STATE OF ILLINOIS

Strike Teams for COVID-19 Treatments and COVID-19 Vaccines REQUEST FOR PROPOSALS

DUE: September 26, 2021, 5:00 PM CST

Background

The Illinois Department of Public Health (IDPH) is seeking to partner with a vendor that will provide up to five (5)strike teams to assist long term care (LTC) facilities with administering monoclonal antibody (mAB) therapy, oral antivirals and COVID-19 vaccines to their residents when indicated. The strike teams will be comprised of clinical staff (medical provider, including pharmacist, with prescribing privileges and licensed nurses). IDPH will allocate the COVID-19 vaccines, oral antivirals, and mAB for pre-exposure prophylaxis (Evusheld), for free, to these strike teams, for as long as the state-sponsored program exists. IDPH will allocate a certain quantity of mAB for treatment purposes (currently Bebtelovimab which is separate from Evusheld mAB for pre-exposure prophylaxis) free for use for LTC residents who cannot access it in a timely manner through other sources. However, the vendor will also be encouraged to directly obtain mAB therapy which is commercially available. Each strike team will be expected to travel to about five (5) LTC facilities each week to administer the mAB and/or COVID-19 booster vaccines, depending on the number of residents who require these services, at IDPH guidance and referral. IDPH will facilitate the identification of the LTC facilities in need. Note that there are about 1,600 LTC facilities in Illinois. This RFP is being considered under the Emergency Declaration need for urgent mitigation strategies for Covid-19 in anticipation of a surge in cases and hospitalizations during the fall/winter seasons.

While oral treatments for COVID-19 are widely available, the first line oral agent Paxlovid may interact with medications that LTC residents are commonly prescribed. This has resulted in a high demand for monoclonal antibodies as an alternative to Paxlovid. Monoclonal antibody therapy is an effective option for mild to moderate COVID-19 illness to prevent hospitalization and death, especially in high-risk individuals like LTC residents. The therapy is administered via intravenous injection, which may not be possible for LTC staff to administer. The strike teams will additionally facilitate COVID-19 vaccine clinics, if LTCs request these services or if IDPH identifies a need for supporting these services at an LTCF. Finally, a specific mAB product (Evusheld) can also be used for preventative measures for those with moderate to severe immunosuppression who are not expected receive adequate protection from vaccines alone.

The resulting contract with the awarded vendor shall have an initial term of twelve (12) months from the date of execution with one twelve (12) month renewal option. The renewal option may only be exercised in conjunction with the renewal of the COVID-19 Gubernatorial Disaster Proclamation for the renewal contract period.

Any vendor requiring clarification of any section of this RFP or wishing to comment on any requirement of the RFP must submit specific questions, in writing via email to the point of contact address directed below, no later than the deadline for questions indicated in the "Key Dates" section of this RFP. Questions or comments not raised in writing on or before the deadline to submit questions are thereafter waived. At the close of the question period, a copy of all questions or comments and the State's responses will be posted on the IDPH's website shown below. Every effort

will be made to post this information as soon as possible after the question period ends, contingent on the number and complexity of the questions.

Key Dates

9/9/22	RFP Release
9/16/22	Questions due from potential vendors due via email to $\underline{\text{William.Smith@illinois.gov}} \ \ \text{not later}$
	than 5:00 p.m. Central Time
9/21/22	Answers to questions from potential vendors released via IDPH COVID-19 website link
	below: https://dph.illinois.gov/resource-center/funding-opportunities/request-for-
	proposal/covid19-treatment-vaccine-strike-teams.html
9/26/22	Submissions due via email to William.Smith@illinois.gov not later than 5:00 p.m. Central
	Standard Time
10/7/22 (estimated)	Vendor notification of award

Directions

The State is seeking proposals from interested vendors with the ability to provide clinical services under the supervision of a medical provider licensed in Illinois and in good standing with all regulatory and licensure standards, who can also travel to long term care facilities across Illinois (outside of the city of Chicago) to deliver the services described in this RFP to protect the health and improve the lives of Illinoisans as COVID-19 response and recovery efforts continue.

The proposal must be submitted as two separate documents. The first document will include the vendor's response as to how it will deliver the services required and cannot include any pricing information. The all-inclusive pricing information must be presented on the attached budget template (see Attachment A). Each document will be evaluated separately. Proposals should include:

- Name of vendor, vendor's address, and contact person, including work phone, cell phone, and email address.
- Operational Plan that describes the vendor's proposal as described in the Scope of Work.
- Proposed staffing plan at the immediate commencement of the contract.
- References, which shall include the names and contact information for three (3) entities for whom the vendor has provided similar services described in the proposal.
- Proposed pricing (submitted in a separate, clearly labeled attachment from the rest of the proposal).

