

Request for Proposal: Outpatient Capacity Assessment RFP

Questions and Answers:

1. What have been the number of certificate of need applications that have been submitted to the Board in the last three years?

Answer: 2018- 6 CONs issued, 2019- 6 CONs issued, 2020- 5 CONs issued, 2021- 7 CONs issued as of 9/22/21.

2. Can you please clarify what is meant by “equipment” in section 2.3.1 – Health Resource Allocation Plan service line and equipment data collection?

Answer: The GMCB performs data collection on the following types of hospital-based equipment:

Equipment	
Angiographic (Radiographic/Fluoroscopic System)	X-ray test that uses a special dye and camera (fluoroscopy) to take pictures of the blood flow in an artery or a vein.
Angiography (Cardiac Cath Labs)	Dedicated laboratory for cardiac catheterization (see definition above in services).
Angiography (Other Interventional Radiology)	A magnetic resonance angiogram (MRA) or computed tomography angiogram (CTA).
Computed Tomography (CT) Scanner (identify open, wide bore, or closed)	Computed tomographic scanner for head or whole body scans.
Extracorporeal Shock Wave Lithotripter (ESWL)	A medical device used for treating stones in the kidney or urethra. The device disintegrates kidney stones noninvasively through the transmission of acoustic shock waves directed at the stones.
Hyperbaric Oxygen Therapy	A special pressure chamber to increase the amount of oxygen in the blood.
Linear Accelerator	Customizes high energy x-rays or electrons to conform to a tumor's shape and destroy cancer cells while sparing surrounding normal tissue.
Magnetic Resonance Imaging (MRI) (identify Tesla level)	The use of a uniform magnetic field and radio frequencies to study tissue and structure of the body. This procedure enables the visualization of biochemical activity of the cell in vivo without the use of ionizing radiation, radioisotopic substances or high-frequency sound.



Mammogram (2D Digital)	Mammography screening - The use of breast x-ray to detect unsuspected breast cancer in asymptomatic women. Diagnostic mammography - The x-ray imaging of breast tissue in symptomatic women who are considered to have a substantial likelihood of having breast cancer already.
Mammograms (3D/Tomosynthesis)	Mammography screening - The use of breast x-ray to detect unsuspected breast cancer in asymptomatic women. Diagnostic mammography - The x-ray imaging of breast tissue in symptomatic women who are considered to have a substantial likelihood of having breast cancer already.
Positron Emission Tomography (PET)	A nuclear medicine imaging technology which uses radioactive (positron emitting) isotopes created in a cyclotron or generator and computers to produce composite pictures of the brain and heart at work. PET scanning produces sectional images depicting metabolic activity or blood flow rather than anatomy.
Positron Emission Tomography/CT (PET/CT)	Provides metabolic functional information for the monitoring of chemotherapy, radiotherapy and surgical planning.
Robotic Surgery System (DaVinci)	The use of mechanical guidance devices to remotely manipulate surgical instrumentation.
Other Robotic Surgery System (please indicate type)	The use of mechanical guidance devices to remotely manipulate surgical instrumentation.
Single Photon Emission Computerized Tomography (SPECT)	A nuclear medicine imaging technology that combines existing technology of gamma camera imaging with computed tomographic imaging technology to provide a clearer and more precise image.
Ultrasound	The use of acoustic waves above the range of 20,000 cycles per second to visualize internal body structures.
Ventilator	

3. Will there be specific project orders for future years' work?

Answer: Yes, should future work be identified and mutually agreed upon, the scope of work will be defined using project orders as it will depend on the types of applications submitted.

4. Is there an incumbent for this work?

Answer: No.

5. Would state extend the due date to Oct 4th?

Answer: Yes, we will be able to extend the submission due date to October 4th. Please see below for the updated schedule, which is also included in addendum 1.

ISSUE DATE	Thursday, September 16, 2021
QUESTIONS DUE	Tuesday, September 21, 2021 4:30 PM (EDT)
WRITTEN RESPONSES TO QUESTIONS	Thursday, September 23, 2021 4:30 PM (EDT)
RFP RESPONSES DUE BY	Monday, October 4, 2021 at 4:30 PM (EDT)
SELECTION NOTIFICATION	Thursday, October 14, 2021
WORK START DATE:	Monday, November 22, 2021

6. Once the Data Use Agreement is in place, how will GMCB send the data to the contractor?

Answer: The GMCB can use the State platform GlobalScape to perform data transfers. We can also use the Contractor's SFTP system as long as it meets state security requirements. There is also the potential to provide direct access to the claims database depending on level of work.

7. Please clarify if the scope includes CON reviews only for outpatient surgery?

Answer: The initial scope of work will relate directly to CON requests for outpatient surgery, however the GMCB may receive future applications where capacity assessments for other health care services will be necessary.

8. Can you provide more information about the current data collected for Health Resource Allocation Plans?

Answer: Currently data collected to support the Health Resource Allocation plan includes services, bed counts as well as facility equipment (see question #2) for different health care sectors as well as hospital-based services. Examples of past data collection can be found on the [HRAP section of the GMCB website](#).

The [inventory template for hospital services](#) was published to the GMCB website for reference.

A completed inventory for Mental Health services can be found here:

https://gmcboard.vermont.gov/sites/gmcb/files/documents/Book%20Mental%20Health%20Services%20Final%20-%20Web_0.xlsx.

9. What is the expected timeframe for reporting past projects in Vermont (section 4.3.6)?

Answer: Bidders should report any past projects completed within the last 10 years.

10. Please clarify if the pricing sheet A is hours / year or hours / 2 years (i.e. the base period of performance).

Answer: Section A of the pricing sheet is meant to reflect proposed positions, hours and hourly rates for each task for the first year of work. Section B should reflect any percentage increases to hourly rates for years 2 and 3.

11. Can you please clarify what bidders should include in Section B of the price schedule? Does this percentage correspond to an increase in proposed hourly rates or total cost?

Answer: The percentages should apply to the hourly labor rates.

12. How many CON applications should we assume will need review / assessment per year for pricing purposes?

Answer: We are not able to estimate an exact number as each application is unique and the type of review will be determined at the time of submission. Please refer to question #1 to see the number of past decisions issued.

13. Can you provide more detail on the level of effort sought, such as estimates of numbers of FTE staff or budget guidance for this contract?

Answer: Bidders may use experience on past projects to determine the level of effort required to complete the work.

14. Can you clarify the scope of Task 2.3 is limited to data related to assessing outpatient surgical capacity?

Answer: This task, while not specific to outpatient surgery, would help inform GMCB's processes for data collection to assess capacity in priority health care sectors as well as hospital-based services across the state.