



STATE OF WASHINGTON

HEALTH CARE AUTHORITY

REQUEST FOR APPLICATIONS (RFA)

RFA NO. 2022HCA12

NOTE: *If you download this RFA from the Health Care Authority website or WEBS, you are responsible for monitoring the posting for updates and new amendments.*

PROJECT TITLE: Safe Station Pilot Program

APPLICATION DUE DATE: May 31, 2022, by 2:00 p.m. *Pacific Time*, Olympia, Washington, USA.

All Applications must be submitted electronically via email to the email address listed below. It is within HCA's sole discretion to accept submission in any other format.

ESTIMATED TIME PERIOD FOR CONTRACT: July 1, 2022, to June 30, 2023

The Health Care Authority reserves the right to extend the contract for up to 5 additional 1-year periods and at comparable amounts to the original award, for a total of 6 years in the life of the Contract, at the sole discretion of the Health Care Authority, and contingent on availability of funds.

FUNDING: HCA has budgeted an amount not to exceed \$1,000,000 for this project. HCA is planning to award up to 3 contracts.

RFA CONTACT: The RFA Coordinator is the sole point of contact in HCA for this procurement. All communication between the Applicant and HCA upon release of this RFA must be with the RFA Coordinator, as follows:

Name	Mitch Gonzales
E-Mail Address	HCAProcurements@hca.wa.gov

Emails must have RFA No. 2022HCA12 in the subject line.

Any other communication will be considered unofficial and non-binding on HCA. Applicants are to rely on written statements issued by the RFA Coordinator. Communication from or directed to parties other than the RFA Coordinator may result in disqualification of the Applicant.

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1. DEFINITIONS

Definitions for the purposes of this RFA include:

“Administrative” or “Indirect Costs” – Elements of costs incurred by the Contractor as costs that are necessary to administrate or operate a program that are not considered direct program costs.

Apparent Successful Applicant (ASA) – The Applicant selected as the entity to perform the anticipated services under this RFA, subject to completion of contract negotiations and execution of a written contract.

Applicant – Individual or company interested in the RFA that submits an application in order to attain a contract with the Health Care Authority.

Application – A formal offer submitted in response to this solicitation.

Authorized Representative – A person to whom signature authority has been delegated in writing acting within the limits of his/her authority.

Behavioral Health Agency – means an entity licensed by the Department of Health to provide behavioral health services under chapter 71.24, 71.05, or 71.34 RCW.

Behavioral Health Professional – means substance use disorder professionals, licensed practical nurses, paramedics, registered nurses, or emergency medical technicians.

Health Care Authority or HCA – an executive agency of the state of Washington that is issuing this RFA.

Contract – The agreement between HCA and the Apparent Successful Applicant (ASA) to carry out the ASA's proposed program.

Participant – An individual who seeks medical assistance at a Safe Station or requests a mobile response unit from a Safe Station.

Safe Station – a fire station that has designated itself as a place where Participants may receive limited medical assistance for substance use disorder, dispose of any paraphernalia, and, if warranted, receive transportation to a medical facility. Safe Stations (1) provide assessment and referral services at their station locations and/or (2) deploy a mobile response unit that responds to requests for assistance in community-based locations.

Request for Application (RFA) – Formal procurement document in which a service or need is identified but no specific method to achieve it has been chosen. The purpose of an RFA is to permit the Applicant community to suggest various approaches to meet the need at a given price.

2. INTRODUCTION

2.1. BACKGROUND AND PURPOSE

The Washington State Health Care Authority, hereafter called “HCA,” is initiating this Request for Application (RFA) to solicit applications from fire departments in Washington State interested in participating on a project to implement “Safe Stations.” Safe Stations are designed to shift the barriers to treatment for those members of a community who want to recover from substance use disorder. Individuals seeking treatment can visit a fire department that is designated as a Safe Station and dispose of any paraphernalia and receive help gaining access to care. Safe Stations provide an alternative to emergency rooms and serve as a safe place for individuals who need help but are not at the point of crisis.

Participating fire departments will be designated as Safe Stations that (1) provide assessment and referral services at their station locations and/or (2) deploy a mobile response unit that responds to requests for assistance in community-based locations. Under the Safe Station program, a fire station will provide a basic initial screen on a “Participant” and then call “Behavioral Health Professionals” to assist with more specific screening. Behavioral Health Professionals include substance use disorder professionals, licensed practical nurses, paramedics, registered nurses, or emergency medical technicians who are trained to provide a welcoming environment and connect persons to treatment support and services, including transportation to acute medical services when warranted.

Fire Stations that combine the Safe Station approach with fire department mobile integrated health programs such as the community assistance referral and education services program under RCW 35.21.930 are encouraged. Certified substance use disorder peer specialists may be employed in a Safe Station pilot program if HCA determines that a plan is in place to provide appropriate levels of supervision and technical support. Behavioral health administrative services organizations in a region with a Safe Station program shall collaborate with the Safe Station program, local crisis providers, and other stakeholders to develop a streamlined process for referring Safe Station clients to the appropriate level of care.

HCA intends to award 3 contract(s) to provide the services described in this RFA.

2.2. ESTIMATED SCHEDULE OF PROCUREMENT ACTIVITIES

HCA Release of Request for Applications	April 29, 2022
Questions Due from Applicants	May 6, 2022 at 2:00 p.m. (Pacific Time)
HCA Posts Answers to Applicant(s) Questions	May 13, 2022
Complaint Deadline	May 20, 2022
Application(s) Due Date	May 31, 2022 at 2:00 p.m. (Pacific Time)
Evaluate Applications	June 1, 2022, - June 6, 2022
Announce “Apparent Successful Applicant” and send notification via e-mail to unsuccessful Applicants	June 7, 2022
Applicant Request for Debrief Due Date	June 10
Hold Debrief Conferences via conference call (if needed)	June 13, 2022, - June 15, 2022

Protest Due Date	June 22, 2022 at 2:00 p.m. (Pacific Time)
Negotiate Contract with ASAs	June 16, 2022, - June 30, 2022
Estimated Contract Start Date	July 1, 2022

HCA reserves the right in its sole discretion to revise the above schedule.

Applicants are strongly encouraged to register as a vendor on Washington’s Electronic Bid System (WEBS), at <https://fortress.wa.gov/ga/webs/> and to download a copy of this RFA from WEBS, in order to view any Amendments that are issued by HCA which may modify the terms of this RFA.

