



Request for Proposal

<http://grc.osu.edu/funding/current>

The Government Resource Center (GRC) is requesting a proposal to serve as survey vendor for the **Managed Care: Monitoring and Evaluation (MCME) Surveys.**

RELEASED BY: The Ohio Colleges of Medicine Government Resource Center

RFP ISSUED: January 12, 2022

INQUIRY PERIOD BEGINS: January 12, 2022

INQUIRY PERIOD ENDS: January 28, 2022

PROPOSAL DUE DATE/BID CLOSING DATE: February 7, 2022, by 1:00 p.m., ET

CONTRACT START: February 21, 2022

**PROPOSALS RECEIVED AFTER THE DUE DATE AND TIME AND/OR WITHOUT COMPLETE APPLICATION,
WILL NOT BE EVALUATED.**

OPENING LOCATION: The Ohio Colleges of Medicine Government Resource Center
ATTN: Kelly Markowski, Ph.D.
Pressey Hall
1070 Carmack Road, Suite 150
Columbus, Ohio 43210

RFP Web Location: <http://grc.osu.edu/funding/current>

Offerors must note that all proposals and other material submitted will become the property of the Ohio State University and its GRC and may be returned only at GRC's option. Proprietary information should not be included in a proposal or supporting materials because GRC will have the right to use any materials or ideas submitted.

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1: Introduction

The Government Resource Center (GRC) is soliciting competitive proposals (Proposals) for activities relating to the Managed Care: Monitoring and Evaluation (MCME) Surveys (the Work). If a suitable offer is made in response to this RFP, OSU may enter into a contract (the Contract) to have the selected Bidder (the Contractor) perform the Work. This RFP provides details on what is required to submit a Proposal for the Work, how OSU will evaluate the Proposals, and what will be required of the Contractor in performing the Work.

This RFP also gives the estimated dates for the various events in the submission process, selection process, and performance of the Work. While these dates are subject to change, prospective Bidders must be prepared to meet them as they currently stand.

The 2022 MCME Surveys will be administered on behalf of the Ohio Department of Medicaid (ODM) by the Ohio Colleges of Medicine Government Resource Center (GRC) for the purposes of evaluating Medicaid contracted managed care organizations (MCOs) in the areas of: (1) Efficient health services, health outcomes, preventive and effective care for Medicaid enrollees; (2) improved provider and member satisfaction; (3) improved preventive care; (4) activities addressing determinants of health; and (5) meaningful achievements in health disparities for differing race/ethnic populations and geographical areas of Ohio.

As a potential survey vendor, each Bidder will need to demonstrate an understanding of the nuances for reaching the study populations and detail previous experiences fielding studies of each population.

Bidders must have extensive expertise in survey-related statistical methods including study design, data cleaning and imputation of missing data, survey weight construction for cross-sectional samples, and small area estimation.

Serving as the MCME Surveys research vendor involves close communication with the Ohio Department of Medicaid, the Ohio Colleges of Medicine Government Resource Center, and other partners of interest (e.g., academic institutions). As such, the Bidder should demonstrate successful experiences working with staff of government agencies and universities.

Please see the [Proposal Requirements](#) section for detailed instructions as well as a checklist of required proposal components.

Inquiries concerning the proposal content and intent and general questions should be sent [via](#) the Ariba Discovery Q&A portal. Answers to inquiries will be posted in the Ariba Discovery Portal and at <http://grc.osu.edu/funding/QA>. The Inquiry Period for this proposal ends January 28, 2022.

If additional information about the MCME Surveys comes available, it will be posted in the Ariba Discovery bid posting page and to the GRC's website's RFP section at <http://grc.osu.edu/funding/current>.

Any failure to meet a deadline in the submission or any objection to the dates for performance in the Work phase may result in OSU's refusal to consider the Proposal of the Bidder.

All bid responses must be submitted through Ariba Discovery.

OSU will not be liable for any costs incurred by any Bidder in response to this RFP, even if OSU does not award a Contract through this process. OSU may decide not to award a Contract for any or all of the Work defined by this RFP or subsequent OSU amendments. It may also cancel this RFP and contract for the Work through some other process or by issuing another RFP. An award is contingent upon sponsor funding for the MCME.

2: Proposal Requirements

Formatting Requirements

Responses must address all aspects of this Request for Proposal and should follow the chronology of the Managed Care: Monitoring and Evaluation (MCME) Surveys RFP. Proposals must be single spaced, 11-pt Calibri font with 1-inch margins. The response, including appendices, shall be submitted as a single searchable PDF file. Applications submitted that include multiple attachments will be disqualified.

