

Academic Detailing Minutes – 7/24/18

Attendees:

MDH Participants

Calvin Johnson, Office of Procurement and Support Services (OPASS)

Afua Tisdale, Office of Procurement and Support Services (OPASS)

Onyeka Anaedozie, Prevention and Health Promotion Administration (PHPA)

Susan Greenbaum, Prevention and Health Promotion Administration (PHPA)

Vendors:

Daniel McMahon, Alosa Health, Inc.

Abbey Plusen, IHV, University of Maryland, School of Medicine

Anthony Amoroso, IHV, University of Maryland, School of Medicine

Whitney Burton, IHV, University of Maryland, School of Medicine

Michael Obiefune, IHV, University of Maryland, School of Medicine

J. Pope, Star Track, University of Maryland, School of Medicine

Keziah Utsler, Remedy Healthcare Consulting LLC

The Pre-Bid Meeting was called to order at 1:05 by Calvin Johnson, MDH Office of Procurement and Support Services, Contract Officer. Participants were welcomed and introductions were made. Calvin provided the following overview of the procurement process:

Key factors to remember when submitting a response to the Request for Proposals

- The contract resulting from this RFP is for 3 years, with 2 one-year renewal options to be exercised at the discretion of the Department.
- There are no minimum qualifications
- All affidavits must be signed as well as the Financial Proposal signature page.
- Vendor must be registered on eMaryland Market Place (eMM) and must have an eMM vendor number (<https://emaryland.buyspeed.com/bsollogin.jsp>).
- The Offeror's Resident Agent must be identified and must sign the Proposal Affidavit. For information of this, contact the Comptroller's Office (mdcomptroller@comp.state.md.us)
- Questions and answers are also posted on eMM.
- **Proposals are due on September 3, 2018 at 5:00 PM Local Time. Proposals submitted after this time will be rejected.** They are to be submitted to Maryland Department of Health, 201 W.

Preston St., 4th Floor, Baltimore, MD 21201 Attention: Procurement Officer. They can be mailed or hand carried. If hand carried, a receipt will be provided. Proposals may not be faxed or emailed.

- Written questions may be submitted, via email to the Procurement Officer at least 5 days prior to the proposal due date (mdh.solicitationquestions@maryland.gov)
- The contract will be awarded in accordance with the Competitive Sealed Proposals method under COMAR 21.05.03
- The contract shall be awarded to the responsible Offeror submitting the Proposal that has been determined to be the most advantageous to the State, considering price and evaluation factors set forth in this RFP.

Pre-Bid Conference
Tuesday /July 24, 2018/12:30 p.m.
Issue Date: 7/2//2018
Prevention and Health Promotion Administration
Academic Detailing Outreach and Education Program
MDH/OPASS # 18-18043

1. Good Afternoon, my name is Calvin T. Johnson from the Office of Procurement and Support Services, OPASS for short, and I am here to help you understand the contract process for this procurement. In case there is a need for clarifications after this meeting. I can be reached at 410.767.8216; my email address is calvin.johnson.maryland.gov. This meeting is to review the solicitation for provision of “*Academic Detailing Outreach and Education Program*”.

Susan Greenbaum the Procurement Coordinator has a sign-in sheet available for you. It’s very important that everyone sign in so if there is a need to contact you as a result of this meeting, we will be able to do so more easily. Feel free to leave your business cards with us.

As you know, the contract (s) resulting from this solicitation will be for 3-year contract with 2 one-year options. See Section 2.1 for more information.. Be assured that everything reviewed today is in the specifications; so if you miss any portion of the meeting, it should not affect your ability to respond to the RFP.

Carefully review **Section 2 –CONTRACTOR REQUIREMENTS: SCOPE OF WORK** beginning on Page 8 of the RFP. As noted, MDH/Office of Procurement & Support Services has issued this RFP for the provision of Academic Detailing Outreach and Education Program.

The IFB and all subsequent documentation regarding this solicitation will be posted on eMarylandMarketplace (www.eMaryland.buyspeed.com/bsa) and mdh (www.mdh.maryland.gov/opass/SitePages/HomePages/Home.aspx) websites. Please remember that in order to receive a contract award, a vendor must be “registered” on eMM. Registration is free. Review **Subsection 4.2** for details.