2.3. MINIMUM QUALIFICATIONS / ELIGIBILITY REQUIREMENTS

The following are the minimum qualifications for Applicants:

- 2.3.1. Licensed to do business in the state of Washington or provide a commitment that it will become licensed in Washington within 30 calendar days of being selected as the Apparent Successful Applicant.
- 2.3.2 Must be a fire department located within Washington State that operates on a 24-hour basis, seven days a week. The fire department, either directly or through subcontracts, must provide medical screening and assessments to individuals who visit or seek assistance for matters relating to substance use disorders. The fire department must also have a means of transportation to transport individuals to a hospital or medical facility.

2.4. PREFERRED QUALIFICATIONS

The following are the preferred qualifications for Applicants:

- 2.4.1 A fire department that is a licensed “behavioral health agency,” as defined in Section 1, Definitions, is preferred. See WAC 246-341-0300. Only fire departments that are licensed behavioral health agencies are eligible to receive federal funds under any contract resulting from this RFA. See Section 2.5, Funding and Contract Period. All fire departments that meet the minimum qualifications under Section 2.3 are eligible to receive state funds under any contract resulting from this RFA.
- 2.4.2 A fire department that can deploy a mobile response unit that responds to requests for assistance in community-based locations is preferred.

2.5. FUNDING AND CONTRACT PERIOD

HCA has budgeted an amount not to exceed \$1,000,000 for this project. Specifically, HCA has budgeted the following amounts:

- July 1, 2022, to December 31, 2022, HCA has budgeted \$500,000 (\$160,000 in state funds; \$340,000 in federal, Medicaid funds)
- January 1, 2023, to June 30, 2023, HCA has budgeted \$500,000 (\$160,000 in state funds; \$340,000 in federal, Medicaid funds)

HCA is planning to award up to 3 contracts.

- **Fire Stations that are Licensed Behavioral Health Agencies:** Fire stations that are licensed behavioral health agencies are eligible to receive both federal and state funds under any resulting contract with HCA. When submitting an Application to this RFA, fire stations that are licensed behavioral health agencies may not propose a budget that exceeds 1/3 of the total amount HCA has budgeted (1/3 of \$1,000,000 = \$333,333.33). Any Application with a proposed budget over the stated amount (\$333,333.33) may not be considered by HCA.
- **Fire Stations that are not Licensed Behavioral Health Agencies:** Fire stations that are not licensed behavioral health agencies are only eligible to receive state funds under any resulting contract with HCA and are not eligible to receive federal funds. When submitting an application to this RFA, Fire stations that are not licensed behavioral health agencies may only propose a budget that does not exceed 1/3 of the total state funds allocated to this project (1/3 of \$320,000 = \$106,666.66). Any Application with a proposed budget over the stated amount (\$106,666.66) may not be considered by HCA.

Applicants will submit their proposed budget and that proposed budget will be used to determine the budget in any resulting contract. See Section 5.2. HCA may award funds in excess of the proposed budget stated by Applicant, if HCA is unable to contract with 3 vendors and unused funds are available.

A single organization may not receive multiple awards, even if applying for multiple service locations.

Any contract awarded as a result of this procurement is contingent upon the availability of funding. HCA may provide additional funding or de-obligate unused funds, if it is deemed by HCA, in its sole discretion, to be in HCA's best interest relative to the overall purpose and objective as stated herein.

Contract date range July 1, 2022, to June 30, 2023.

HCA reserves the right to extend the contract for up to 5 years, in 1-year increments, for a total of 6 years in the life of the Contract, at the sole discretion of HCA, and contingent on availability of funds.

3. GENERAL INFORMATION FOR APPLICANTS

3.1. SCOPE OF WORK

The Safe Station program will designate fire stations as “Safe Stations” meant to be open to the general public—24 hours a day, seven days a week. Participating fire stations will assist those suffering from drug addiction and substance abuse; the focus of the program is on addiction or abuse of all drugs and not just heroin/opioids.

A fire station that is awarded a contract under this RFA, will be a Contractor that must adhere to the following obligations:

- Must have staff on site 24 hours a day, seven days a week ready to receive individuals (hereinafter referred to as “Participants”)
 - The Contractor must:
 - Have a private, designated section of the fire station where staff can identify participants and create a record of the visit. Staff must have an intake form and also record pertinent medical and personal information (such as any means of contacting the Participant – cell phone, email) acquired during the visit. Contractor must store the information electronically and confidentially in accordance with state and federal law, including HIPAA requirements, and HCA policies.
 - Acquire any drugs and/or paraphernalia that participants may have on their possessions in a safe and non-confrontational manner. Such drugs and/or paraphernalia must be put in a locked, drop-box or other similar secure spot.
 - Provide written information to participants about drug recovery programs in the county and/or State. HCA will determine the content of the written materials and Contractor will develop, write, and disseminate the materials. The written materials must be in English. Contractor will use its discretion to determine whether it is necessary to furnish written materials in other languages. Contractor must also have basic office supplies, basic furniture, and food/snacks/water.
 - Have standard operating policies for interacting with participants at the Safe Station and, in the community when deploying a mobile response unit, if applicable.
- Must screen and assess the participant (take the participant's vital signs and inquire about any existing medical conditions) to determine whether transportation to a medical facility is necessary. Contractor must create an objective set of medical measures to determine whether transportation to a medical facility is required. For example, if a participant's vital signs are determined to be unstable (to be defined by Contractor), Contractor must transport the participant to a hospital/medical facility. The Contractor must develop transportation policies for this purpose and, if applicable, policies when deploying a mobile response unit in the community.
- If Contractor determines that a participant does not require transportation to a hospital/medical facility (i.e. the participant is stable), Contractor will call for a subcontracted “Behavioral Health Professional” (substance use disorder professionals, licensed practical nurses, paramedics, registered nurses, or emergency medical technicians) to further screen and assess the Participant. Contractor will wait with the participant until the Behavioral Health Professional arrives.