Failure to conform to any of the requirements listed in this RFP may result in disqualification of the submitted response.

RFP Response Requirement Checklist

The following conditions must be met in order for the RFP response to be considered free from defect:

- Formatted in 11-pt Calibri font, single spaced, with 1-inch margins
- Formatted as a single, searchable PDF file (including all appendices)
- Includes all required materials in the following order:
 - Cover Letter
 - Project Proposal Narrative
 - Budgets and Budget Narratives
 - Staff Biosketches/Credentials of key personnel
- Submitted by Response Due Date/Time: January 31, by 1:00 p.m.

Further explanation related to the proposal sections is below.

A.Cover Letter

The cover letter must be in the form of a standard business letter and must be signed by an individual authorized to legally bind the Bidder. The cover letter will provide an executive summary of the Bidder's request for funds. The letter must also include:

1. A statement detailing the Bidder's company, organization, university/college, including Federal tax identification number and address;
2. A list of the people who prepared the application, including titles;
3. The name, phone number, and email address of a contact person who has authority to answer questions regarding the application;
4. The name, phone number, and email address of the Sponsored Programs Officer or other Bidding Firm officer responsible for the application;

5. The name, phone number, and email address of the Principal Investigator(s) for this project;
6. A list of all co-Bidders, if any, that the Bidder will use on the work if selected—no co-submitting Bidder may be included after proposal submission.
7. Note that the Bidder(s) may not subcontract activities detailed in their submission without written permission from the OSU Principal Investigator(s).

B. Project Proposal Narrative

Content and format requirements:

Section	Page Limit
<p>A. Detailed quantitative fielding plan</p> <p><i>Please address all items included in the MCME Surveys Summary Section.</i></p>	30
<p>B. Survey fielding expertise and experience</p> <p><i>Applicant’s expertise and experience fielding similar surveys. In particular, applicants should describe experience with: Multi-mode surveys; surveys of difficult-to-reach and vulnerable populations (particularly Medicaid enrollees and health care providers); and complex sample designs (e.g., cell phone sampling factoring for pay-as-you-go cell phones and contract cell phones).</i></p>	5
<p>C. Statistical methods expertise and experience</p> <p><i>Applicant’s demonstrated expertise and experience with survey-related statistical methods, including study design, data cleaning and imputation of missing data, survey weights construction for both cross-sectional and longitudinal samples, and analysis of survey data including statistical modeling.</i></p>	5

Section	Page Limit
<p>D. Organizational capacity:</p> <p><i>Applicant’s demonstrated organizational capacity (e.g., staffing, technology, etc.) to undertake the work, referencing specific projects in the past.</i></p> <p><u><i>Bidder Profile:</i></u> <i>Each proposal must include a profile of the Bidder’s experience working on similar projects. The profile must also include the Bidder’s address, telephone number, and any other background information that will help the evaluation committee gauge the ability of the Bidder to fulfill the obligations of the contract.</i></p> <p><u><i>Equipment and Software Requirements:</i></u> <i>The Bidder must provide an assurance that they have the hardware, software, and technology staff support capacity capable of performing the tasks proposed in the application -- this description should detail the Bidder’s call center capacity.</i></p>	2
<p>E. Partnership experience</p> <p><i>Evidence of Applicant’s experience working with academic medical centers, academic institutions, and government/state agencies.</i></p>	1
<p>F. Key personnel</p> <p><i>Brief description of key personnel that will participate in the project.</i></p> <p><u><i>Please note that a change of key staffing must be requested at least 2 weeks prior to the planned staffing changes and must be approved by GRC prior to implementation.</i></u></p> <p><i>Please include an NIH Biosketch for the: Principal Investigator, senior statistical methodologist, senior instrumentation methodologist, call center lead, senior CATI/CAWI/PAPI coder, data manager, and project manager in the Staff Biosketches/Credentials section. For any additional key personnel listed in section I, please include staff credentials.</i></p>	2

C. Budgets and Budget Narratives

Please complete a separate budget form and budget narrative segmenting by the state fiscal year (SFY), as detailed in the checklist below. The SFY for Ohio starts on July 1st and ends on June 30th of the following calendar year.

