant to be heard publicly in accordance with the Executive Law. Such sanctions may be imposed and remedies invoked independently of or in addition to sanctions and remedies otherwise provided by law.

(g) The Consultant will include the provisions of clause (a) through (f) in every subcontract or purchase order in such a manner that such provisions will be binding upon each subcontractor or vendor as to operations to be performed within the State of New York. The Consultant will take such action in enforcing such provisions of such subcontract or purchase order as the State Commissioner of Human Rights or the contracting agency may direct, including sanctions or remedies for non-compliance. If the Consultant becomes involved in or is threatened with litigation with a subcontractor or vendor as a result of such direction by the State Commissioner of Human Rights or the contracting agency, the Consultant shall promptly notify HRI.

2. Assurances Required by DHHS--PHS (Where Applicable)

(a) Human Subjects, Derived Materials or Data
The Consultant and HRI both agree to abide by DHHS regulations concerning Human Subjects. The DHHS regulation, 45 CFR 46, provides a systematic means, based on established ethical principles, protecting the rights and welfare of individuals who may be exposed to the possibility of physical, psychological or social injury while they are participating as subjects in research, development or related
activities. The regulation extends to the human fetus (either in utero or ex utero), the dead, organs, tissues, and body fluids, and graphic, written or recorded information derived from human sources.

The DHHS regulation requires institutional assurances, including the implementation of procedures for review, and the assignment of responsibilities for adequately protecting the rights and welfare of human subjects. Safeguarding these rights and welfare is, by DHHS policy, primarily the responsibility of the grantee. The Consultant is responsible for ensuring that the activity described or covered by this Agreement, and additional information relating to human subjects, derived materials or data are annually reviewed and approved by the Institutional Review Board of the Consultant. The Consultant and HRI agree to complete a HHS 596 form on an annual basis.

(b) Laboratory Animals
The Consultant agrees to abide by PHS policy requiring that laboratory animals not suffer unnecessary discomfort, pain or injury. The Consultant must assure PHS, in writing, that it is committed to following the standards established by the Animal Welfare Acts and by the documents entitled "Principles for Use of Animals" and "Guide for the Care and Use of Laboratory Animals."

(c) Recombinant DNA
The Consultant agrees to abide by the current PHS Guidelines for Research involving Recombinant DNA Molecules. All research involving recombinant DNA techniques that is supported by the Public Health Service must meet the requirements of these Guidelines, which were developed in response to the concerns of the scientific and lay communities about the possible effects of recombinant DNA research. Their purpose is to specify practices for the construction and handling of recombinant DNA molecules and organisms or viruses containing recombinant DNA. As defined by the Guidelines, "recombinant DNA" corresponds to: (1) molecules that are constructed outside living cells by joining natural or synthetic DNA segments to DNA molecules that can replicate in a living cell; or (2) DNA molecules that result from the replication of a molecule described in (1).

Several types of studies involving recombinant DNA are exempt from the Guidelines while others are prohibited by the Guidelines. For the remainder, the Consultant must establish and implement policies that provide for the safe conduct of the research in full conformity with the Guidelines. This responsibility includes establishing an institutional biosafety committee to review all recombinant DNA research to be conducted at or sponsored by the Consultant and to approve those projects that are in conformity with the Guidelines. For each approved project, a valid Memorandum of Understanding and Agreement (MUA) shall be prepared for submission when solicited by an appropriate PHS staff member. The MUA is considered approved after review and acceptance by ORDA and by the Consultant.

(d) Promoting Objectivity in Research
Consultant agrees to comply with the DHHS/PHS regulatory requirements on Responsibility of Applicants for Promoting Objectivity in Research and financial conflicts of interest set forth in 42 C.F.R Parts 50 and 94.

(e) Other DHHS-PHS Regulations
The Consultant agrees to comply with applicable DHHS regulations concerning Civil Rights and Equal Opportunity, Student Unrest Provisions, Handicapped Individuals and Sex Discrimination.