- Certified substance use disorder peer specialists may be employed in a Safe Station if HCA determines that Contractor has a plan in place to provide appropriate levels of supervision and technical support.
- The Behavioral Health Professional must meet with the Participant to talk about their drug abuse or addiction needs in more detail, as well as options for treatment programs. The Behavioral Health Professional and Contractor must determine next steps for the Participant. After the Participant has left the Safe Station, Contractor and/or the Behavioral Health Professional must attempt follow-up contacts with the Participant. Contractor and/or the Behavioral Health Professional must make at least 3 attempts a week for 3 consecutive weeks following the Participant's visit, until Contractor and/or Behavioral Health Professional makes direct contact with Participant. If Contractor and/or Behavioral Health Professional make direct contact with the Participant, Contractor and/or Behavioral Health Professional will collaborate with Participant and Behavioral Health Administrative Services Organizations in the region to develop a streamlined process for referring Participant to the appropriate level of care.
- Communication About the Safe Station Program to the Public
 - Contractor should create awareness about the Safe Station Program in the community. Contractor should utilize a variety of outreach and communication methods to disseminate information about the Safe Station program. Contractor may use any means to spread awareness about the Safe Station program so long as it is pre-approved by HCA.
 - Contractor must affix a sign on the exterior of the fire station or post signage outside the fire station that identifies the fire station as a Safe Station. This sign must be visible 24 hours a day, seven days per week.
- Communication with HCA About Progress
 - Every 30 days, Contractor must provide to HCA a list of participants who have visited the Safe Station. In the list submitted to HCA, the participants must be described without the disclosure of protected health information (should be referred to "27. y.o. male/female"). The report should consist of the following for each individual Participant:
 - Date and time the Participant was received at the Safe Station;
 - The results of any screening or assessments done by Contractor and/or Behavioral Health Professionals;
 - Whether participants who visited the Safe Station were transported to a hospital/medical facility; and
 - Documentation of follow-up attempts by Contractor and/or Behavioral Health Professionals.

3.2. PROPRIETARY INFORMATION / PUBLIC DISCLOSURE

Applications submitted in response to this RFA will become the property of HCA. All Applications received will remain confidential until the Apparent Successful Applicant is announced; thereafter, the Applications will be deemed public records as defined in chapter 42.56 of the Revised Code of Washington (RCW). Exceptions considered only if Applicant identifies content as proprietary in their Application materials.

3.3. AMENDMENTS TO THE RFA

If HCA determines in its sole discretion that it is necessary to revise any part of this RFA or provide any additional information, HCA will post on Washington's Electronic Bid System (WEBS), at <https://fortress.wa.gov/ga/webs/>, an amendment capturing changes or additions. For this purpose, the published questions and answers and any other pertinent information will be provided as an addendum to the RFA and will be placed on the website.

HCA also reserves the right to cancel or to reissue the RFA in whole or in part, prior to execution of a contract.

3.4. CONTRACT AND GENERAL TERMS & CONDITIONS

The ASA will be expected to enter into a contract which is substantially the same as the sample contract and its general terms and conditions, see Exhibit A, *HCA General Contract Terms*. HCA will not accept any draft contracts prepared by any Applicant. The Applicant may submit exceptions as allowed in Attachment 2, *Certifications and Assurances*. All exceptions must be submitted as an attachment to Attachment 2, *Certifications and Assurances*. HCA will review requested exceptions and accept or reject the same at its sole discretion.

HCA reserves the right to negotiate with applicants for project tasks, deliverables, and funding amounts. Special consideration during selection may include community geographic location(s) to provide for project distribution statewide and overall risk ranking.

If, after the announcement of the ASA, and after a reasonable period of time, the ASA and HCA cannot reach agreement on acceptable terms for the Contract, the HCA may cancel the selection and Award the Contract to the next most qualified Applicant.

3.5. RECEIPT OF INSUFFICIENT NUMBER OF APPLICATIONS

If HCA receives only one responsive Application as a result of this RFA, HCA reserves the right to either: 1) directly negotiate and contract with the Applicant; or 2) not award any contract at all. HCA may continue to have the Applicant complete the entire RFA. HCA is under no obligation to tell the Applicant if it is the only Applicant.

3.6. NO OBLIGATION TO CONTRACT

This RFA does not obligate HCA to enter into any contract for services specified herein.

3.7. REJECTION OF APPLICATIONS

HCA reserves the right, at its sole discretion, to reject any and all Applications received without penalty and not to issue any contract as a result of this RFA.

3.8. COMMITMENT OF FUNDS

The Director of HCA or his/her delegate is the only individual who may legally commit HCA to the expenditures of funds for a contract resulting from this RFA. No cost chargeable to the proposed contract may be incurred before receipt of a fully executed contract.

3.9. STATE AND FEDERAL COMPLIANCE

HCA complies with HCA, state and federal statutes and polices, to include, but not limited to:

- 3.9.1. ADA - HCA complies with the Americans with Disabilities Act (ADA). Applicants may contact the RFA Coordinator to receive this RFA in Braille or on tape.
- 3.9.2. Accessibility - HCA is committed to making its materials and programs accessible to all customers and employees. If you experience any difficulty accessing information provided by HCA, please contact us at HCAProcurements@hca.wa.gov. We will do our best to assist you, which may include providing the information to you in an alternative format.
- 3.9.3. Specific restrictions apply to contracting with current or former state employees pursuant to chapter 42.52 of the Revised Code of Washington. Applicants should familiarize themselves with the requirements prior to submitting an application that includes current or former state employees.
- 3.9.4. All Contractors are required to have a Unique Entity Identifier issued by SAM.gov.
- 3.9.5. Contracts awarded using federal funds may need to be in compliance with applicable federal reporting requirements, please refer to Exhibit A, *HCA General Contract Terms*.
- 3.9.6. Discrimination - In accordance with federal law, HCA is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. HCA is an equal opportunity provider and employer.
- 3.9.7. In preparing this Application, Applicant has not been assisted by any current or former employee of the state of Washington whose duties relate (or did relate) to this Application or prospective contract, and who was assisting in other than their official, public capacity.
- 3.9.8. Applicant grants HCA the right to contact references and others who may have pertinent information regarding the ability of the Applicant and the lead staff person to perform the services contemplated by this RFA.
- 3.9.9. If any of the Applicant's staff members who will perform work on this contract have retired from the state of Washington under the provisions of the 2008 Early Retirement Factors legislation, their name(s) are noted on a separately attached page.

4. APPLICATION PROCESS

4.1. QUESTIONS, ANSWERS, & CLARIFICATIONS

Applicants who have questions and/or requests for clarifications regarding this RFA must submit via email to HCAProcurements@hca.wa.gov no later than May 6, 2022, at 2:00 p.m., Pacific Time. All correspondence regarding this solicitation must reference the RFA number in the subject line.

HCA responses will be posted per the information provided in the *Estimated Schedule of Procurement Activities* section.

No phone calls or in-person inquiries will be accepted. Any verbal information received from an HCA employee or any other entity shall not constitute an official response to any questions regarding this RFA.

HCA will be bound only to HCA written answers to questions issued by the RFA Coordinator. Any communications with HCA employees other than the RFA Coordinator will not be considered official or binding. Questions arising in subsequent communication with the RFA Coordinator will be documented and answered in written form. A copy of the questions and answers will be posted on WEBS.