Budgets and Budget Narratives Section Checklist:

- Budget Forms for SFY 2022: February 21, 2022 - June 30, 2022
 - SFY 2022 MCME Surveys Budget Form
 - SFY 2022 MCME Surveys Budget Narrative
- Budget Forms for SFY 2023: July 1, 2022 - June 30, 2023
 - SFY 2023 MCME Surveys Budget Form
 - SFY 2023 MCME Surveys Budget Narrative

Project Funding Periods:

- MCME Surveys: February 21, 2022 - June 30, 2023

Instructions: In this section, the Bidder must provide a detailed budget breakdown per state fiscal year (SFY). The Bidder must provide an accompanying budget narrative, detailing specific direct and indirect costs associated with the application. The study budgets must cover the duration of each subproject independently.

Proposals submitted totaling over \$1,184,760 in Year 1 and \$1,376,080 in Year 2 may not be considered.

NOTE: There is NO ability to carryover unspent funds beyond the project designated state fiscal year(s) or beyond project close dates, so selected Bidders must be able to spend the allotted dollars during the allotted timeframe.

Award funding may be used for direct costs, including but not limited to personnel expenses, software, and travel. Unallowable expenses include but are not limited to food, computer hardware, and equipment.

Funding requests should include:

- A. Direct costs related to:
 - i. Survey development;
 - ii. Survey instrument cognitive testing;
 - iii. Pilot testing;
 - iv. Data collection (including participant incentives);
 - v. Data collection monitoring (GRC Research Team live monitoring);
 - vi. Data cleaning and editing;
 - vii. Reports and deliverables including analysis of survey data;
 - viii. Technical assistance (e.g., research requests from OSU); and
 - ix. Staff training.

Funding Restrictions: Funds may **NOT** be used for certain project expenses. These include:

- A. Capital expenses;
- B. Establishing loan repayment programs;
- C. Billing for Medicaid reimbursable services; and
- D. Payment for continuing medical education units.

D. Staff Biosketches/Credentials

[NIH Biosketch](#) for:

- Principal investigator,
- Senior statistical methodologist,
- Senior instrumentation methodologist,
- Call center lead,
- Senior CATI/CAWI/PAPI coder,
- Data manager, and
- Project manager.

For any additional key personnel listed in Section I of the Project Proposal Narrative, please list staff credentials and years of relevant experience.

3: Managed Care: Monitoring and Evaluation (MCME)