The Procurement Method used for this solicitation is **Competitive Sealed Proposal** Although this is a relatively uncomplicated process, I cannot stress too much the importance of following the steps and requirements.

An **MBE subcontracting goal** was **Not** established for the contracts resulting from this solicitation. However, Minority Business Enterprises are encouraged to respond to this solicitation.

Carefully review Subsection 4.3 – Questions, Page 22, regarding how to submit questions subsequent to this Pre-Bid Conference. Questions shall be submitted via <http://mdh.solicitationquestions@maryland.gov>. Questions should be submitted no later than five (5) days prior to the bid due date. The Procurement Officer, based on the availability of time to research and communicate an answer, shall decide whether an answer can be given before the bid due date. So try to get any questions to us ASAP.

Subsection 4.23, page 26 is regarding **Payments by Electronic Funds Transfer**. Carefully review this clause. By submitting a response to this solicitation, the Bidder agrees to accept payments by electronic funds transfer (EFT) unless the State Comptroller's Office grants an exemption. Payment by EFT is mandatory for contracts exceeding \$200,000. This section goes into detail on how to register or request an exemption.

2. POINTS TO EMPHASIZE: -

The **Offeror Minimum Qualifications** is listed in Section 1, subsection 2.1 on page 7. As noted, the bidder must provide proof with its bid that all minimum qualifications have been met.

The **Scope of Work - Requirements** are listed in Section 2.3, , pages 10 – 21 This is the “meat” of the solicitation that will give you a clear understanding of what the Department expects of the successful bidders in the provision of the services. Pay special attention to all subsections in the Scope of Work.

The Bid Format is listed in Section 5, pages 32 – 40. Pay special attention to the **Required Bid Submission Requirements**, subsection 5.4 starting on page 33 and the complete list of Attachments are listed on page 44. Failure to include all required items may void your bid submission.

- A. Also included in Section 6, is subsection 6.6 – **Documents Required upon Notice of Recommendation for Contract Award**. As noted, this is a list of documents that are only required from the winning bidder. Please keep this in mind when submitting your bid documents.
- B. One of the affidavits that you are required to complete, sign and submit if you are the winning bidder is the **Contract Affidavit (Attachment N)**. This form asks for the name of your resident agent. If there is a question of who your Resident Agent is, please call the State's Corporate Charter Division at (410) 767-1330. The office is located at 301 W. Preston Street.
- C. Please correctly review the **FINANCIAL PROPOSAL Instructions (Attachment B)**Page 48.
Academic Detailing Outreach and Education Program Price Form

Within five (5) working days of being notified of its recommendation for award, the Offeror must complete and submit the Contract Affidavit included as **Attachment N** and the Standard Contract as **Attachment M**. Please note that the contract shall not become effective until the Contract Affidavit is signed and returned.

- D. **WE REQUIRE THAT ALL REQUESTED ATTACHMENTS/DOCUMENTS BE RETURNED TO US IN TRIPPLICATE** with original signatures. We do **Not** require that the solicitation document be returned. A list of Attachments can be found on pages 45-99. Some pages may not be applicable to this particular procurement.

Again, please carefully review Section 4.4 –**Required Bid Submission** – Pages 35-37 in the specifications in order to submit the correct required attachments/documents.

- E. Lastly, don't forget to sign the Financial/Price Form and Signature pages (**Attachment F**).
- F. The most important matter is to get your bid to us by the date, time, and location listed. Your bid documents in triplicate are due no later than **Monday, September 3, 2018 no later than 5:00 p.m.** ***No Proposals will be accepted after 5:00 p.m.***

As listed on the Key Information Summary Sheet, please send your Proposal to my attention at MDH headquarters, 201 W. Preston Street, Room 416, Baltimore, Md. 21201. Bidders mailing bids should allow sufficient mail delivery time to ensure timely receipt. A receipt of delivery will be provided for hand-delivered bids.

The bid opening is public and may be attended by you. At the time of the bid opening, the apparent successful vendors will be determined. However, a final determination will be made after bid submission requirements, bid calculations, etc. are made and verified.

