

ADDENDUM NUMBER THREE

THE UNIVERSITY OF NEW MEXICO HOSPITALS

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

Date: August 1, 2017

Proposal Number: P369-17

Name of Procurement Specialist: Jennifer Sanchez

Due Date: July 31, 2017 @ 2:00 pm MST/MDT

Revised Due Date: **Wednesday, August 9, 2017 @ 2:00 pm MST/MDT**

Notice to all respondents:

Amend the Proposal: **RFP P369-17 – STRATEGIC PLANNING CONSULTANT SERVICES**

This addendum becomes part of the Proposal Documents and modifies, as noted below, the original Bidding Documents.

WRITTEN RESPONES – QUESTIONS AND ANSWERS

I. PREVIOUS/FUTURE PLAN(s) QUESTION(s)

- a.** Is the Strategic Plan the 2020 Strategic Plan Refresh available on the website the Strategic Plan referenced in the RFP? If not, can we obtain a copy of the pertinent Plan? [Referred to in Scope of Work Overall]

UNMH Response: **Yes, the UNMH 2020 Strategic Plan is available and can be obtained on the UNMH website at <http://strategy.unm.edu/>.**

- b.** Can you describe the progress (success and challenges) on UNMH's last strategic plan and when it was last updated?

UNMH RESPONSE: **UNMH made progress on the priorities set in the last strategic plan (2012) which including increasing ambulatory capacity and improving patient throughput. Challenges included approval for additional facility build to accommodate patient volumes.**

- c.** Have you completed a Community Needs Assessment in the last 12 months? 24 months? And can you please provide it? May we have a copy of your most recent Community Health Needs Assessment report?

Does UNMH have a Community Needs Assessment in-place that is sufficiently comprehensive and current to provide understanding so that the Offeror can “address marketplace needs”, or would development of a Community Needs Assessment be an appropriate part of the proposed scope of services?

UNMH RESPONSE: No, the UNMH has not completed formal and comprehensive Community Needs Assessment.

- d. Will the successful Offeror be provided with a copy of the previous strategic plan once the contract has been awarded?

UNMH RESPONSE: UNMH will provide the successful Offeror with a copy of such information that UNMH determines, in its sole discretion, will best help advance UNMH's strategic interests. UNMH has not made a determination whether its interests are advanced by providing a copy of any prior strategic plan to the successful Offeror.

- e. Can we obtain a copy of the Utilities Master Plan? [Referred to in Scope of Work Deliverables a.xii. Please describe (or provide) the “Utility Master Plan” referenced in Exhibit A, Section 4.a.xii

UNMH RESPONSE: UNMH will provide the successful Offeror with a copy of such information that UNMH determines, in its sole discretion, will best help advance UNMH's strategic interests. UNMH has not made a determination whether its interests are advanced by providing a copy of any prior plan(s) to the successful Offeror.

f. Master Facility Plan

- i. Beyond the FY2015 HSC plan, are there any other strategic plans or planning initiatives that need to be aligned with the UNMH plan?
- ii. Please describe the relationship between the proposed 3 to 5 year Comprehensive Strategic Plan and the current Strategic Plan.
- iii. An HSC-wide Master Facility Plan was completed in FY 2015. To what extent is additional assessment of the existing facilities required?
- iv. Describe the progress on the Master Facilities plan completed in 2015. Will we have access to the full facility plan (and some of the planners) as we consider the space planning components for this plan?

UNMH RESPONSE: The successful Offeror will be expected to align with strategic plans and planning initiatives for a new facility build. This work is already underway. UNMH expects that the successful Offeror may be

provided with the Plan for review; however, the successful Offeror is not expected to rely on it

II. SCOPE OF WORK QUESTION(S)

- a.** The UNM Master Facility Plan discusses the need to replace the adult acute care hospital as a number one priority in 2015, and the RFP has many requests related to facility planning.