4.2. SUBMISSION OF APPLICATIONS

The Application must be received by the RFA Coordinator no later than the Application Due deadline in the *Estimated Schedule of Procurement Activities* section, and must be submitted electronically as an attachment to an e-mail as follows:

- 4.2.1. Send email addressed to **Mitch Gonzales** at HCAProcurements@hca.wa.gov;
- 4.2.2. Email will have the subject line: RFA # 2022HCA12 –Mitch Gonzales;
- 4.2.3. Application documents must be submitted in the same order as presented in Section 5, *Application Contents*, with the same headings, adhering to page formatting and other criteria indicated in the attachments;

Failure to submit the Application by the date indicated above and/or as outlined above may result in the Applicant being found non-responsive.

Applicants should allow sufficient time to ensure timely receipt of the Application by the RFA Coordinator. Late Applications will not be accepted and will be automatically disqualified from further consideration, unless HCA e-mail is found to be at fault. HCA does not assume responsibility for problems with Applicant's e-mail. If HCA e-mail is not working, appropriate allowances will be made.

All Applications and any accompanying documentation become the property of HCA and will not be returned.

5. APPLICATION CONTENTS

Items marked “MANDATORY” must be included as part of the Application for the Application to be considered responsive. Items marked “SCORED” are those that are awarded points as part of the evaluation conducted by the evaluation team. Items may be both “MANDATORY” and “SCORED” (MANDATORY & SCORED).

5.1. MINIMUM & PREFERRED QUALIFICATIONS (MANDATORY & SCORED)

Sections 2.3 and 2.4 of this RFA state the minimum and preferred qualifications for Applicants, respectively. The minimum qualifications stated in Section 2.3 are only eligibility criteria for Applicants (i.e. an Applicant must meet these criteria in order to submit an Application) and are not scored. The preferred qualifications stated in Section 2.4 are scored but an Applicant does not have to meet these criteria in order to submit an Application.

The two preferred qualifications stated in Section 2.4 will be scored equally; each qualification (2.4.1 & 2.4.2) is worth 50 points for a total of 100 points.

Applicants must fill out Attachment 1 to indicate whether they meet the minimum and preferred qualifications.

5.2. COST PROPOSAL (MANDATORY & SCORED)

Maximum Available Points: 100

Fire stations that are licensed behavioral health agencies may not propose a budget that exceeds 1/3 of the total amount HCA has budgeted (1/3 of \$1,000,000 = \$333,333.33). Fire stations that are not licensed behavioral health agencies may only propose a budget that does not exceed 1/3 of the total state funds allocated to this project (1/3 of \$320,000 = \$106,666.66). Any Application that exceeds these amounts may not be considered by HCA.

Budget Attachment(s) and/or Exhibit(s) must be completed in the same order as presented in this document with the same headings. Applicant must prepare a separate budget for each funding source project, if applicable. Ex: If the Applicant is applying for one project funded by SOR and another project funded by DMA, two budgets are required.

The evaluation process is designed to award this procurement not necessarily to the Applicant of least cost, but rather to the Applicant whose Application best meets the requirements of this RFA. However, Applicants are encouraged to submit Applications which are consistent with state government efforts to conserve state resources.

A. Identification of Costs

1. Identify all costs in U.S. dollars including expenses to be charged for performing the services necessary to accomplish the objectives of the contract. The Applicant is to submit a fully detailed budget including staff costs, estimates for any applicable sales and use taxes, and any expenses necessary to accomplish the tasks and to produce the deliverables under the contract.
2. ASA(s) will be required to collect Washington state sales and use taxes from HCA, as applicable, and for remittance of payment to the Washington State Department of Revenue (DOR). Applicants must identify any expenses to which Washington State sales and use taxes apply in the Cost Proposal and include an estimated amount for such taxes (based on the current tax rate(s)). HCA understands these amounts may fluctuate as tax rates fluctuate. If a tax isn't specifically identified, HCA will assume it is included in the costs identified.

B. Cost Proposal

- I. Applicants must respond using Exhibit B, Cost Proposal, to submit their costs to ensure compliance with the formatting requirements. Exhibit B must be completed in its entirety in accordance with the instructions identified within the Exhibit.
- II. The budget proposed by Applicant in Exhibit B will be used to determine the budget in any resulting contract. HCA may award funds in excess of the proposed budget stated by Applicant in Exhibit B, if HCA is unable to contract with 3 vendors and unused funds are available.

5.3. PROGRAM NARRATIVE (MANDATORY & SCORED)

Maximum Points Total: 400

Page Limit: 2-5 pgs.

5.3.1. Organizational History

5.3.1.1. Provide a brief history of your organization. Include prior substance use disorder prevention experience. [75 points total]

5.3.1.2. What is your organization's mission and how will the proposed funds help you to achieve your mission? [75 points total]

5.3.2. Need & Background of Community

Applicant Tip: If applicable, be sure to provide the history of how your organization has worked in the past to address substance abuse issues in your community and how the funds allocated to this RFA would enhance programs and services.

5.3.2.1. Description of area, including exact population size and descriptions of populations to be served, with a special focus on populations in need and local health disparities. [50 points total]

5.3.2.2. Describe the substance abuse issues as you currently understand them in the community you intend to serve. [100 points total]

5.3.2.3. Describe why the safe station pilot program will be effective in addressing the substance abuse needs in your community. [100 points total]

5.4. PROJECT DESCRIPTION (MANDATORY & SCORED)

Applicant Tip: Be sure to include specific descriptions and dates for how and when your chosen objective(s) will be achieved. A thorough response will demonstrate how each budget item is supporting the project and will lead to achieving the objective(s).

Maximum Points Total: 400

Page Limit: 2-5 pgs.

5.4.1. Provide an overview of how you propose to implement the Safe Station program in your community. [25 points total]

5.4.1.1. Describe how your Organization will work to improve access to resources for substance abuse in the identified high-need community. [70 points total]

- 5.4.1.2. Include a short explanation describing the anticipated role and involvement of key stakeholders in the identified community. [70 points total]
- 5.3.1.3 Please list those individuals or organizations interested in participation and partnership on this project, including potential partnerships and linkages with other community programs and public and private stakeholders. [25 points total]
- 5.4.2. How will your Organization address health disparities to ensure equity and inclusion of all substance abuse services? [25 points total]
 - 5.4.2.1. Explain how your Organization will provide culturally competent and appropriate services, using specific details that demonstrate this capacity. [70 points total]
 - 5.4.2.2. Explain how your Organization will be actively involved with reducing health disparities and promoting health equity. Describe strategies that will be used and/or potential steps to be taken. [70 points total]
- 5.4.3. Describe any barriers you foresee to implementing the Safe Station program and how you may overcome them. [25 points total]
- 5.3.4 How does Applicant intend to collect and store appropriate individual information in accordance with OCIO 141.10, [Securing Information Technology Assets Standards | OCIO \(wa.gov\)](#), and all state and federal privacy laws, rules and regulations? [20 points total]

5.5. COVID-19 VACCINATION CERTIFICATION (MANDATORY)

Applicant must review and complete Attachment 3, Applicant Forms and Certifications, Section D, COVID-19 Vaccination Certification to respond as to whether or not the Applicant complies with Proclamation 21-14.1 – COVID-19 Vaccination Requirement. Applicant must sign and return this certification as part of its Proposal.

