



**REQUEST FOR PROPOSALS # 34800-012723
AMENDMENT # 2 FOR PROVISION OF
LIVESCAN DEVICES AND PERIPHERALS,
INSTALLATION SERVICES, MAINTENANCE
AND SUPPORT AND TRAINING**

DATE: 05/05/23

RFP # 34800-012723 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 | | April 3, 2023 |
| 2. Disability Accommodation Request Deadline | 2:00 p.m. | April 6, 2023 |
| 3. Notice of Intent to Respond Deadline | 2:00 p.m. | April 10, 2023 |
| 4. Written "Questions & Comments" Deadline | 2:00 p.m. | April 14, 2023 |
| 5. State Response to Written "Questions & Comments" | | May 5, 2023 |
| 6. Response Deadline | 2:00 p.m. | May 12, 2023 |
| 7. State Completion of Technical Response Evaluations | | May 23, 2023 |
| 8. State Opening & Scoring of Cost Proposals | 2:00 p.m. | May 24, 2023 |
| 9. Negotiations (Optional) | | May 25-26, 2023 |
| 10. State Notice of Intent to Award Released <u>and</u> RFP Files Opened for Public Inspection | 2:00 p.m. | May 29, 2023 |
| 11. End of Open File Period | | June 5, 2023 |
| 12. State sends contract to Contractor for signature | | June 6, 2023 |

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| 13. Contractor Signature Deadline | 2:00 p.m. | June 7, 2023 |
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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 NOT be construed as a change in the actual wording of the RFP document.

| RFP SECTION | PAGE # | QUESTION / COMMENT | STATE RESPONSE |
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| RFP Section 5.1, Evaluation Categories & Maximum Points | Pg. 12 | <p>Page 24, Section C Technical Response & Evaluation Guide</p> <p>The Maximum Possible Score in the calculation formula is shown as 40, but C1-C3 are worth a total of 15 points (5x3) and C4 and C5 are worth 20 (10x2), so they only total 35.</p> <p>Similarly, the two cost items on page 26 total 35 points, but the calculation formula show shows 30.</p> <p>- Please clarify what the correct points distribution is.</p> | <p>Evaluation factors in section C are used to calculate the raw weighted score of the section and are only meant to indicate the relative importance of said section.</p> <p>Section B is worth a total of 30 points.</p> <p>Section C is worth a total of 40 points.</p> <p>The cost proposal is worth a total of 30 points.</p> |
| RFP Attachment 6.6, Pro Forma Contract, Section A.5 – A.6 | Pg. 31 | <p>Page 33, A.5 –</p> <ol style="list-style-type: none"> Please clarify this requirement. What do you mean that we shall “provide FBI/CJIS requirements...”. Are you asking us to confirm that the images captured by our Livescans will meet those requirements? Livescans don’t normally capture Type-13 Latent Friction Ridge Images. Please clarify this requirement. | <ol style="list-style-type: none"> Yes, please confirm that images captured by Livescans will meet FBI/CJIS requirements. The Livescan Device is not being used to capture a Type 13 image but the ten print image submitted by |

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| | | <p>3. Per A.6, vendors must provide a 500 ppi ten print / palmprint scanner. So please confirm that the Type 14 Variable Resolution Fingerprint Images listed in A.5 are either not required or are limited to 500 ppi ten prints and palmprints.</p> | <p>the Device needs to meet requirements for search capability of Type -13 images.</p> <p>(3) Yes, 500 ppi is for ten prints and palmprints only ---not for Type 14 images. See (2) above.</p> |
| <p>RFP Attachment 6.6, Pro Forma Contract, Section D.33</p> | <p>Pg. 45</p> | <p>Pg 46, Section D33.(1), Mandatory Terms and Conditions</p> <p>1) The Contractor shall maintain technology professional liability (errors & omissions)/cyber liability insurance appropriate to the Contractor's profession in an amount not less than ten million dollars (\$10,000,000) per occurrence or claim and ten million dollars (\$10,000,000) annual aggregate, covering all acts, claims, errors, omissions, negligence, infringement of intellectual property (including copyright, patent and trade secret); network security and privacy risks, including but not limited to unauthorized access, failure of security, information theft, damage to destruction of or alteration of electronic information, breach of privacy perils, wrongful disclosure and release of private information, collection, or other negligence in the</p> | <p>The State declines to make this change.</p> |