- i. Can you provide more insight into where UNMH is with respect to building out the replacement hospital and additional clinics in the community?
- ii. Is the focus of the facility planning asked for in the RFP to update the master facility plan to reflect the changes in clinical services and care delivery models that may result from the new Strategic Plan?

UNMH RESPONSE: The UNMH expects that the questions above will be answered during the interview/oral presentation and discovery phase(s) of this RFP.

- b.** What level of facility assessment are you expecting? We are aware of the plan to build a new facility. Are you looking for a validation of assumptions for the current plan or something more?

UNMH RESPONSE: No, the UNMH is not looking for a validation of assumptions for the current plan. The UNMH has engaged with a planning firm to consult with respect to planning the new facility. The successful Offeror will work in coordination with this consultant or other firms involved with the new facility project.

- c.** What state-wide market data do you have available? (i.e. inpatient, outpatient surgery, outpatient clinic claims) Do you readily have access to the market data or is it vendor's responsibility to procure the data?

UNMH RESPONSE: UNMH will work with the successful Offeror to ensure they have access to current data. UNMH expects that the successful Offeror will be able to enhance and update market data.

- d.** Should research, the school of medicine, faculty practice(s), and GME program be considered in scope for this work?

UNMH RESPONSE: No, do not include the school of medicine, faculty practices and GME in Offeror's SOW.

- e. What level of external stakeholder and community input has been gathered and to what extent would you like your facilitators to obtain additional external input?

UNMH REPOSE: UNMH has internal data. The UNMH expects the successful Offeror will use its professional skills to review, evaluate and enhance external stakeholder and community input if needed.

- f. Based the wide ranging areas being considered for the plan, is UNMH open to a leading consulting firm partnering with strategic expertise in select areas (e.g., detailed facility assessment and requirements)?

UNMH REPOSE: Yes, the UNMH is open to a leading consulting firm partnering with strategic expertise in select areas.

- g. Is the UNMH strategic plan intended to focus exclusively on strategy for the clinical mission (or is it intended to also generate specific recommendations for strategic development of the education and research missions)?

UNMH RESPONSE: It is the intent that the initial proposal shall primarily focus on the clinical mission only (not education and research) and our clinical programs (e.g. trauma, cancer, stroke, etc.)

- h. Please clarify Required Deliverables ii. Is the desired deliverable recommendations, criteria for prioritizing, and/or a data collection plan?

UNMH RESPONSE: The UNMH expects that the successful Offeror will use its professional skills to make recommendations with respect to prioritization and data collection.

- i. What electronic health record platform do you utilize for inpatient patients? Do you have an enterprise-wide platform that includes all ambulatory and clinic sites?

UNMH RESPONSE: UNMH uses the Cerner electronic health record platform. Yes, the UNMH does have an enterprise-wide platform that includes all inpatient, ambulatory and clinic sites.

- j. **Exhibit A - 4-a-vi.** Did UNMH complete engineering assessments and other facility condition review for all inpatient and outpatient facilities? If no, should our work scope include facility condition assessment of all candidate locations?

UNMH RESPONSE: Yes, UNMH did complete engineering assessments. No, in regards to the initial projects SOW (Exhibit A), Offeror's SOW should not include facility condition assessment of all candidate locations.

- k. **Exhibit A - 4-a-vi.** Will the selected consultant be required to tour all inpatient and outpatient facilities throughout the system or would that be limited to hospital campuses? If the former, can you provide a list of the off-site locations?

UNMH RESPONSE: UNMH expects the successful offer to perform all appropriate due diligence to support its evaluation, plan and recommendations. Yes, UNMH will provide the successful Offeror with a list of the off-site locations.

- l. **Exhibit A - 4-a-x.** Should the scope include buildings/sites (if any) that only consist of support functions (e.g. offices, warehouse) relative to identifying opportunities for consolidation and/or expansion?

UNMH RESPONSE: Yes, Offeror should include in its Scope.

