

STATE OF TENNESSEE DEPARTMENT OF HEALTH

REQUEST FOR PROPOSALS # 34347-92724 AMENDMENT # 2 FOR SELF-MEASURED BLOOD PRESSURE (SMBP) STATEWIDE PLATFORM

DATE: April 25, 2025

RFP # 34347-92724 IS AMENDED AS FOLLOWS:

1. This RFP Schedule of Events updates and confirms scheduled RFP dates. Any event, time, or date containing revised or new text is highlighted.

	EVENT	TIME (central time zone)	DATE
1.	RFP Issued		March 19, 2025
2.	Disability Accommodation Request Deadline	2:00 p.m.	March 24, 2025
3.	Pre-response Conference	9:00 a.m.	March 25, 2025
4.	Notice of Intent to Respond Deadline	2:00 p.m.	March 26, 2025
5.	Written "Questions & Comments" Deadline	2:00 p.m.	March 31, 2025
6.	State Response to Written "Questions & Comments"		April 25, 2025
7.	Response Deadline	2:00 p.m.	May 2, 2025
8.	State Schedules Respondent Oral Presentation or Field Test		May 7, 2025
9.	Respondent Oral Presentation or Field Test	8 a.m 4:30 p.m.	May 12, 2025
10.	State Completion of Technical Response Evaluations		May 29, 2025
11.	State Opening & Scoring of Cost Proposals	2:00 p.m.	June 2, 2025
12.	Negotiations (Optional)	4:30 p.m.	June 2-4, 2025

13. State Notice of Intent to Award Released <u>and</u> RFP Files Opened for Public Inspection	2:00 p.m.	June 6, 2025
14. End of Protest Period		June 13, 2025
15. State sends contract to Contractor for signature		June 17, 2025
16. Contractor Signature Deadline	2:00 p.m.	June 20, 2025

2. State responses to questions and comments in the table below amend and clarify this RFP.

Any restatement of RFP text in the Question/Comment column shall <u>NOT</u> be construed as a change in the actual wording of the RFP document.

RFP Section	#	Question/Comment	State Response
	1	In addition to providing a web- based HIPAA-compliant platform, does the winning Vendor also need to provide clinical support staff? And if so, is this for all patients enrolled in the program? Or does the platform simply need to provide the ability for one-on-one counseling, web- based or telephonic support tools, and access to educational classes/resources by non- Vendor resources? Or both?	 As per Pro Forma contract section A.3.a., the selected vendor would need to provide the following to all Participants enrolled: Support by trained staff to educate the Participant weekly with interactive sessions with a health coach via an in-app portal about how to perform BP measurements in alignment with the Evidence-Based Practice and recommended monitoring protocol. Support by trained staff to educate the Participant weekly with interactive sessions with a health coach via an in-app portal about how to perform BP measurements in alignment with the Evidence-Based Practice and recommended monitoring protocol. Support by trained staff to educate the Participant weekly with interactive sessions with a health coach via an in-app portal about how to perform BP measurements in alignment with the Evidence-Based Practice and recommended monitoring protocol. Support by trained staff to educate the Participant and defines normal, at-risk (prehypertensive), and high BP levels. Support HIPAA-compliant data sharing by following all HIPPA guidelines and requirements when applicable, to the Participant's primary care physician, or other Healthcare Provider, when applicable.
RFP Section 1.1.2.	2	Section 1.1.2 states the "total estimated maximum liability will be \$308,000.00". What is this in reference to?	Please see section C.1. of the Pro Forma contract for a definition of maximum liability.
	3	What is the State of Tennessee's definition of a "small business"? And must the small business be headquartered in the State to qualify?	A small business is defined as: A business that is a continuing, independent, for- profit business which performs a commercially useful function and has total gross receipts of no more than ten million dollars (\$10,000,000) averaged over a three-year period or employs no more than 99 persons on a full-time basis.

RFP Attachment		In the Technical requirements,	Out-of-state businesses may receive a Go-DBE certification through reciprocity from their home state. Please refer to the Go-DBE website for more information: <u>https://www.tn.gov/generalservices/procurement/ central-procurement-officecpo-/go-dbe.html</u> The vendor will assist the State with promotional
6.2 Section C.4.	4	page 28, C.4, there is a requirement for "participant recruitment". Can you please provide additional information and insight into this requirement?	content for participant recruitment and assist providers with promotional content to increase enrollment. Please Release 2 for additions to RFP Attachment 6.3., and the to Pro Forma section A.3.o.
	5	Are the devices personal use devices and not stand alone blood pressure kiosks?	The devices are personal use for participants.
RFP Section 1.1.2.	6	I just want to reach out to ask about the expected total contract size annually.	The State's current estimated maximum liability for the 3-year contract is \$308,000.00
Pro Forma contract section A.3.c.	7	Are we required to send the bp monitor with all 3 cuff sizes?	It is not a requirement to provide all 3 cuff sizes. During enrollment the vendor would determine what size the Participant needed.
Pro Forma contract section A.3.j.	8	Who does Contractor bill, the state or the individual insurance carrier? How does the payment flow?	The vendor would bill the State for the platform and what is outlined in RFP Attachment 6.3, page 31-34.
RFP Attachment 6.2 Section C.6.	9	How many EHR/HIE systems will we need to integrate with? Which ones? What happens if we are willing but EHR isn't willing?	We do not have a specified number of ERH/HIE that will need to be integrated with. The vendor is to per Pro Forma contract section A.3.b.(5) offer data export capability to Microsoft Word, Excel, and/or Portable Document Format (PDF) and Electronic Health Record (EHR) or Health Information Technology (HIT) integration. It is also stated in RFP Attachment 6.2 Section C.5, page 27 that the vendor is to describe the technical approach and functionality for the SMBP platform to interoperate with other electronic health record and/or health information technology systems to facilitate bi- directional communication with the platform and provider.
RFP Attachment 6.2 Section D.4.	10	How will we receive the eligible list of participants?	RFP Attachment 6.2 Section D.4 is asking for the vendor to explain the platform's accessibility features including but not limited to language, vision, or hearing impairment, cultural appropriateness, and level of literacy. Participants will self-enroll, and Providers can refer patients. The State will not be sending a list of eligible patients. Please see updates to Pro Forma section A.3.a.(1) in Release # 2.

3. Delete RFP # 34347-92724, in its entirety, and replace it with RFP # 34347-92724, Release # 2, attached to this amendment. Revisions of the original RFP document are emphasized within the

new release. A clean version of Release # 2 has been attached, wherein any sentence or paragraph containing revised or new text is highlighted. Also attached is a marked up version of Release # 2 where all changed are tracked.

4. <u>RFP Amendment Effective Date</u>. The revisions set forth herein shall be effective upon release. All other terms and conditions of this RFP not expressly amended herein shall remain in full force and effect.