STATE OF NEW HAMPSHIRE
NH DEPARTMENT OF CORRECTIONS

REQUEST FOR PROPOSAL

INPATIENT AND OUTPATIENT HOSPITAL SERVICES

RFP NHDOC 20-03-GFMED

ISSUE DATE: January 24, 2020

CLOSING DATE: March 20, 2020 at 2:00 PM
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Promoting Public Safety through Integrity, Respect, Professionalism, Collaboration and Accountability

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SECTION A: Overview and Schedule

1. Executive Summary:

1.1. Purpose: The purpose of this request for proposal (RFP) is to seek Inpatient & Outpatient Hospital Services and professional medical services for the Concord and Southern area for the patient population of the NH Department of Corrections (NHDOC). This RFP is designed to comply with RSA 623-C:2 as amended effective July 1, 2013.

1.2. Performance Period: Contract(s) resulting from this RFP is anticipated to be effective for the period beginning July 1, 2020, or upon approval of the Governor and Executive Council, whichever is later through June 30, 2023. The Department may extend contracted services for one (1) additional period of up to two (2) years, contingent upon satisfactory Vendor performance, continued appropriation and G&C approval.

1.3. Resident Population: Resident population served from the following facilities are marked with an “X” below:

| Concord Area Correctional Facilities | | | |
|------------------------------------|------------------|----------------------------------|
| X NH State Prison for Men – (NHSP-M) | 281 North State Street | Concord, NH 03301 |
| X Secure Psychiatric Unit (SPU)/Residential Treatment Unit (RTU) | 281 North State Street | Concord, NH 03301 |
| X North End Transitional Housing Unit | 1 Perimeter Road | Concord, NH 03301 |
| X Concord Transitional Work Center | 275 North State Street | Concord, NH 03301 |
| X NH Correctional Facility for Women – (NHCF-W) | 42 Perimeter Road | Concord, NH 03301 |
| X Shea Farm Housing Unit | 60 Iron Works Road | Concord, NH 03301 |

| Southern Area Correctional Facilities | | | |
|--------------------------------------|------------------|----------------------------------|
| X Calumet Transitional Housing Unit | 126 Lowell Street | Manchester, NH 03104 |

2. Average Resident Population, Medical Transports and Hospital Visits for SFY 2019:

<table>
<thead>
<tr>
<th>Average Resident Population</th>
<th>Medical Transports for SFY 2019</th>
<th>Hospital Visits for SFY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>2474</td>
<td>2916</td>
<td>Emergency Room 450 Inpatient Stay 139</td>
</tr>
</tbody>
</table>

3. Schedule of Events (Timetable):

The following table, below, provides a Schedule of Events for this RFP through contract finalization and approval by the Governor and Executive Council. The NH Department of Corrections reserves the right to amend this schedule at its sole discretion and at any time through a published Addendum.

<table>
<thead>
<tr>
<th>Event #</th>
<th>Description of Event</th>
<th>Date of Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>RFP Issued</td>
<td>January 24, 2020</td>
</tr>
<tr>
<td>2</td>
<td>Vendor Conference</td>
<td>TBD, if required</td>
</tr>
<tr>
<td>3</td>
<td>Vendor (Proposer) Written Inquiries Due</td>
<td>February 14, 2020 at 2:00PM</td>
</tr>
<tr>
<td>4</td>
<td>NHDOC Posts Answers to Inquiries</td>
<td>February 21, 2020</td>
</tr>
<tr>
<td>5</td>
<td>Proposals Due</td>
<td>March 20, 2020 at 2:00PM</td>
</tr>
</tbody>
</table>

1 On rare occasions patients may be brought from the NH Northern Correctional Facility, Berlin, NH to receive services at the Contractor’ facility and in such circumstances all contract conditions shall apply.
Note: The NH Department of Corrections, with the exception of Event #5: “Proposals Due”, may alter the above Schedule of Events (Timetable) at any time. The Vendor’s “Proposals Due” date cannot be changed in order to maintain the integrity of the public contract procurement process of the State of New Hampshire except for the reasons as stated in Section D: Process for Submitting a Proposal, Subpart 5.3., Addendums(s) or Withdrawal to/or this RFP and Section G: Terms and Conditions Related to the RFP Process. Notice of any such changes will be posted on the NH Department of Corrections website and will be entitled Addendum and will serve as a Public Notice.

SECTION B: Description of Agency/Division/Program

The NH Department of Corrections is an executive agency of the State of New Hampshire charged with overseeing the State’s correctional facilities supervising residents, patients and probation and parolees by providing a safe, secure and humane correctional system through a continuum of services that promotes successful re-entry into society for the safety of our citizens and in support of crime victims.

SECTION C: Scope of Services

1. Inpatient Hospital Services:

1.1. The NH Department of Corrections is seeking proposals for inpatient services to be reimbursed on a Diagnosis Related Group (DRG) methodology. Specifically, the Vendor is asked to acknowledge the payment methodology and provide a DRG coefficient for evaluation. Such payment methodology will allow recognition of case mix and still provide an all-inclusive rate for inpatient hospital services.

1.2. In developing the DRG rate, the Vendor should review the provisions of amended RSA 623-C:2 enacted as of July 1, 2013 requiring hospitals providing inpatient services to this population to accept fees not greater than one hundred ten percent (110%) of the Medicare allowable rate.

1.3. Please Note: The NH Department of Corrections requests the Vendor to comment on the competitiveness of the DRG coefficient provided as it relates to RSA 623-C:2, I and II, private commercial payment and other public sources of third party payment.

1.4. Medicaid covered services provided by a residential care and/or health facility licensed pursuant to RSA 151 shall be paid at the NH Medicaid rate. In addition, please see RSA 623-C:2(Ih). The NH Department of Corrections will assist patients in applying for this reimbursement as allowed by rules and regulations of the NH Medicaid program in effect on the date of service.

1.5. Observation stays shall be defined as a stay of less than twenty-four (24) hours. Any hospital stay of 24 hours or greater, whether coded as observation or inpatient admission will be reimbursed at the DRG rate for inpatient stay not to exceed 110% of the Medicare allowable rate and will be billed to NH Department of Corrections for payment based on this methodology.

2. Emergency and Urgent Care Services:

2.1. Please Note: Indicate the Vendor’s acceptable reimbursement level for Emergency and Urgent Care Services as a percentage discount off the hospital billed charge. At a minimum, the Vendor shall adhere to the requirements of the amended RSA 623-C:2 requiring that the hospital rate does not exceed 110% of the Medicare allowable amount for these services. The Vendor shall indicate the availability of an Urgent Care facility and/or service as part of the Emergency Services requirement. The Vendor will follow industry standard billing practices if
any of these services rendered (e.g. emergency or urgent care services) revert to an inpatient stay as these services would then be billed as part of the overall inpatient stay.

2.2. **Please Note:** The NH Department of Corrections requests the Vendor to comment on the competitiveness of the discount provided as it relates to the requirements of the amended RSA 623-C:2 effective July 1, 2013, private commercial payment and other public sources of third party payment and indicate the Vendor’s availability of an Urgent Care facility and/or service as part of the Emergency Services requirement.

3. **Outpatient Hospital Services:**
   3.1. The NH Department of Corrections is seeking proposals for outpatient services to be reimbursed as a percentage of the January 2020 relevant NH Medicare Fee Schedule and indicate the percentage (%) multiplier, below. The following NH Medicare Fee Schedules are to be used:

<table>
<thead>
<tr>
<th>NH January 2020 Medicare Fee Schedule</th>
<th>Percentage (%) Multiplier</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient Laboratory</td>
<td></td>
</tr>
<tr>
<td>Outpatient Radiology</td>
<td></td>
</tr>
<tr>
<td>National Level II Codes (HCPCS)</td>
<td></td>
</tr>
</tbody>
</table>

3.2. **Please Note:** The NH Department of Corrections requests the Vendor to comment on the competitiveness of the discount provided as it relates to the requirements of the amended RSA 623-C:2 effective July 1, 2013, private commercial payment and other public sources of third party payment.

3.3. **Please Note:** All other outpatient services not covered by the NH Medicare Fee Schedules above shall be paid as a percentage of the facility charge structure. Indicate the percentage discount off the hospital’s billed charge.

3.3.1. **Please Note:** The NH Department of Corrections requests the Vendor to comment on the competitiveness of the discount provided as it relates to the requirements of the amended RSA 623-C:2 effective July 1, 2013, private commercial payment and other public sources of third party payment.

3.3.2. **Please Note:** The Vendor shall provide a complete list of all affiliated facilities that routinely provide services not covered under the Vendor’s tax ID number. The Vendor shall provide written confirmation that the affiliated facilities will accept the contracted rate or will be reimbursed under the provisions of RSA 623-C:2.

3.3.3. **Please Note:** The Vendor shall provide a complete list of all services, procedures provided by affiliated facilities not covered under the contracted reimbursement rate.

4. **Rate Adjustments:**
   4.1. The NH Department of Corrections requests a three-year rate proposal and agreement because of the need to properly appropriate funds over the next biennium. If the Vendor proposes an annual adjustment to the rates, please indicate what the adjustment will be and the rationale for such adjustment.

4.2. The NH Department of Corrections will review the Vendor’s request for rate adjustment using hospital reimbursement rates by the most recently published Consumer Price Index by the Bureau of Labor Statistics, Boston-Cambridge-Newton, MA-NH/Northeast Region. The adjustment request shall not violate the intent of RSA 623-C:2.

4.3. **Please Note:** During the term of the agreement with any selected Vendor, the NH Department of Corrections will require by Agreement that the Vendor provide written notification of any
annual rate increases. Any rate adjustments may require written agreement and/or possible contract amendment from the NH Department of Corrections prior to going into effect.

4.4. If it is necessary to increase the price limitation of the Contract this provision shall require Governor and Executive Council approval.

5. **Hospital Claim Processing:**

5.1. *Please Note:* The NH Department of Corrections lacks electronic claims system capacity. For Hospitals Services, the NH Department of Corrections will require the Vendor to invoice the discounted amount of services rendered to patients. Claims are to be provided in the industry standard format (CMS 1500, UB-04) but should indicate the amount expected to be reimbursed. For inpatient admissions, the submitted UB-04 shall reflect the DRG and DRG rate expected for reimbursement. The Vendor is asked in this section to describe in detail the method by which it will address this requires and provide a sample format of the methodology. In addition, the Vendor should be aware of the requirements of RSA 623-C:2(I)g.

5.2. All invoices shall clearly reflect if the patient’s status is observation, emergency room, inpatient, or outpatient.

6. **Physician Services:**

6.1. The NH Department of Corrections seeks to include professional medical services in this RFP. In particular, it seeks to access services for employed physicians to be reimbursed at a discounted level. The Vendor should indicate its willingness to provide discounted professional services for its employed physicians and provide the following:

6.1.1. Listing of the employed physicians and relevant specialty.

6.1.2. Level of reimbursement expressed as a percentage of the January 2020 NH Medicare Physician Fee Schedule not to exceed 110% of Medicare.

6.2. *Please Note:* The NH Department of Corrections requests the Vendor to comment on the competitiveness of the discount as it relates to billed charges, commercial third party payments and other public program third party payer reimbursements (i.e. Medicaid, Veteran Administration, etc.).

7. **Physician Services Claims Processing:**

7.1. The Vendor should validate the Physician Service claims will be provided to the NH Department of Corrections in a timely manner and consistent with the industry format (CMS 1500). Claims for Physician Services will be processed by the NH Department of Corrections by applying the negotiated percentage of the January 2020 NH Medicare Fee Schedule to the services, regardless of amount billed.

7.2. *Please Note:* The NH Department of Corrections requests the Vendor invoice at 110% of Medicare for employed Physician Services. No payments of services rendered under this methodology will exceed the 110% Medicare amount.

8. **Other Services at Discounted Rates:**

8.1. The NH Department of Corrections is interested in access to other necessary services that the Vendor may be willing to provide at a discounted rate under the one hundred twenty-five percent (125%) of Medicare rate.