- m. There are references to facility considerations in the scope description (e.g., “innovative inpatient and outpatient space planning and design concepts”, “major inpatient and outpatient facility deficiencies”, “facility resource requirements for inpatient bed need forecast by program”). How much of a focus/emphasis should be put on facilities planning? Does UNMH have a current facilities master plan or would this be part of the scope of this work?

UNMH RESPONSE: The UNMH has engaged with a planning firm to consult with respect to planning the new facility. The successful Offeror will work in coordination with this consultant and other vendors that may be involved with the new facility. UNMH has a current facilities master plan and this is not part of this scope of work.

- n. When was the last revision of the funding agreements among the UNM Medical School, faculty and UNMH? Would the funds flow analyses consider these relationships too, or only address funds flow within UNMH (Health system and Hospital)?

UNMH RESPONSE: Funding agreements among the entities of the UNM Health System are revised, at a minimum, on an annual basis. The funds flow analysis will focus on the Hospital not the Health System.

III. INFORMATION TECHNOLOGY QUESTIONS

- a. Regarding: xi. Provide recommendations for how new and developing technologies influence building design / IT infrastructure on page 3 and xi. Assess Information Technology to promote greater Health System Integration on page 2 – Our assumption is that is asking for assistance in IT gap assessment, requirements, and strategic plan alternatives evaluation, development and finalization involving key IT and business stakeholders.

i. Is this assumption correct?

UNMH RESPONSE: No, UNMH does not want this scope of work to include a strategic plan for IT.

ii. If yes, what support in post completion of the strategic plan is expected?
iii. What level of IT assessment are you expecting?

UNMH RESPONSE: UNMH expects an assessment of how our current IT functions support priorities in the strategic plan and a recommendation if additional functionalities need to be identified and implemented.

iv. Is there new technology that you will need in the future?

UNMH RESPONSE: Unknown.

v. Do you want an assessment of what you currently have and whether it will meet your needs in the future?

UNMH RESPONSE: Yes.

UNMH RESPONSE: The UNMH anticipates that the initial project may not include an IT assessment in the initial project SOW; however, the UNMH reserves the right to add this portion of the SOW thru way of a written amendment to the awarded contract.

b. Does UNMH have a clinically integrated network?

UNMH RESPONSE: The UNMH expects that the questions above will be answered during the interview/oral presentation and discovery phase(s) of this RFP.

c. To what extent is digital and technology transformation in scope?

UNMH RESPONSE: The UNMH expects that the questions above will be answered during the interview/oral presentation and discovery phase(s) of this RFP.

d. When was the last major Information Technology assessment/ plan completed? How broad was the scope of review and will we have access to the inputs/ assessment findings?

Please elaborate/clarify scope and deliverable expectations related to Plan requirement to “Assess Information Technology to promote greater Health System Integration” as specified in Exhibit A, section 3.b.xi.

UNMH RESPONSE: The Information Technology assessment was a component of the previously completed plan; however, it was not a major

component. Yes, the UNMH will provide access to the inputs/assessment findings to the successful Offeror.

- e. What cost accounting system do you use? Do you have department level service line level cost accounting available?

UNMH RESPONSE: The UNMH uses the Decision Support System (DSS) accounting system. Yes, the UNMH can pull reports based on department level services.

IV. COST PROPOSAL QUESTIONS

- a. Should the budget submitted be for the initial contract term of 4 years?

UNMH RESPONSE: It is anticipated that the RFP will result in a Master Services Agreement, with the initial project set forth as an addendum, and future projects as additional addendum, therefore, the budget should not be submitted for the entirety of the contract term of four (4) years. Offerors should submit its budget for the initial project, per the Exhibit A – Scope of Work.

- b. Please clarify the definitions of Professional Fees and Labor Fees. What should be included in each of these categories? [Referred to in Cost Proposal i.1.] **Exhibit B - 1-d-i.1.** How is Labor Costs defined and how is it different from Professional Fees?

UNMH RESPONSE: It is anticipated that the RFP will result in a Master Services Agreement with discounted hourly rates stipulated. Labor costs include non-professional fees, to include but not limited to direct labor and overhead costs. Professional fee would be that of fees for persons who will provide the UNMH for its specialized and or trained services.