Surveys Overview & Requirements

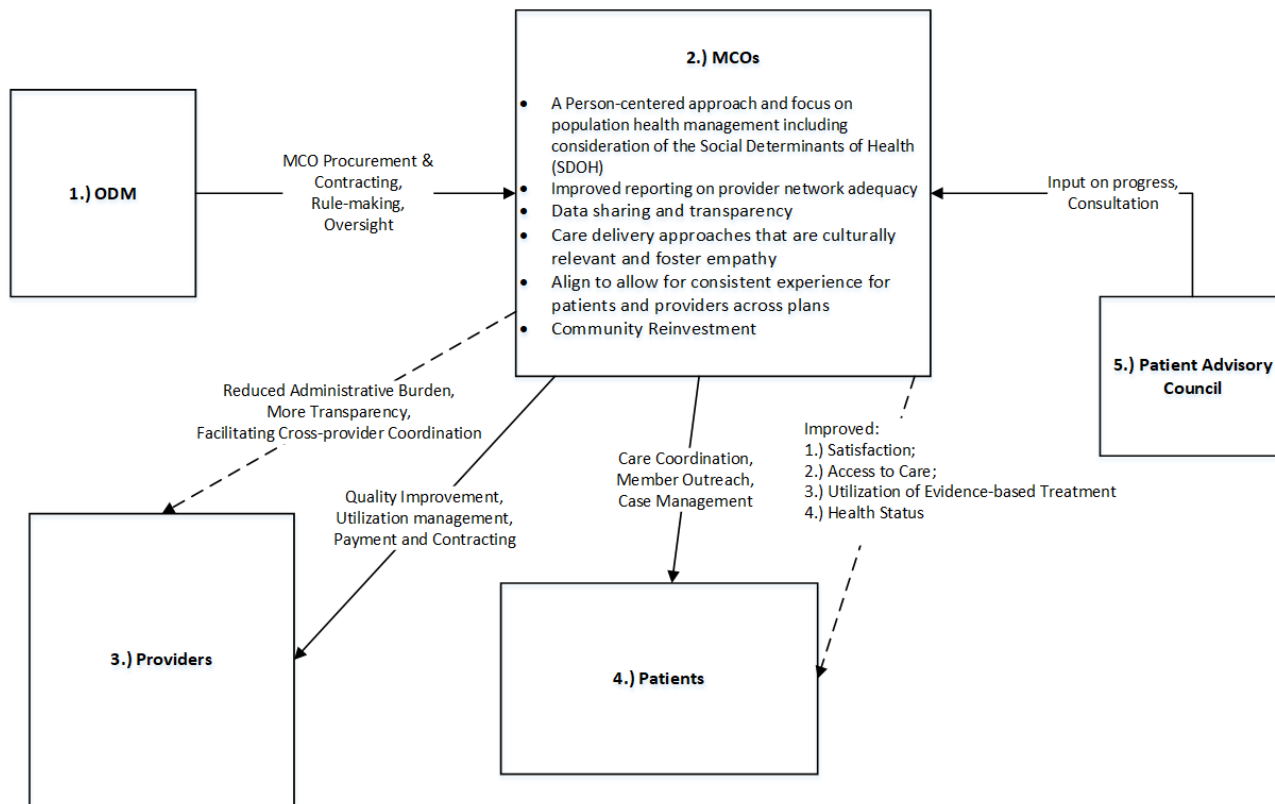
MCME Background and Overview

In early 2019, Ohio Governor Mike DeWine called on the Ohio Department of Medicaid (ODM) to ensure that Ohioans were getting the best value in the provision of quality care. ODM's response to this request was to develop a new managed care organization (MCO) procurement and contracting process, premised upon a patient-centered approach complemented by population health management, greater data sharing and transparency, care delivery that is culturally relevant and empathetic, and an emphasis for more consistent provider and patient experience between managed care health plans. The desired goals are to improve provider experience by reducing administrative burden and facilitating cross-provider coordination, and to improve patient satisfaction, access to care, and health outcomes.

As an ongoing evaluative process, the Ohio Colleges of Medicine Government Resource Center's role for this initiative is to provide ODM with timely and actionable information regarding the rollout and implementation of new managed care contracts, including identifying successes as well as emergent issues. The evaluation and monitoring activities contained in the MCME will utilize Medicaid administrative data, provider surveys, and qualitative stakeholder interviews and the main deliverable will be periodic executive reports that distill key trends and themes. In addition to data and evaluation tasks, the GRC will also provide project management, administration, and fiscal support to this project.

The MCME Surveys will provide key data for evaluating whether MCOs, given the new services procurement process, are factoring for and operationalizing: (1) Better health outcomes, more efficient services, and more effective care for Medicaid enrollees; (2) improved provider and member satisfaction; (3) improved preventive care; (4) activities addressing determinants of health; and (5) meaningful achievements in health disparities for differing race/ethnic populations and geographical areas of Ohio. A process diagram depicting the new MCO framework is depicted in Figure 1.

Figure 1: Process Diagram of MCME



NOTE: solid lines represent key relationships in the model, while dashed lines represent anticipated outcomes.

MCME Project Scope of Work

The evaluation will incorporate Medicaid administrative data, a survey of MPRE enrollees, and qualitative one-on-one interviews. As part of the evaluation, the funded entity will:

- Attend regular meetings with GRC and ODM staff to discuss progress.
- Attend monthly MCME Executive Committee meetings.
- Assist with finalizing the survey instruments for the patient survey, comparison population survey, and Medicaid provider survey.
- Assist with finalizing the survey study design, including but not limited to the sampling plan (from a GRC generated lists), strategies of weight construction for multiple sampling components, and the mode(s) of data collection for the surveys.
- Collect survey data for three aspects of the MCME: (1) Medicaid Patient Survey; (2) Comparison Population Survey; and (3) Medicaid Provider Survey. The surveys will be a cross-sectional probability sample drawn from Medicaid enrolled patients using Medicaid administrative data, a comparison population to be drawn from the 2021 Ohio Medicaid Assessment Survey, and a list of Medicaid providers.
 - *Medicaid Patients Survey.* This survey will use a Consumer Assessment of Healthcare Providers Survey (CAHPS)-like framework edited to ODM needs with a focus on successes

