To Whom it May Concern:

Health Research, Inc. (HRI) and the New York State Department of Health (NYSDOH), with funding from the Centers for Disease Control and Prevention (CDC), on behalf of the Bureau of Cancer Prevention and Control (BCPC) are seeking bids from New York State (NYS) Federally Qualified Health Centers (FQHC) to participate in a project to increase colorectal cancer (CRC) screening rates in FQHC primary care practice sites. While contracts will be awarded to the FQHC, bids must be submitted for each clinic at which activities will be implemented.

Successful bidders will be awarded an initial contract for a nine-month period, from October 1, 2021 to June 29, 2022 to support project start-up and implementation, a second, twelve-month contract period from June 30, 2022 to June 29, 2023 to support continued implementation and evaluation, and two additional, partial-year contracts over the next two years anticipated to be from June 30, 2023 to December 31, 2023 and June 30, 2024 to December 31, 2024, respectively to support continued evaluation and monitoring of project impact on clinic CRC screening rates. Up to six (6) clinics will be selected for funding. Each FQHC may submit bids for up to two clinics.

Pending availability of funding, awarded FQHCs may be eligible for additional funding opportunities to expand and sustain project work in additional clinics in future years.

The project intent is to develop and implement a quality improvement (QI) plan that includes at least two of the four priority evidence-based interventions (EBIs) as identified by [The Community Guide](https://www.thecommunityguide.org/content/task-force-findings-cancer-prevention-and-control) ([client reminders](https://www.thecommunityguide.org/findings/cancer-screening-client-reminders-colorectal-cancer), [provider reminders](https://www.thecommunityguide.org/findings/cancer-screening-provider-reminder-and-recall-systems-colorectal-cancer), [provider assessment and feedback](https://www.thecommunityguide.org/findings/cancer-screening-provider-assessment-and-feedback-colorectal-cancer), and [reducing structural barriers](https://www.thecommunityguide.org/findings/cancer-screening-reducing-structural-barriers-clients-colorectal-cancer)) and other systems changes in each clinic site to make sustainable, lasting improvements in primary care clinic CRC screening rates. The NYSDOH will provide technical assistance on development and implementation of an approved QI plan and will support a learning collaborative across all participating clinics.

Successful bidders will:

* participate in an assessment of their current clinic practices related to CRC screening,
* receive post-assessment feedback, recommendations, and support for QI plan development,
* develop a QI plan which describes the EBIs and other systems changes to be implemented to increase clinic CRC screening,
* implement the approved QI plan,
* participate in a learning collaborative with other awarded FQHC clinics, and
* participate in evaluation activities to assess individual clinic and all-participating clinic (all project) progress, including provision of annual follow-up data to the BCPC in project years 3 and 4 and potentially beyond to demonstrate project impact over the long term.

The successful bidder will submit a bid by August 11, 2021 that demonstrates clinic eligibility and capacity to allocate staff time and effort to participate in all project activities. A deliverable-based contract with Health Research, Inc. will be awarded to the successful FQHCs, as described below.

**Minimum Eligibility** – In order to submit bids, FQHCs must identify a clinic site in which to implement the project that meets all seven (7) of the below criteria. A single FQHC may identify up to two clinic sites in which to implement the project but must submit separate bids for each clinic site. Bidders that do not identify a clinic or clinics that meet these criteria will not be considered for funding.

**Required Clinic Criteria**:

1. A clinic site of a current NYS FQHC that provides primary care.
2. A clinic colorectal cancer (CRC) screening rate of less than 60% using the Uniform Data System 2021 Health Center Data Reporting Requirements (please see page 100 [2021 UDS Data Reporting Requirements Manual](https://bphc.hrsa.gov/sites/default/files/bphc/datareporting/pdf/2021-uds-manual.pdf)) for the June 2021 trailing year, demonstrated by response to Section 2 of the bid survey.
3. A CRC screening-eligible population, based on criteria for UDS measure denominator, that is at least 20% of the total clinic population **or** comprises at least 1,000 patients, demonstrated by response to Section 3 of the bid survey.
4. The capacity to ensure that all patients, regardless of insurance status or ability to pay, can access needed CRC screening, diagnostic and treatment services, as demonstrated by clinic participation in the [NYSDOH Cancer Services](https://www.health.ny.gov/diseases/cancer/services/) Program **or** other responses to questions in Section 4 of the bid survey.
5. Staff capacity to support and participate in all project activities, as demonstrated by completion of the staffing plan in Section 5 of the bid survey, which requires, at a minimum, identification of individual staff to fulfill each of the following four (4) clinic team member roles; 1) a Clinic Team Lead, 2) a Provider Champion, 3) a QI Lead, and 4) a Health Information Technology (HIT) Lead. Each identified clinic team member will be responsible for fulfilling specific project deliverables. Should designated staff become unavailable, awardees must ensure roles are covered so there are no gaps in project implementation. Other clinic staff responsible for implementing project work should be identified in the staffing plan submitted in response to the survey to ensure all activities described in Table 1 are supported.
6. Capacity to provide all required project data as demonstrated by completion of the baseline data questions in Section 6 of the bid survey.
7. Submission of Contract Year 1 budget using the Excel file attached to the bid solicitation email, as listed in Section 7 of the bid survey.