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| | | <p>handling of confidential information, and including coverage for related regulatory fines, defenses, and penalties.</p> <p>The bidder requests that “patent” be removed from the cyber liability requirements because it is above and beyond the standard cyber liability insurance coverage offering.</p> | | | | | | | | | |
| RFP Attachment 6.3, Cost Proposal & Scoring Guide | Pg. 24 | <p>Can you please clarify the following from RFP Attachment 6.3 and also provide an example.</p> <div data-bbox="659 793 1130 1041" style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p style="text-align: center;">EVALUATION COST AMOUNT (sum of evaluation costs above):</p> <p style="text-align: center;"><small>The Solicitation Coordinator will use this sum and the formula below to calculate the Cost Proposal Score. Numbers rounded to two (2) places to the right of the decimal point will be standard for calculations.</small></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">lowest evaluation cost amount from all proposals</td> <td style="text-align: center;">x 30</td> <td style="text-align: center;">=</td> <td></td> </tr> <tr> <td style="text-align: center;">evaluation cost amount being evaluated</td> <td style="text-align: center;">(maximum section score)</td> <td style="text-align: center;">SCORE:</td> <td></td> </tr> </table> <p style="text-align: center;"><small>State Use – Solicitation Coordinator Signature, Printed Name & Date:</small></p> </div> | lowest evaluation cost amount from all proposals | x 30 | = | | evaluation cost amount being evaluated | (maximum section score) | SCORE: | | <p>Cost will be evaluated by dividing the lowest evaluated cost amount from all respondents by the cost being evaluated and then multiplied by the total maximum points.</p> <p>If the lowest cost across all respondents totals \$5 and your company proposes a total cost of \$10, your score would be calculated by calculating \$5 divided by \$10 and then multiplied by 30 to give you your company’s total cost proposal points.</p> |
| lowest evaluation cost amount from all proposals | x 30 | = | | | | | | | | | |
| evaluation cost amount being evaluated | (maximum section score) | SCORE: | | | | | | | | | |
| General Question | N/A | Does the state have an incumbent contract? | No. | | | | | | | | |
| RFP Attachment 6.6, Pro | Pg. 33 | The Maintenance and Support section talks about three tiers of problems and resolution timing. | Please see item 3 below. | | | | | | | | |

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| Forma Contract, Section A.12 | | Should this be assumed to be 24X7x365? | |
| RFP Attachment 6.6, Pro Forma Contract, Section A.6 | Pg. 31 | Is a cabinet a mandatory item or optional item? Which Live Scan hardware form factor: Live Scan Fixed or Adjustable Cabinet, or Live Scan Workstation? A.6.A.12. Livescan Devices shall include printer, camera, bar code scanner, or any other Peripherals needed in order to operate Livescan Device as desired. | Mandatory, Fixed Cabinet; the live scan devices shall be set at a standard height to include printer, camera, bar code scanner, or any other Peripherals needed in order to operate Livescan Device |
| General Question | N/A | Is there a specific location for any optional items? If so, where would that be? | The specific location will likely be the booking areas located at each Sheriff Office/Department |
| General Question | N/A | On page 25 Section B.15. Is this a requirement of the Response, or a recommendation? It says "should" at the top of the page. | <p>It is unclear what the respondent is referring to as page 25 is asking for references and B.15 is on page 19.</p> <p>References are not a scored item. They are solely intended for the State to determine if the Respondent is responsible.</p> <p>In regard to Section B.15, Respondents must provide an answer per the instructions in</p> |