8.2. *Please Note:* The Vendor shall indicate in this sections if any other such services are available. Items of interest include but not limited to on-campus (NH Department of Corrections facilities) rehabilitation services: Physical Therapy (PT), Occupational Therapy (OT), Speech Therapy (ST) and Respiratory Therapy (RT), Oncology, Radiation Therapy, chemotherapy, or alternative to hospital based rehabilitation services.
8.3. **Please Note:** For inpatient rehabilitation services, Vendors shall provide pricing based on Medicare’s Case Mix Groups (CMG) utilizing the payment on account factor (PAF or % of charge) of the January 2020 NH Medicare Fee Schedule. The NH Department of Corrections is seeking a rate not to exceed 110% of Medicare per RSA 623-C:2.

9. **Auditing:**

9.1. The NH Department of Corrections reserves the right to retrospectively audit any and all claims submitted for conformance to the contracted rate and medically appropriate claim designation, i.e. inpatient, outpatient, emergency or observation status. Such auditing function may be performed by employees of the NH Department of Corrections, the NH Department of Administrative Services, the Department of Health and Human Services or a contracted service. The Vendor shall be expected to provide itemized copies of invoices and access to clinical records substantiating billing status.

9.2. The Vendor should be able to defend its pricing methodology and properly detail any internal process controls for ensuring accurate pricing of claims RSA 623-C:2(g).

10. **General Service Provisions:**

10.1. **Notification of Required Services:** The NH Department of Correction’s on-site Nurse Coordinator or designee shall contact the Vendor when service is needed. A list of NH Department of Corrections key personnel by site shall be provided to the Vendor.

10.2. **Rules and Regulations:** The Vendor agrees to comply with all Policies, Procedure and Directives (PPD’s) of the NH Department of Corrections. The Vendor shall adhere to the Department’s Administrative Rules, Conduct and Confidentiality of Information policies.

10.3. **Additional Facilities:** Upon agreement of both parties, additional facilities belonging or associated to the NH Department of Corrections may be added to a contract.

10.4. **Licenses, Credentials and Certificates:** The Vendor shall ensure NH State licensed professionals provide the services required. The Vendor and its staff shall possess the credentials, licenses and/or certificates required by law and regulations to provide such services.

11. **Administrative Rules, Policies, Regulations and Policy and Procedure Directives:**

Vendor shall comply with any applicable NH Department of Corrections Administrative Rules, Policies, Regulations and Policy and Procedure Directives (PPD’s) to include but not limited to PPD 5.08: *Staff Personal Property Permitted In and Restricted from Prison Facilities.*  Additional information can be located as a separate link:


12. **Prison Rape Elimination Act (PREA) of 2003:**

Vendor shall comply with the Prison Rape Elimination Act (PREA) of 2003 (Federal Law 42 U.S.C.15601 et. seq.), with all applicable Federal PREA standards, and with all State policies and standards related to PREA for preventing, detecting, monitoring, investigating, and eradicating any form of sexual abuse within facilities/programs/offices owned, operated, or contracted. Vendor acknowledges that, in addition to self-monitoring requirements, the State will conduct compliance monitoring of PREA standards, which may require an outside independent audit.

Additional information can be located as a separate link:

13. Protected Health Information (PHI):
Vendor shall safeguard any and all PHI according to the terms of the Health Information Portability and Accountability Act (HIPPA) of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments.

SECTION D: Process for Submitting a Proposal
1. Proposal Submission Deadline, Labeling, Addressing Instructions:
   1.1. Submission Deadline and Labeling Proposal(s): Sealed Proposals submitted in response to this RFP must be received by the NH Department of Corrections, no later than 2:00 PM on March 20, 2020 as specified in the Schedule section, herein. Proposal envelopes, boxes and/or containers must be clearly marked as follows:

   STATE OF NEW HAMPSHIRE
   DEPARTMENT OF CORRECTIONS
   RESPONSE TO:
   RFP NHDOC 20-03-GFMED
   INPATIENT & OUTPATIENT HOSPITAL

   1.2. Addressing Proposal(s): Proposals may be submitted via: Overnight Delivery Service, In-Person or U.S. Mail with proposals addressed as such:

<table>
<thead>
<tr>
<th>Overnight Delivery Service or In-Person</th>
<th>U.S. Mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>State of New Hampshire</td>
<td>State of New Hampshire</td>
</tr>
<tr>
<td>NH Department of Corrections</td>
<td>NH Department of Corrections</td>
</tr>
<tr>
<td>Attn: Contract Administrator</td>
<td>Attn: Contract Administrator</td>
</tr>
<tr>
<td>105 Pleasant Street, Rm 322</td>
<td>P.O. Box 1806</td>
</tr>
<tr>
<td>Concord, NH 03301</td>
<td>Concord, NH 03302</td>
</tr>
</tbody>
</table>

   A successful proposal requires much planning. The Main Building at 105 Pleasant Street is a secured facility. Please allow sufficient time for shipping. Vendors shall assume all risk for Overnight Delivery Services and U.S. Mail not meeting the RFP deadline and date.

2. Submission Criteria:
   2.1. All Proposals submitted in response to this RFP shall consist of:
   2.1.1. One (1) original and two (2) clearly identified copies of the Proposal, including all required attachments.
   2.1.2. One (1) clearly identified electronic copy of the Proposal in MS Word, including all required attachments contained on a thumb drive.
   2.2. The NH Department of Corrections reserves the right to reject any and all Proposals and to waive informalities and minor irregularities in Proposals received and to accept any portion of a Proposal or all items bid if deemed in the best interest of the State.
   2.3. Proposers who are ineligible to bid on proposals, bids or quotes issued by the NH Department of Administrative Services, Division of Procurement and Support Services, pursuant to the provisions of RSA 21-I:11-c shall not be considered eligible for an award under this proposal.
2.4. Unless waived as a non-material deviation in accordance with SECTION D: Process for Submitting a Proposal and SECTION G: Terms and Conditions Related to the RFP Process, late submissions shall not be accepted and may be returned to the proposers unopened.

2.5. Delivery of the Proposals shall be at the Proposer’s expense. Any damage that may occur due to shipping shall be the Proposer’s responsibility.

2.6. For Overnight Delivery Service, the time of receipt shall be when a Proposal is received at the location designated above. For In-Person delivery, the time of receipt shall be when the Proposal is delivered to the Contractor Administrator or designee.

2.7. The NH Department of Corrections accepts no responsibility for mislabeled mail or mail that is not delivered or undelivered for whatever reason.

2.8. Partial proposals shall not be accepted. All proposals shall be submitted for the full scope of services being requested within the RFP.

2.9. If an unsigned proposal is received in response to the RFP, the Proposer may be notified by the NH Department of Corrections and shall be considered “technically non-compliant”.

2.10. A Proposer who has failed to sign a Proposal may file a signed version of the RFP response within three (3) business days of the day the notice is issued.

2.11. The NH Department of Corrections shall not consider a Proposal, which remains unsigned on the fourth (4) business day after issuing notification of the unsigned Proposal.

2.12. Vendors are permitted to submit one (1) Proposal in response to this RFP.

3. **Contact Information – Sole Point of Contact:**

The sole point of contact, the Contractor Administrator, relative to the bid or bidding process for this RFP, from the RFP issue date until the selection of a Vendor, and approval of the resulting contract by G&C is:

<table>
<thead>
<tr>
<th>NH Department of Corrections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract Administrator</td>
</tr>
<tr>
<td>P.O. Box 1806</td>
</tr>
<tr>
<td>Concord, NH 03302</td>
</tr>
<tr>
<td>Tel: (603) 271-7602</td>
</tr>
<tr>
<td>Fax: (888) 908-6609</td>
</tr>
<tr>
<td>E-Mail: <a href="mailto:jennifer.lind@doc.nh.gov">jennifer.lind@doc.nh.gov</a></td>
</tr>
</tbody>
</table>

Other personnel are not authorized to discuss this RFP with Bidders before the proposal submission deadline. Contact regarding this RFP with any other State personnel could result in disqualification. The State will not be held responsible for oral responses to Bidders regardless of the source.

4. **Proposal Inquiries:**

All inquiries concerning this RFP, including but not limited to, requests for clarifications, questions, and any changes to this RFP, shall be submitted via e-mail to the sole point of contact, identified in SECTION D: Process for Submitting a Proposal, Paragraph 3, **Contact Information – Sole Point of Contact**, above, citing the RFP Title, RFP Number, RFP Section/Paragraph and RFP page number submitted to:

<table>
<thead>
<tr>
<th>NH Department of Corrections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract Administrator</td>
</tr>
<tr>
<td>P.O. Box 1806</td>
</tr>
<tr>
<td>Concord, NH 03302</td>
</tr>
<tr>
<td>Tel: (603) 271-7602</td>
</tr>
<tr>
<td>Fax: (888) 908-6609</td>
</tr>
<tr>
<td>E-Mail: <a href="mailto:jennifer.lind@doc.nh.gov">jennifer.lind@doc.nh.gov</a></td>
</tr>
</tbody>
</table>
4.1. Inquiries must be received by the NH Department of Correction’s RFP Point of Contact, above, no later than the conclusion of the Vendor (Proposer) Written Inquiry Period see Schedule of Events (Timetable); herein. Inquiries received later than the conclusion of the Vendor Proposer Written Inquiry Period shall not be considered properly submitted and may not be considered.

4.2. Inquiries received shall be addressed only if they are deemed by the NH Department of Corrections to be critical to the bid process. The NH Department of Corrections as its discretion may request clarification of an inquiry submitted by a Vendor. Inquiries and/or questions that are not understood will not be answered. Statements that are not questions will not receive a response.

4.3. No inquiries shall be accepted after 2:00 PM on February 14, 2020 as specified in SECTION A: Overview and Schedule, Paragraph 3: Schedule of Events (Timetable).:

4.4. The NH Department of Corrections intends to issue official responses to properly submitted inquiries on or before the date specified in the Schedule of Events (Timetable); herein; however this date is subject to change at the Departments discretion.

4.5. Official responses by the NH Department of Corrections will be made only in writing by the process described above. Responses for appropriate written inquires received meeting the requirements above will be posted on the NH Department of Corrections website: NHDOC, Doing Business, RFP’s on or prior to 2:00 PM on February 21, 2020 and shall serve as a Public Notice.

4.6. The NH Department of Corrections may consolidate and/or paraphrase questions for sufficiency and clarity.

4.7. The NH Department of Corrections may, at its discretion, amend this RFP on its own initiative or in response to issues raised by inquiries, as it deems appropriate.

4.8. Oral/verbal statements, representations, agreements, instructions, clarifications, or modifications concerning the RFP shall not be binding upon the NH Department of Corrections.

4.9. Vendors shall be responsible for reviewing the most updated information related to this RFP before submitting a Proposal by self-monitoring the NH Department of Correction’s website: NHDOC, Doing Business, RFP’s.

5. Addendums(s) or Withdrawal of RFP:

5.1. If the NH Department of Corrections decides to amend or clarify any part of this RFP, a written addendum shall be provided to all Vendors on the Department’s website: https://www.nh.gov/nhdoc/business/rfp.html. This notification will serve as the Public Notice.

5.2. The NH Department of Corrections, at its discretion, may amend the RFP at any time prior to the closing of the RFP and/or terminate this procurement in whole or in part at any time.

5.3. Whereas the Department may modify the RFP and as a result of the modification determine that Vendors will not have enough time to effect changes to their Proposals, the Department may postpone the Proposal Due Date for a period of up to thirty (30) days in the best interest of the State to allow fairness in the competitive bidding process. Notice of this postponement shall be posted on the NH Department of Corrections website prior to the Proposal Due Date list in the Schedule of Events, herein.

6. Restriction of Contact with Agency Employees:

From the date of release of the RFP until an award is made and announced regarding the selection of a Proposer, all communication with personnel employed by or under contract with the NH Department of Corrections regarding the RFP is forbidden unless first approved by the RFP Point(s) of Contact listed in the Proposal Inquiries section, herein.
6.1. NH Department of Correction’s employees have been directed not to hold conferences and/or discussions concerning the RFP with any potential Vendor during the selection process, unless otherwise authorized by the Point(s) of Contact.