Please ensure that there is no mention of the pricing within the technical proposal submission. Inclusion of pricing information within the technical proposal submission could result in the submission being deemed non-responsive.

Proposals must be submitted via email not later than 5:00 p.m., Central Standard Time on 9/26/22 to:

William Smith
Illinois Department of Public Health
William.Smith@illinois.gov

The State reserves the right to award the contract to the vendor that has the best overall proposal within the State's timelines and to issue supplemental solicitations as warranted.

The State is not obligated to award a contract pursuant to this solicitation. If the State issues an award, the award will be made to the responsive and responsible vendor whose offer best meets the specified criteria. If the State does not consider the price to be fair and reasonable, and negotiations fail to result in a contract or fail to meet an acceptable price, then the State reserves the right to discontinue negotiations with the vendor and begin negotiations with the next highest scoring vendor. The State will determine whether the price is fair and reasonable by considering the offer, including the vendor's qualifications, the vendor's reputation, all prices submitted, other known prices, the project budget, and other relevant factors. The State will notify each vendor if they were selected for award upon the completion of successful contract negotiations.

Partial awards will not be considered.

The State evaluates three categories of information: Responsibility, Responsiveness, and Price. The State considers the information provided and the quality of that information when evaluating proposals. If the State finds a failure or deficiency, the State may reject the proposal or reflect the failure or deficiency in the evaluation.

The State may award to the most responsive and responsible vendor whose proposal best meets the below criteria.

- The State determines how well a proposal meets the responsiveness requirements. The State ranks proposals, without consideration of price, from best to least qualified using a point ranking system (unless otherwise specified) as an aid in conducting the evaluation. Vendors who receive fewer than the minimum required points will not be considered for price evaluation and award.
- If the State does not consider the price to be fair and reasonable, and negotiations fail to meet an acceptable price, the State reserves the right to cancel the award and take appropriate action to meet the needs of the State. The State determines whether the price is fair and reasonable by considering the proposal, including the vendor's qualifications, the vendor's reputation, all prices submitted, other known prices, the project budget, and other relevant factors.

Scope of Work

IDPH is seeking to partner with a vendor for the Strike Teams for Covid-19 Treatment, Prevention (PreP), and COVID-19 Vaccination.

The vendor will work closely with IDPH and other State stakeholders to plan and implement the expansion of COVID-19 treatment, PreP, and vaccinations in long-term care facilities that are experiencing challenges in obtaining these services in a timely manner for their residents.

To meet the State's requirements, vendor's proposals must include the below requirements. Please respond to each listed request for information and provide significant detail related to your firm's experience and approach toward each requirement. The responses to the requests below will be the basis for the technical evaluation of submissions and resultant award.

Provision of medical therapeutic and prophylactic interventions and infection prevention services

Provide services related to provision of monoclonal antibodies (mAB), antivirals and reporting in LTC facilities, particularly skilled nursing and assisted living facilities, outside of the City of Chicago as outlined in greater detail in sections below.

- Form clinical teams that can deploy to LTC facilities including those as defined by the Nursing Home Care Act (210 ILCS 45/1-101, et seq., e.g., skilled nursing facilities and assisted living facilities).
 - Teams must include at least one clinician (physician or nurse); see logistics section below.
 - Teams must be available to deploy within 48 hours of request by IDPH.
 - Teams conduct technical assistance and support clinical services for COVID-19 at facilities as directed by IDPH, who will utilize data to prioritize facilities in need of therapeutics and prophylactic therapies.