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| | | | RFP Attachment 6.2, Section B. |
| RFP Attachment 6.6, Pro Forma Contract, Section A.5 | Pg. 31 | Page 31 Section A.5. What minutiae information (Type 9) do you expect in a TN compliant EBTS record? | State requires adherence to the most recent major version of the EBTS and incorporation of all TOTs. |
| RFP Attachment 6.6, Pro Forma Contract, Section A.6 | Pg. 31 | Can you please expand or clarify the following from Page 31 Section A.6.A)2.b “The livescan application software shall provide system administration and management tools to include fingerprint modules.” | The software will allow site administrator(s) the opportunity to filter or select cases and obtain reports from the Live scan device including reports concerning fingerprint modules such as quality assurance of prints, placement of prints, and capture and verification of prints. The software shall allow the State to search the Device for retrieval of records. |
| RFP Attachment 6.6, Pro Forma Contract, Section A.6 | Pg. 31 | Can you please expand or clarify the following from Page 31 Section A.6.A)2.c “The software shall also include automatic placement of out-of-sequence prints and perform quality assurance checks for rolled-to-flat impressions, image quality, and data entry.” Is it intended to be detection? | The Livescan operator should be informed by the device that prints are out-of-sequence prints or are of poor print quality during the capture/recording of fingerprints to ensure that the |

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| | | | correct print (image) is captured at the time of booking. |
| RFP Attachment 6.6, Pro Forma Contract, Section A.10 | Pg. 32 | Please clarify Page 32 Section 10- Livescan Devices shall be capable of interfacing with JMS or RMS of law enforcement agency. Are interfaces to be included or capable of including the JMS/RMS interface? | Yes, the interfaces shall be included when installed at the law enforcement agency. |
| General Question | N/A | If the JMS/RMS interfaces are to be included in the cost, can a list of JMS/RMS companies be provided at each location? | Yes. Prior to the Livescan Devices being installed, State will assist awarded Contractor in obtaining information from each agency. |
| RFP Attachment 6.6, Pro Forma Contract, Term of Contract | Pg. 34 | Page 34 B. Term of Contract is 42 months, but the M&S is only for 3 years. Should one of these two be amended to agree with the other? | Livescan Devices will be installed prior to maintenance and support beginning. All maintenance and support shall begin at the same time. |
| RFP Attachment 6.6, Pro Forma Contract, Section A.6 | Pg. 32 | On Page 32 Section 11, Livescan Devices must have a livescan directory for agency that has a log-in and password in order for user to utilize the device-this is confusing can you please clarify the meaning. | The Livescan directory will be searched at the time the username and unique password is entered to gain access to the Livescan Device. |
| RFP Attachment 6.3, Cost Proposal | Pg. 23-24 | Regarding RFP Attachment 6.3 (PDF Page 24 of 52) "Three Years of Maintenance and Support to begin October 1, 2023": Should the three-year support and maintenance price be based on a standard warranty (Monday thru Friday, 8am | Please see Item 3 below. |

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| | | to 5pm) or twenty-by-seven (24/7) coverage? | |
| RFP Attachment 6.6, Pro Forma Contract, Section A.2 | Pg. 30 | Regarding RFP Scope Section A.2, Item "m" (PDF Page 30 of 52) "Portable Livescan Device is a livescan device that can be easily moved and is transportable.": Is a ruggedized travel case with wheels required for the portable livescan units? | Yes, a ruggedized travel case with wheels is required. Please see Item 4 below. |
| RFP Attachment 6.6, Pro Forma Contract, Section A.6 | Pg. 32 | Regarding RFP Scope Section A.6, Item "12" (PDF Page 32 of 52) "Livescan Devices shall include printer, camera, bar code scanner, or any other Peripherals needed in order to operate Livescan Device as desired.": Is a ruggedized cabinet required for the livescans that will be installed in the jail? If a ruggedized cabinet is required, please advise if it should have the ability to electronically adjust the height of the fingerprint/palm print capture area (platen)? (e.g. to process very tall people, very short people, and people in a wheel chair.) | Yes, a ruggedized cabinet is required for Livescan Devices installed in the jails. Please see Item 5 below. No, the Device is not required to adjust in height. |
| RFP Attachment 6.6, Pro Forma Contract, Section A.6 | Pg. 32 | Regarding RFP Scope Section A.6, Item "12" (PDF Page 32 of 52) "Livescan Devices shall include printer, camera, bar code scanner, or any other Peripherals needed in order to operate Livescan Device as desired.": Is an Uninterruptible Power Supply (UPS) required on the livescan system? | Yes, an uninterruptible power supply is required. Please see Item 5 below. |

(3) Delete RFP Attachment 6.6, Section A.12 in its entirety and insert the following in its place (any sentence or paragraph containing revised or new text is highlighted):

A.12. Service level agreements shall at a minimum be as follows:

Problems are divided into three categories:

(1) Critical Problem – Tier 3

- a. Problems or issues in the Livescan Device that interrupt or prevent the entire customer population from performing regular business operations; or
- b. Problems or issues caused by the Livescan Device having a catastrophic impact on regular business operations.
- c. Problems in which data may be lost or corrupted
- d. Maintenance and support shall be provided twenty four (24) hours per day, three hundred sixty five (365) days per year.