Please remember that after this Pre-Proposal Conference prospective Offeror may have questions answered that may help them understand the RFP, etc. Just keep in mind that the answers to your questions, if they are significant in nature, will be posted on the eMM and MDH websites. Therefore, please allow sufficient time for this to occur.

If you have any comments/questions about the procurement process, please contact me at 410.767.8216. Again, my email address is calvin.johnson.maryland.gov

Onyeka Anadozie, Deputy Director for the Infectious Disease Prevention and Health Services Bureau (IDPHSB), Prevention and Health Promotion Administration (PHPA) provided:

Description of Services and Background

This solicitation is being issued for the purpose of finding a contractor to develop, train and operate Maryland's comprehensive academic detailing program, which must include education and

outreach on HIV, viral hepatitis, STIs, PrEP, EPT, extra-genital testing and complete case reporting and data collection, including SOGI. This program will institute a service for physicians and other healthcare professionals in which evidence-based, non-commercial information about recommendations for general and disease-specific health screenings to be incorporated into a standard of care for Maryland residents with the intent to improve the quality of routine health care and health outcomes in the state.

Academic detailing is non-commercial-based educational outreach to medical providers. The process involves face-to-face education of providers by trained health care professionals, typically pharmacists, physicians, or nurses. The goal of academic detailing is to improve prescribing of targeted drugs and implementation of appropriate treatment algorithms to be consistent with medical evidence from randomized controlled trials, which ultimately improves patient care and can reduce health care costs. A key component of non-commercial academic detailing programs is that the academic detailers/clinical educators, management, staff, program developers and others do not have any financial links to the pharmaceutical industry. Academic detailing has been studied for over 25 years and has been shown to be effective at improving prescribing of targeted medications. Academic detailing is also used to educate providers regarding other non-drug interventions, such as screening and treatment guidelines.

The Prevention and Health Promotion Administration within the Maryland Department of Health has a mission to protect, promote and improve the health and well-being of all Marylanders and their families through provision of public health leadership and through community-based public health efforts in partnership with local health departments, providers, community based organizations, and public and private sector agencies, giving special attention to at-risk and vulnerable populations. The Administration envisions a future in which all Marylanders and their families enjoy optimal health and well-being.

The Infectious Disease Prevention and Health Services Bureau within the Prevention and Health Promotion Administration works to improve the health of Marylanders by reducing the transmission of infectious diseases and helping impacted persons live longer, healthier lives. The Bureau is dedicated to primary and secondary prevention of HIV transmission in Maryland. In partnership with impacted communities, the Bureau develops, funds and evaluates effective Adult Viral Hepatitis, Sexually Transmitted Infection, and HIV prevention and treatment programs. The Bureau provides training, support and technical assistance to develop the capacity of agencies and individuals to successfully deliver those interventions and services, including, but not limited to, local health departments, providers, community based organizations, and public and private sector agencies.

The Center for Viral Hepatitis within the Infectious Disease Prevention and Health Services Bureau is responsible for the coordinated statewide efforts to screen, test, treat, and eventually eliminate viral hepatitis in Maryland. In 2014, the Department was awarded funding from CDC to establish Maryland Community-based Programs to Test and Cure Hepatitis C (“Maryland Test and Cure Program”). This four-year grant has provided significant insight into the availability of HCV screening and care services in Baltimore City and Baltimore County—the Maryland counties with the highest prevalence of HCV. Additionally, it has expanded provider capacity to identify and treat individuals with HCV infection. In addition, the Department received another grant from CDC entitled “Improving Hepatitis B and C Care Cascades: Focus on Increased Testing and Diagnosis.” One of the most noteworthy activities supported by this grant is the completion of a situational analysis to describe (a) jurisdiction-wide disease burden, epidemiological trends, and laws and policies impacting testing, care and treatment of HBV and HCV infection; (b) identify high prevalence areas; and (c) identify settings where testing should be conducted.