(f) Additional Assurances
Under this grant, should any additional DHHS-PHS regulations be promulgated, the Consultant and HRI will review and agree, if feasible, to include them as part of this Agreement.
Appendix B – Additions to Consultant Agreement

1. System for Award Management (SAM) – for all agreements

Consultant is required to register with SAM.gov and maintain active status as stated in 2 CFR Subtitle A, Chapter 1, and Part 25 of Code of Federal Regulations. Consultant must maintain the accuracy/currency of the information in SAM at all times during which your entity has an active agreement with HRI. Additionally, your entity is required to review and update the information at least annually after the initial registration, and more frequently if required by changes in your information.

2. Equal Employment Opportunity – for all agreements

This contractor and subcontractor shall abide by the requirements of 41 CFR 60-741.5(a). This regulation prohibits discrimination against qualified individuals on the basis of disability, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified individuals with disabilities.

This contractor and subcontractor shall abide by the requirements of 41 CFR 60-300.5(a). This regulation prohibits discrimination against qualified protected veterans, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified protected veterans.

3. Whistleblower Policy – for all federally funded agreements

Congress has enacted whistleblower protection statute 41 U.S.C. 4712, which applies to all employees working for contractors, grantees, subcontractors, and subgrantees on federal grants and contracts. This program requires all grantees, subgrantees and subcontractors to: inform their employees working on any federally funded award they are subject to the whistleblower rights and remedies of the program; inform their employee in writing of employee whistleblower protections under 41 U.S.C. 4712 in the predominant native language of the workforce; and Contractors and grantees will include such requirements in any agreement made with a subcontractor or subgrantee.

The statute (41 U.S.C. 4712) states that an “employee of a contractor, subcontractor, grantee [or subgrantee] may not be discharged, demoted, or otherwise discriminated against as a reprisal for “whistleblowing”. In addition, whistleblower protections cannot be waived by any agreement, policy, form, or condition of employment.

Whistleblowing is defined as making a disclosure “that the employee reasonably believes is evidence of any of the following: gross mismanagement of a federal contract or grant; a gross waste of federal funds; an abuse of authority relating to a federal contract or grant; a substantial and specific danger to public health or safety; or a violation of law, rule, or regulation related to a federal contract or grant (including the competition for, or negotiation of, a contract or grant). To qualify under the statute, the employee’s disclosure must be made to: a Member of Congress or a representative of a Congressional committee; or an Inspector General; or the Government Accountability Office; or a Federal employee responsible for contract or grant oversight or management at the relevant agency; or an authorized official of the Department of Justice or other law enforcement agency; or a court or grand jury; a management official or other employee of the contractor, subcontractor, grantee or subgrantee who has the responsibility to investigate, discover or address misconduct.
VI. Completing the Proposal

A. Proposal Content

1. Program Summary (two pages)

The work to be completed will meet the stated requirements as outlined in Section III.

- Applicants should describe in their program summary its approach to meeting the requirements outlined above including anticipated time frames and resources required;
- Applicants should assume a 36-month project period, beginning on February 1, 2015 with yearly contracts issued

2. Applicant Experience (four pages)

Applicants must provide specific information that demonstrates experience with each of the minimum qualifications as listed in Section III (also included below):

At least five years of progressively responsible experience including the following:

- Experience managing, organizing and facilitating workgroup meetings with broad stakeholder perspectives;
- Experience successfully working with public and private payers to support payment reform initiative(s);
- Experience with the design and implementation of primary care models, including familiarity with NCQA standards and other models in the state (i.e. CPCi, MAP-CP, and other demonstrations described in the SHIP);
- Change leadership and management expertise; and
- Experience aligning multiple entities including state agencies, public-private partnerships and projects, and both public (state and federal) and private sector led health care innovations.

The successful applicant will document skills and experience with health care policy, health economics; management and finance; operations; technology development; statistics; and evaluation. Applicants will be expected to document experience (in New York or other states) with the following:

- Design and implementation of novel payment and service delivery strategies that are state-wide and multi-payer (private and public) to achieve the Triple Aim;
- Work with payers (public and private), providers and consumers including work with commercial and public payers on payment innovation across urban and rural markets;
- Development and implementation of innovative health delivery models inclusive of primary, specialty, acute and long-term care; behavioral and population health;
- Evolving health information technologies;
- Health workforce development;
- Working with public employee health plans on benefit and payment strategies;
- Demonstrated history of successfully supporting state(s) that have received CMMI awards; and
- Development and implementation of statewide multi-payer payment reform model(s).

