

ADDENDUM NUMBER TWO

THE UNIVERSITY OF NEW MEXICO HOSPITALS

Purchasing Department
933 Bradbury Dr. SE Ste 3165
Albuquerque, New Mexico 87106

Date: September 10, 2020

Proposal Number: P426-20

Name of Procurement Specialist: Jennifer Sanchez

Due Date: September 14, 2020 @ 2:00 pm MST/MDT

Revised Due Date: September 16, 2020 @ 2:00 pm MST/MDT

Notice to all respondents:

Amend the Proposal: **RFP 426-20 Strategic Healthcare Consultant and Preparation of Strategic Plan**

This **addendum** becomes part of the Proposal Documents and **modifies**, as noted below, the original Bidding Documents. THE FOLLOWING PROVISIONS OF THE ABOVE-REFERENCED RFP ARE AMENDED AS FOLLOWS:

1. The new Offer Due Date/Time is Wednesday, September 16, 2020, @ 2:00 pm MST/MDT.

2. WRITTEN RESPONSES – QUESTIONS AND ANSWERS

QUESTION 1: In order to ensure we are providing proposal pricing in a consistent manner, would you please confirm that the pricing to be provided is for the initial strategic planning project? Section 1 on page 3 of the RFP indicates that the initial contract term is for 4 years. Section 3.11 on page 7 of the RFP suggests that the price of the agreement may be for a term of 8 years. Exhibit B, Section 1.d.iv on page 8 states that pricing will remain firm throughout the initial year.

RESPONSE: It is anticipated that the initial term of the Master Services Agreement arising from this RFP shall be 4 years, and the scope of work addenda to that Agreement for the Strategic Plan project will be completed in accordance with a timeline mutually agreed by UNMH and the successful offeror. In addition we are hereby amending

page 7, paragraph 3.11 to provide for a maximum term of the Master Services Agreement plus all renewals to be 10 years, pursuant to NMSA 13-1-150. Section 1.d.14 of Exhibit B relating to maintaining firm pricing during the first year is hereby deleted.

QUESTION 2: **Would you consider extending the due date, considering the short time period between the date of the RFP release and required proposal submission and ring the hard copy submission requirement? Is there a possibility of getting an extension to submit the proposal?**

RESPONSE: **Per this addendum the RFP due date has been extended. See item #1 above.**

QUESTION 3: **Do you envision required meetings will occur remotely (via Zoom or some other technology), in-person, or through a combination of remote/in-person options? Is the selected consultant able to complete interviews and meetings via teleconference?**

RESPONSE: **We expect required meetings to occur in the format they are best suited for, but will take into account and adjust for public-health orders and infection control measures, as needed.**

QUESTION 4: **What are your current policies for meetings, virtual platforms, etc during COVID social distancing that should be factored into the scheduling and support? Considering the current COVID-19 pandemic, is there a preference for this engagement's meetings to be in-person or virtual?**

RESPONSE: **UNM Hospital follows infection control and public health orders from the State of New Mexico. These are a matter of public record.**

QUESTION 5: **Will this project require input such as interview and focus groups from other than internal stakeholders for the System of Care? (as in community at large)?**

RESPONSE: **It is possible that other internal stakeholders may be required for interview and focus.**

QUESTION 6: **Do you have a desired or allocated budget amount for the work? What is the expected budget for this engagement? Is there a budget limit for this project? Do they have a budget for this work?**

RESPONSE: The UNMH determine that the question does not relate to the RFP or any clarification thereof.

QUESTION 7: **When was UNMH’s last Strategic Plan completed and who did UNMH contract with to complete the plan? When was the last UNMH Strategic plan completed? Do they have existing plan? When was it completed? Did they use external consulting help to develop it? If so, who was the firm?**

RESPONSE: The UNMH determine that the question does not relate to the RFP or any clarification thereof

QUESTION 8: **When were UNMH’s Service Line Strategic Plans completed and which Service Lines were included? Were they completed with a lens towards value-based care?**

RESPONSE: There are a number of service line strategic plans recently completed. They may be made available if appropriate to the successful offerer.

QUESTION 9: **Is the strategic plan only for the UNM Hospital, or does it also include the five mentioned hospitals and clinics which are part of the “Main UNMH campus”?**

RESPONSE: This is already stated – part of UNM Hospital and associated hospitals, which includes all UNMH operated hospitals wherever located on the UNM campus and all UNMH operated/staffed clinics.

QUESTION 10: **Does the strategic plan also include UNM Sandoval Regional Medical Center (SRMC)?**

RESPONSE: No, SRMC is not part of the RFP Scope of Work.