The Center for HIV/STI Integration and Capacity (CHSIC) supports the Infectious Disease Prevention and Health Services Bureau’s program integration, behavioral health, population health, social marketing,

and capacity building activities. CHSIC facilitates the Bureau's Cross Center Leadership Team to further collaboration across and among Bureau units. CHSIC administers the HIV-prevention set-aside in the Maryland Behavioral Health Administration's substance abuse Block Grant from the Substance Abuse and Mental Health Services Administration. These resources support the implementation of Rewriting Inner Scripts (RISE), a behavioral intervention designed to interrupt the replication of absorbed racism and homophobia among same gender loving men of color. These resources also support training, implementation, monitoring, and evaluation of Sexual Health in Recovery, a psychoeducational curricula to support recovering persons in reclaiming sexuality as an ally, rather than a relapse trigger, in recovery. CHSIC monitors the policy environment, identifying and recommending opportunities for legislative, regulatory, and policy improvements. CHSIC develops regulations for the Center portfolio. CHSIC leads community mobilization efforts related to Vulnerable Populations, such as the Gay, Bisexual and Same Gender Loving Men's Response Team, which facilitates collaboration among MSM-serving grantees; the Transgender Response Team, which generates and issues Best Practice Bulletins for serving transgender clients in specific service environments; and the annual Youth Summit, which builds sexual health knowledge among adolescents. CHSIC is leading the Bureau's efforts to expand PrEP capacity and awareness statewide. CHSIC funds, trains, and manages local health departments offering PrEP.

The Center for HIV Prevention and Health Services manages the state response to the evolving needs of those Marylanders most impacted by HIV or AIDS at the individual, community, and system level. Through a portfolio of directly funded programs, the Center develops effective health care practices for dissemination throughout the state. The Center works to increase positive health outcomes across the continuum of HIV care from diagnosis through viral load suppression. It works with affected community, industry partners, and healthcare access points to develop healthcare policy, engage in health systems advocacy, and ensure measurable impact of HIV-informed systems of care. Through a cooperative agreement with the CDC, the Center implements HIV testing safety-net programs in all 24 of Maryland's health jurisdictions. In addition, the Center certifies all community-based testing programs and is the designee of the Maryland Office of Healthcare Quality for HIV testing. In collaboration with HRSA's Ryan White HIV/AIDS Program (RWHAP), HUD's Housing Opportunity for Persons with AIDS (HOPWA), and the CDC, the Center administers funding to over 42 service-delivery sites to ensure Maryland's response to HIV remains relevant, responsive, and effective, regardless of locality, for those living with, affected by, or vulnerable to HIV infection.

The Center for HIV Surveillance, Epidemiology and Evaluation seeks to collect the information necessary to describe the HIV/AIDS epidemic in Maryland, to evaluate and improve the quality of the information collection activities, to analyze and report this information to policymakers and the community for HIV planning, and to evaluate the effectiveness of programs targeting the HIV/AIDS epidemic. Information is collected across the entire spectrum of HIV from exposure to infection to disease progression to death. The primary source of information is through the legally mandated HIV/AIDS disease reporting (HGA 18-201.1, 18-202.1, and 18-205). This standard disease reporting is supplemented through special surveillance activities, research projects, and health services evaluation activities. Funding for these activities are provided through competitive grant awards from the CDC and HRSA.

The Contractor shall develop, train and recruit a professional academic detailing clinical education and outreach program for clinical providers in Maryland on HIV, viral hepatitis, chlamydia, gonorrhea, syphilis, and PrEP in order to increase diagnoses of diseases among persons unaware of their diseases status, enhance linkage to care among relevant infectious disease providers, improve co-management of patients with co-occurring conditions, and affect improved treatment outcomes.

General Requirements

- Contractor must be a leader in the field of academic detailing and have at least five (5) years of experience implementing and managing an academic program.
- Contractor must be experienced in providing clinical education and outreach on at least two (2) of the following diseases: HIV, viral hepatitis, chlamydia, gonorrhea, and syphilis.
- Contractor must be experienced in providing clinical education and outreach shall be experienced in providing clinical education and outreach on at least one (1) of the following topic areas: pre-exposure prophylaxis (PrEP), expedited partner therapy (EPT), extra-genital testing, provider case reporting, sexual orientation and gender identification (SOGI) data collection.
- Contractor must have staff of pharmacists, medical doctors or nurses with relevant degrees and a minimum of five (5) years field experience.