- c. Section 2.2.2D, Item 4 (Total Project Cost) Page 6 - Can you please clarify the Cost Proposal sections? In particular, Section 2.1 specifies that Cost Proposals must be submitted in a separate binder from the Technical Proposal. However, Section 2.2.D.4 includes the Project Cost information and questions.

UNMH RESPONSE: Do not separate Cost Proposals in a separate binder from the proposal. Please see question VII.i.ii to this addendum for more information as to format.

- d. **Exhibit B - 1-d.i., PAGE 13-14.** This section references a Cost Response Form, but there was no cost response form in the RFP packet. Is there a specific format that should be used?

How may the respondents access a copy of the Cost Response Form referenced in Exhibit B, section 1.d. (p. 6)?

This section specifies that “Offerors must complete a Cost Response Form.” Can you please provide this form, as we did not receive it?

UNMH RESPONSE: Each Offeror is responsible for creating its own Cost Response form. Please see Exhibit B, Section D for more information as to the information that should be included.

V. UNMH BACKGROUND QUESTIONS

- a. What is the governance structure?

UNMH RESPONSE: The governance structure of UNM Hospitals includes oversight from an appointed, volunteer Board of Trustees. This board oversees the hospitals’ clinical operations to ensure it can keep providing high-quality care and supporting education and research at the university’s Health Sciences Center.

UNM Hospitals is part of the UNM Health System, which is the clinical component of the University of New Mexico’s Health Sciences Center. The Chief Operating Officer of UNM Hospitals reports to the Chancellor for the Health Sciences Center, who reports to the University’s Board of Regents.

- b. We would like to better understand the structures and relationships among the University of New Mexico Hospitals, the Health Sciences Center and other affiliated organizations.

- i. Could you provide an organizational chart that would facilitate this understanding?

UNMH RESPONSE: The UNMH strategic framework is attached to this addendum #3

- ii. Also, would it be possible to see the current strategic plans for UNMH and UNM Health System?

UNMH RESPONSE: Please find response under Section I.c. above.

- c. Does UNMH have defined payor partnerships?

UNMH RESPONSE: This is not identified as public information; therefore, a response is not being included.

- d. How many community based services do you have? E.g. clinics, relationship with FQHC, assisted living, etc.

UNMH RESPONSE: Please see Exhibit A – Scope of Work, Section entitled “Background”

- e. Is there onsite decision support? Personnel and software?

UNMH RESPONSE: Yes.

- f. Is UNMH part of any ACOs (commercial or Medicare)?

UNMH RESPONSE: No, the UNMH is not part of any ACOs.

- g. To what extent has UNMH been piloting population health and value based care payment models?

UNMH RESPONSE: The UNMH has been working on beginning stages of implementation for piloting populations health and for value based care payment models.

- h. As a State entity, any costs incurred in treating Medicaid beneficiaries and not fully reimbursed through the Medicaid program become a hidden tax, as the burden shifts from 72% Federal dollars to a state-only obligation which is met through other appropriations, or higher rates that are paid by businesses and residents of New Mexico. What percent of the costs incurred by Medicaid beneficiaries is currently being reimbursed to UNMH?

UNMH RESPONSE: The UNMH expects that the questions above will be answered during the interview/oral presentation and discovery phase(s) of this RFP.

VI. TIMELINE QUESTIONS

- a. What is the assumed timeline for this planning effort? Are there expectations for phases and/or major milestones? What is the anticipated start date and is there a definitive or expected end date?

The RFP states that “the RFP will result in UNMH entering into a contractual agreement with one or more successful Offeror(s), for an initial strategic planning project, and possible subsequent projects for an initial contract term of four (4) year(s)...” Do you have a specific timeline for this initial strategic planning project (weeks, months)?