(2) Major Problem – Tier 2

- a. Problems or issues in the Livescan Device that interrupt or prevent a significant percentage of the customer population from performing regular business operations; or
- b. Problems or issues caused by the Livescan Device having a major impact on regular business operations.
- c. Problems where Livescan Device does not work as specified, but there is a simple work-around.
- d. Problem with Livescan Device where there is no data loss or corruption. If data loss or corruption, the problem shall be deemed critical and a Tier 3 issue.
- e. Maintenance and support shall be provided twenty four (24) hours per day, three hundred sixty five (365) days per year.

(3) Minor Problem – Tier 1

- a. Problems or issues in the Livescan Device that interrupt or prevent an individual from performing regular business operations; or
- b. Problems or issues having a minor impact on regular business operations.
- c. Information requests.
- d. Problems involving minor user interface
- e. Problems where aspects or features of Livescan Devices are missing or failing.
- f. Maintenance and support shall be provided Monday through Friday from 8 AM – 5 PM CST.

(1) For each of the above Problem types, the following actions must be taken to resolve the Problem as follows (each time period shall be construed as "action completed within XX timeframe"):

Actions shall follow the following time frames:

| Action | Critical | Major | Minor |
|------------------------------------------------------------|----------|---------|----------------------|
| Initial response | 15 min | 30 min | 3 hours |
| Time from initial response to final resolution of incident | 3 hours | 5 hours | 1 State Business Day |

(4) Delete RFP Attachment 6.6, Section A.2.m in its entirety and insert the following in its place (any sentence or paragraph containing revised or new text is highlighted):

m. Portable Livescan Device is a livescan device that can be easily moved and is transportable in a ruggedized travel case with wheels

(5) Delete RFP Attachment 6.6, Section A.6. in its entirety and insert the following in its place (any sentence or paragraph containing revised or new text is highlighted):

A.6. The Contractor shall provide Livescan Devices and Portable Livescan Devices with the following minimum capabilities and the following Peripherals:

A) Livescan Device Requirements:

1. Shall include an FBI Appendix F Certified 500 ppi Ten Print/Palmprint Scanner. <https://fbibiospecs.fbi.gov/ebts-1/approved-ebts>
2. Shall include livescan application software that is capable of the following:
 - a. The live scan application software shall include a DNA workflow that verifies the booking identification and name by submitting a Two Finger Search, collects the barcode information (using the scanner) from the DNA kits provided to the agencies by the State, and submits that information via e-mail to the State.
 - b. The livescan application software shall provide system administration and management tools to include fingerprint modules.
 - c. The software shall also include automatic placement of out-of-sequence prints and perform quality assurance checks for rolled-to-flat impressions, image quality, and data entry.
3. Contractor shall provide a Ten Print card printer with every Livescan Device. Printer may be of any brand as long as the printer is compatible to Livescan Device.
4. Livescan Devices shall comply with IAFIS/NGI ANSI/NIST image standards, ensuring image quality for all prints.
5. Livescan Devices shall be capable of submitting Palm Print data in a NIST Type-15 record
6. Livescan Devices shall be capable of transmitting the fingerprint, demographic, and Mugshot data in a NIST format use by the following methods:
 - a. SMTP e-mail as a mime-encoded attachment
 - b. Secure FTP to a configurable host directory
7. Livescan Devices shall include local and state law enforcement agencies ORIs in the "arresting agency" drop-down box.
8. Livescan Devices shall feature digital photo / Mugshot capture which is a digital photograph of the suspect's face Devices shall have a camera.
9. Livescan Devices shall include as a Peripheral a barcode reader that shall be either a 1D (one dimensional) or 2D (two dimensional) reader for submitting information on the DNA Swab kit. A Barcode Reader is an optical scanner that can read digital barcodes.
10. Livescan Devices shall be capable of interfacing with JMS or RMS of law enforcement agency.
11. Livescan Devices must have a livescan directory for agency that has a log-in and password in order for user to utilize the device.