Clinic sites currently participating in the HRI-funded contract/NYSDOH project *Increasing Cancer Screening through Patient Navigation in Targeted NYS Federally Qualified Health Centers* are not eligible for this award.

The successful bidders will be awarded deliverable-based contracts with Health Research, Inc. The first contract period is anticipated to begin October 1, 2021 and end June 29, 2022, the second June 30, 2022 to June 29, 2023, the third on or around June 30, 2023 to December 31, 2023 and the fourth on or around June 30, 2024 to December 31, 2024 and will include the deliverables and timeframes resulting in the payments noted in the chart below. Activities and payments as described are per clinic site:

Total project costs not to exceed $19,000 for project implementation in one clinic or $38,000 for project implementation in two clinics, inclusive of the following contract periods and activities:

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| **TABLE 1** |
|  | **Contract Period 1 (10/1/21 - 6/29/22)** | **Contract Period 2 (6/30/22- 6/29/23)** | **Contract Period 3****(6/30/23 – 12/31/23)** | **Contract Period 4 (6/30/24 – 12/31/24)** |  |
| **Implementation** | **Evaluation** |  |
| **Key Deliverable** | **Description** | **Due Date/ Timeframe** | **Funding** | **Due Date/ Timeframe** | **Funding** | **Due Date/ Timeframe** | **Funding** | **Due Date/ Timeframe** | **Funding** | **Subtotal** |
| **Kickoff Meetings** | Clinic teams participate in project kickoff meetings. Frequency: One kickoff meeting with NYSDOH and all funded clinics, one kickoff meeting with NYSDOH and the individual clinic | 10/1 – 10/15/21 | $500 |   |   |   |   |  |  | **$500**  |
| **Clinic Assessment** | Clinic team completes a clinic assessment to identify existing interventions and opportunities to improve the clinic’s CRC screening process. This deliverable includes completion of an assessment form and clinic team participation in at least one meeting with NYSDOH to develop a process map/workflow of clinic CRC screening activities and clarify elements of the assessment. Meeting/s may require participation of other clinic and/or FQHC staff beyond the clinic team (such as medical assistants, patient advocates or navigators) to provide information or clarification on specific activities. | 10/1 – 10/30/21 | $1,750 |   |   |   |   |  |  | **$1,750** |
| **Feedback Review** | The clinic team and other staff review NYSDOH feedback and recommendations for QI plan activities (based on assessment) and provide comments. The clinic meets with NYSDOH to discuss recommendations and receive guidance on completing their QI plan. Frequency: At least one meeting to review feedback and QI plan development process. | 11/1 – 11/15/21 | $500  |   |   |   |   |  |  | **$500**  |
| **QI Plan Development & Approval** | Complete a QI plan to improve clinic CRC screening rates. QI plan must include at least two EBIs for implementation. Frequency: May require more than one technical assistance (TA) meeting/call to review draft plans. | 11/15 - 12/31/21  | $2,000  |   |   |   |   |  |  | **$2,000** |
| **QI Plan Implementation Reporting** | Upon QI plan approval, the clinic submits monthly progress reports to document QI plan implementation and changes to CRC screening rate and process measures. Frequency: Monthly during QI plan implementation | 1/1/22 – 6/29/22 | $1,500  | 6/30/22 - 3/31/23  | $2,500  |   |   |  |  | **$4,000**  |
| **QI Plan Implementation Meetings** | Upon QI plan approval, clinic team attends regular meetings with NYSDOH to discuss progress reports, identify barriers and successes, and receive guidance, resources and TA. Frequency: at least every other month during QI plan implementation | 1/1/22 - 6/29/22 | $1,000  | 6/30/22 - 6/29/23 | $1,500  |   |   |  |  | **$2,500**  |
| **Learning Collaborative** | Clinic team and other clinic staff participate in all learning collaborative sessions with all funded clinics. Frequency: live, 90-minute virtual session every other month and follow-up activities assigned via online learning platform | 3/1/22 – 6/29/22 | $1,500  | 6/30/22 - 1/30/23 | $1,500  |   |   |  |  | **$3,000**  |
| **Data Validation** | Complete data validation of CRC screening measure. Frequency: Once per project implementation period, anticipated within contract period 1  | 1/1/22 – 3/31/22 | $1,250 |  |   |   |   |  |  | **$1,250**  |
| **Evaluation** | Complete project evaluation activities including: monthly reporting on QI plan implementation (inclusive of narrative update, selected process measures, and screening rates), interim surveys to assess overall project implementation, and post-implementation project evaluation including at least annual survey/data reporting and submission of at least one outcome report/success story. Frequency: Monthly submission of project reporting tool. Contract year 2 includes submission of annual survey and at least one outcome report/success story. Contract years 3 and 4 include submission of annual survey. | 2/1/22 – 6/29/22 | Embedded in reporting & meeting payments | 6/30/22 - 6/29/23 | $1,500  | 8/1/23 – 11/30/23 | $1000  | 8/1/24 – 11/30/24 | $1,000 | **$3,500**  |
| **TOTAL** |  |  | **$10,000**  |  | **$7,000**  |  | **$1,000**  |  | **$1,000** | **$19,000**  |