6.2. Proposers may be disqualified for violating this restriction on communications.

7. Validity of Proposal:
Proposals must be valid for one hundred and eighty (180) days following the deadline for submission of Proposals in the Schedule of Events or until the Effective Date of any resulting Contract, whichever is later.

8. Alterations/Changes to RFP and Associated Documents:
Any alteration to the text or format of this RFP, or the text or format of any addendum or any file associated with this RFP is prohibited. Any such alterations shall result in the Proposal being rejected.

9. Subcontractors:
Proposals utilizing subcontractors for any portion of the services identified in this RFP shall require subcontractors to meet all requirements described in this RFP, the Proposal, any resulting contract and any renewal thereof. Subcontractors shall commit to the entire contract period stated within the RFP, unless the NH Department Corrections specifically agrees upon the change of such subcontractors. Subcontracting of services shall require prior approval by the NH Department of Corrections. The NH Department of Corrections reserves the right to reject subcontractors identified in this RFP and to require the Vendor to replace such subcontractors deemed unacceptable.

10. Rejection of Proposals:
Proposals may be rejected at any time at the discretion of the Director of Administration or designee if the Contractor:
10.1. Has any interest that shall, in the sole discretion of the NH Department of Corrections, conflict with performance of services for the State.
10.2. If a non-profit/not-for-profit fails to furnish the NH Department of Corrections with the names and addresses of the organization’s Board of Directors/Members, List of Key Personnel and Salaries, Resumes of Key Personnel (redact all personal information pertaining to these requirements) and/or Mission Statement.
10.3. Fails to make an oral presentation, if requested by the NH Department of Corrections, at a time, place and in a manner satisfactory to the Department.
10.4. Fails to reach an agreement with the NH Department of Corrections on any and all Contract terms.

11. Remedies for “Minor Irregularities” of a Proposal:
The NH Department of Corrections, in its sole discretion, may determine that “Minor Irregularities” of a Proposal may be insubstantial. In such cases, the NH Department of Corrections may:
11.1. Seek clarification.
11.2. Allow the Contractor to make corrections, or
11.3. Apply a combination of the two (2) remedies.
SECTION E: Content and Requirements for a Proposal

1. Proposal Organization:
   1.1. Overview:
      1.1.1. Vendors are expected to examine all documentation and requirements of the RFP. Failure to observe the terms and conditions in completion of the Proposal are at the Vendor’s risk and may, at the discretion of the NH Department of Corrections, result in disqualification.
      1.1.2. Proposal must conform to all instructions, conditions, and requirements included in the RFP.
      1.1.3. Partial Proposals shall not be accepted. All Proposals shall be submitted for the full scope of services being requested within the RFP.
      1.1.4. Proposals should be received by the deadline set forth in the Schedule of Events (Timetable), SECTION A: Overview and Schedule.
      1.1.5. Fax or e-mail copies will not be accepted.
      1.1.6. Vendors shall submit a Technical Proposal and Cost Proposal and other supporting documents as outlined in the RFP.

1.2. Proposal Format:
   1.2.1. Proposals should follow the following format:

<table>
<thead>
<tr>
<th>Font Style</th>
<th>12 Point, Times New Roman</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line Spacing</td>
<td>One and a half</td>
</tr>
<tr>
<td>Text Justification</td>
<td>Flush left</td>
</tr>
<tr>
<td>Margins</td>
<td>One inch all around</td>
</tr>
<tr>
<td>Tabs</td>
<td>Do not include section tabs</td>
</tr>
<tr>
<td>Binding</td>
<td>Do not bind, staple or 3-hole punch</td>
</tr>
<tr>
<td>Separation of Sections</td>
<td>Use binder clips</td>
</tr>
<tr>
<td>Header/Footer</td>
<td>Do not alter current headers &amp; footers</td>
</tr>
<tr>
<td>Signatures/Initials</td>
<td>ORIGINAL (handwritten) and in BLUE ink; No computer generated initials</td>
</tr>
<tr>
<td>Executed forms by Vendor</td>
<td>ORIGINAL Forms (no photo copies) executed in BLUE ink</td>
</tr>
<tr>
<td>Single Sided</td>
<td>Do not double side pages</td>
</tr>
<tr>
<td>Vendor Text</td>
<td>Do not alter the format of the RFP, Form Number P-37 and Appendixes to add Vendor specific information</td>
</tr>
<tr>
<td>Black Ink/Graphics</td>
<td>Responses shall use BLACK ink ONLY; NO COLOR graphics</td>
</tr>
<tr>
<td>Sealed Bids</td>
<td>Bids shall be sealed</td>
</tr>
</tbody>
</table>

1.3. RFP Presentation Response:
   1.3.1. RFP Response shall consist of a sealed Technical Proposal and a sealed Standard Terms and Conditions Proposal (to include Cost Proposal).
   1.3.2. Presentation of sealed Technical Proposal
      1.3.2.1. RFP Cover Sheet, labeled:
         - Name of Organization;
         - RFP Title and Number, Date of Submission; and
         - Marked as “Original”.
      1.3.2.2. Table of Contents
      1.3.2.3. Transmittal Letter, SECTION I: Appendixes, (Appendix A)
      1.3.2.4. Exceptions to Terms and Condition(s) Letter, SECTION I: Appendixes, (Appendix B)
      1.3.2.5. Non-Disclosure of Right to Know of Information Letter to State Agency,
State of NH, Department of Corrections  
Inpatient & Outpatient Hospital Services  
RFP NHDOC 20-03-GFMED


1.3.2.6. Technical Proposal Cover Sheet, labeled “Technical Proposal”
1.3.2.6.1. Executive Summary – Not to exceed five (5) pages; briefly summarize an overview of the organization (including any networks or subcontractors to be involved) to include:
   • Number of years in operation; and
   • Approach of the organization.

1.3.2.6.2. Organizational Capability – Not to exceed five (5) pages; describe the organization’s approach to provide services as specified in the RFP. The respondent shall address all area of the requested services pertaining to the objectives of the SECTION C: Scope of Services and Scope of Services, Exhibit B of this RFP.

1.3.2.6.3. Key Personnel (Organizational Chart) – Complements the organizational chart to include titles of key personnel primarily responsible for meeting the terms and conditions of a contract.

1.3.2.6.4. Mission Statement

1.3.2.6.5. Financial Statements – Provide, preferably audited, two (2) consecutive years, and copies of any quarterly financial statements prepared since the end of the period reported by your most recent annual report. Acceptable financial verification shall include one (1) of the following checking off one (1) of the boxes below:

<table>
<thead>
<tr>
<th>Check</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Option 1</td>
<td>a copy of the organization’s most recent full set of financial statements</td>
</tr>
<tr>
<td>Option 2</td>
<td>a copy of the organization’s audited set of financial statements from an independent Certified Public Accountant (CPA) firm</td>
</tr>
<tr>
<td>Option 3</td>
<td>a copy of the sole proprietorship’s most recent set of Income Statements, Statement or Owner’s Capital and Balance Sheets or federal income tax returns</td>
</tr>
</tbody>
</table>

1.3.2.6.6. Subcontractor Letters of Commitment (if applicable) – If subcontractors are part of this proposal, signed letter of commitment from the subcontractor are required.

1.3.2.6.7. Licenses/Certifications

1.3.2.6.8. Sample Reports

1.3.3. Presentation of sealed Standard Terms and Conditions Proposal

1.3.3.1. Standard Terms and Conditions Cover Sheet, labeled “Standard Terms and Conditions Proposal”

1.3.3.1.1. General Provisions, FORM NUMBER P-37 (version 11/7/19)

1.3.3.1.2. Special Provisions, Exhibit A

1.3.3.1.3. Scope of Services, Exhibit B

1.3.3.1.4. Estimated Budget/Method of Payment, Exhibit C
   • Cost Proposal
   • Method of Payment

1.3.3.1.5. Proposal Check Sheet

1.3.3.1.6. Glossary of Terms

Promoting Public Safety through Integrity, Respect, Professionalism, Collaboration and Accountability

Division of Medical & Forensic Services
1.3.3.1.7. Certificate of Good Standing (see Proposal Check Sheet)
1.3.3.1.8. Certificate of Authority/Vote (see Proposal Check Sheet)
1.3.3.1.9. Certificate of Insurance (see Proposal Check Sheet)
1.3.3.1.10. Administrative Rules, Rules of Conduct and Confidentiality of Information Form (see Proposal Check Sheet)
1.3.3.1.11. Health Insurance Portability and Accountability Act (HIPAA) Form, Business Associate Agreement (see Proposal Check Sheet)
1.3.3.1.12. PREA Acknowledgement Form (see Proposal Check Sheet)
1.3.3.1.13. List of Board of Directors and Business Address (see Proposal Check Sheet for instructions)
1.3.3.1.14. List of Key Personnel and Salaries (see Proposal Check Sheet for instructions)
1.3.3.1.15. Resumes of Key Personnel (see Proposal Check Sheet for instructions)
1.3.3.1.16. Alternate W-9 Registration (see Proposal Check Sheet)

SECTION F: Evaluation of Proposals

1. Evaluation Criteria and Scoring:
   1.1. Each responsive Proposal will be evaluated and considered with regard to the following criteria:
      1.1.1. Technical Proposal;
      1.1.2. Cost Proposal – Bidder’s response to the following Cost Proposal categories:
         1.1.2.1. Inpatient Hospital Services;
         1.1.2.2. Emergency and Urgent Care Services;
         1.1.2.3. Outpatient Hospital Services;
         1.1.2.4. Rate Adjustments;
         1.1.2.5. Hospital Claims Processing;
         1.1.2.6. Physician Services;
         1.1.2.7. Physician Services Claims Processing; and
         1.1.2.8. Other Services at Discounted Rates.

The remainder of this page is intentionally blank.
1.2. The NH Department of Corrections will use a scoring scale of 1000 points, a maximum of 200 points awarded based on the Technical Proposal and a maximum of 800 points awarded based on the Cost Proposal.

1.3. The NH Department of Corrections will select a Proposer based upon the criteria and standards contained in this RFP and from applying the weighting in this section. Reference checks, to the extent they are utilized by the NH Department of Corrections, will be used to refine and finalize scores.

2. Proposal Review:

2.1. NH Department of Corrections shall conduct an objective review of the proposal(s) received in response to this RFP. The evaluation will be based on the demonstrated capabilities and skill of the prospective Vendor in relation to the needs of the services to be provided as set forth in this RFP.

2.2. NH Department of Corrections shall not review proposals that reduce the Department’s current functions.

2.3. NH Department of Corrections reserves the right to accept or reject any proposal and to waive any minor irregularities as determined by the NH Department of Corrections in any proposal.

2.4. NH Department of Corrections reserves the right to cancel this RFP in whole or in part upon written or published notice of intent to do so, or solicit new Proposals under a new acquisition process. Financial responsibility for the preparation, work performed and submission of proposals shall be the sole responsibility of the Proposer and the NH Department of Corrections shall not be held liable for any such costs.

2.5. If the NH Department of Corrections determines to make an award based on the above criteria, the Department may notify the selected Proposer(s). Should the NH Department of Corrections be unable to reach an agreement with a selected Proposer(s) during Contract discussions, the NH Department of Corrections may then undertake Contract discussions with the next preferred Proposer and so on, or the NH Department of Corrections may reject all proposals, cancel this RFP, or solicit new Proposals under a new acquisition process.