Applicants should also provide the following:

- Indicate the number of years that the Applicant has been in business and the number of years that the services specified by this RFP have been performed;
- Include a list of key personnel and associated resumes (limit 2 pages per person) for those who will be dedicated to this project. In particular, please demonstrate and document how the team
and staff proposed have designed evidence-based tools for programs similar to those in the scope of work requirements;

- Applicants must clearly indicate the names of personnel that will be the primary team working with the Innovation Center (includes primary contact, project manager, and other team members who will be onsite more than 50%);
- Include a list of at least three (3) references that may be contacted to inquire about the Applicant’s past and current job performance. The Applicant should provide names, titles, organizations, telephone numbers, email, and addresses; and,
- Provide a summary listing of judgments or pending lawsuits or actions against; adverse contract actions, including termination(s), suspension, imposition of penalties, or other actions relating to failure to perform or deficiencies in fulfilling contractual obligations against your firm. If none, so state.

3. Scope of Work/Project Narrative (ten pages)

- The detailed scope of work to be addressed is outlined in Sections I and III of this RFP. Content of the applicant’s response should account for these requirements in this section of the applicant’s response.
- Include a project plan to demonstrate how deliverables will be achieved, with milestones, responsible parties and required resources. The deliverables from the project plan will connect to the Budget Template and must be clearly identified.
- Describe any risk mitigation strategies to avoid missing deadlines.
- Activities should be described in terms of meeting the requirements of Section III.
- Provide an estimated timeline for the completion of activities.

4. Budget and Justification (ten pages)

- Follow the budget directions in Attachment 2. Applicants should submit a 36-month budget broken down into three 12-month periods, assuming a February 1, 2015, start date that aligns with the deliverables of the project plan to be submitted. All costs must be related to the provision of services as described in this RFP.
- Budgets should be fiscally and programmatically sound. Requests should be consistent with the proposed scope of services, reasonable and cost effective. Budgets must relate directly to activities described in the project narrative and work plan. Only administrative costs directly related to the project activities will be considered for funding. No direct health care services will be funded by this program.
- Expenditures will not be allowed for the purchase of major pieces of depreciable equipment or remodeling or modification of structure.
- Any ineligible budget items will be removed from the budget prior to contracting. The budget amount requested will be reduced to reflect the removal of the ineligible items.
- Justification for each deliverable should be submitted in narrative form. Explain how the cost was calculated and how each item is essential to the operation of the network. For all existing staff, the Budget Justification must delineate how the percentage of time devoted to this initiative has been determined. Items that cannot be justified as integral to the operation of the network will not be allowed.
B. Proposal Format

All proposals must conform to the format prescribed below. Points will be deducted from proposals that deviate from the prescribed format. See attachments 1-3 for instructions and templates that must be used in the Applicant response.

Proposals MUST NOT exceed 26 single-spaced typed pages (not including the cover page and appendix/attachments), using an 11 point font. The value assigned to each section is an indication of the relative weight that will be given when scoring your proposal.

1. Summary (2 pages) (Maximum Score: 10 points)
2. Applicant Experience (4 pages) (Maximum Score: 30 points)
3. Scope of Work/Project Narrative (10 pages) (Maximum Score: 40 points)
4. Budget (incl. justification) (10 pages) (Maximum Score: 20 points)
5. Appendix: The appendix may include the following documents with corresponding page limits:
   a. Primary Project Team List: List of personnel on the primary team working most closely with the Innovation Center – include primary contact, project manager, and other team members who will be onsite more than 50% time, and include a brief summary of each person’s anticipated role (limit 2 pages)
   b. Resumes for key personnel, including primary team (limit 2 pages per person)
   c. References to validate applicant experience (limit 2 pages)

C. Review Process

Proposals meeting the guidelines set forth above will be reviewed and evaluated competitively by HRI/the NYSDOH Office Quality and Patient Safety.

In the event of a tie score, the highest scoring Applicants will be invited to an interview to last for no longer than one hour in Albany, New York. Any cost related to this meeting or in response to this RFP is the obligation of the Applicant and not the responsibility of the Department of Health or HRI. Proposals failing to provide all response requirements or failing to follow the prescribed format may be removed from consideration or points may be deducted.