- and challenges of ODM and MCOs and will include questions on social determinants of health, health care systems' determinants of health, quality of care issues, satisfaction with Medicaid, and relationship to the healthcare system. The survey will be primarily a Computer-Assisted Web Interview (CAWI) survey with a Computer-Assisted Telephone Interview (CATI) follow-up for CAWI nonresponse – Paper and Pencil Interviews (PAPI) can be considered. The target date for completion of fielding for this survey will be Spring 2022, with a second iteration to be completed by Spring 2023. **Please note that this indicates 2 Medicaid Patient Survey iterations.**
- The analytic goals of this survey will be overall estimates of the Medicaid population and estimates for representative samples for each MCO (5 MCOs in Spring 2022 and 6 MCOs thereafter). The target number of completes for each MCO group is 770 for a total of 3,850 in Spring 2022, and 4,620 in Spring 2023.
 - The expected median time per completed interview is expected at 20 minutes.
- *Comparison Population Survey.* There will be a comparison population of individuals with similar characteristics as Medicaid enrollees who will be asked basically the same questions as the Medicaid enrollee/patient survey in order to compare experiences with the health care system. The instrument for this survey and the Medicaid patient survey will be identical except for any Medicaid-specific items. The survey will consist of re-contacts from the 2021 Ohio Medicaid Assessment Survey (OMAS) respondents who: (1) Agreed to be re-contacted; (2) who reported in the 2021 OMAS having an annual family income of 206% or less of the Federal Poverty Level (\$45,238 or less annual income in 2021); (3) are ages 19-64; and (4) are not enrolled in Medicaid, via self-report.
 - There will also be additional inclusion criteria (e.g. having a doctor's visit in the last 6 months) where possible in order to ensure health system interaction for comparability purposes. The comparison group will consist of two subgroups: (1) Individuals with Employer-sponsored Insurance (ESI); and (2) individuals who are uninsured. The Comparison Population Survey will be primarily a Computer-Assisted Web Interview (CAWI) survey with a Computer-Assisted Telephone Interview (CATI) follow-up for CAWI nonresponse – Paper and Pencil Interviews (PAPI) can be considered. The target date for completion of fielding for this survey will be April 2022, with a second iteration to be completed in April 2023. **Please note that this indicates 2 Comparison Population Survey iterations.**
 - The primary analytic goal of this survey will be to produce overall population estimates for comparison with the Medicaid enrollee survey with secondary goals of analyses by insurance status, regions of the state, race, ethnicity, and gender. The target number of completes for the comparison population will be 3,600 in Spring 2022, and 3,600 in Spring 2023.
 - The expected median time per completed interview is expected at 20 minutes.
 - *Medicaid Providers Survey.* Medicaid Health Care Provider interviews will be collected to compare the responses of the Medicaid enrolled and the comparison population to data from representatives of the health care system. Development of this survey instrument will be informed by cursory results from MCO stakeholder interviews in order to align themes and experiences of MCO initiatives. The survey will use a CAHPS-like provider framework

that will be adjusted to ODM needs and will include items related to MCO satisfaction, social determinants of health, health care systems' determinants of health, quality of care issues, and other key areas determined by ODM. This survey will use a CAWI format with a possible PAPI option to be supported by the US Postal Service and Fax receipt. The target for completion of fielding for this survey will be Spring 2022 for the initial fielding, and Spring 2023 for the second fielding. **Please note that this indicates 2 Medicaid Provider Survey iterations.**

- The analytic goals of the survey will be to provide estimates for the provider population overall with secondary goals including analyses by firm size and provider type. The target number of completes for the provider survey will be 1,100 starting in Spring 2022 and 1,100 starting in Spring 2023.
 - The expected median time per completed interview is expected at 15 minutes.
-
- Field all surveys, including web, telephone, and potentially mail components.
 - Process, weight, and post-collection evaluate collected survey data, including but not limited to tasks such as cleaning data, imputation of missing data, coding of open-ended responses, and development of survey weights.
 - Given GRC's MCME Research Team's qualitative follow-up to survey data collection, collaborate with GRC on recruitment for qualitative interviews from the surveys' respondents.
 - Provide a detailed MCME Survey Methodology Report for each iteration of data collection that will detail sample design, details of fielding including but not limited to the length of interviews, breakdowns of response rates by geographic and demographic characteristics, cooperation rates, treatment of missing data, and construction of survey weights.
 - Provide analytic support, text editing, and narrative assistance with MCME Reporting including interim reports, a final comprehensive report, and the MCME Survey Methodology Report.
 - As an example of prior GRC survey methods reports, please see the 2021 Ohio Medicaid Released Enrollees Study Final Reports at <https://medicaid.ohio.gov/Portals/0/Resources/Research/OMRES-Final-Report.pdf>.