3. Planned Evaluations:

NH Department of Corrections plans to use the following process:

<table>
<thead>
<tr>
<th>Category</th>
<th>Points Per Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1.3.</td>
<td>Technical Proposal: (200 Points)</td>
</tr>
<tr>
<td>1.1.3.1.</td>
<td>Executive Summary: (100 Points)</td>
</tr>
<tr>
<td>1.1.3.2.</td>
<td>Organizational Capability: (100 Points)</td>
</tr>
<tr>
<td>1.1.4.</td>
<td>Cost Proposal: (800 Points)</td>
</tr>
<tr>
<td>1.1.4.1.</td>
<td>Inpatient Hospital Services: (100 Points)</td>
</tr>
<tr>
<td>1.1.4.2.</td>
<td>Emergency and Urgent Care Services: (175 Points)</td>
</tr>
<tr>
<td>1.1.4.3.</td>
<td>Outpatient Hospital Services: (200 Points)</td>
</tr>
<tr>
<td>1.1.4.4.</td>
<td>Rate Adjustments: (75 Points)</td>
</tr>
<tr>
<td>1.1.4.5.</td>
<td>Hospital Claims Processing: (100 Points)</td>
</tr>
<tr>
<td>1.1.4.6.</td>
<td>Physician Services: (50 Points)</td>
</tr>
<tr>
<td>1.1.4.7.</td>
<td>Physician Services Claims Processing: (50 Points)</td>
</tr>
<tr>
<td>1.1.4.8.</td>
<td>Other Services at Discounted Rates, i.e. PT, OT, ST, RT, etc.: (50 Points)</td>
</tr>
<tr>
<td>Total of all Categories</td>
<td>1000</td>
</tr>
</tbody>
</table>
3.1. Initial/Procedural Screening;
3.2. Preliminary Technical Scoring of Proposals;
3.3. Final Technical Scoring of Proposals (Not Applicable);
3.4. Cost Proposal Review;
3.5. Best and Final Offer (If Applicable); and
3.6. Final Selection.

4. **Initial/Procedural Screening:**
   NH Department of Corrections will conduct an initial/procedural screening step to verify Proposer compliance with the submission requirements set forth in this RFP and to confirm that the Technical Proposal satisfies the conditions defined in SECTION E: Content and Requirements for a Proposal.
   4.1. The NH Department of Corrections may waive or offer a limited opportunity to cure immaterial deviations from the RFP requirements if it is determined to be in the best interest of the State.
   4.2. Cost Proposals will remain sealed during the Initial/Procedural Screening.

5. **Preliminary Technical Scoring of Proposals:**
   NH Department of Corrections will establish an evaluation team to initially score the Technical Proposals. This evaluation team will review the technical proposals and give a preliminary score to the Technical Proposals under the guidelines set forth in SECTION F: Evaluation of Proposals. Only those Proposers who are considered best qualified will be invited to participate in the remainder of the RFP evaluation process. Cost Proposals will remain sealed during the Preliminary Technical Scoring of Proposals.

6. **Final Technical Scoring of Proposals:**
   Following Reference Checks and review of written clarifications of Proposal(s), if applicable, the evaluation team will determine a final score for each Technical Proposal(s).
   6.1. The NH Department of Corrections utilizes a consensus scoring methodology to evaluate submitted proposals. Each final proposal will be evaluated by an open forum of discussion/debate by the evaluation committee. The proposals will be scored comparing the Proposer’s proposal to the evaluation criteria and specifications defined in this RFP. Only the consensus score to sheet will be used to designate the point value assigned to each proposal.

7. **Cost Proposal Review:**
   Cost Proposals will be reviewed upon completion of the final technical scoring of proposals. The Proposer’s Cost Proposal will be allocated a maximum potential score of 800 points. Proposers are advised that this is not a low bid award and that the scoring of the cost proposal will be combined with the scoring of the technical proposal to determine the overall highest scoring proposal.
   7.1. The following will be used to assign points for costs:
   7.2. For the purpose of use of this formula, the lowest proposed prices is defined as the lowest price proposed by a Proposer.

   **Proposer’s Price Score = (Lowest Proposed Price/Proposer’s Price) X 800**

8. **Best and Final Offer (BAFO):**
   NH Department of Corrections may, at its sole option, invite the highest scoring Proposer(s) to submit a “Best and Final Offer” for the Department’s consideration. The NH Department of Corrections reserves the right to select the Proposer based solely on the initial proposal(s) and is
under no obligation to solicit or accept a BAFO from any proposer(s). As the Department may not request a BAFO, Proposers are encouraged to provide their most competitive prices in their initial proposals.

8.1. The BAFO is a one-time invitation only process for a Proposer to submit its lowest priced offer for the Department’s consideration.

8.2. NH Department of Corrections will provide a deadline submission date for the BAFO.

8.3. NH Department of Corrections may communicate in writing any price/cost targets that the Department is seeking in a BAFO. If such target(s) is provided, the Department will do so uniformly to all Proposers selected to participate in the BAFO.

8.4. All restrictions on contact with State employees outlined in SECTION D: Process for Submitting a Proposal shall remain in effect for the BAFO period.

8.5. Each invited Proposer shall only make one BAFO. The BAFO shall not alter the substance of the Proposer’s Technical Proposal. The BAFO may only amend the Proposer’s initial price proposal.

8.6. To the extent the NH Department of Corrections solicits and receives a BAFO pursuant to this section, the Department will re-score the BAFO price proposals after review of the BAFO in accordance with SECTION F: Evaluation of Proposals. The NH Department of Corrections will not select a Proposer based on the lowest priced BAFO proposal. A final selection, if any, shall be based on the combined score of the technical proposal and BAFO cost proposal. Only those Proposers who were invited to submit a BAFO will be considered for an award.

9. Final Selection:

NH Department of Corrections will conduct a final selection based on the final evaluation of the initial proposals or, if requested, as a result of the BAFO and begin contract negotiations with the selected Proposer(s).

10. Rights of the NH Department of Corrections:

NH Department of Corrections reserves the right to:

10.1. Make independent investigations in evaluating Proposals;

10.2. Request additional information to clarify elements of a Proposal;

10.3. Waive minor or immaterial deviations from the RFP requirements, if determined to be in the best interest of the State;

10.4. Omit any planned evaluation step if, in the Department’s view, the step is not needed;

10.5. At its sole discretion, reject any and all Proposals at any time; and

10.6. Open contract discussion with the second highest scoring Proposer and so on, if the Department is unable to reach an agreement of Contract terms with the higher scoring Proposer(s).

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SECTION G: Terms and Conditions Related to the RFP Process

1. RFP Addendum:
   The NH Department of Corrections reserves the right to amend this RFP at its discretion, prior to the Proposal submission deadline. In the event of an addendum to this RFP, the Department, at its sole discretion, may extend the Proposal submission deadline, as it deems appropriate.

2. Non-Collusion:
   The Proposer’s signature on a Proposal submitted in response to this RFP guarantees that the prices, terms and conditions, and Work quoted have been established without collusion with other Proposers and without effort to preclude the NH Department of Corrections from obtaining the best possible competitive Proposal.

3. Property of the State:
   All material received in response to this RFP shall become the property of the State and will not be returned to the Proposer. Upon Contract award, the State reserves the right to use any information presented in any Proposal.

4. Confidentiality of a Proposal:
   Unless necessary for the approval of a contract, the substance of a Proposal must remain confidential until the Effective Date of any Contract resulting from this RFP. A Proposer’s disclosure or distribution of Proposals other than to the Agency will be grounds for disqualification.

5. Public Disclosure:
   Pursuant to RSA 21-G:37, all responses to this RFP shall be considered confidential until the award of a contract. At the time of receipt of proposals, the Agency will post the number of responses received with no further information. No later than five (5) business days prior to submission of a contract to the Department of Administrative Services pursuant to this RFP, the Agency will post the name, rank or score of each proposer. In the event that the contract does not require Governor & Executive Council approval, the Agency shall disclose the rank or score of the Proposals at least five (5) business days before final approval of the Contract.

The content of each Proposer’s Proposal shall become public information upon the award of any resulting Contract. Any information submitted as part of a response to this request for proposal (RFP) may be subject to public disclosure under RSA 91A. In addition, in accordance with RSA 9-F:1, any contract entered into as a result of this RFP will be made accessible to the public online via the website Transparent NH (http://www.nh.gov/transparentnh/). However, business financial information and proprietary information such as trade secrets, business and financial models and forecasts, and proprietary formulas may be exempt from public disclosure under RSA 91-A:5, IV. If you believe any information being submitted in response to this request for proposal, bid or information should be kept confidential as financial or proprietary information; you must specifically identify that information in a letter to the agency, and must mark/stamp each page of the materials that you claim must be exempt from disclosure as “CONFIDENTIAL”. A designation by the Proposer of information it believes exempt does not have the effect of making such information exempt. The Agency will determine the information it believes is properly exempted from disclosure. Marking of the entire Proposal or entire sections of the Proposal (e.g. pricing) as confidential will neither be accepted nor honored. Notwithstanding any provision of this RFP to the contrary, Proposer pricing will be subject to disclosure upon approval of the contract. The Agency will endeavor to maintain the confidentiality of portions of the Proposal that are clearly and properly marked confidential.
If a request is made to the Agency to view portions of a Proposal that the Proposer has properly and clearly marked confidential, the Agency will notify the Proposer of the request and of the date the Agency plans to release the records. By submitting a Proposal, Proposers agree that unless the Proposer obtains a court order, at its sole expense, enjoining the release of the requested information, the Agency may release the requested information on the date specified in the Agency’s notice without any liability to the Proposers.

6. Non-Commitment:
Notwithstanding any other provision of this RFP, this RFP does not commit the Agency to award a Contract. The Agency reserves the right, at its sole discretion, to reject any and all Proposals, or any portions thereof, at any time; to cancel this RFP; and to solicit new Proposals under a new acquisition process.

7. Proposal Preparation Cost:
By submitting a Proposal, a Proposer agrees that in no event shall the Agency be either responsible for or held liable for any costs incurred by a Proposer in the preparation of or in connection with the Proposal, or for Work performed prior to the Effective Date of a resulting Contract.

8. Ethical Requirements:
From the time this RFP is published until a contract is awarded, no bidder shall offer or give, directly or indirectly, any gift, expense reimbursement, or honorarium, as defined by RSA 15-B, to any elected official, public official, public employee, constitutional official, or family member of any such official or employee who will or has selected, evaluated, or awarded an RFP, or similar submission. Any bidder that violates RSA 21-G:38 shall be subject to prosecution for an offense under RSA 640:2. Any bidder who has been convicted of an offense based on conduct in violation of this section, which has not been annulled, or who is subject to a pending criminal charge for such an offense, shall be disqualified from bidding on the RFP, or similar request for submission and every such bidder shall be disqualified from bidding on any RFP or similar request for submission issued by any state agency. A bidder that was disqualified under this section because of a pending criminal charge which is subsequently dismissed, results in an acquittal, or is annulled, may notify the department of administrative services, which shall note that information on the list maintained on the state’s internal intranet system, except in the case of annulment, the information, shall be deleted from the list.

9. Challenges on Form or Process of the RFP:
Any challenges regarding the validity or legality of the form and procedures of this RFP, including but not limited to the evaluation and scoring of Proposals, shall be brought to the attention of the Agency at least ten (10) business days prior to the Proposal Submission Deadline. By submitting a proposal, the Proposer is deemed to have waived any challenges to the agency’s authority to conduct this procurement and the form and procedures of this RFP.

SECTION H: Contract Terms and Award
1. Non-Exclusive Contract:
Any resulting Contract from this RFP will be a non-exclusive Contract. The State reserves the right, at its discretion, to retain other Contractors to provide any of the Services or Deliverables identified under this procurement or make an award by item, part of an item, group of items, or total Proposal.

2. Award:
The solicitation of this RFP shall not commit the NH Department of Corrections to award a contract. If the NH Department of Corrections decides to award a contract as a result of this RFP process, any
award is contingent upon approval of the Contract by Governor and Executive Council of the State of New Hampshire and upon continued appropriation of funding for the contract.

3. **Standard Contract Terms:**

The NH Department of Corrections will require the successful bidder to execute a Not to Exceed Contract using the Standard Terms and Conditions of the State of New Hampshire, which is attached as Appendix C – Standard Terms and Conditions.