In reference to Exhibit B – Evaluation Criteria, item C. Management Approach on page 6, i.3. highlighted below - Does UMNH have a timeline or number of months in mind to complete the strategic plan project?

c. MANAGEMENT APPROACH (25 Points Possible).

3. Approach to meeting milestones and deliverable timetables and include a proposed timetable for completion of tasks related to the project.

UNMH RESPONSE: UMNH anticipates delivery of a completed written Strategic Plan by January 31, 2018, with a follow up in person presentation thereafter.

VII. GENERAL RFP QUESTIONS

- a. Please provide more context around the question - Has your company ever failed to meet Federal, State, local or industry requirements for your type of Software and required equipment?
 - i. If yes, explain.
 - ii. If not, explain what you are doing to prevent it from occurring, given that the RFP is for consulting services not software or equipment.

UNMH RESPONSE: The question above under, Section 1(a)iii(8) is deleted in its entirety.

- b. Is a wet signature required on the Original submission?

UNMH RESPONSE: Yes, a wet signature is required on the ORIGINAL hard submission. A wet signature is not required on the hard copies.

- c. To Clarify the due date of 7/31, does that need to be in hand by the deadline? Or postage stamped by the deadline? Can you please confirm that hand delivery of a response to RFP P369-17 Strategic Planning Consultant Services is acceptable?

UNMH RESPONSE: Yes, the proposals MUST be in hand by the deadline. Yes, hand delivery is an acceptable form of delivery.

- d. Section 2.2.2.E, page 6/Exhibit C – if an Offeror is not a resident veteran, how should this form be completed? Should we mark the box that is most applicable to our revenue and then leave the box on Exhibit E blank?

If a form is not applicable to our company (e.g. Exhibit C – Resident Veterans Certificate), do you still want us to include the blank form as part of our proposal submission? Or is it sufficient to simply state in our response that this form is not applicable?

UNMH RESPONSE: If resident veteran is not applicable, on your table of contents please put “n/a” or you may submit a blank form and put a notation at the top that this form is N/A.

e. Exhibit G/Insurance Requirements, page 19

- i. This exhibit is not listed in Section 2.2.2 (Proposal Content and Organization). Should it be included in the proposal submission, and if so, where, or would we provide a COI later if selected?

Under Certificates of Insurance, Item 1 requests an “additional insured” clause naming UNMH to be included on the insurance certificate. Is it sufficient to provide a copy of our standard Certificate of Insurance with our proposal and obtain the additional insured certificate upon contract award? Or do you require the certificate to include this clause as part of our proposal submission?

UNMH RESPONSE: It is sufficient to provide a copy of Offeror standard Certificate of Insurance with their response.

If an award is made, prior to commencing work under a resulting contract the Certificate of Insurance shall contain “The Regents of the University of New Mexico Hospitals, the University of New Mexico Hospitals, its agents, servants and employee are held as additional insured.”

- f. **Exhibit B, Section 1.d.ii, page 14** - Can you please provide a copy of UNMH’s Travel Reimbursement Policies for our review?

UNMH RESPONSE: UNMH Travel polices will be uploaded to the UNMH website at <http://hsc.unm.edu/health/about/bids-proposals/proposals.html> under RFP 369-17.

- g. Can you please send me the list of companies that RFP369-17 was sent to?
UNMH RESPONSE: All RFP information is considered confidential until an award is made.

- h. Is there preference given to Disadvantaged Businesses i.e. Woman Owned? If so, how many additional points?

UNMH RESPONSE: No. The only preferences are provided under New Mexico law as set forth in Section 3.1 and Exhibits C of the RFP.

i. Can you clarify how you would like the proposals delivered?

- i. Can you clarify the term “technical proposal”? (2.1.2: “Proposal - One (1) ORIGINAL, eight (8) HARD COPIES, and one (1) ELECTRONIC COPY of the proposal containing ONLY the Technical Proposal”). Is that the entire proposal or just the “technical approach” section (2.2.2.D.2) suffice? Please clarify.