MCME Methods Considerations

The following methods considerations should be addressed and referenced in the application:

- Sampling
 - Using Medicaid administrative data to construct sample frames for the Medicaid Patient Surveys
 - Using the 2021 OMAS to construct sample frames for the Comparison Population Surveys
 - Using a list of Medicaid providers to construct sample frames for the Medicaid Providers Surveys
 - Complex sample designs
 - Defend proposed sample designs in detail, referencing possible alternatives

- Questionnaire
 - Describe proposed approach for collaboration of survey instrument development
 - Describe CATI/CAWI/PAPI programming, validation procedures, and testing
- Data collection
 - Call center practices, including staff training, respondent contact protocols, data collection software, and quality assurance, including strategies to improve response rates among a difficult-to-reach population (this may also include texting).
 - Web data collection practices
- Data processing
 - Describe data cleaning and imputation techniques and legitimate chosen imputation strategy compared to alternatives
 - Describe weighting techniques and defend chosen weighting strategy compared to alternatives
 - Describe estimation techniques, including multivariate regression
 - Describe protocols for producing public use and restricted use files
 - Describe protocol for coding of open-ended responses
- Data analysis and reporting
 - Describe approach to assist with the analysis and reporting of survey results, including overall, by MCO, and by subpopulation

MCME Project Deliverables

Project Deliverables for Period Signature of Contract or February 21, 2022 through June 30, 2023:

- Regular attendance in meetings with ODM and GRC staff and the MCME Executive Committee to discuss progress;
- Collaboration with ODM and GRC to finalize the surveys' instruments, sampling plans, and maximize response rates;
- Fielding the 2022 and 2023 MCME surveys (note: 12 surveys total);
- Interim databases with documentation at the completion of 25%, 50%, and 100% of interviews;
- Provide weekly fielding reports containing counts of completed interviews per landline, cell phone, and web, paper (if applicable) of respondents' race/ethnicity, respondents' gender, record attempts, average number of attempts, eligibles reached, refusals, cooperation rate (unweighted by lower and upper bounds), RR#3 total/landline/cell (unweighted), and RR#5 total/landline/cell (unweighted);
- Final processed surveys data, including coded open-ended responses, survey weights, imputed values for cases with missing data, and data labels;
- Codebooks describing for each final processed surveys dataset;
- 2022 and 2023 MCME Methodology Reports detailing the surveys' methodology, including but not limited to details about study design, fielding protocols, response patterns, the creation of survey weights, and imputation methods;
- Results from survey data analyses produced in collaboration with the GRC;

- A copyedited version of the 2022 and 2023 MCME Surveys Methodology Report, interim reports, and the MCME Surveys Final Report;
- Submit monthly invoices;
- Submit monthly staff time reports; and
- Submit quarterly and/or monthly MEDTAPP formatted progress reports and a final progress report.

4: Appendices

Appendix A: Legal Proposal and Contract Requirements

SECTION I: Definitions

The following definitions are relative to this Request for Proposal (hereinafter referred to as RFP), and any addenda incorporated hereafter:

Addendum(a): Written instruments, issued solely by, that detail amendments, changes or clarifications to the specifications and terms and conditions of this RFP. Such written instruments shall be the sole method employed by the University to amend, change or clarify this RFP and any claims (from whatever source) that verbal amendments, changes or clarifications have been made shall be summarily rejected by the University.

Agreement or Contract: Award resulting from the RFP.

ARO: After receipt of order.

Bid Closing Date: The date and time specified in this RFP by which the Proposal must be received by the University's Purchasing Department in accordance with Section II, Item 1 of this RFP. Proposals received after such date and time will not be considered.

Bidder: Respondent to the RFP.

ET: Eastern Standard Time

GRC: Ohio Colleges of Medicine Government Resource Center

May, Should: Indicates something that is requested but not mandatory. If the Bidder fails to provide requested information, the University may, at its sole option, either request that the Bidder provide the information or evaluate the proposal without the information.

OSU, University, Purchaser: The Ohio State University.

Proposal: Response provided by Supplier or Bidder.

RFP: Request for Proposal.

Shall, Must, Will: Indicates a mandatory requirement - failure to meet mandatory requirements will invalidate the bid response, or result in rejection of a proposal as non-responsive.

SECTION II: RFP Terms and Conditions

The Government Resource Center (GRC) reserves the right to:

- Reject any or all Proposals received in response to this RFP;
- Request clarification from any Bidder on any or all aspects of its proposal;
- Cancel and/or reissue this RFP at any time;
- Retain all Proposals submitted in response to this RFP; and,
- Invite some, all, or none of the Bidders for interviews and further discussion.

Provisions: If any provisions in a resultant agreement are held to be invalid, void, or unenforceable, the remaining provisions shall continue in full force and effect without being impaired or invalidated in any way.