Staffing

- Contractor must recruit a minimum of two (2) academic detailers, also known as clinical educators, with these minimum qualifications: degree and training as a pharmacist, nurse, medical doctor or other clinician; minimum of five (5) years in direct clinical work, minimum of two (2) years in academic detailing or equivalent clinical education setting, and minimum of two (2) years with experience in either HIV, viral hepatitis, chlamydia, gonorrhea, or syphilis; and a minimum of two (2) years with experience in either PrEP, EPT, extra-genital testing, provider case reporting, or SOGI data collection.
- Contractor shall provide a minimum of 16 hours of specialized training on academic detailing techniques, including effective communication with providers, data collection, use of electronic-based data collection devices, and program and statistical reporting.
- Contractor shall work in conjunction with the Department to provide the following training on clinical topics: minimum of eight (8) hours on HIV screening, co-management of patients living with HIV between primary care and other providers (e.g. pediatricians, gynecologists, etc.) and HIV/infectious disease providers, and other related HIV topics (treatment adherence, anti-retroviral medications, post-exposure prophylaxis or PEP, PrEP, etc.); minimum of four (4) hours on viral hepatitis screening and treatment guidelines; and minimum of eight (8) hours on STD screening and treatment recommendations, when appropriate.
- Contractor shall work in conjunction with the Contract Administrator to provide semi-annual training sessions, when deemed necessary, on updated screening and/or treatment guidelines.

Reports

- The Contractor shall work with the Contract Administrator to identify key milestones to evaluate the effectiveness of the program.
- The Contractor shall develop and maintain a data collection system to track the encounters by the academic detailers/clinical educators with each participating physician and other health professionals including educational materials used, questions asked, detailer's assessment, knowledge on the disease area and recommended screenings, tracking of adoption of screening and other pertinent information.

- The Contractor shall develop and maintain a tool to keep track of all CME credits provided for participating physicians for auditing purposes.
- The Contractor shall provide monthly reports on the number of physicians and other health professionals who participated in the academic detailing program.
- The Contractor shall provide an annual assessment of the quality and effectiveness of the academic detailing program based on assessments gathered from those who participated in the program, including the impact of academic detailing on physician's routine screening practices, treatment and other relevant practices, if such data is accessible.

Evidence-based Materials

- The Contractor shall develop rigorous, non-commercial, evidence-based educational materials on optimum medical practice for screening and treating HIV, hepatitis, chlamydia, syphilis, and gonorrhea among Maryland residents.
- The Contractor shall develop rigorous, non-commercial, evidence-based educational materials on optimum medical practice for screening and providing PrEP and EPT to Maryland residents.
- The Contractor shall develop rigorous, non-commercial, evidence-based educational materials on optimum medical practice for extra-genital testing, provider case reporting, and SOGI data collection.
- The Contractor shall ensure that all educational materials are relevant to primary care and other population-based medical providers, including pediatricians, gynecologists, obstetricians, geriatricians and other specialty providers.
- The Contractor shall ensure that all materials focus on routine population-based screening, co-managing of patients with co-occurring conditions, promoting treatment adherence and improving health outcomes.
- The Contractor shall provide a comprehensive evidence document that includes a comprehensive and up-to-date review of the most current medical literature on a given screening practice and related pharmacotherapy, including screening algorithms, medication dosing and treatment algorithms, and other relevant practices.
- The Contractor shall provide a concise presentation document with key facts on the relevant disease, screening guidelines, treatment recommendations and other practices.
- The Contractor shall make these documents available in printed and electronic formats.
- The Contractor shall, at the direction of the Contract Administrator, develop one (1) evidence document per condition and one (1) presentation document per condition. The Contractor shall print at a minimum 400 copies of each document.
- The Contractor shall ensure that all educational print materials shall be branded to prominently display sponsorship by Maryland Department of Health. The Contractor shall also provide

Department-branded printed educational materials to be used by the detailers/clinical educators during their outreach and education sessions.