Note: Compliance with the Proclamation is mandatory. For more information please visit <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/505-160-VaccinationRequirementFAQs.pdf>.

5.6. EXECUTIVE ORDER 18-03 (MANDATORY & SCORED)

Pursuant to RCW 39.26.160(3) and consistent with Executive Order 18-03 – Supporting Workers’ Rights to Effectively Address Workplace Violations (dated June 12, 2018), HCA will evaluate Applications for best value and provide an Application preference in the amount of 50 points to any Applicant who certifies, pursuant to the certification attached as Attachment 4, that their firm does NOT require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waiver. Applicants that do require their employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waiver will not be disqualified evaluation of this RFA, however they will receive 0 out of 50 points for this section.

5.7. REQUIRED ATTACHMENTS

The attachments must be filled out and submitted with the Application. Refer to the instructions on each attachment to determine which ones are required to be included in the packet. Applicants can find the attachments at the end of this RFA

Attachment 1: Minimum & Preferred Qualifications (Preferred Qualifications Scored)

Attachment 2: Certifications and Assurances (Not Scored)

Attachment 3: Covid-19 Vaccination Certification (Not Scored)

Attachment 4: Executive Order 18-03 (Scored)

5.8. BONUS POINTS (OPTIONAL/SCORED) (based on region/risk/need/etc.)

Applicants are eligible to receive up to 30 additional points for meeting certain needs or goals as follows:

- 5.8.1. Community Letters of Support - 15 points per letter, maximum of 30 points, 2 letters maximum. Applicant's letters of support should come from members/organizations in their community who assist individuals in that community with substance abuse disorders and recovery options.

6. EVALUATION AND CONTRACT AWARD

6.1. ACCEPTANCE PERIOD

Applications must provide one hundred twenty (120) calendar days for acceptance by HCA from the due date for receipt of Applications.

6.2. MOST FAVORABLE TERMS

HCA reserves the right to make an award without further discussion of the Application submitted. Therefore, the Application should be submitted initially on the most favorable terms which the Applicant can propose. HCA reserve the right to contact an Applicant for clarification of its Application.

6.3. EVALUATION PROCEDURE

6.3.1. Administrative Review

All Applications received by the stated deadline in Section 2.2, Estimated Schedule of Procurement Activities, will be reviewed by the RFA Coordinator to ensure that the Applications contain all of the required information requested in the RFA. Only responsive Applications which meet the requirements will be evaluated by the evaluation team. Any Applicant who does not meet the stated qualifications or any Application that does not contain all of the required information will be rejected as non-responsive.

The RFA Coordinator may, at their sole discretion, contact the Applicant for clarification of any portion of the Applicant's Application. Applicants should take every precaution to ensure that all answers are clear, complete, and directly address the specific requirement.

HCA also reserves the right at its sole discretion to waive minor administrative irregularities.

6.3.2. Responsiveness

Responsive Applications will be evaluated strictly in accordance with the requirements stated in this RFA and any addenda issued. The evaluation of Applications will be accomplished by an evaluation team(s), to be designated by HCA, which will determine the ranking of the Applications. Evaluations will only be based upon information provided in the Applicant's Application.

Applications that have passed Administrative Review will be reviewed and scored by an evaluation team using a weighted scoring system, Section 6.4, *Evaluation Weighting and Scoring*. Applications will be evaluated strictly in accordance with the requirements set forth in this RFA and any addenda issued.

6.4. EVALUATION WEIGHTING AND SCORING

HCA reserves the right to award the contract to the Applicant whose Application is deemed to be in the best interest of HCA and the state of Washington.

A. Weighting and Total Score

Applicant's final score will be based on the following table:

SECTION #	SCORED APPLICATION CONTENTS	MAXIMUM POINTS POSSIBLE
5.1	Preferred Qualifications	100 points maximum
5.2	Cost Proposal	100 points maximum
5.3	Program Narrative	400 points maximum
5.4	Project Description	400 points maximum
5.6	Executive Order 18-03	50 points maximum
5.8	Community Letters of Support	30 points maximum
TOTAL MAXIMUM POINTS POSSIBLE		1,080

For purposes of evaluating and scoring Sections 5.3, Program Narrative, and 5.4, Project Description, points will be assigned to each question based on the average of all evaluation team members scores for the question (0-10) as identified in the scoring methodology in section D, below. The averaged scores will be multiplied by the assigned weights. Individual question scores will then be combined to result in the Applicant's total weighted score. Any point calculations that result in decimal points will be rounded to the nearest whole number.

B. Scoring of Preferred Qualifications in Section 5.1

Evaluators will score Section 5.1 based on Applicant's responses to questions 3 and 4 in Attachment 1. If Applicant answers "Yes" to a question about a preferred qualification, Applicant will receive 50 points (total of 100 points).

C. Scoring Methodology of the Cost Proposal in 5.2

Points for each cost category in Exhibit B of the Cost Proposal (see Section 5.2) will be awarded according to the following formula. Any point calculations that result in decimal points will be rounded to the nearest whole number.

Lowest Cost Proposal Element	x	Cost Proposal Maximum Available Points Per Element	=	Applicant's Cost Proposal Points
Applicant's Cost Proposal Element				

D. Scoring Methodology for Sections 5.3 and 5.4

Evaluators will score Sections 5.3, Program Narrative, and 5.4, Project Description, using the following (0-10) scoring methodology:

Scoring Methodology		
Score	Description	Scoring Criteria
10	Far Exceeds Requirements	The Applicant has provided an innovative, detailed, and thorough response to the requirement, and clearly demonstrates a high level of experience with, or understanding of the requirement.
7	Exceeds Requirements	The Applicant has demonstrated an above-average capability, approach, or solution and has provided a complete description of the capability, approach, or solution.
5	Meets Requirements	The Applicant has an acceptable capability of solution to meet this criterion and has described its approach in sufficient detail to be considered "as substantially meeting the requirements".
3	Below Requirements	The Applicant has established some capability to perform the requirement but descriptions regarding their approach are not sufficient to demonstrate the Applicant will be fully able to meet the requirements.
1	Substantially Below Requirements	The Applicant has not established the capability to perform the requirement, has marginally described its approach, or has simply restated the requirement.
0	No Value	The Applicant does not address any component of the requirement or no information was provided.

