

State of Connecticut Digital Behavioral Health RFP



Request for Proposal

For Digital Therapeutic (Point Solution) behavioral health services to members of its State Medical Plan and Partnership Medical Plan.

Released by: Office of the State Comptroller

On: February 11, 2025

Closing Date/Time: 2:00pm ET February 27, 2025

Note: Only those firms who provided responses to the Mental Health Portion of the State's RFI in January will be allowed to respond to this Request for Proposal (RFP).

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1 Purpose/Introduction

1.1 INTRODUCTION

The Office of the State Comptroller (OSC), State of Connecticut (the “State”), acting through the Health Care Cost Containment Committee (“HCCCC”), is conducting an active search of the marketplace for a service provider(s) to provide Digital Behavioral Health (Point Solution) services to its active and retired employees and their dependents effective July 1, 2025.

There are approximately 67,000 active employees and non-Medicare retirees (151,000 members) covered by the State Plan which offers medical and prescription drug benefits. In addition to providing benefits to State employees and retirees, the State also covers employees in the probate court system, General Assembly members, former legislators, and other groups, as authorized by statute.

The State provides coverage under an MA-PD plan to additional 63,000 Medicare retirees and Medicare-eligible spouses and dependents.

The State also offers medical and prescription drug benefits to employees of certain municipal entities under the Connecticut Partnership Plan. There are approximately 26,000 employees (60,000 members) covered through the Partnership Plan who will also be included in this offering. A listing of these groups can be found here: <https://www.osc.ct.gov/ctpartner/members.html>

Through the issuance of this Request for Proposal (RFP), OSC is soliciting proposals from qualified bidders that can provide the services listed above. If you are interested and able to meet the requirements described in this RFP, OSC appreciates and welcomes your submission.

OSC reserves the right to award any service in whole or in part, if proposals demonstrate that doing so would be in OSC's best interest. OSC also reserves the right to issue multiple awards, no award, cancel, or alter the procurement at any time. In addition, OSC reserves the right to extend the proposed RFP period, if needed. Proposals containing the lowest cost will not necessarily be awarded as OSC recognizes that factors other than costs are important to the ultimate selection of the bidder(s). Proposals provided in response to this RFP must comply with the submittal requirements set forth in later sections, including all forms and certifications, and will be evaluated in accordance with the criteria and procedures described herein. Based upon the results of the evaluation, OSC will award a contract(s) to the most advantageous bidder(s), based on cost and the technical evaluation factors in the RFP. Any contract awarded hereunder will be subject to the approval of the Office of the Attorney General in accordance with applicable state laws and regulations.

The RFP process and any contract arising therefrom will be governed in all respects by the laws of the State of Connecticut. Under no circumstances may a contract made with the State contain limited liability and/or binding arbitration provisions. The State may not waive its sovereign immunity or indemnify a bidder.

Please read the entire solicitation package and submit an offer in accordance with the instructions. All forms contained in the solicitation package must be completed in full and submitted along with the Technical Response and Price Proposal Worksheet, which combined, will constitute the offer. **This RFP and your**

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response, including all subsequent documents provided during this RFP process will become part of the contract terms and policy between the parties.

Entities responding to this RFP should also note that the State requires access to certain information and that this data must be provided to the State's health care consultant, The Segal Company, and to its health benefits navigator, Quantum Health. OSC has retained Segal to assist in the evaluation of the proposals for responsiveness to the RFP and to review such proposals with them.

Submission of your offer will acknowledge acceptance of these requirements. The financial requirements include initial and renewal pricing and projection controls.

All bidders must meet the General Proposal Conditions set forth in this RFP and are asked to respond only to the specific questions asked. This RFP is for a three-year contract that can be extended at the Comptroller's option for two additional one-year periods, not to exceed the maximum five years. The selected bidder(s) must prepare to implement the program beginning April 1, 2025 and to "go live" by July 1, 2025.

The State may conduct multiple Best and Final "Reverse Auction" rounds during which each bidder will be informed of its ranking in comparison to other bidders in various financial and technical categories as may be selected by the RFP committee. The State reserves the right to eliminate the lowest ranked bidder in each round.

Reverse auctions are authorized by Connecticut General Statutes ("C.G.S.") §4a-60b.