12. Livescan Devices shall include printer, camera, bar code scanner, or any other Peripherals needed in order to operate Livescan Device as desired.
13. All Livescan Devices must have a 99% Uptime.

14. All Livescan Devices in jails across the State shall be provided and installed in ruggedized cabinets.

15. All Livescan Devices shall have an uninterrupted power supply.

(6) Delete RFP Attachment 6.2 – Section B in its entirety and insert the following in its place (any sentence or paragraph containing revised or new text is highlighted):

RFP ATTACHMENT 6.2. — SECTION B

TECHNICAL RESPONSE & EVALUATION GUIDE

SECTION B: GENERAL QUALIFICATIONS & EXPERIENCE. The Respondent must address all items detailed below and provide, in sequence, the information and documentation as required (referenced with the associated item references). The Respondent must also detail the response page number for each item in the appropriate space below. Proposal Evaluation Team members will independently evaluate and assign one score for all responses to Section B— General Qualifications & Experience Items.

| RESPONDENT LEGAL ENTITY NAME: | | |
|-------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Response Page # (Respondent completes) | Item Ref. | Section B— General Qualifications & Experience Items |
| | B.1. | Detail the name, e-mail address, mailing address, telephone number, and facsimile number of the person the State should contact regarding the response. |
| | B.2. | Describe the Respondent’s form of business (<i>i.e.</i> , individual, sole proprietor, corporation, non-profit corporation, partnership, limited liability company) and business location (physical location or domicile). |
| | B.3. | Detail the number of years the Respondent has been in business. |
| | B.4. | Briefly describe how long the Respondent has been providing the goods or services required by this RFP. |
| | B.5. | Describe the Respondent’s number of employees, client base, and location of offices. |
| | B.6. | Provide a statement of whether there have been any mergers, acquisitions, or change of control of the Respondent within the last ten (10) years. If so, include an explanation providing relevant details. |
| | B.7. | Provide a statement of whether the Respondent or, to the Respondent's knowledge, any of the Respondent’s employees, agents, independent contractors, or subcontractors, involved in the delivery of goods or performance of services on a contract pursuant to this RFP, have been convicted of, pled guilty to, or pled <i>nolo contendere</i> to any felony. If so, include an explanation providing relevant details. |
| | B.8. | Provide a statement of whether, in the last ten (10) years, the Respondent has filed (or had filed against it) any bankruptcy or insolvency proceeding, whether voluntary or involuntary, or undergone the appointment of a receiver, trustee, or assignee for the benefit of creditors. If so, include an explanation providing relevant details. |