Can you please clarify the number of copies and format of submissions? In particular, how many copies of the Cost Proposal are required?

UNMH RESPONSE: Section 2.1.2 is deleted in its entirety and replaced with the following language:

2.1.2 Proposal - One (1) ORIGINAL, ten (10) HARD COPIES, and one (1) ELECTRONIC COPY of the entire proposal. ORIGINAL and COPY shall be in separate labeled binders. The proposal can NOT be emailed.

- ii. The RFP states that “each portion of the proposal (technical/cost) must be submitted in separate binders and must be prominently displayed on the front cover” (section 2.1) and asks for 1 original and 8 hard copies. Does this mean we should submit 18 binders? Or will 9 binders with tabs.

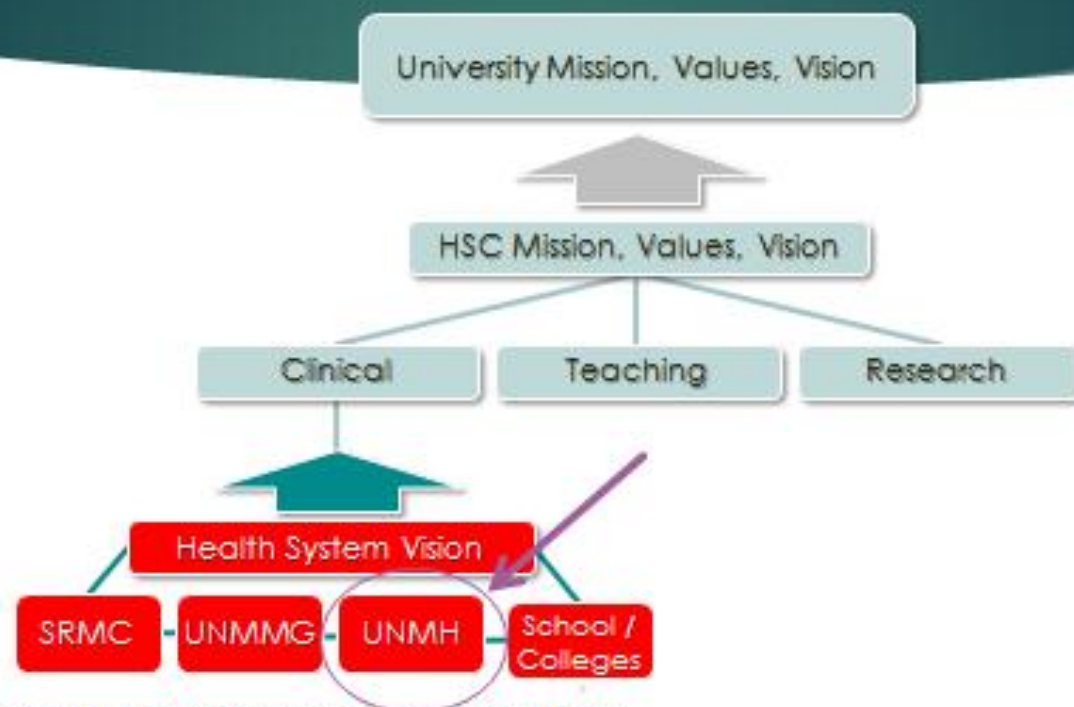
Section 2.1 page 5 - Should all pricing information be contained in a separate document (with a reference to the separate Cost Proposal in Section D.4 in our proposal) or should some summary information be provided in Section D.4 in our Technical Proposal?

Section 2.1 specifies that each portion (technical and cost) must be submitted separately. Section 2.1.2 requests copies of only the Technical Proposal.

UNMH RESPONSE: The technical and cost should be submitted as one (1) binder and organized and indexed per section 2.2.2. All pricing information shall be contained in one document, labeled and indexed separately.

Per the revision above, a total of 11 binders, this includes one (1) original and ten (10) hard copies.

Strategic Framework: Integration with the University



*Clinical components within the School of Medicine, of Colleges of Nursing and Pharmacy