1.2 EVALUATION OF PROPOSALS

1.2.1 Evaluation Process. It is the intent of the OSC to conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this RFP. When evaluating proposals, negotiating with successful bidders, and awarding contracts, OSC will conform with its written procedures for procurements pursuant to C.G.S. § 4-217 and the State's Code of Ethics pursuant to C.G.S. §1-79 *et seq.* . Final funding allocation decisions will be determined during contract negotiation.

1.2.2 Evaluation Review Committee. OSC will designate an RFP Review Committee and Committee Chairperson ("Chairperson") to evaluate proposals submitted in response to this RFP. The RFP Review Committee will be composed of individuals representing labor and management,, OSC staff or other designees as deemed appropriate. The contents of all submitted proposals, including any confidential information, will be shared with the RFP Review Committee. Only proposals found to be responsive (that is, complying with all instructions and requirements described herein) will be reviewed, rated, and scored. Proposals that fail to comply with all instructions will be rejected without further consideration. The RFP Review Committee will evaluate all proposals that meet the minimum submission requirements. They will be scored and rank ordered and the Committee will make recommendations for award(s) to the Comptroller who will make the final selection.

1.2.3 Minimum Submission Requirements. To be eligible for evaluation, proposals must (1) be received on or before the Closing Date and Time; (2) meet the eligibility and qualification requirements to respond to the procurement; (3) follow the required Proposal Outline; and (4) be complete. Proposals that fail to follow instructions, deviate significantly from the requirements of this RFP, or fail to satisfy these minimum submission requirements will not be reviewed.

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1.2.4 Deviations and Negotiation. The Chairperson shall have the sole right to determine whether any deviation from the requirements of this RFP is substantial in nature, and the Chairperson may reject non-conforming proposals. In addition, the Chairperson may waive minor irregularities in proposals, allow a bidder to correct minor irregularities, and negotiate with eligible bidders in any manner deemed necessary or desirable to serve the best interests of the State.

1.2.5 Evaluation Considerations. Proposals meeting the minimum submission requirements will be evaluated according to the established criteria. Evaluation will be made on the basis of the evaluation criteria discussed below and may include any oral presentation that may be required by the Chairperson, through a recommendation by the technical review committee, at his or her discretion. The criteria are the objective standards that the RFP Review Committee will use to evaluate the technical merits of the proposals. The Chairperson reserves the right to recommend a bidder for contract award based upon the bidder's proposal without oral presentations or further discussion. However, the Chairperson may engage in further discussion if he or she determines that it may be beneficial to do so. In such case, the Chairperson will notify those eligible bidders with whom further discussion is desired. In addition, the Chairperson may permit qualified bidders to revise their proposals by submitting best and final offers ("BAFOs") offers, if necessary.

1.2.6 Evaluation Criteria. Proposals by bidders who meet the minimum qualifications will be evaluated by the RFP Review Committee on the basis of the following factors. (These are not listed in order of importance.)

Note: As part of its evaluation of the staffing plan, the RFP Review Committee will verify the bidder's commitment to affirmative action by compliance with the regulations of the Commission on Human Rights and Opportunities. See Regulations of CT State Agencies §46a-68j-21 et seq.

- Proposal's conformity with RFP specifications
- Value of the services, taking into consideration the requirements of the RFP, proposed services and any "value-added" terms, conditions and service levels
- Cost of the proposed services
- Bidder's commitment to partnering with OSC's other vendors, as appropriate
- Willingness and experience in integrating with and being a reference for Primary Care Providers engaged in value-based payment arrangements
- Qualifications of the bidder including financial capacity and staffing, and availability of staff to work with OSC during the implementation and education phases and continue to support OSC throughout the contract
- Experience with large employer plans, commitment to such plans, and experience offering such plans to public sector employers, which includes robust references
- Timely access to behavioral healthcare
- Geographic accessibility
- Commitment to collect race and ethnicity data and ability to report such data and strategies to address disparities as may be uncovered
- Clinical value of services as displayed through peer reviewed studies and program results
- Measurable return on investment as identified in peer reviewed studies and program results
- Proven ability to successfully engage plan members who would most benefit from bidder's programmatic offering(s)
- Positive plan member experience as demonstrated through satisfaction surveys, NPS scores and other mechanisms
- Willingness to accept Comptroller's standard contract terms and conditions and ongoing compliance with state contracting requirements
- Robust information services and reporting