Operation of Academic Detailing/Clinical Education Program

- The Contractor shall assign a project management staff person to be responsible for the operation of the program, including supervision of the detailers/clinical educators and act as a liaison to the Contract Administrator.
- The Contractor shall identify medical practices for education and outreach sessions. The identification shall be, but not limited to, these sources: Contract Administrator provided list of practitioners, lists through relevant professional medical associations, lists of practitioners affiliated with insurance providers, and identification of practices during visits to other practices, such as within a professional medical building. This list must be approved by the Contract Monitor.
- The Contractor shall provide in-office education sessions to clinical and non-clinical staff at the medical practices. The education will be structured in three sessions as follows:
 - First session will introduce medical practice to the academic detailing/clinical education project; describe the option for Continuing Medical Education (CME) credit; and survey physician and practice manager or substitute on HIV, hepatitis, syphilis, chlamydia, gonorrhea, PrEP, EPT, extra-genital testing, current screening and treatment protocols, and practice operations for case reporting and data collection (e.g. electronic medical record, lab, charts, etc.).
 - Second session will provide the education on screening, treatment, patient co-management and other relevant information, provide the evidence document and option for CME credit and obtain commitment to initiating screening practices.
 - Third session will provide any additional education as requested by the practice and survey physician and practice on changes in screening practice and other aspects of the project.
- The Contractor shall maintain regular communications with the academic detailers/clinical educators, manage scheduling of education sessions, obtain feedback from academic detailers/clinical educators on sessions, provide continuous updates as necessary, and assess and recommend opportunities for improvements and expansion.
- The Contractor shall develop and maintain an information infrastructure to correspond with the academic detailers/clinical educators and provide opportunities for relationship-building, exchanging ideas, training and practicing on new clinical topics, monitoring progress, providing feedback, and communicating news and developments.
- The Contractor shall maintain monthly calls with the Contract Administrator on project progress and minimum of two in-person meetings per year.

Continuing Medical Education (CME) Credit

- The Contractor shall arrange for and cover the costs of Continuing Medical Education (CME) credits through an Accreditation Council for Continuing Medical Education (ACCME) accredited institution for the physicians who successfully participate in this program.

Objectives

- The Contractor shall inform and educate a minimum of 1,100 physicians and 1,500 other clinical and practice-related staff through a minimum of 2,700 visits per year on current recommendations for general and disease-specific health screenings to be incorporated into a standard of care for Maryland residents, including HIV, hepatitis, syphilis, gonorrhea, chlamydia, PrEP, EPT, and extra-genital testing.

Questions and Answers

Q - For the sessions, is it an individual encounter or meeting with many?

A – It depends on what the session looks like. It can be a session with 10 providers. The emphasis is on how many clinicians can be reached.

Q – Does it matter what association the accreditation comes from?

A – Check with Contract Monitor first for approval

Q – There are so many different techniques, what are you looking for, what is the most appropriate?

A – We are looking for the vendor to propose this, looking for innovation.

Q – Will the State be requiring a certain amount of CMEs?

A – Although we can't force anyone to participate, we encourage participation.

Q – Are the project Managers required to have a certain number of years' experience?

A – No

Q – Is physical interaction required?

A – The initial sessions should be done in person and perhaps the subsequent sessions can be done remotely. Additionally, the proposal would have to prove the effectiveness of tele-medicine or online modules?

Q – How much does the State have allocated for this RFP?

A. – The State cannot provide that response however you should demonstrate in your proposal your ability to perform what is outlined in the RFP as well as submit a financial proposal as required by the RFP .

Q – Is the financial proposal weighed more heavily than the technical proposal?

A – They are weighted the same. The committee will evaluate and rank the technical proposals before the financial proposals are opened. The evaluation committee will make a recommendation to the Procurement Officer. The Procurement Officer will have the final determination.

Q-Do you the State have preexisting priority locations? How will you envision the rollout?

A-Yes, we(State) do, but we are looking for the proposal that will have the best solutions as to an effective strategy to rollout.

Q – Can other costs, such as Medicaid data purchasing, be put on the Financial Proposal form?

A – The State will review each proposal. Please be sure to fill in the correctly.

Q – Can certain tabs be skipped, such as minimum Qualifications?

A – Please review the RFP to ensure the correct sections that many or may not be applicable.

Q – Do the staff assigned to this contract have to be 100% on this contract?

A – Please submit this question to the MDH Website (mdh.solicitationquestions@maryland.gov)