The Term of the Contract will be for **three (3)** years from the date of approval. The contract term may be extended by an additional term of **two (2)** years at the sole option of the State, subject to the parties’ prior written agreement on terms and applicable fees for each extended term contingent upon satisfactory Vendor performance, continued funding and Governor and Executive Council approval.

To the extent that a Proposer believes that exceptions to the standard form contract will be necessary for the Proposer to enter into the Agreement, the Proposer should note those issues during the Proposer Inquiry Period. The NH Department of Corrections will review requested exceptions and accept, reject or note that it is open to negotiation of the proposed exception at its sole discretion. If the NH Department of Corrections accepts a Proposer’s exception the Department will, at the conclusion of the inquiry period, provide notice to all potential proposers of the exceptions, which have been accepted and indicate that exception is available to all potential proposers. Any exceptions to the standard form contract that are not raised during the proposer inquiry period are waived. In no event is a Proposer to submit its own standard contract terms and conditions as a replacement for the State’s terms in response to this solicitation.

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SECTION I: Appendixes
1. Appendix A – Transmittal Letter
2. Appendix B – Exception to Terms and Conditions
3. Appendix C – Standard Terms and Conditions
   3.1. Section 1 – Form Number P-37 (version 11/7/19), General Provisions
   3.2. Section 2 – Special Provisions, Exhibit A
   3.3. Section 3 – Scope of Services, Exhibit B
   3.4. Section 4 – Estimated Budget/Method of Payment, Exhibit C
   3.5. Section 5 – Proposal Check Sheet
   3.6. Section 6 – Glossary of Terms
Appendix A – Proposal Transmittal Letter
Proposal Due Date: March 20, 2020

[Insert name of Organization] hereby offers the NH Department of Corrections Inpatient & Outpatient Hospital Services as outlined in RFP NHDOC 20-03-GFMED at the price(s) quoted in the Vendor response in complete accordance with all conditions of this RFP and the Standard Terms and Conditions outlined in Appendix C – Standard Terms and Conditions.

[Insert Name of Contract Signatory of P-37] has reviewed and agreed to be bound by the Proposal and attests to the following:

The Vendor attests to the fact that:
1. The Vendor has not altered any of the language or other provisions contained in the Proposal document.
2. The Proposal is effective for a period of 180 days from the Proposal due date.
3. The Proposal was established without collusion with other parties.
4. The Vendor has read and fully understands this Proposal, Addendums to the RFP, and the terms and conditions including but not limited to the Standard Terms and Conditions in Appendix C – Standard Terms and Conditions, which shall form the basis of any Contract resulting from this RFP.
5. Vendor attests that no new terms and conditions have been added and no existing terms and conditions have been deleted or modified from the NHDOC 20-03-GFMED Inpatient & Outpatient Hospital Services RFP used in the Vendor’s Proposal response.

Vendor’s Official Point of Contact Information

Title of Contract Signatory (above): 

Contract Signatory Telephone Number: 

Contract Signatory E-Mail: 

Address of Contract Signatory: 

Contact Person (if different from Contract Signatory): 

Contact Person E-Mail: 

URL: 

Contract Signatory Signature (above): 

NOTARY PUBLIC/JUSTICE OF THE PEACE

County: State:

On this ___ day of ____________, 20___ personally appeared before me, the above named ________________ , in his/her capacity as an authorized representative of __________________________ , known to me or satisfactorily proven, and took oath that the foregoing is true and accurate to the best of his/her knowledge and belief.

In witness thereof, I hereunto set my hand and official hand and official seal.

(Notary Public/Justice of the Peace) (My Commission Expires)
Appendix B – Exception to Terms and Conditions


Exception to Terms and Conditions

A Responder shall be presumed to be in agreement with the Terms and Conditions of RFP NHDOC 20-03-GFMED Inpatient & Outpatient Hospital Services and the Standard Terms and Conditions in Appendix C – Standard Terms and Conditions unless the Responder takes specific exception to one or more of the conditions on this form. Responders are cautioned that by taking any exception they may be materially deviating from the RFP specifications. If a Responder materially deviates from a RFP specification, its Proposal may be rejected.

A material deviation is an exception to a specification, which 1) affords the Responder taking the exception a competitive advantage over other Responders or 2) gives the State something significantly different than the NH Department of Corrections requested.

**INSTRUCTIONS:** Responders must explicitly list all exceptions to the NH Department of Corrections concerning the Terms and Conditions of RFP NHDOC 20-03-GFMED Inpatient & Outpatient Hospital Services and the Standard Terms and Conditions in Appendix C – Standard Terms and Conditions. Reference the actual number of the Terms and Conditions for which an exception(s) is being taken. If no exceptions exist, state “NONE” specifically on the form below. Whether or not exceptions are taken, the Responder must SIGN this form and submit it as part of organization’s Proposal response. *(Add additional pages if necessary)*.

<table>
<thead>
<tr>
<th>Term &amp; Condition Number</th>
<th>Explanation of Exception</th>
</tr>
</thead>
</table>

*By signing this form, I (Contract Signatory) acknowledges and accepts, without qualification, all Terms and Conditions of RFP NHDOC 20-03-GFMED Inpatient & Outpatient Hospital Services and terms and conditions of the Appendix C – Standard Terms and Conditions and other required documents stated in the RFP except those clearly outlined as exceptions above.*

__________________________
Contract Signatory Signature and Title
Appendix C – Standard Terms and Conditions

Form Number P-37 (version 11/7/19), General Provisions
Special Provisions, Exhibit A
Scope of Services, Exhibit B
Estimated Budget (Cost Proposal)/Method of Payment, Exhibit C
Proposal Check Sheet
Glossary of Terms
AGREEMENT
The State of New Hampshire and the Contractor hereby mutually agree follows:

**GENERAL PROVISIONS**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. IDENTIFICATION.</strong></td>
<td></td>
</tr>
<tr>
<td>1.1 State Agency Name</td>
<td>1.2 State Agency Address</td>
</tr>
<tr>
<td>NH Department of Corrections</td>
<td>105 Pleasant Street, Concord, NH 03301</td>
</tr>
<tr>
<td></td>
<td>P.O. Box 1806, Concord, NH 03302</td>
</tr>
<tr>
<td>1.3 Contractor Name</td>
<td>1.4 Contractor Address</td>
</tr>
<tr>
<td>1.5 Contractor Phone Number</td>
<td>1.6 Account Number</td>
</tr>
<tr>
<td>1.7 Completion Date</td>
<td>1.8 Price Limitation</td>
</tr>
<tr>
<td></td>
<td>December 31, 2022</td>
</tr>
<tr>
<td>1.9 Contracting Officer for State Agency</td>
<td>1.10 State Agency Telephone Number</td>
</tr>
<tr>
<td></td>
<td>603-271-5603</td>
</tr>
<tr>
<td>1.11 Contractor Signature</td>
<td>1.12 Name and Title of Contractor Signatory</td>
</tr>
<tr>
<td>1.13 State Agency Signature</td>
<td>1.14 Name and Title of State Agency Signatory</td>
</tr>
<tr>
<td></td>
<td>Helen E. Hanks, Commissioner</td>
</tr>
<tr>
<td>1.15 Approval by the N.H. Department of Administration, Division of Personnel <em>(if applicable)</em></td>
<td></td>
</tr>
<tr>
<td>By:</td>
<td>Director, On:</td>
</tr>
<tr>
<td>1.16 Approval by the Attorney General (Form, Substance and Execution) <em>(if applicable)</em></td>
<td></td>
</tr>
<tr>
<td>By:</td>
<td>On:</td>
</tr>
<tr>
<td>1.17 Approval by the Governor and Executive Council <em>(if applicable)</em></td>
<td></td>
</tr>
<tr>
<td>G&amp;C Item number:</td>
<td>G&amp;C Meeting Date:</td>
</tr>
</tbody>
</table>

Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.
2. SERVICES TO BE PERFORMED. The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT B which is incorporated herein by reference ("Services").

3. EFFECTIVE DATE/COMPLETION OF SERVICES.
3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.18, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

4. CONDITIONAL NATURE OF AGREEMENT.
Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds affected by any state or federal legislative or executive action that reduces, eliminates or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope for Services provide in EXHIBIT B, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to reduce or terminate the Services under this Agreement immediately upon giving the Contractor notice of such reduction or termination. The State shall not be required to transfer funds from any other account or source to the Account identified in block 1.6 in the event funds in the Account are reduced or unavailable.

5. CONTRACT PRICE/PRICE LIMITATION/PAYMENT.
5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT C which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.
6.1 In connection with the performance of the Services, the Contractor shall comply with all applicable statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal employment opportunity laws. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 The Contractor agrees to permit the State or United States access to any of the Contractor’s books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

7. PERSONNEL.
7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State’s representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer’s decision shall be final for the State.
8. EVENT OF DEFAULT/REMEDIES.
8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder (“Event of Default”):
8.1.1 failure to perform the Services satisfactorily or on schedule;
8.1.2 failure to submit any report required hereunder; and/or
8.1.3 failure to perform any other covenant, term or condition of this Agreement.
8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:
8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;
8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;
8.2.3 give the Contractor a written notice specifying the Event of Default and set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or
8.2.4 give the Contractor a written notice specifying the Event of Default, treat the Agreement as breached, terminate the Agreement and pursue any of its remedies at law or in equity, or both.
8.3 No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

9. TERMINATION.
9.1 Notwithstanding paragraph 8, the State may, at its sole discretion, terminate the Agreement for any reason, in whole or in part, by thirty (30) days written notice to the Contractor that the State is exercising its option to terminate the Agreement.
9.2 In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall, at the State’s discretion, deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report (“Termination Report”) describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT B. In addition, at the State’s discretion, the Contractor shall, within 15 days notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement.

10. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.
10.1 As used in the Agreement, the word “data” shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.
10.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.
10.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

11. CONTRACTOR’S RELATION TO THE STATE. In the performance of the Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers’ compensation or other emoluments provided by the State to its employees.

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.
12.1 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and a written consent of the State. For purposes of this paragraph, a Change of Control shall constitute assignment. “Change of Control” means (a) merger, consolidation, or a transaction or series of related transactions in which a third party, together with its affiliates, becomes the direct or indirect owner of fifty percent (50%) or more of the voting shares or similar equity interests, or combined voting power of the Contractor, or (b) the sale of all or substantially all of the assets of the Contractor.
12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. The State is entitled to copies of all subcontracts and assignment agreements and shall not be bound by any provisions contained in a subcontract or an assignment agreement to which it is not a party.

13. INDEMNIFICATION. Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omission of the
Contractor, or subcontractors, including but not limited to the negligence, reckless or intentional conduct. The State shall not be liable for any costs incurred by the Contractor arising under this paragraph 13. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of this sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

14. INSURANCE.
14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than $1,000,000 per occurrence and $2,000,000 aggregate or excess; and
14.1.2 special cause of loss coverage form covering all property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the property.
14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

15. WORKERS’ COMPENSATION.
15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A (“Workers’ Compensation”).
15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers’ Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. The Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers’ Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers’ Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers’ Compensation laws in connection with the performance of the Services under this Agreement.

16. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

17. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no such approval is required under this circumstances pursuant to State law, rule or policy.

18. CHOICE OF LAW AND FORUM. This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

19. CONFLICTING TERMS. In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

22. SPECIAL PROVISIONS. Additional or modifying provisions set forth in the attached EXHIBIT A are incorporated herein by reference.

23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings with respect to the subject matter hereto.

Contractor Initials ____________
Date ___________
Special Provisions, Exhibit A

1. FORM NUMBER P-37 (version 7/11/19)
   “To modify the Form P-37, General Provisions, Section 14. Insurance, paragraph 14.3, by adding after the last sentence of the clause to read: “Cancellation notice by the Insurer to the Certificate Holder will be delivered in accordance with the policy provisions.”

The remainder of this page is intentionally blank.
Scope of Services, Exhibit B

1. **Purpose:**
   The purpose of this Contract is to seek Inpatient & Outpatient Hospital Services and professional medical services for the Concord and Southern area for the patient population of the NH Department of Corrections. This Contract is designed to comply with RSA 623-C:2 as amended effective July 1, 2013.