QUESTION 11: **Do you currently have a hardwired or codified process for evaluating new clinical and business opportunities?**

RESPONSE: The UNMH determine that the question does not relate to the RFP or any clarification thereof

QUESTION 12: **In the Scope of Work, Section 3.b.viii, the RFP states: “Identify and evaluate strategic models Provide leadership with the quantitative analytics necessary**

to support future ongoing decisions making;” (stet) Will the consultant be reviewing existing models or developing and providing new models?

RESPONSE: Both.

QUESTION 13: Are the “other limited key stakeholders” included in the expected 20-30 interviews intended to support quantitative and qualitative input?

RESPONSE: They are included.

QUESTION 14: Please explain the difference between “labor costs (flat fee)” and “professional fees (flat fee...)?” as specified in Exhibit B, Evaluation Criteria, d. Cost Proposal?

RESPONSE: If the vendor chooses to use these categories in their cost proposal, please provide sufficient detail to understand fees and costs.

QUESTION 15: What is the expectation for integrating UNMH’s Strategic Plan with the Strategic Plan of the Health System?

RESPONSE: It will be integrated; stakeholders will have knowledge of the Health System strategic plan.

QUESTION 16: Please confirm that the entire timeline for completing the four phases of work and all steps described in “Exhibit A Scope of Work” is only a “12-week period during Fall 2020.” (Section 3a – Scope of Work Overall Approach, page 2). When does work need to be completed—clarify the 12 weeks and 4 phases—Timeframe for completion is there a hard stop date (e.g., calendar year end) by which they need to complete the plan? Are there other key milestone dates that need to be considered (i.e., board meetings/retreats)?

RESPONSE: Work must be completed for this initial plan by January 2021. The preferred timeline is by December 2020.

QUESTION 17: Which stakeholders does UNMH anticipate involving in the planning process (i.e. Board, Executive Team, Service Line Leaders, Physicians, Community Partners)?

RESPONSE: Potentially any of these, but no more than 20-30 interviews in total.

- QUESTION 18:** What has prompted UNMH to initiate a Strategic Plan at this point in time?
- RESPONSE:** The UNMH determine that the question does not relate to the RFP or any clarification thereof.
- QUESTION 19:** What quality or criteria is most important to UNMH in selecting a potential consulting partner?
- RESPONSE:** Per the Exhibit B Evaluation Criteria, the points are weighted to reflect how proposal responses will be evaluated.
- QUESTION 20:** They have planning committee. Will you also want us to interview the board as part of the assessment? What about physician involvement/faculty practice plan?
- RESPONSE:** If needed, board member and clinicians will be available for participation.
- QUESTION 21:** Is a Client Liaison to be selected in addition to the referenced Steering Committee?
- RESPONSE:** Not enough information to respond.
- QUESTION 22:** In the organizational assessment—are both corporate/support services and clinical operations in scope?
- RESPONSE:** Yes, support services and clinical operations all are in scope.
- QUESTION 23:** What internal resources (e.g., planning department) will be available to help on this project and to what extent/level of commitment?
- RESPONSE:** Resources to the extent necessary will be available as determined to be necessary to help on the project.
- QUESTION 24:** Section II Proposal Copies and Format, Section 2.1.2 states the proposal cannot be emailed. We respectfully request you reconsider email submissions in light of the current and continued work at home orders, or reduced capacity orders, in effect in numerous states and municipalities resulting from the COVID-19 pandemic. Due to the rapid turnaround, is there any possibility of submitting it electronically?

RESPONSE: At this time, the UNMH is not willing to forego paper responses.

QUESTION 25: **Section 2.1.1 of the RFP on page 5: Please confirm that only 1 electronic version (USB) of the proposal is required. The RFP states “and one (3) ELECTRONIC COPIES”.**

RESPONSE: Section 2.1.1 of the RFP is revised to read as follows:

Proposal - One (1) ORIGINAL, TWO (2) HARD COPIES, and THREE (3) ELECTRONIC COPIES of the proposal containing ONLY the Technical Proposal; ORIGINAL and COPY shall be in separate labeled binders. The proposal can NOT be emailed.

QUESTION 26: **Does UNMH require the Total Project Cost (Exhibit B, Section 1.d) to be in a separate binder from the other technical sections? Section 2.1 on page 5 of the RFP states that “Each portion of the proposal (technical/cost) must be submitted in separate binders...”. Section 2.2.2 on pages 5 and 6 includes the Total Project Cost (Exhibit B, Section 1.d) within the organized and indexed list. Please confirm that both the qualitative/technical and quantitative/project costs can be submitted together, in the same binder.**

RESPONSE: The proposal response should be submitted in one binder.

All other provisions of the Proposal Documents shall remain unchanged. This addendum is hereby made a part of the Proposal Documents to the same extent as those provisions contained in the original documents and all itemized listing thereof.