E. Scoring of Executive Order 18-03

Pursuant to RCW 39.26.160(3) and consistent with Executive Order 18-03 – Supporting Workers’ Rights to Effectively Address Workplace Violations (dated June 12, 2018), HCA will evaluate bids for best value and provide a bid preference in the amount of 50 points to any Applicant who certifies, pursuant to the certification attached as Attachment 3, that their firm does NOT require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waiver. Applicants that do require their employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waiver will not be disqualified evaluation of this RFA, however they will receive 0 out of 50 points for this section.

F. Scoring of Community Letters of Support

An Applicant will receive 15 points for each letter they submit with their application (total of two max for 30 points total). Evaluators will give an Applicant 15 points for a letter, if Evaluators determine that the letter is authentic and relevant to this RFA.

6.5. RFA NOTIFICATION TO APPLICANTS

HCA will notify the ASA(s) of their selection in writing upon completion of the evaluation process. Unsuccessful will be notified separately in writing.

6.6. DEBRIEFING OF UNSUCCESSFUL APPLICANTS

Any Applicant who submitted an Application and has been notified that it was not selected for contract award may request a debriefing. The request for a debriefing conference must be received by the RFA Coordinator no later than 5:00 p.m., local time, in Olympia, Washington, within three business days after the Unsuccessful Applicant Notification is e-mailed to the Applicant. The debriefing will be held within three business days of the request, or as schedules allow.

Discussion at the debriefing conference will be limited to the following:

- 6.6.1. Evaluation and scoring of the Applicant's Application;
- 6.6.2. Critique of the Application based on the evaluation; and
- 6.6.3. Review of the Applicant's final score in comparison with other final scores without identifying the other Applicants.

Topics an Applicant could have raised as part of the complaint process (Section 6.7) cannot be discussed as part of the debriefing conference, even if the Applicant did not submit a complaint.

Comparisons between Applications, or evaluations of the other Applications will not be allowed. Debriefing conferences may be conducted in person or on the telephone and will be scheduled for a maximum of thirty (30) minutes.

6.7. COMPLAINT PROCESS

- 6.7.1. Vendors may submit a complaint to HCA based on any of the following:
 - 6.7.1.1. The RFA unnecessarily restricts competition;
 - 6.7.1.2. The RFA evaluation or scoring process is unfair or unclear; or
 - 6.7.1.3. The RFA requirements are inadequate or insufficient to prepare a response.
- 6.7.2. A complaint must be submitted to HCA prior to five business days before the bid response deadline. The complaint must:
 - 6.7.2.1. Be in writing;
 - 6.7.2.2. Be sent to the RFA Coordinator in a timely manner;
 - 6.7.2.3. Clearly articulate the basis for the complaint; and
 - 6.7.2.4. Include a proposed remedy.

The RFA Coordinator will respond to the complaint in writing. The response to the complaint and any changes to the RFA will be posted on WEBS. The Director of HCA will be notified of all complaints and will be provided a copy of HCA's response. An Applicant or potential Applicant cannot raise during a bid protest any issue that the Applicant or potential Applicant raised in a complaint. HCA's action or inaction in response to a complaint will be final. There will be no appeal process.

6.8. PROTEST PROCEDURE

A protest may be made only by Applicant who submitted a response to this RFA and who have participated in a debriefing conference. Upon completing the debriefing conference, the Applicant is allowed five (5) Business Days to file a protest. Protests must be received by the Contracts Administrator no later than 4:30 p.m., Pacific Time, on the fifth Business Day following the Applicant's debriefing. Protests must be submitted by e-mail to ensure timely receipt.

Consistent with RCW 39.26.030, proposal submissions and proposal evaluations will be available for public inspection following the announcement of ASA(s). If requested by an Applicant who received a debriefing pursuant to Section 6.6 **Error! Reference source not found.**, the protest period will not conclude before the requestor has been provided with the applicable proposal submissions and proposal evaluations and provided five (5) Business Days to review the same. Applicant is responsible for notifying the RFA Coordinator of any such public disclosure requests so the timeline can be adjusted accordingly.

Applicants protesting this RFA must follow the procedures described below. Protests that do not follow these procedures will not be considered. This protest procedure constitutes the sole administrative remedy available to Applicants under this RFA.

- 6.8.1. All protests must be in writing, addressed to the Contracts Administrator, and signed by the protesting party or an authorized agent. The protest must state (1) the RFA number, (2) the grounds for the protest with specific facts, (3) complete statements of the action(s) being protested, and (4) the relief or corrective action being requested. Protests must be emailed to contracts@hca.wa.gov with the following subject line: "RFA # Protest – [Applicant Name]"
- 6.8.2. Only protests alleging an issue of fact concerning the following subjects will be considered:
 - 6.8.2.1. A matter of bias, discrimination, or conflict of interest on the part of an evaluator;
 - 6.8.2.1.1. Errors in computing the score; or
 - 6.8.2.1.2. Non-compliance with procedures described in the RFA, HCA's protest process, or Department of Enterprise Services (DES) policy requirements (POL-DES-170-00).

Protests based on anything other than those items listed above will not be considered. Protests will be rejected as without merit to the extent they address issues such as: 1) an evaluator's professional judgment on the quality of a proposal; or 2) HCA's assessment of its own needs or requirements.

- 6.8.3. Upon receipt of a protest, HCA will undertake a protest review. The HCA Director, or an HCA employee delegated by the HCA Director who is a neutral party with no involvement in the evaluation and award process (Protest Officer), will review and respond to the protest. If the HCA Director delegates the protest review to an HCA employee, the Director nonetheless reserves the right to make the final agency decision on the protest. The Protest Officer will have the right to seek additional information regarding the procurement from sources they deem appropriate in order to fully consider the protest.
- 6.8.4. If HCA determines in its sole discretion that a protest from one Applicant may affect the interests of another Applicant, then HCA may invite such Applicant to submit its views and any relevant information on the protest to the Protest Officer. In such a situation, the protest materials submitted by each Applicant will be made available to all other Applicants upon request.
- 6.8.5. The Protest Officer will issue a written protest response no more than ten (10) Business Days after receipt of the protest, unless additional time is needed, in which case HCA will notify the protesting Applicant in writing. The Protest Officer's decision is final, unless the HCA Director exercises their right to make the final agency decision on the protest. There will be no appeal process.