2. **Performance Period:**
   Contract(s) awarded by the Governor and Executive Council (G&C) on behalf of the NH Department of Corrections (NHDOC) as a result of this RFP is anticipated to be effective for the period beginning July 1, 2020, or upon approval of the Governor and Executive Council, whichever is later through June 30, 2023. The Department may extend contracted services for one (1) additional period of up to two (2) years, contingent upon satisfactory Contractor performance, continued appropriation and G&C approval.

3. **Resident Population Served:**
   Resident population served from the following facilities are marked with an “X” below:

<table>
<thead>
<tr>
<th>Concord Area Correctional Facilities</th>
<th>Southern Area Correctional Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>X NH State Prison for Men – (NHSP-M) 281 North State Street</td>
<td>X Calumet Transitional Housing Unit 126 Lowell Street</td>
</tr>
<tr>
<td>X Secure Psychiatric Unit (SPU)/Residential Treatment Unit (RTU) 281 North State Street</td>
<td></td>
</tr>
<tr>
<td>X North End Transitional Housing Unit 1 Perimeter Road</td>
<td></td>
</tr>
<tr>
<td>X Concord Transitional Work Center 275 North State Street</td>
<td></td>
</tr>
<tr>
<td>X NH Correctional Facility for Women – (NHCF-W) 42 Perimeter Road</td>
<td></td>
</tr>
<tr>
<td>X Shea Farm Housing Unit 60 Iron Works Road</td>
<td></td>
</tr>
</tbody>
</table>

4. **Average Resident Population, Medical Transports and Hospital Visits for SFY 2019:**

<table>
<thead>
<tr>
<th>Average Resident Population</th>
<th>Medical Transports for SFY 2019</th>
<th>Hospital Visits for SFY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>2474</td>
<td>2916</td>
<td>Emergency Room 450 Inpatient Stay 139</td>
</tr>
</tbody>
</table>

5. **Inpatient Hospital Services:**
   5.1. The NH Department of Corrections is seeking inpatient services to be reimbursed on a Diagnosis Related Group (DRG) methodology. Specifically, the Contractor is asked to acknowledge the payment methodology and provide a DRG coefficient for evaluation. Such payment methodology will allow recognition of case mix and still provide an all-inclusive rate for inpatient hospital services.

---

2 On rare occasions patients may be brought from the NH Northern Correctional Facility, Berlin, NH to receive services at the Contractor’ facility and in such circumstances all contract conditions shall apply.

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Promoting Public Safety through Integrity, Respect, Professionalism, Collaboration and Accountability

Division of Medical & Forensic Services

Contractor Initials
Date
5.2. In developing the DRG rate, the Contractor should review the provisions of amended RSA 623-C:2 enacted as of July 1, 2013 requiring hospitals providing inpatient services to this population to accept fees not greater than one hundred ten percent (110%) of the Medicare allowable rate.

5.3. **Please Note:** The NH Department of Corrections requests the Contractor to comment on the competitiveness of the DRG coefficient provided as it relates to RSA 623-C:2, I and II, private commercial payment and other public sources of third party payment.

5.4. Medicaid covered services provided by a residential care and/or health facility licensed pursuant to RSA 151 shall be paid at the NH Medicaid rate. In addition, please see RSA 623C:2(I)h. The NH Department of Corrections will assist patients in applying for this reimbursement as allowed by rules and regulations of the NH Medicaid program in effect on the date of service.

5.5. Observation stays shall be defined as a stay of less than twenty-four (24) hours. Any hospital stay of 24 hours or greater, whether coded as observation or inpatient admission services will be reimbursed at the DRG rate for inpatient stay not to exceed 110% of the Medicare allowable rate and will be billed to NH Department of Corrections for payment based on this methodology.

6. **Emergency and Urgent Care Services:**

6.1. **Please Note:** Indicate the Contractor’s acceptable reimbursement level for Emergency and Urgent Care Services as a percentage discount off the hospital billed charge. At a minimum, the Contractor shall adhere to the requirements of the amended RSA 623-C:2 requiring that the hospital rate does not exceed 110% of the Medicare allowable amount for these services. The Contractor shall indicate the availability of an Urgent Care facility and/or service as part of the Emergency Services requirement. The Contractor will follow industry standard billing practices if any of these services rendered (e.g. emergency or urgent care services) revert to an inpatient stay as these services would then be billed as part of the overall inpatient stay.

6.2. **Please Note:** The NH Department of Corrections requests the Contractor to comment on the competitiveness of the discount provided as it relates to the requirements of the amended RSA 623-C:2 effective July 1, 2013, private commercial payment and other public sources of third party payment and indicate the Contractor’s availability of an Urgent Care facility and/or service as part of the Emergency Services requirement.

7. **Outpatient Hospital Services:**

7.1. The NH Department of Corrections is seeking proposals for outpatient services to be reimbursed as a percentage of the January 2020 relevant NH Medicare Fee Schedule and indicate the percentage (%) multiplier, below. The following NH Medicare Fee Schedules are to be used:

<table>
<thead>
<tr>
<th>NH January 2020 Medicare Fee Schedule</th>
<th>Percentage (%) Multiplier</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient Laboratory</td>
<td></td>
</tr>
<tr>
<td>Outpatient Radiology</td>
<td></td>
</tr>
<tr>
<td>National Level II Codes (HCPCS)</td>
<td></td>
</tr>
</tbody>
</table>

7.2. **Please Note:** The NH Department of Corrections requests the Contractor to comment on the competitiveness of the discount provided as it relates to the requirements of the amended RSA 623-C:2 effective July 1, 2013, private commercial payment and other public sources of third party payment and indicate the Contractor’s availability of an Urgent Care facility and/or service as part of the Emergency Services requirement.
party payment.

7.3. **Please Note:** All other outpatient services not covered by the NH Medicare Fee Schedules above shall be paid as a percentage of the facility charge structure. Indicate the percentage discount off the hospital’s billed charge.

7.3.1. **Please Note:** The NH Department of Corrections requests the Contractor to comment on the competitiveness of the discount provided as it relates to the requirements of the amended **RSA 623-C:2** effective July 1, 2013, private commercial payment and other public sources of third party payment.

7.3.2. **Please Note:** The Contractor shall provide a complete list of all affiliated facilities that routinely provide services not covered under the Contractor’s tax ID number. The Contractor shall provide written confirmation that the affiliated facilities will accept the contracted rate or will be reimbursed under the provisions of **RSA 623-C:2**.

7.3.3. **Please Note:** The Contractor shall provide a complete list of all services, procedures provided by affiliated facilities not covered under the contracted reimbursement rate.

8. **Rate Adjustments:**

8.1. The NH Department of Corrections requests a three-year rate proposal and agreement because of the need to properly appropriate funds over the next biennium. If the Contractor proposes an annual adjustment to the rates, please indicate what the adjustment will be and the rationale for such adjustment.

8.2. The NH Department of Corrections will review the Contractor’s request for rate adjustment using hospital reimbursement rates by the most recently published Consumer Price Index by the Bureau of Labor Statistics, Boston-Cambridge-Newton, MA-NH/Northeast Region. The adjustment request shall not violate the intent of **RSA 623-C:2**.

8.3. **Please Note:** During the term of the agreement with any selected Contractor, the NH Department of Corrections will require by Agreement that the Contractor provide written notification of any annual rate increases. Any rate adjustments may require written agreement and/or possible contract amendment from the NH Department of Corrections prior to going into effect.

8.4. If it is necessary to increase the price limitation of the Contract this provision shall require Governor and Executive Council approval.

9. **Hospital Claim Processing:**

9.1. **Please Note:** The NH Department of Corrections lacks electronic claims system capacity. For Hospitals Services, the NH Department of Corrections will require the Contractor to invoice the discounted amount of services rendered to patients. Claims are to be provided in the industry standard format (CMS 1500, UB-04) but should indicate the amount expected to be reimbursed. For inpatient admissions, the submitted UB-04 shall reflect the DRG and DRG rate expected for reimbursement. The Contractor is asked in this section to describe in detail the method by which it will address this requires and provide a sample format of the methodology. In addition, the Contractor should be aware of the requirements of **RSA 623-C:2(I)g**.

9.2. All invoices shall clearly reflect if the patient’s status is observation, emergency room, inpatient, or outpatient.
10. Physician Services:
10.1. The NH Department of Corrections seeks to include professional medical services. In particular, it seeks to access services for employed physicians to be reimbursed at a discounted level. The Contractor should indicate its willingness to provide discounted professional services for its employed physicians and provide the following:
10.1.1. Listing of the employed physicians and relevant specialty.
10.1.2. Level of reimbursement expressed as a percentage of the January 2020 NH Medicare Physician Fee Schedule not to exceed 110% of Medicare.
10.2. Please Note: The NH Department of Corrections requests the Contractor to comment on the competitiveness of the discount as it relates to billed charges, commercial third party payments and other public program third party payer reimbursements (i.e. Medicaid, Veteran Administration, etc.).

11. Physician Services Claims Processing:
11.1. The Contractor should validate the Physician Service claims will be provided to the NH Department of Corrections in a timely manner and consistent with the industry format (CMS 1500). Claims for Physician Services will be processed by the NH Department of corrections by applying the negotiated percentage of the January 2020 NH Medicare Fee Schedule to the services, regardless of amount billed.
11.2. Please Note: The NH Department of Corrections requests that the Contractor invoice at 110% of Medicare rate for employed Physician Services. No payments of services rendered under this methodology will exceed the 110% Medicare amount.

12. Other Services at Discounted Rates:
12.1. The NH Department of Corrections is interested in access to other necessary services that the Contractor may be willing to provide at a discounted rate under the one hundred twenty-five percent (125%) of Medicare rate.
12.2. Please Note: The Contractor shall indicate in this sections if any other such services are available. Items of interest include but not limited to on-campus (NH Department of Corrections facilities) rehabilitation services: Physical Therapy (PT), Occupational Therapy (OT), Speech Therapy (ST) and Respiratory Therapy (RT), Oncology, Radiation Therapy, chemotherapy, or alternative to hospital based rehabilitation services.
12.3. Please Note: For inpatient rehabilitation services, Contractors shall provide pricing based on Medicare’s Case Mix Groups (CMG) utilizing the payment on account factor (PAF or % of charge) for January 2020. The NH Department of Corrections is seeking a rate not to exceed 110% of Medicare per RSA 623-C:2.

13. Auditing:
13.1. The NH Department of Corrections reserves the right to retrospectively audit any and all claims submitted for conformance to the contracted rate and medically appropriate claim designation, i.e. inpatient, outpatient, emergency or observation status. Such auditing function may be performed by employees of the NH Department of Corrections, the NH Department of Administrative Services, the Department of Health and Human Services or a contracted service.
13.2. The Contractor shall be expected to provide itemized copies of invoices and access to clinical records substantiating billing status.
13.3. The Contractor should be able to defend its pricing methodology and properly detail any internal process controls for ensuring accurate pricing of claims RSA 623-C:2(g).
14. General Service Provisions:
   14.1. Notification of Required Services: The NH Department of Corrections shall contact the Contractor when service is needed. A list of NH Department of Corrections key personnel by site and contact information will be provided to the Contractor.
   14.2. Rules and Regulations: The Contractor agrees to comply with all Policies, Procedure and Directives (PPD’s) of the NH Department of Corrections. The Contractor shall adhere to the Department’s Administrative Rules, Conduct and Confidentiality of Information policies.
   14.3. Additional Facilities: Upon agreement of both parties, additional facilities belonging or associated to the NH Department of Corrections may be added to the Contract.
   14.4. Licenses, Credentials and Certificates: The Contractor shall ensure NH State licensed professionals provide the services required. The Contractor and its staff shall possess and maintain the credentials, licenses and/or certificates required by law and regulations to provide such services for the life of the Contract and any renewals thereof.

15. Administrative Rules, Policies, Regulations and Policy and Procedure Directives:
   Contractor shall comply with any applicable NH Department of Corrections Administrative Rules, Policies, Regulations and Policy and Procedure Directives (PPD’s) to include but not limited to PPD 5.08: Staff Personal Property Permitted In and Restricted from Prison Facilities. Additional information can be located as a separate link: http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm.