Ethical Conduct: It is expected that once a purchase order or contract is issued, vendors not receiving an award will not undertake any actions that might interfere with, or be detrimental to, the contractual obligations of the University. The University reserves the right to take any and all actions deemed appropriate in response to unethical conduct by a vendor. Such actions include, but are not limited to, establishing guidelines for campus visits by a vendor, and/or removal of a vendor from the University's bidders' list(s).

Apart from a contact required for any on-going business at the University, vendors are specifically prohibited from contacting any individual at or associated with the University regarding this RFP. Vendor communication shall be limited to the Purchasing Department contact named on the cover page of this document. A vendor's failure to adhere to this prohibition may, at the University's sole discretion, disqualify the vendor's Proposal.

Cancellation for Lack of Funding: A resultant agreement may be canceled without any further obligation on the part of the GRC in the event that sufficient appropriated funding is unavailable to assure full performance of its terms. The vendor shall be notified in writing of such non-appropriation at the earliest opportunity.

Termination of Agreement: Consistent failure by the vendor to meet the terms and conditions of a resultant agreement deemed by the University, in its sole discretion, to be a material breach of the agreement, including, but not limited to delivery, required service-levels, quality, and invoice inaccuracies, will constitute a default of the agreement by the vendor. In the event that said default continues for a period of thirty (30) days after the vendor receipt of notice-of-default from the University, the University reserves the right to immediately terminate the agreement. Termination shall in no way limit the University's right to recover damages that occur as a result of the vendor's breach. Either party may cancel a resultant agreement after ninety (90) days from the effective date of the agreement by giving the other party thirty (30) days prior written notice of intent.

Quote: Response must be valid for 120 days.

Contract Term: The contract term will commence on February 21, 2022 or receipt of the purchase order, whichever is later, and continue through June 30, 2023. Pricing will remain firm for the initial period. At

the end of the initial period, the contract may be renewed, pending continued project funding from OSU-GRC sponsors for an additional five (5) 1-year periods (at the same terms and conditions), upon the signed mutual agreement between the University and the awarded vendor. The University will review requests for price increases for each of the 5 renewal periods.

The University, at its sole discretion, reserves the right to extend any resultant contract, under the same pricing and terms and conditions, to some or all University areas.

SECTION III: RFP Schedule and Other Forms

Due prior to issuance of purchase order or University contract:

The following MUST be properly completed by Bidders and MUST be received by the University prior to the issuance of a purchase order or University contract. If not included in the bid-response package, the University reserves the right to request the following from (at its sole discretion) some, all, or none of the respondents. The University also reserves the right to define and impose reasonable deadlines for the receipt of the following; failure to meet such deadlines MAY, at the sole discretion of the University, invalidate the bid response.

- Signed and dated Bidder Signature Page
- DUA (related to Medicaid administrative data)
- Certificate of Insurance, upon request

The University reserves the right to request from (at its sole discretion) some or all of the respondents, any further information or documentation that it deems necessary for the issuance of a purchase order or University contract.

Multiple or Alternate Proposals

OSU welcomes multiple Proposals from a single Bidder, but OSU requires each such Proposal to be submitted separately from every other Proposal the Bidder makes. Additionally, the Bidder must treat every Proposal submitted as a separate and distinct submission and include in each Proposal all materials, information, documentation and other items this RFP requires for a Proposal to be complete and acceptable.

No alternate Proposal may incorporate materials from another Proposal made by the Bidder or refer to another Proposal. OSU will judge each alternate Proposal on its own merits.

Appendix B: Forms

Bidder Signature Page

(Needed for Purchase Order Process - optional)

Any joint proposal must be signed by all bidders (when applicable: see Appendix A, Section II)

Bidder #1

By signing this document I am agreeing on behalf of my firm to the specifications of this RFP and accepting, without exception or amendment, The Ohio State University's "RFP Terms and Conditions" and the "Purchase Order Terms and Conditions." Any purchase order or University contract issued as a result of this RFP shall be subject to these terms and conditions. Should a Bidder propose exceptions to the Terms and Conditions cited above, the Bidder must submit such proposed exceptions and/or amendments in writing and in its bid response package by the Bid Closing Date/Time. The Ohio State University reserves the right to reject some, all, or none of the proposed exceptions and/or amendments and asserts its Terms and Conditions as described herein.