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| RESPONDENT LEGAL ENTITY NAME: | | |
| Response Page # (Respondent completes) | Item Ref. | Section B— General Qualifications & Experience Items |
| | B.9. | <p>Provide a statement of whether there is any material, pending litigation against the Respondent that the Respondent should reasonably believe could adversely affect its ability to meet contract requirements pursuant to this RFP or is likely to have a material adverse effect on the Respondent's financial condition. If such exists, list each separately, explain the relevant details, and attach the opinion of counsel addressing whether and to what extent it would impair the Respondent's performance in a contract pursuant to this RFP.</p> <p>NOTE: All persons, agencies, firms, or other entities that provide legal opinions regarding the Respondent must be properly licensed to render such opinions. The State may require the Respondent to submit proof of license for each person or entity that renders such opinions.</p> |
| | B.10. | <p>Provide a statement of whether there are any pending or in progress Securities Exchange Commission investigations involving the Respondent. If such exists, list each separately, explain the relevant details, and attach the opinion of counsel addressing whether and to what extent it will impair the Respondent's performance in a contract pursuant to this RFP.</p> <p>NOTE: All persons, agencies, firms, or other entities that provide legal opinions regarding the Respondent must be properly licensed to render such opinions. The State may require the Respondent to submit proof of license for each person or entity that renders such opinions.</p> |
| | B.11. | Provide a brief, descriptive statement detailing evidence of the Respondent's ability to deliver the goods or services sought under this RFP (e.g., prior experience, training, certifications, resources, program and quality management systems, etc.). |
| | B.12. | Provide a narrative description of the proposed project team, its members, and organizational structure along with an organizational chart identifying the key people who will be assigned to deliver the goods or services required by this RFP. |
| | B.13. | Provide a personnel roster listing the names of key people who the Respondent will assign to meet the Respondent's requirements under this RFP along with the estimated number of hours that each individual will devote to that performance. Follow the personnel roster with a resume for each of the people listed. The resumes must detail the individual's title, education, current position with the Respondent, and employment history. |
| | B.14. | <p>Provide a statement of whether the Respondent intends to use subcontractors to meet the Respondent's requirements of any contract awarded pursuant to this RFP, and if so, detail:</p> <p>(a) the names of the subcontractors along with the contact person, mailing address, telephone number, and e-mail address for each;</p> <p>(b) a description of the scope and portions of the goods each subcontractor involved in the delivery of goods or performance of the services each subcontractor will perform; <u>and</u></p> <p>(c) a statement specifying that each proposed subcontractor has expressly assented to being proposed as a subcontractor in the Respondent's response to this RFP.</p> |
| | B.15. | Provide documentation of the Respondent's commitment to diversity as represented by the following: |

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| RESPONDENT LEGAL ENTITY NAME: | | |
| Response Page # (Respondent completes) | Item Ref. | Section B— General Qualifications & Experience Items |
| | | <p>(a) <u>Business Strategy</u>. Provide a description of the Respondent's existing programs and procedures designed to encourage and foster commerce with business enterprises owned by minorities, women, service-disabled veterans, persons with disabilities, and small business enterprises. Please also include a list of the Respondent's certifications as a diversity business, if applicable.</p> <p>(b) <u>Business Relationships</u>. Provide a listing of the Respondent's current contracts with business enterprises owned by minorities, women, service-disabled veterans, persons with disabilities, and small business enterprises. Please include the following information:</p> <ul style="list-style-type: none"> (i) contract description; (ii) contractor name and ownership characteristics (i.e., ethnicity, gender, service-disabled veteran-owned or persons with disabilities); (iii) contractor contact name and telephone number. <p>(c) <u>Estimated Participation</u>. Provide an estimated level of participation by business enterprises owned by minorities, women, service-disabled veterans, persons with disabilities and small business enterprises if a contract is awarded to the Respondent pursuant to this RFP. Please include the following information:</p> <ul style="list-style-type: none"> (i) a percentage (%) indicating the participation estimate. (Express the estimated participation number as a percentage of the total estimated contract value that will be dedicated to business with subcontractors and supply contractors having such ownership characteristics only and DO NOT INCLUDE DOLLAR AMOUNTS); (ii) anticipated goods or services contract descriptions; (iii) names and ownership characteristics (i.e., ethnicity, gender, service-disabled veterans, or disability) of anticipated subcontractors and supply contractors. <p>NOTE: In order to claim status as a Diversity Business Enterprise under this contract, businesses must be certified by the Governor's Office of Diversity Business Enterprise (Go-DBE). Please visit the Go-DBE website at https://tn.diversitysoftware.com/FrontEnd/StartCertification.asp?TN=tn&XID=9810 for more information.</p> <p>(d) <u>Workforce</u>. Provide the percentage of the Respondent's total current employees by ethnicity and gender.</p> <p>NOTE: Respondents that demonstrate a commitment to diversity will advance State efforts to expand opportunity to do business with the State as contractors and subcontractors. Response evaluations will recognize the positive qualifications and experience of a Respondent that does business with enterprises owned by minorities, women, service-disabled veterans, persons with disabilities, and small business enterprises and who offer a diverse workforce.</p> |
| | B.16. | <p>Provide a statement of whether or not the Respondent has any current contracts with the State of Tennessee or has completed any contracts with the State of Tennessee within the previous five (5) year period. If so, provide the following information for all of the current and completed contracts:</p> <ul style="list-style-type: none"> (a) the name, title, telephone number and e-mail address of the State contact knowledgeable about the contract; (b) the procuring State agency name; (c) a brief description of the contract's scope of services; (d) the contract period; and (e) the contract number. |