16. Prison Rape Elimination Act (PREA) of 2003:
   Contractor shall comply with the Prison Rape Elimination Act (PREA) of 2003 (Federal Law 42 U.S.C.15601 et. seq.), with all applicable Federal PREA standards, and with all State policies and standards related to PREA for preventing, detecting, monitoring, investigating, and eradicating any form of sexual abuse within facilities/programs/offices owned, operated, or contracted. Contractor acknowledges that, in addition to self-monitoring requirements, the State will conduct compliance monitoring of PREA standards, which may require an outside independent audit. Additional information can be located as a separate link: http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm.

17. Protected Health Information (PHI):
   Contractor shall safeguard any and all PHI according to the terms of the Health Information Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments.

   In performing its obligations under the Contract, the Contractor may gain access to information of the patients, including confidential information or Patient Health Information (PHI). The Contractor shall not use information developed or obtained during the performance of, or acquired or developed by reason of the Contract, except as is directly connected to and necessary for the Contractor’s performance under the Contract.

   The Contractor agrees to maintain the confidentiality of and to protect from unauthorized use, disclosure, publication, reproduction and all information of the patient that becomes available to the Contractor in connection with its performance under the Contract. In the event of unauthorized use of
or disclosure of the patient’s information, the Contractor shall immediately notify the NH Department of Corrections.

All financial, statistical, personnel and/or technical data supplied by NH Department of Corrections to the Contractor are confidential. The Contractor is required to use reasonable care to protect the confidentiality of such data. Any use, sale or offering of this data in any form by the Contractor, or any individual or entity in the Contractor’s charge or employ, will be considered a violation of this Contract and may result in contract termination. In addition, such conduct may be reported to the State Attorney General for possible criminal prosecution.

18. Change of Ownership:
In the event that the Contractor should change ownership for any reason whatsoever, the NH Department of Corrections shall have the option of continuing under the Contract with the Contractor or its successors or assigns for the full remaining term of the Contract, continuing under the Contract with the Contractor or, its successors or, assigns for such period of time as determined necessary by the NH Department of Corrections, or terminating the Contract.

19. Contractor Designated Liaison:
Contractor shall designate a representative to act as a liaison between the Contractor and the Department of Corrections for the duration of the Contract and any renewals thereof. The Contractor shall, within five (5) days after the award of the Contract: submit a written identification and notification to NH Department of Corrections of the name, title, address, telephone & fax number, of its organization as a duly authorized representative to whom all correspondence, official notices and requests related to the Contractor’s performance under the Contract.

19.1. Any written notice to the Contractor shall be deemed sufficient when deposited in the U.S. mail, postage prepaid and addressed to the person designated by the Contractor under this paragraph.

19.2. The Contractor shall have the right to change or substitute the name of the individual described above as deemed necessary provided that any such change is not effective until the Commissioner of the NH Department of Corrections actually receives notice of this change.

19.3. Changes to the named Liaison by the Contractor must be made in writing and forwarded to NH Department of Corrections, Director of Medical & Forensic Services, or designee, P.O. Box 1806, Concord, NH 03302.

20. Contractor Liaison’s Responsibilities:
Contractor’s designated liaison shall be responsible for:
20.1. Representing the Contractor on all matters pertaining to the Contract and any renewals thereof. Such a representative shall be authorized and empowered to represent the Contractor regarding all aspects of the Contract and any renewals thereof.
20.2. Monitoring the Contractor’s compliance with the terms of the Contract and any renewals thereof.
20.3. Receiving and responding to all inquiries and requests made by NH Department of Corrections in the time frames and format specified by NH Department of Corrections in this RFP and in the Contract and any renewals thereof; and
20.4. Meeting with representatives of NH Department of Corrections on a periodic or as-needed basis to resolve issues, which may arise.
21. NH Department of Corrections Contract Liaison Responsibilities:

NH Department of Corrections’ Commissioner, or designee, shall act as liaison between the Contractor and the NH Department of Corrections for the duration of the Contract and any renewals thereof. The NH Department of Corrections reserves the right to change its representative, at its sole discretion, during the term of the Contract, and shall provide the Contractor with written notice of such change. The NH Department of Corrections representative shall be responsible for:

21.1. Representing the NH Department of Corrections on all matters pertaining to the Contract. The representative shall be authorized and empowered to represent the NH Department of Corrections regarding all aspects of the Contract, subject to the approval of the Governor and Executive Council of the State of New Hampshire, where needed.
21.2. Monitoring compliance with the terms of the Contract.
21.3. Responding to all inquiries and requests related to the Contract made by the Contractor, under the terms and in the time frames specified by the Contract.
21.4. Meeting with the Contractor’s representative on a periodic or as-needed basis and resolving issues, which arise.
21.5. Informing the Contractor of any discretionary action taken by the NH Department of Corrections pursuant to the provision of the Contract.
21.6. Ensuring that a minimum of two (2) NH Department of Corrections security officers shall transport and be present during a patient’s evaluation and treatment at the Contractor’s facility.
21.7. Providing the Contractor with a list of key personnel and contact information.

22. Reporting Requirements:

22.1. The Contractor shall provide, at a minimum, quarterly reports on outpatient utilization by the Department’s facility and inpatient utilization by DRG. Descriptions of reports or sample reports should be provided as an attachment to the RFP response.
22.2. The Contractor shall provide any and all reports as requested on an as needed basis according to a schedule and format to be determined by the NH Department of Corrections including but not limited to:
   22.2.1. Quarterly summary of the cost by product line by DRG for inpatient and product line by primary diagnosis for outpatient services;
   22.2.2. Length of stay information;
   22.2.3. Breakdowns of inpatient and outpatient billings by Current Procedural Terminology (CPT) and Healthcare common Procedure Coding System (HCPCS) codes;
   22.2.4. Quarterly summary of Charges to Reimbursement reporting by inpatient and outpatient services;
   22.2.5. Quarterly summary of Inpatient Case by Department (Cost Centers) and Outpatient Cases by Department (Cost Centers); and
   22.2.6. Billings are to be provided in a format consistent with Medicare and Medicaid billing on industry standard form (CMS 1500, UB-04).
22.3. The Contractor shall provide proof of any and all permits to perform inpatient and outpatient hospital/medical services as required by authorities having local, state and/or federal jurisdiction at any time during the life of the Contract and any renewals thereof.
22.4. All material developed or acquired by the Contractor, as a result of work under the Contract shall become the property of the State of New Hampshire. No material or reports prepared by the Contractor shall be released to the public without the prior written consent of the NH Department of Corrections.
22.5. Any information and/or reports requested by the NH Department of Corrections forwarded to
NH Department of Corrections, Director of Medical & Forensic Services, or designee, P.O.
Box 1806, Concord, NH 03302.

23. Performance Evaluation:
NH Department of Corrections shall, at its sole discretion monitor and evaluate the Contractor’s
compliance with the Terms and Conditions and adherence to the Scope of Services of the Contract for
the life of the Contract and any renewals thereof.
23.1. The NH Department of Corrections may request a meeting with the Contractor at a minimum of
twice a year to assess the performance of the Contractor relative to the Contractor’s compliance
with the Contract as set forth in the approved Contract.
23.2. The NH Department of Corrections shall determine the acceptability of any reports submitted
by the Contractor. If they are not deemed acceptable, NH Department of Corrections shall
notify the Contractor and explain the deficiencies.
23.3. Perform periodic programmatic and financial review of the Contractor’s performance or
responsibilities. This may include, but limited to, on-site inspections audits conducted by the
NH Department of Corrections or its agents of the Contractor’s records. The audits may, at a
minimum, include a review of the following:
   23.3.1. Claims and financial administration;
   23.3.2. Program operation;
   23.3.3. Financial reports;
   23.3.4. Staff qualifications;
   23.3.5. Clinical protocols; and
   23.3.6. Individual medical records.
23.4. Inform the Contractor of any dissatisfaction with the Contractor’s performance and include
requirements for corrective action.
23.5. The Contractor understands and agrees that the NH Department of Corrections reserves the
right to amend the claims process for Hospital and Professional Services as outlined in Exhibit
B. Scope of Services. The NH Department of Corrections continues to work on alternative
mechanisms to expedite the claims process and provide useful real time data to NH Department
of Corrections. Any such change to the claims process will be provided with written notice in
advance of the required change.
   23.5.1. Patient specific discharge summaries shall be completed and provided within twenty-
four (24) hours of discharge to the NH Department of Corrections for one-hundred
percent (100%) of patients served;
   23.5.2. For patients released from an emergency room or urgent care evaluation, a nurse-to-
nurse report between the vendor and the appropriate NHDOC Nurse shall be completed
and provided for 100% of patients served; and
   23.5.3. For patients being released from an inpatient or observation stay, there shall be a
provider-to-provider and nurse-to-nurse report prior to discharge back to a NHDOC
facility for 100% of patients seen.

24. Performance Measures:
NH Department of Corrections shall, at its sole discretion:
24.1. Inform the Contractor of any dissatisfaction with the Contractor’s performance and include
requirements for corrective action.
24.2. Terminate the Contract as permitted by law, if the NH Department of Corrections determines that the Contractor:
   24.2.1. Does not comply with the terms of the Contract.
   24.2.2. Has lost or has been notified of intention to lose their certification/licensure/permits.
   24.2.3. The Contractor shall fully coordinate the performance activities of the Contract with those of the NH Department of Corrections. As the work of the Contractor progresses, advice and information on matters covered by the Contract shall be made available by the Contractor to the NH Department of Corrections as requested by the Department throughout the effective period of the Contract.
   24.2.4. All other expectations outlined in this Contract with regard to rates, claims processing, liaison expectations, reporting requirements, licensure/certification and types of services.

25. Bankruptcy or Insolvency Proceeding Notifications:
   25.1. Upon filing for any bankruptcy or insolvency proceeding by or against the Contractor, whether voluntary or involuntary, or upon the appointment of a receiver, trustee, or assignee for the benefit of creditors, the Contractor must notify the NH Department of Corrections immediately.
   25.2. Upon learning of the actions herein identified, the NH Department of Corrections reserves the right at its sole discretion to either cancel the Contract in whole or in part, or, re-affirm the Contract in whole or in part.

26. Embodiment of the Contract:
   In the event of a conflict in language between the documents referenced below, the provisions and requirements set forth and/or referenced in the negotiated document noted in 26.1.1. shall govern. The NH Department of Corrections reserves the right to clarify any contractual relationship in writing with the concurrence of the Contractor, and such written clarification shall govern in case of conflict with the applicable requirements stated in the RFP or the Proposer’s Proposal and/or the result of a Contract.
   26.1. Order of Precedence:
      26.1.1. State of NH Department of Corrections Contract Agreement NHDOC 20-03-GFMED.
      26.1.2. State of NH Department of Corrections RFP NHDOC 20-03-GFMED.
      26.1.3. Proposer’s Response to RFP NHDOC 20-03-GFMED.

27. Cancellation of Contract:
   NH Department of Corrections may cancel the Contract at any time for breach of contractual obligations by providing the Contractor with a written notice of such cancellation. Should the NH Department of Corrections exercise its right to cancel the Contract, the cancellation shall become effective on the date as specified in the Notice of Cancellation sent to the Contractor.
   27.1. The NH Department of Corrections reserves the right to cancel this Contract for the convenience of the State with no penalties by giving the Contractor sixty (60) days’ notice of said cancellation.
   27.2. The NH Department of Corrections reserves the right to terminate the Contract without penalty or recourse by giving the Contractor a written notice of such termination at least sixty (60) days prior to the effective termination date.
28. Contractor Transition:
NH Department of Corrections, at its discretion, in any Contract or renewals thereof, resulting from this RFP, may require the Contractor to work cooperatively with any predecessor and/or successor Contractor to assure the orderly and uninterrupted transition from one Contractor to another.