Company Name:	
Address:	
City/State/Zip:	
Federal Tax ID:	
Email Address:	
Phone:	
Fax:	
Authorized Signature:	
Signature Date:	
Printed Name:	
Title:	

Bidder #2

By signing this document I am agreeing on behalf of my firm to the specifications of this RFP and accepting, without exception or amendment the University’s “RFP Terms and Conditions” and the “Purchase Order Terms and Conditions.” Any purchase order or University contract issued as a result of this RFP shall be subject to these terms and conditions. Should a Bidder propose exceptions to the Terms and Conditions cited above, the Bidder must submit such proposed exceptions and/or amendments in writing, and in its bid response package, by the Bid Closing Date/Time. The University reserves the right to reject some, all or none of the proposed exceptions and/or amendments and asserts its Terms and Conditions as described herein.

Company Name:	
Address:	
City/State/Zip:	
Federal Tax ID:	
Email Address:	
Phone:	
Fax:	
Authorized Signature:	
Signature Date:	
Printed Name:	
Title:	

Appendix C: Additional Study Details

Managed Care: Monitoring and Evaluation Surveys

Please note that OSU contracts with an academic MCME research team which holds representation from various Ohio universities, to prepare a “draft” survey, including recommendations in collaboration with the Vendor of sampling frame requirements and sampling procedures, a draft survey questionnaire for the 2022 and 2023 MCME surveys iterations, and qualitative questions/protocols. Since the sampling design work is under OSU’s direction, we believe that the scope-of-work discussion concerning sampling is roughly sufficient for Vendor needs and Proposal development, although as noted, a mechanism is provided for Vendors to ask questions and receive answers prior to the Proposal deadline. Note that: (1) Medicaid administrative data analyses will be performed by OSU researchers; (2) MCME survey analyses will be performed by OSU researchers in collaboration with the Vendor; and (3) qualitative data analyses will be performed by OSU researchers. The selected Vendor will be asked to consult and assist with data and reporting issues relating to MCME survey analyses and MCME Reports.

Appendix D: Evaluation of Proposals

Evaluation of Proposals, Generally. The evaluation process may consist of up to three distinct phases:

1. The Procurement Representative’s Initial Review of all Proposals for Defects;
2. The Evaluation Committee’s Evaluation of the Proposals; and
3. Request for More Information (Interviews, Presentations, and/or Demonstrations).

Proposal Evaluation Criteria. In the Proposal evaluation phase, the Evaluation Committee will rate the Proposals submitted in response to this RFP based on the following criteria and weight assigned to each criterion, to a total of 1,000.

Criteria	Weight	Requirements Rubric			
		Does Not Meet	Meets	Exceeds	Greatly Exceeds
GENERAL REQUIREMENTS					
ORGANIZATIONAL CAPACITY - 20%					
Bidder Profile	25	0	5	7	9
Past Project Performance	75	0	5	7	9
Equipment and Software Requirements	40	0	5	7	9
Support Requirements	10	0	5	7	9
STAFF QUALIFICATIONS – 20%					
Project Management	90	0	5	7	9
Sample Design and Weighting	60	0	5	7	9
Survey Instrument Development	20	0	5	7	9
Data Management	40	0	5	7	9
Data Analysis and Report Writing	40	0	5	7	9
Interviewers	50	0	5	7	9
SURVEY METHODOLOGY – 20%					
Survey Instrument Development and Pretesting	40	0	5	7	9
Sample Design	70	0	5	7	9
Interview Training and Procedures	70	0	5	7	9

		Requirements Rubric			
Criteria	Weight	Does Not Meet	Meets	Exceeds	Greatly Exceeds
Response and Cooperation Rates	50	0	5	7	9
Weighting/Imputation	40	0	5	7	9
Data Coding and Cleaning	20	0	5	7	9
Database Construction	20	0	5	7	9
ANALYTICAL PLAN – 5%					
Summary Report	30	0	5	7	9
PROJECT MANAGEMENT – 9%					
Project Management Plan and Weekly Reports	30	0	5	7	9
Project Schedule	30	0	5	7	9
Staffing Plan	30	0	5	7	9
RESOURCE ALLOCATION – 6%					
Time Commitment	60	0	5	7	9
COST SUMMARY - 20%	60	0	5	7	9
TOTAL (100%)	(1,000)				

Interviews, Demonstrations, and Presentations. The Proposal Evaluation Committee may require some Bidders to interview with the committee, make a presentation about their Proposal, and/or demonstrate their products or services. Such presentations, demonstrations, and interviews provide a Bidder with an opportunity to clarify its Proposals and to ensure a mutual understanding of the Proposal’s content. The presentations, demonstrations, and interviews will be scheduled at the convenience and discretion of the evaluation committee. The evaluation committee may record any presentations, demonstrations, and interviews.