6.8.6. The final determination of the protest will:

6.8.6.1. Find the protest lacking in merit and uphold HCA's action; or

6.8.6.1.1. Find only technical or harmless errors in HCA's acquisition process and determine HCA to be in substantial compliance and reject the protest; or

6.8.6.1.2. Find merit in the protest and provide options to the HCA Director, which may include:

- 1) Correct the errors and re-evaluate all proposals; or
- 2) Issue a new solicitation document and begin a new process; or
- 3) Make other findings and determine other courses of action as appropriate.

If the protest is not successful, HCA will enter into a contract with the ASA(s), assuming the parties reach agreement on the contract's terms.

ATTACHMENT 1 – Minimum & Preferred Qualifications

Applicant must attest that they meet all of the following requirements by following instructions below and including with Application packet.

The following are the minimum and preferred qualifications for Applicants. Applicants must be able to answer “**YES**” to **ALL** of the following minimum qualifications listed below (Questions 1-2) to pass and to move forward to the Application evaluation process. Applicant may answer “**NO**” to any preferred qualifications listed below (questions with options to answer “**YES**” or “**NO**”; Questions 3-4)

Check or click in the box if your organization qualifies.

- 1) Licensed to do business in the state of Washington or provide a commitment that it will become licensed in Washington State within 30 calendar days of being selected as an Apparent Successful Applicant. (Minimum Qualification)

YES

- 2) A fire department located within Washington State that: (1) operates on a 24-hour basis, seven days a week; (2) can provide medical screening and assessments, either directly or through subcontracts, to individuals who visit or seek assistance for matters relating to substance use disorders; and (3) has a means of transportation to transport individuals to a hospital or medical facility. (Minimum Qualification)

YES

- 3) Are you a Behavioral Health Agency licensed by the Washington State Department of Health? (Preferred Qualification and not a Minimum Qualification) [50 Points]

YES NO

- 4) Are you a fire department that can deploy a mobile response unit that responds to requests for assistance in community-based locations? (Preferred Qualification and not a Minimum Qualification) [50 Points]

YES NO

ATTACHMENT 2 – Certifications and Assurances

A. APPLICANT PROFILE & SUBMITTAL FORM

1. COMPANY INFORMATION:

(a)	Firm Legal Name*	
	DBA (if any)	
	Street Address	
	Mailing Address:	
	Delivery Address	
	City, State, ZIP	

***Firm Legal Name:** HCA requires the legal name of your company as it is registered in the state of Washington or the state in which your company was registered. Enclose proof of the legal name of your company from the Secretary of State’s Office, Washington State Business Licensing Service (<http://bls.dor.wa.gov/>) or your state equivalent if not a Washington business.

(b)	Telephone Number		
	Area Code:	Number:	Extension:
	Toll Free Number		
	Area Code:	Number:	Extension:

(c)	Email Address

(d)	Provide a list identifying which parties of the organization have the authority to sign contracts/amendments on behalf of the firm.

(e)	Names, addresses, e-mail addresses and telephone numbers of the sole proprietor, partners, or principal officers as appropriate to the organization.
	Name & Title:
	Address:
	Email Address:
	Telephone Number

(f)	Primary Contact Person for Questions/Contract Negotiations, including address if different than above
	Name & Title:
	Address:

Email Address:		
Telephone Number for Contact Person		
Area Code:	Number:	Extension:

Click in checkbox to select

(g)	Legal Status	<input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Government <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other** <input type="checkbox"/> S-Corporation <input type="checkbox"/> Non-Profit (501c3)*
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*Organizations claiming status under Section 501(c)(3) of the Internal revenue code must provide a copy of the determination letter that recognizes that status.

**If Other was selected, describe Applicant's Legal Status.

(h)	Currently Involved in or planning a merger or divestiture?	<input type="checkbox"/> YES <input type="checkbox"/> NO
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Include a statement of the likelihood of merger, acquisition, or restructuring in the next 5 years.

(i)	WA State UBI	
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Applicant must be licensed in the state of Washington within 30 calendar days of notification of being selected as an Apparently Successful Applicant. If no current UBI affirm that your organization will obtain a business license within this timeline.

YES NO

If the State of Washington has exempted your business from state licensing, submit proof of that exemption.

(j)	Federal Tax Identification Number*	
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*Business tax identification numbers only. Do not provide any personal information.

(k)	Unique Entity Identifier issued by SAM.gov	
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(l)	Subcontractor (s)	<input type="checkbox"/> YES <input type="checkbox"/> NO
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If yes, complete and provide an information sheet for each Subcontractor, providing information for items 1(a) – 1(l) shown above.

The substitution of one Subcontractor for another may be made only at the discretion and prior written approval of HCA. The contractor is liable and responsible for all Subcontractor work.

2. FEDERAL & STATE DEBARMENT CERTIFICATION

Is the Applicant, including any of its officers or holder of controlling interest; or proposed Subcontractors presently or been previously debarred, suspended, proposed	<input type="checkbox"/> YES <input type="checkbox"/> NO
--	--

for debarment, declared ineligible, or voluntarily excluded from participation in any federal or state contracts or grants by any federal or state department or agency?	
--	--

Is the Applicant, including any of its officers or holder of controlling interest; or proposed Subcontractors presently or been previously debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in any federal or state contracts or grants by any federal or state department or agency?	<input type="checkbox"/> YES <input type="checkbox"/> NO
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3. MINIMUM QUALIFICATIONS

Applicant confirms they meet all the minimum requirements specified in Section 2.3 (MINIMUM QUALIFICATIONS) as a prerequisite to submitting a proposal in response to this solicitation.	<input type="checkbox"/> YES
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If an Applicant selects “yes” and it is verified later that the Applicant does not meet the Minimum Qualifications, the Applicant’s proposal will be considered non-responsive.

4. PROPRIETARY INFORMATION AND PUBLIC DISCLOSURE

Does Applicant’s proposal contain any proprietary or confidential information? Is Applicant claiming an exemption under chapter 42.56 RCW, the Public Records Act, or other state or federal law that provides for nondisclosure of a record?	<input type="checkbox"/> YES <input type="checkbox"/> NO
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If yes, provide an indexed list, identifying location of proprietary information by document name, page number, and location on page where the proprietary information is in the response. Each page claimed to be exempt from disclosure must reference either (1) the specific basis claimed under Chapter 42.56 RCW, the Public Records Act, or (2) a statement of why the information is designated proprietary or exempt from disclosure. Additionally, each page claimed to be exempt from disclosure must be clearly identified by the word “Proprietary” printed on the lower right-hand corner of the page. Stating or marking the entire proposal or entire sections as proprietary will not be honored.