29. Audit Requirement:
Contractor agrees to comply with any recommendations arising from periodic audits on the performance of the Contract, providing that the recommendations do not require unreasonable hardship, which would normally affect the value of the Contract.

30. Notification to the Contractor:
NH Department of Corrections shall be responsible for notifying the Contractor of any policy or procedural changes affecting the contracted services at least thirty (30) days before the implementation of such policy or procedure. The Contractor shall implement the changes on the date specified by the Department.

31. Other Contractual Documents Required by the NH Department of Corrections:
Form Number P-37 (version 11/7/19); Certificate of Good Standing; Certificates of Authority/Vote; Certificate of Insurance; Administrative Rules, Rules of Conduct, Confidentiality of Information Agreements; Health Insurance Portability and Accountability Act (HIPAA) Form, PREA Acknowledgement Form and ALT-W9 Registration shall be applicable for the requested contracted activities and are located as a separate link on the NH Department of Corrections website: [http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm](http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm) with instructions found in the Proposal Check Sheet.

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Estimated Budget/Method of Payment, Exhibit C

1. Method of Payment:

1.1. Services are to be invoiced monthly commencing thirty (30) days after the start of service. Due dates for monthly invoices will be the 15th following the month in which services are provided.

1.2. Invoices shall be sent to the NH Department of Corrections, Director of Medical & Forensic Services, P.O. Box 1806, Concord, NH 03302, or designee, for approval. The “Bill To” address on the invoice shall be: NH Department of Corrections, Director of Medical & Forensic Services, P.O. Box 1806, Concord, NH 03302.

1.3. The NH Department of Corrections may adjust the payment amount identified on a Contractor’s monthly invoice. The NH Department of Corrections shall suspend payment to an invoice if an invoice is not submitted in accordance with the instructions established by the NH Department of Corrections.

1.4. The NH Department of Corrections Bureau of Financial Services may issue payment to the Contractor within thirty (30) days of receipt of an approved invoice. Invoices shall be itemized by facility using industry standard forms (CMS 1500 and UB-04) and shall contain the following information:

1.4.1. Dates of Service (DOS);

1.4.2. NHDOC title and billing address;

1.4.3. Patient name, patient identification (ID) number, patient account number, date of birth (DOB), and all other applicable fields per the industry standard form;

1.4.4. Itemized service/product total charge per service/product type;

1.4.5. NH Department of Corrections prefers the Contractor to provide the associated adjustments per RSA 623-C:2 on claims submitted; and

1.4.6. Patient’s Status: Observation, Emergency Room, Inpatient or Outpatient.

1.5. Payment shall be made to the name and address identified in the Contract as the "Contractor" unless: (a) the Contractor has authorized a different name and mailing address in writing or; (b) authorized a different name and mailing address in an official State of New Hampshire Contractor Registration Application Form; or (c) unless a court of law specifies otherwise. The Contractor shall not invoice federal tax. The State’s tax-exempt certificate number is 026000618W.

1.6. The Contractor’s shall follow the State’s Fiscal Year Calendar for budgeting purpose. Original Contract Period shall commence on July 1, 2020.

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Proposal Check Sheet

Contractors shall submit one (1) original hard copy, labeled "Original", two (2) copies of the original labeled "Copy" and one (1) thumb drive of the original completed proposal in response to this RFP. The originals shall be signed in blue ink. These originals must be typed or clearly printed in black ink. Proposals that are not completed or unsigned shall be considered “technically non-compliant.” Any proposal(s) received after the deadline shall not be considered. Proposals must be sealed or they shall not be accepted. Proposals shall not be stapled or three-hole punched. Use only binder clips to secure and separate sections to the Technical and Cost Proposal. Contract Signatory shall initial and date the bottom right hand corner of each page to the Appendix C documents and any other required documents for their Proposal.

If interested in submitting a proposal for these services, please fully complete, execute and return the following documentation in the sequence below:

Part A (sealed in separate envelope)
- RFP Cover Sheet
- Table of Contents
- Transmittal Letter (refer to SECTION I: Appendixes, A)
- Exceptions to Terms and Conditions(s) Letter (refer to SECTION I: Appendixes, B)
- Non-Disclosure of Right to Know of Information Letter to State Agency (refer to SECTION G: Terms and Conditions Related to the RFP Process, Paragraph 5. Public Disclosure);
- Technical Proposal Cover Sheet, labeled “Technical Proposal”
- Technical Proposal Contents
  - Executive Summary
  - Organizational Capability
  - Key Personnel (Organizational Chart) (redact all personal information, use Organization’s business address and contact information)
  - Mission Statement
  - Financial Statements
  - Subcontractor Letter(s) of Commitment, (if applicable)
  - Licenses/Certifications
  - Sample Reports

Part B (sealed in separate envelope)
- Standard Terms and Conditions Cover Sheet, labeled “Standard Terms and Conditions”
  - Standard Terms and Conditions Contents (refer to SECTION I: Appendixes, C)
- General Provisions, FORM NUMBER P-37 (version 11/7/19) p. 29-32
  - Please fully execute: Items 1.11, and 1.12; and
  - Note: THE NAME OF THE CONTRACTOR’S ORGANIZATION SHALL BE WRITTEN ON THE P-37 AS FOUND ON THE CERTIFICATE OF GOOD STANDING (ISSUED BY THE NH SECRETARY OF STATES OFFICE) TO INCLUDE D/B/A NAMES OF THE ORGANIZATION, IF APPLICABLE.
- Scope of Services, Exhibit B, p. 34-43.
- Estimated Budget/Method of Payment, Exhibit C
  - Method of Payment, p. 44.
- Proposal Check Sheet, p. 45-47.
- Glossary of Terms, p. 48-49.
- Certificate of Good Standing (COGS) (NOT INCLUDED HEREIN).
In order to obtain a Certificate, a potential Contractor can contact, in writing, the NH Secretary of State’s Office, Corporate Division, State House Annex, Room 317, 25 Capital Street, 3rd Floor, Concord, NH 03301; call the Corporate Division at 603-271-3246; visit the Secretary of State’s Office in person; or utilize their website http://sos.nh.gov/corp_div.aspx. Requests must include the complete name of the company as it is registered with the Office of the Secretary of State and a check for (CALL FOR FEES) made payable to the State of New Hampshire. **If you wish to visit the Secretary of State’s Office in person and pay in cash, you must bring exact change for each Certificate of Good Standing document(s) and or filings requested, or you may use either Visa or MasterCard as a method of payment.** In the event that you need to expedite the request, you may fax the request to (603) 271-3246 (CALL FOR FEES) for the expedited service.

- **Certificate of Authority/Vote (COA/COV) (NOT INCLUDED HEREIN).**
  The COA/COV authorizes, by position, a representative(s) of the organization to enter into an agreement/amendment with the State of NH and ensures that the person signing the agreement/amendment with the State of NH is authorized as of the date he/she signed.

  The officer’s (contract signatory) signature should either be notarized or include a corporate seal that confirms the title of the person(s) authorized to sign the agreement. Preferably, the date of the officer signing the COA/COV must be on the date that the agreement/amendment and other required documents is signed attesting that the officer on behalf of the organization had authority to enter into agreement/amendment with the State of NH when it was signed.

  Use the following link, execute and submit only the one that applies to your organization:


  - 2015 Certificate of Authority Vote #1 - Corp or LLC (Non-specific);
  - 2015 Certificate of Authority Vote #2 - Corp or LLC (Specific);
  - 2015 Certificate of Authority Vote #3 - Corp General or Limited Partnership;
  - 2015 Certificate of Authority Vote #4 - Limited Partnership or LLC with Manager;
  - 2015 Certificate of Authority Vote #5 - Sole Proprietor; and
  - Limited Liability Company (LLC) with Member or Manager.

  **Note:** THE NAME OF THE CONTRACTOR’S ORGANIZATION MUST BE WRITTEN ON THE CERTIFICATE OF AUTHORITY/VOTE AS FOUND ON THE CERTIFICATE OF GOOD STANDING TO INCLUDE D/B/A NAMES OF THE ORGANIZATION, IF APPLICABLE.

- Other sources of authority (if not using the above generic forms):
  - **Source of Authority (must come from the governing body, either)**
    1. A **majority voted** at a meeting; or
    2. The body provided **unanimous consent in writing**; or
    3. The organization’s **policy or governing document**.
  - **Source of Authority (in effect on the day the agreement/amendment was signed)**
    1. Authority was **granted the same day** as the day the agreement/amendment was signed.
    2. Authority was **granted after** the day the agreement/amendment was signed and the governing body ratifies and accepts the earlier execution.
    3. Authority was **granted prior** to the day the agreement/amendment was signed and it has not been amended or repealed as of the day the agreement/amendment was signed.
Certificate of Insurance (COI) (NOT INCLUDED HEREIN). The Contractor must contact their Insurance provider and follow their process to get a certificate pursuant to the General Provisions of FORM NUMBER P-37 (version 11/7/19), Paragraph 14 and 15. The NH Department of Corrections, P.O. Box 1806, Concord, NH, 03302-1806 must be listed at the Certificate Holder on the document.

- **Note:** THE NAME OF THE CONTRACTOR’S ORGANIZATION TO INCLUDE DBA NAMES, IF APPLICABLE, AND ADDRESS AS FOUND ON THE CERTIFICATE OF GOOD STANDING, MUST BE IDENTIFIED IN THE INSURED SECTION OF THE CERTIFICATE OF LIABILITY INSURANCE DOCUMENT.
- **Note:** THE NH DEPARTMENT OF CORRECTIONS. P.O. BOX 1806, CONCORD, NH 03302 MUST BE LISTED AS THE CERTIFICATE HOLDER.
- **Note:** THE STATE OF NH, NH DEPARTMENT OF CORRECTIONS MUST BE LISTED AS ADDITIONALLY INSURED.

Shall provide the minimum General Liability coverage to be no less than $1,000,000.00 per each occurrence and $2,000,000.00 general aggregate for the life of the Contract and any renewals thereof.

Shall provide Workers’ Compensation and Employer’s Liability insurance coverage for the life of the Contract and any renewals thereof.

Shall provide Umbrella Liability insurance coverage for the life of the Contract and any renewals thereof.

Shall provide proof and identify limits and expiration dates of General Liability, Excess Umbrella Liability, Workers’ Compensation and Employer’s Liability, and Professional Liability coverage, and Malpractice Liability and Business Owners Policy (if applicable).

- Health Insurance Portability and Accountability Act (HIPAA) Form, [http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm](http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm);
- PREA Acknowledgement Form, [http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm](http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm);
- FBI CJIS Security Addendum Form, [http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm](http://www.nh.gov/nhdoc/business/rfp_bidding_tools.htm) (Not Applicable);
- List of Board of Directors and Addresses (only applicable to Non-Profit organizations and redact all personal information, use business addresses);
- List of Key Personnel, Title and Salaries (only applicable to Non-Profit organizations and redact all personal information);
- Resumes of Key Personnel (only applicable to Non-Profit organizations and redact all personal information, use business addresses and business telephone numbers);
- Alternate W-9 Registration (NOT INCLUDED HEREIN). The Contractor shall complete their Contractor Registration process on-line through the following link: [https://das.nh.gov/purchasing/vendorregistration](https://das.nh.gov/purchasing/vendorregistration); which will direct a potential Contractor to the State of NH Vendor Registration site. A Contractor should submit proof of their submission with their proposal. Please follow the instructions provided.

All documentation listed above is necessary for the successful completion and submission of Proposals. All attachments are located on the following webpage: [http://www.nh.gov/nhdoc/business/rfp.html](http://www.nh.gov/nhdoc/business/rfp.html) under the heading “**DOING BUSINESS, RFP RESOURCES.**”
Glossary of Terms

Various terms and abbreviations are used within the RFP that may not be familiar to all readers. This glossary term and acronym list is an attempt to help make reading these documents easier and more understandable.

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<tr>
<th>Term</th>
<th>Acronym</th>
<th>Description/Definition</th>
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<td>Best and Final Offer</td>
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<td>Case Mix Group</td>
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