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| RESPONDENT LEGAL ENTITY NAME: | | |
| Response Page # (Respondent completes) | Item Ref. | Section B— General Qualifications & Experience Items |
| | B.17. | Provide a statement and any relevant details addressing whether the Respondent is any of the following: <ul style="list-style-type: none"> (a) is presently debarred, suspended, proposed for debarment, or voluntarily excluded from covered transactions by any federal or state department or agency; (b) has within the past three (3) years, been convicted of, or had a civil judgment rendered against the contracting party from commission of fraud, or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or grant under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; (c) is presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses detailed above; and (d) has within a three (3) year period preceding the contract had one or more public transactions (federal, state, or local) terminated for cause or default. |
| | B.18. | Provide a statement that Respondent has the resources to provide support coverage for the entire State within the time period as required in the Pro Forma Contract Section A.12. |
| | | SCORE (for <u>all</u> Section B—Qualifications & Experience Items above): (maximum possible score = 30) |

(7) Delete RFP Attachment 6.2 – Section C in its entirety and insert the following in its place (any sentence or paragraph containing revised or new text is highlighted):

RFP ATTACHMENT 6.2. — SECTION C

TECHNICAL RESPONSE & EVALUATION GUIDE

SECTION C: TECHNICAL QUALIFICATIONS, EXPERIENCE & APPROACH. The Respondent must address all items (below) and provide, in sequence, the information and documentation as required (referenced with the associated item references). The Respondent must also detail the response page number for each item in the appropriate space below.

A Proposal Evaluation Team, made up of three or more State employees, will independently evaluate and score the response to each item. Each evaluator will use the following whole number, raw point scale for scoring each item:

0 = little value 1 = poor 2 = fair 3 = satisfactory 4 = good 5 = excellent

The Solicitation Coordinator will multiply the Item Score by the associated Evaluation Factor (indicating the relative emphasis of the item in the overall evaluation). The resulting product will be the item's Raw Weighted Score for purposes of calculating the section score as indicated.

| RESPONDENT LEGAL ENTITY NAME: | | | | | |
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| Response Page # (Respondent completes) | Item Ref. | Section C— Technical Qualifications, Experience & Approach Items | Item Score | Evaluation Factor | Raw Weighted Score |
| | C.1. | Provide a narrative that illustrates the Respondent's understanding of the State's requirements for livescan devices, portable devices and Peripherals including installation services and project schedule for livescan rollout across the State. | | 1 | |
| | C.2. | Provide a narrative that illustrates how the Respondent will complete the scope of services regarding the livescans and Peripherals, accomplish required objectives as outlined in Section A of the Contract, and meet the State's project schedule in accordance with Attachment A of the Contract. | | 1 | |
| | C.3. | Provide a narrative that illustrates how the Respondent will manage the project regarding livescan devices and Peripherals, ensure completion of the scope of services as outlined in Section A of the Contract, and accomplish required objectives within the State's project schedule in accordance with Attachment A of the Contract. | | 1 | |
| | C.4 | Provide a detailed timeline of phases of device rollout across the State to be completed on or before September 30, 2023. | | 2 | |
| | C.5. | Provide a narrative describing how the Respondent will perform the service level agreement portion of the contract as set forth in pro forma contract A.12. | | 2 | |
| <i>The Solicitation Coordinator will use this sum and the formula below to calculate the section score. All calculations will use and result in numbers rounded to two (2) places to the right of the decimal point.</i> | | | Total Raw Weighted Score: | | |
| | | | <i>(sum of Raw Weighted Scores above)</i> | | |
| Total Raw Weighted Score <hr/> Maximum Possible Raw Weighted Score <i>(i.e., 5 x the sum of item weights above)</i> | | | X 40 <i>(maximum possible score)</i> | | = SCORE: |
| <i>State Use – Evaluator Identification:</i> | | | | | |
| <i>State Use – Solicitation Coordinator Signature, Printed Name & Date:</i> | | | | | |

(8) RFP Amendment Effective Date. 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.