5. CERTIFICATIONS AND ASSURANCES

Applicant makes the following certifications and assurances (5(a) – 5(i)) as a required element of the proposal attached, understanding that the truthfulness of the facts affirmed here and the continuing compliance with these requirements are conditions precedent to the award or continuation of the related contract:

(a)	Applicant’s answers and statements made in the proposal are true and correct.
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(b)	Applicant’s prices and/or cost data have been determined independently, without consultation, communication, or agreement with others for the purpose of restricting competition?
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Applicant may join with other persons or organizations for the purpose of presenting a single proposal.

(c)	Applicant’s attached proposal is a firm offer for a period of 120 days from the due date for receipt of proposals, or up until the start date of the resulting contract, and it may be accepted by HCA without further negotiation (except where Applicant has identified exceptions to the Draft Contract (see 10(g) below) or where there is lack of certainty in key terms) at any time within this period.
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(d)	Applicant understands that HCA will not be liable for any costs incurred by the Applicant in preparation of a proposal submitted in response to this RFA, in conduct of a presentation/product demonstration, or any activities related in any way to responding to this RFA. Funds are not obligated until a contract has been fully executed.	
(e)	Applicant understands that its proposal will become the property of HCA, and Applicant claims no proprietary rights to the ideas, writings, items, or samples, unless so stated in its response to question #4 in this <i>Applicant Profile</i> .	
(f)	Applicant confirms the prices and/or cost data submitted have not been knowingly disclosed by the Applicant and will not be knowingly disclosed by Applicant prior to announcement of ASA, directly or indirectly, to any other Applicant or to any competitor.	
(g)	(1) Applicant agrees that submission of the attached proposal constitutes acceptance of the solicitation contents and the attached Draft Contract terms and conditions. Additionally, if there are any exceptions to these terms, Applicant has described those exceptions in detail as redlines within Exhibit A, Draft Contract.	
	(2) Applicant is submitting exceptions to Exhibit A, Draft Contract with its proposal.	<input type="checkbox"/> YES <input type="checkbox"/> NO
(h)	Applicant confirms it has made no attempt and will make no attempt to induce any other person or firm to submit or not to submit a proposal for the purpose of restricting competition.	
(i)	Applicant grants HCA the right to contact references and others, who may have pertinent information regarding the ability of Applicant and the lead staff person(s) to perform the services contemplated by this solicitation.	

AUTHORIZED SIGNATURE(S):

By signing below, you hereby certify that you are an authorized representative of your firm/company and empowered to negotiate, enter into, and execute, in the name and on behalf of your firm/company, any agreements or documents associated with this solicitation and to bind your firm/company to the obligations stipulated therein.

I declare under penalty of perjury under the law of Washington that the information provided in this Exhibit A is true and correct.

Name:	Title:
Signature:	Date:
Location: (city or other location, and state or country)	

SIGNATURE OF APPLICANT AUTHORIZED REPRESENTATIVE

TITLE DATE

Attachment 3 – PROCLAMATION 21-14 – COVID-19 VACCINATION CERTIFICATION

To reduce the spread of COVID-19, Washington state Governor Jay Inslee, pursuant to emergency powers authorized in [RCW 43.06.220](#), issued [Proclamation 21-14 – COVID-19 Vaccination Requirement](#) (dated August 9, 2021), as amended by [Proclamation 21-14.1 – COVID-19 Vaccination Requirement](#) (dated August 20, 2021) and as may be amended thereafter. The Proclamation requires contractors who have goods, services, or public works contracts with a Washington state agency to ensure that their personnel (including Subcontractors) who perform contract activities on-site comply with the COVID-19 vaccination requirements, unless exempted as prescribed by the Proclamation.

HCA Solicitation Number:	2022HCA12
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I hereby certify, on behalf of the firm identified below, as follows (check one):

- COVID-19 CONTRACTOR VACCINATION PROCLAMATION COMPLIANCE. Contractor:*
 - Has reviewed and understands Contractor’s obligations as set forth in [Proclamation 21-14 – COVID-19 Vaccination Requirement](#) (dated August 9, 2021), as amended by [Proclamation 21-14.1 – COVID-19 Vaccination Requirement](#) (dated August 20, 2021); and
 - Contractor personnel (including Subcontractors) who are subject to the vaccination requirement in the above-referenced Proclamation will provide Agency proof of full vaccination against COVID-19 or appropriate exemption for which a reasonable accommodation has been provided.

OR
- CONTRACTOR IS NOT ABLE TO PERFORM IN COMPLIANCE WITH THE VACCINATION PROCLAMATION. CONTRACTOR IS NOT ABLE TO PERFORM THE CONTRACT OBLIGATIONS IN COMPLIANCE WITH THE ABOVE-REFERENCED PROCLAMATION.*

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

Firm Name: _____ Name of Contractor/Applicant – Print full legal entity name of firm	
By: _____ Signature of authorized person Title: _____ Title of person signing certificate Date: _____	_____ Print Name of person making certifications for firm Place: _____ Print city and state where signed

ATTACHMENT 4 – Executive Order 18-03

Workers’ Rights - Contractor Certification

Pursuant to the Washington State Governor’s Executive Order 18-03 (dated June 12, 2018), the Washington State Health Care Authority is seeking to contract with qualified entities and business owners who certify that their employees are not, as a condition of employment, subject to mandatory individual arbitration clauses and class or collective action waivers.

HCA Solicitation Number:	2022HCA12
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I hereby certify, on behalf of the firm identified below, as follows (check one):

- NO MANDATORY INDIVIDUAL ARBITRATION CLAUSES AND CLASS OR COLLECTIVE ACTION WAIVERS FOR EMPLOYEES.** This firm does NOT require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

OR

- MANDATORY INDIVIDUAL ARBITRATION CLAUSES AND CLASS OR COLLECTIVE ACTION WAIVERS FOR EMPLOYEES.** This firm requires its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

NAME OF FIRM REPRESENTED – PRINT FULL LEGAL ENTITY NAME OF FIRM:		
AUTHORIZED REPRESENTATIVE SIGNATURE:	AUTHORIZED REPRESENTATIVE TITLE:	
AUTHORIZED REPRESENTATIVE PRINTED NAME:	CITY AND STATE WHERE SIGNED	DATE SIGNED

EXHIBIT A – HCA General Contract Terms

Attached as a separate document

EXHIBIT B – Cost Proposal
Attached as a separate spreadsheet