- Staffing must be sufficiently stable, so that staff on treatment teams can be authenticated into a secure portal authentication such as INEDSS and ICARE will be offered weekly for the first month, monthly for the next three months, then quarterly. In your response, describe how your organization will identify, train, and retain operational staff with relevant competencies.
- Teams must be of sufficient size to provide services and consultations to LTC facilities regarding treatment, vaccination, and reporting for up to 100 individuals per clinical service provision event or per day. All teams and staff utilized must be licensed and trained in accordance with any applicable laws and regulations.
- Teams must include personnel able to contact the Medical Director and/or Director of Nursing of each facility to review list of positive patients and exposures to discuss potential use of COVID-19 treatment(s) as indicated by the most prevalent circulating SARS-CoV-2 variant (as informed by IDPH). Teams must have personnel able to discuss the option for receipt of antivirals, and review of potential drug interactions and ability to pause medications which may significantly interact.
- Teams must have personnel able to contact the Medical Director and/or Director of Nursing of each facility to review list of residents to discuss potential use of COVID-19 vaccines.
- Vendor must facilitate ordering of vaccine, mAB and/or antiviral following discussion with Illinois Department of Public Health (IDPH) and the facility.
- Vendor must be able to educate providers caring for immunocompromised patients (e.g., transplant patients, chemotherapy patients, etc.) on pre-exposure prophylaxis (PrEP), post-exposure prophylaxis (PEP) and the need for rapid evaluation if exposed
- For all facilities, collect the resident census, including:
 - o confirm those who tested SARS-CoV-2 positive within the prior 7 days for receipt of treatment with mAB:
 - Confirm those residents identified as close contacts of COVID-19 cases within 5 days for receipt of oral antiviral;
 - Confirm those who are not up to date on vaccines for receipt of COVID-19 vaccine; and
 - Confirm those who meet eligibility criteria for Pre Exposure Prophylaxis (Evusheld) for receipt of the same.
- Provide treatment to patient, including:
 - o Intravenous injection with an additional one (1)hour of observation post-infusion, with checks during infusion and observation;
 - Oral medications with screening and adjustment of co-administered drugs/ drug interactions
 - Provide pre-exposure prophylaxis with intramuscular injection (Evusheld) and post -injection monitoring for one (1) hour, every 6 months;
 - Provide COVID-19 vaccine to the eligible residents; and
 - o For all individuals for whom treatment or prophylaxis is provided, collect necessary patient identifiable and reportable information (e.g., full name, date of birth, race/ethnicity, address)
- Collect relevant epidemiologic information, as determined by IDPH, and report to IDPH in compliance with federal, state, and local reporting mandates.
- Consideration may be given to provide mAB or antivirals to infected or exposed healthcare personnel. Infected individuals would be at home on isolation; exposed individuals who are vaccinated may continue to work but could qualify for treatment.

- Collaborate with infection prevention and control assessments at facilities and provide information, when requested, that may impact infection and prevention control reports to IDPH.
- Collect patient-level clinical outcome data (such as hospitalization, death, COVID-19 rebound symptoms) weekly for up to 2 weeks after completion of treatment, PreP or vaccination.

Logistics regarding facilitation of receipt of services

- Vendors must be registered with Amerisource Bergen (ABC) to order Bebtelovimab and have an HHS
 Health Partner Ordering Platform (HPOP) for ordering Bebtelovimab, Evusheld, and antivirals or other
 ordering hubs designated by IDPH.
- Additional information to consider are as follows:
 - Medication must be stored according to manufacturer's specifications prior to delivery to facility.
 - Medication should be administered at the long-term care facility; vendor team must include appropriate staffing qualified to administer and observe intravenous and/or intramuscular injections.
 - Administration and observation time can take from 80-120 minutes.
 - Under an amendment to the PREP Act (Public Readiness and Emergency Preparedness Act for Medical Countermeasures Against COVID-19), Pharmacists and qualified Pharmacy Technicians may prescribe and administer COVID-19 therapeutics (subcutaneously, orally, or intramuscularly) unless otherwise stated in the product EUA (https://www.ashp.org/-/media/assets/advocacyissues/docs/GRDHHS-PREP-ActDeclaration-Amendment-9-Fact-Sheet.pdf)
- The team coordinator should contact the long-term care site and have a point of contact prior to team deployment.
- Determine who is responsible for ordering the vaccine or treatment administration. Options include a referring provider, an on-site provider, or a standing order.
- Team should be prepared to manage adverse reactions, including:
 - o Administration may be adjusted based on patient circumstances; and
 - Ensure an emergency action plan is in place that includes the ability to activate EMS, if necessary (a requirement for administration under the EUA)
- Appropriate personal protective equipment (PPE) must be worn by the team on site at all times. Many facilities in need of treatment or post-exposure prophylaxis will be in an outbreak. N95 fit-tested respirators and eyewear, along with gown and gloves, must be worn by clinical staff working with infected or exposed residents.

Reporting

- Team must provide IDPH information on utilization and information regarding product on hand in compliance with federal, state, and local reporting mandates.
- For all individuals for whom treatment or prophylaxis is provided, collect necessary patient identifiable and reportable information (e.g., full name, date of birth, race/ethnicity, address) into a REDCap data capture tool designated by IDPH.
- Team must provide reports of adverse events:
 - o Events that are potentially attributable to vaccine or treatment use must be reported to the **FDA**. (Refer to the Fact Sheet for Healthcare Providers as part of EUA for guidance)

- o Complete and submit a MedWatch form or complete and fax FDA Form 3500 to report.
- Site must maintain records regarding use of the mAB by patients, including the following:
 - Inventory information: e.g., lot numbers, quantity, receiving site, receipt date, product storage; and
 - Patient information: e.g., patient name, age, race, ethnicity, disease manifestation, number of doses administered per patient, other drugs administered.
 - Ensure that any records associated with this EUA are maintained for inspection upon request.
- Reporting to Primary Care Physician which residents received therapy: Vendor will report to the facility
 which individuals received services, and which services they received. Services must include educational
 materials including fact sheet about any medications and/or vaccines administered.
- Vendor must submit quarterly performance reports to IDPH summarizing number of facilities and individuals reached, number of therapeutics and vaccines administered, key challenges, lessons learned, and any success highlights.