It is anticipated that there will be one award. The proposal receiving the highest score will receive the award. Proposals will be reviewed using the criteria that are listed under Proposal Content.

VII. Attachments

Attachment 1: Proposal Cover Sheet
Attachment 2: Budget Instructions
Attachment 3: Budget Templates
Proposal Cover Sheet

Management Consultant RFP Response
RFP #XXXXX

Applicant: ________________________________________________________________

Contact Person
________________________________________________

Name
________________________________________________

Title
________________________________________________

Address
________________________________________________

________________________________________________

(    )

Phone
________________________________________________

Email
________________________________________________

Total Proposal Budget Total: ____________________________

I, ________________________________________________, for and on behalf of the applicant organization(s), signify that the following information is true and accurate to the best of my knowledge and that the above named network/organization agrees to abide by the terms of this application and is fully able and willing to carry out the terms of the project.

__________________________________________________________

Signature

__________________________________________________________

Title

__________________________________________________________

Date
Budget Instructions

Applicants should develop budgets that include detailed information as described below. The budgets submitted should include expenses by deliverable, justification of costs for each deliverable, and a total cost summary. Budget requests should be for a 36-month period only broken down into 12 month increments and should relate directly to activities described in the project narrative. Only administrative costs directly related to the project activities will be considered for funding. No direct health care services will be funded by this program.

Follow these directions for developing and completing the budget forms:

Budget and Justification – Costs by Deliverable using “Deliverable Budget Template”:
- Identify the amount of total funds for the 36-month period and specify, by using a project plan format with deliverables, how the funds will spent. Use the template provided for the cost associated with each deliverable.
- For each deliverable, complete all fields in the Deliverable Budget Template (See Attachment 3).
- The Deliverable Budget Template includes a columns to identify the staff person’s title, estimated hours to complete deliverable, hourly rate, and total cost. All columns should be completed.
- The budget template can also be used for other estimated costs associated with each deliverable (described in the template as “units”). Applicants shall use the format as applicable.
- Under each chart in the Deliverable Budget Template, applicants must include a budget justification for the deliverable (in narrative form).

Budget Summary – Total Proposed Costs using “Total Cost Proposal Template”:
- Total the costs per deliverable by completing the Proposal Budget Summary Template in Attachment 3. Each deliverable should be included with its total expense. Additional narrative can be provided as needed below the Proposal Budget Summary.
Budget Template

Instructions:
• For each deliverable in the Applicant project plan, populate the Deliverable Budget Template in section A below. Deliverable numbers should match the project plan and all deliverables in the project plan should be included.
• For the total cost of the proposal, complete the template in section B below.
• Follow instructions in Attachment 2.

A. Deliverable Budget Template (complete this section for each deliverable):

Deliverable [#]: [Deliverable name; to be completed by Applicant, should match with Project Plan deliverable]
Description: [Brief description of deliverable to be completed by Applicant]

<table>
<thead>
<tr>
<th>Staff person title / Unit</th>
<th># hours / # of units</th>
<th>Hourly Rate / Unit cost</th>
<th>Total cost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>$</td>
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<td></td>
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<td></td>
<td>$</td>
</tr>
</tbody>
</table>

Total cost for Deliverable [#]: $

Deliverable [#] Budget Justification: [Narrative to be completed by Applicant]

B. Total Cost Proposal Template (complete once; use as many lines as needed for all deliverables):

Total Cost Proposal

<table>
<thead>
<tr>
<th>Deliverable</th>
<th>Total Cost of Deliverable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deliverable [#]: [deliverable name]</td>
<td>$[total cost for deliverable]</td>
</tr>
<tr>
<td>Deliverable [#]: [deliverable name]</td>
<td>$[total cost for deliverable]</td>
</tr>
<tr>
<td>Deliverable [#]: [deliverable name]</td>
<td>$[total cost for deliverable]</td>
</tr>
<tr>
<td>Deliverable [#]: [deliverable name]</td>
<td>$[total cost for deliverable]</td>
</tr>
<tr>
<td>Deliverable [#]: [deliverable name]</td>
<td>$[total cost for deliverable]</td>
</tr>
</tbody>
</table>

Total Cost: $[total cost of proposal]