NYSDOH (and NYSDOH-identified collaborative partners, where applicable) will:

1. Support assessment efforts, including data validation, and provide assessment tools and guidance to complete assessment of clinic activities
2. Review assessment results with and provide feedback to clinic teams and other key staff
3. Provide QI plan template and recommendations for activities to include in QI plan. Provide technical assistance and support to clinic teams to complete QI plan including development of SMART goals and process measures to monitor implementation
4. Identify additional resources to support clinic QI plan implementation
5. Facilitate learning collaborative across all participating clinics to share best practices, challenges and solutions
6. Provide ongoing technical assistance on QI plan implementation and support clinics in identifying successes and addressing barriers and challenges
7. Evaluate project implementation and outcomes to support overall project success
8. Communicate progress to the funding sponsor – the CDC
9. Identify opportunities to share and promote clinic work
10. Oversee contract execution, vouchering and payment

Project success will be measured based on full participation in and completion of all project activities and deliverables within stated timeframes. Completing these activities with fidelity to project guidance while regularly monitoring progress to address barriers and challenges and to expand activities that demonstrate improvement is expected to contribute to increased CRC clinic screening rates.

The successful bidders will be required to enter into deliverable-based contracts with HRI for the full cost of the project.

Bid Surveys and Deliverables and Deadline:

Bid surveys must be submitted to HRI/the NYSDOH via the survey link provided here no later than August 11, 2021 and include completion of all information in the survey. Bidders should submit a separate bid (complete a separate survey) for each of the clinics they are proposing and may apply on behalf of either one or two clinics. Pending availability of funding, awarded FQHCs may be eligible for additional funding opportunities to expand and sustain project work in additional clinics in future years.

Bidders may submit questions to Canserv@health.ny.gov no later than July 23, 2021, with an email subject line that reads, “Increasing CRC Screening in FQHCs”. All vendors receiving the bid request will also receive the questions and answers.

All bids will be reviewed and evaluated by Bureau of Cancer Prevention and Control staff based on the criteria set forth below.Bids submitted by the due date listed above that meet all required criteria, as demonstrated by complete responses to survey questions 1, 2, 3, 4, 5, and 6a-6k, will be moved on to additional review for preferred qualifications. **Response to question number 7 is requested but is not scored.**

Bids will be assigned preference points as follows:

1. As of the date of application, participates in the State’s Cancer Services Program (response to question 4a is “yes” and is verified by NYSDOH as an existing credentialed Cancer Services Program provider) = 3 points

2. Do not currently participate in the State’s Cancer Services Program (response to question 4a is “no”), but, respond that they are willing to work with the NYSDOH CSP = 2 point

3. Will not participate in the State’s Cancer Services Program (response to question 4a is “no”), but, respond that their clinic has resources to support uninsured patients with financial barriers to complete CRC screening and diagnostic evaluation services = 1 point

4. Able to provide the data in response to question 6Ia; will be awarded 1 point per each item able to provide data; total possible points = 8

Contracts will be awarded to the top six bids with the highest score, out of a total possible score of 11. **If there are tie scores, bidders reporting the largest number of clients unscreened for CRC (response to survey question 2b minus response to survey question 2a), will be awarded to ensure that awards do not support project implementation in any more than six (6) clinics.**

**Funding Agreement:** Funding for these awards is supported through a grant from the Centers for Disease Control and Prevention (CDC). Successful applicants will enter into a deliverable-based contract with Health Research, Inc. the bona fide agent of the New York State Department of Health.  Awardees will be required to submit a voucher for the awarded amount in addition to other required deliverables and will receive a check issued by Health Research, Inc. upon verification of the voucher and other required deliverables.  Applicant organizations will need to have a current FEIN or Tax ID number, a Dunn & Bradstreet (DUNS) number and must maintain an active registration in Sam.Gov.