Quantity of services

Vendor shall work with IDPH to reach the following goals per week:

o 5-10 sites total for targeted COVID-19 therapeutics, prophylaxis, and treatment education for healthcare providers per week;In your response describe how your organization plans to offer flexible capacity regarding deployment frequency and volume.

Equipment and Materials:

- o IDPH will allocate mAb for PreP, vaccine, and antivirals for these efforts. Limited supply of mAB for treatment will also be available from IDPH, with the goal of the vendor being able to order and bill for majority of mAB (Bebtelovimab) through current commercial use.
- Vendor is responsible for providing print materials for educational efforts.
- Vendor is responsible for all equipment and materials including, but not limited to, additional educational materials as needed, consent forms, PPE for vendor's personnel, other medication administration materials not provided by IDPH, data entry materials (e.g. computers and WiFi hotspots, as needed, and materials needed on-site to indicate medication administration in process, such as signage).
- In addition, providers must have a functional HL7 interface into I-CARE and be able to submit vaccination records within 24 hours of vaccination, as applicable
- Providers should have a quality assessment and Quality improvement process/protocol built into their operations

Additional Requirements

A) There is a Business Enterprise Program (BEP) target of 4% for this solicitation. Vendor submissions should include all BEP target information through a Utilization Plan (see Attachment B). Failure to submit a Utilization Plan may render the offer non-responsive. Businesses included in Utilization Plans as meeting BEP

requirements as prime vendors or subcontractors must be certified by the Department of Central Management Services as BEP vendors. Vendors may visit https://cms.diversitycompliance.com to search for certified BEP vendors. The NIGP codes used to calculate the Business Enterprise Goal, and a list of the BEP vendors associated with those codes, are attached to this solicitation as Attachment C. This is not an all-encompassing list of vendors that may be used as subcontractors to fulfill this goal. If the vendor has a potential subcontracting opportunity for goods or services that would be considered applicable to this contract, the vendor may use that subcontractor to fulfill the BEP goal, assuming that subcontractor is BEP certified with the State of Illinois.

- B) Prevailing Wage Rates shall apply, if applicable.
- C) Vendor's proposed pricing shall be inclusive of all costs. Expenses are not allowed.
- D) COVID-19 PROTECTIONS: In response to the COVID-19 pandemic, Governor J.B. Pritzker issued Executive Order 2021-22 and 2021-23. These Executive Orders mandate certain contractors shall use face coverings, have COVID-19 vaccinations, or undergo testing for COVID-19 when in indoor public places, Health Care Facilities, Schools, Institutions of Higher Education, and State owned and operated congregate facilities. Vendor shall adhere to the requirements of these Executive Orders as applied by the Agency. The Agency may also implement vaccination or testing requirements that exceed those in the Executive Orders.

The chart below describes the elements of responsiveness that IDPH will evaluate in the vendor proposals.

Proposal Specification Checklist Table: Mandatory Requirements and Evaluation Criteria

Please indicate, utilizing the table below, the section and page number where the requested information is in your proposal. Respondent must complete this Proposal Specification Checklist Table provided as Attachment D to identify how their proposal meets the requirements of the solicitation.

	Vendor's	Proposal	Page
Mandatory Requirements	Reference		
Name of vendor, vendor's address, and contact person, including work	Section		
phone, cell phone, and email address.			
	Page(s)		
Submission of Operational Plan.	Section		
	Page(s)		
Submission of separate a Pricing Plan distinct from the technical proposal	Section		
submission materials.			
	Page(s)		
Submission of plan to meet BEP requirement.	Section		
	Page(s)		
Vendor provides three (3) references with complete contact information.	Section		
	Page(s)		
Vendor must be able to legally provide clinical services under the	Section		
supervision of a licensed medical provider in Illinois.			
	Page(s)		
Vendor must be able to travel to long term care facilities across Illinois	Section		

(outside of the City of Chicago) to deliver these services.	
	Page(s)

	Vendors	Proposal	Page
Evaluation Criteria	Reference		
Provision of medical therapeutic and prophylactic interventions and	Section		
infection prevention services:			
	Page(s)		
Data collection and reporting.	Section		
	Page(s)		
Staffing Plan and logistics.	Section		
	Page(s)		
Quantity of services.	Section		
	Page(s)		
Internal Quality Assessment and Improvement process.	Section		
	Page(s)		