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- At the option of the RFP Review Committee, bidder's presentation and oral interview

1.2.7 Bidder Selection. After evaluating proposals, the RFP Review Committee will submit the rankings of all proposals along with its recommendation to the Comptroller. The final selection of bidder is at the discretion of the Comptroller. Any bidder selected will be promptly notified and given the opportunity to negotiate a contract with OSC. Such negotiations may, but will not automatically, result in a contract. All unsuccessful bidders will be notified by e-mail or U.S. mail, at the OSC's discretion, about the outcome of the evaluation and bidder selection process. OSC reserves the right to decline to make awards if OSC considers there are no adequate proposals.

1.2.8 Debriefing. Within ten (10) days of receiving notification from the OSC that a contract has been awarded, unsuccessful bidders may contact the Official Contact and request information about the evaluation and bidder selection process. The email sent date on the notification will be considered "day one" of the ten (10) day period. If unsuccessful bidders still have questions after receiving this information, they may contact the Official Contact and request a meeting with the Comptroller's designee to discuss the evaluation process and their proposals. If held, a debriefing meeting will not include any comparisons of unsuccessful proposals with other proposals. The Comptroller's designee may schedule and hold the debriefing meeting within fifteen (15) days of the request. The Comptroller will not change, alter, or modify the outcome of the evaluation or selection process as a result of any debriefing meeting.

1.2.9 Appeal Process. Bidders may appeal any aspect OSC's competitive procurement, including the evaluation and bidder selection process. Any such appeal must be submitted to OSC in writing. A bidder may file an appeal at any time after the closing date, but not later than thirty (30) days after the Comptroller notifies unsuccessful bidders about the outcome of the evaluation and bidder selection process. The email sent date on the notification will be considered "day one" of the thirty (30) day period. The filing of an appeal shall not be deemed sufficient reason for OSC to delay, suspend, cancel, or terminate the procurement process or execution of a contract. More detailed information about filing an appeal may be obtained from the Official Contact.

1.3 Only those firms who provided responses to the Mental Health Portion of the State's RFI in January will be allowed to respond to this RFP.

2 General Information

2.1 BACKGROUND

The Comptroller is empowered by C.G.S. § 5-259 to arrange and procure group hospitalization and medical and surgical insurance plans for State employees and retirees, including coverage for prescription drugs. The Healthcare Policy & Benefit Services Division (HPBSD) of the Office of the State Comptroller (OSC) administers these State healthcare coverage programs through the State Plan. Non-state public employers are able to obtain coverage for their employees under the Connecticut Partnership Plan. See <http://www.osc.ct.gov/ctpartner/index.html>.

Under the State and Partnership Plans, medical benefits are administered by Anthem and Plan navigation and care coordination services are provided by Quantum Health. Anthem also offers specialized services for

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pediatric anxiety and OCD through the “Instride” program and Eating Disorder treatment through “Equip”, The Pharmacy Benefits Manager is CVS Health. Dental benefits are administered by Cigna. Medicare retiree benefits (MA-PD) are administered by Aetna. These services are not part of this RFP.

Current Plan Design

All plans are described on the OSC website at <https://carecompass.ct.gov/>

2.2 OSC seeks to provide high quality, cost-effective benefits to its employees, retirees and their families (eligible “Plan Members”). OSC is soliciting proposals to provide digital and in-person therapeutic services that address behavioral health including mental health and substance use disorder as well as overall well-being. The State is interested in programs that drive Plan Member engagement and robust ROI.

The State's goals are:

- **Improved clinical outcomes**
- **Better access to care**
- **Increased member satisfaction**
- **Cost containment (hard dollar savings and prevention of unneeded spending)**

2.3 SCOPE OF SERVICES REQUESTED

2.3.1. Overall Well-Being:

- **Comprehensive Behavioral Health Services:** Offer a wide range of services to address the mental, emotional, and social well-being of Plan Members, including mental health screenings, counseling, psychotherapy, stress management programs, and substance use disorder treatment.
- **Prevention and Early Intervention:** Implement proactive strategies, such as educational campaigns, mental health screenings, and resilience training, to prevent the onset of more serious issues.
- **Ongoing Support:** Provide ongoing support services for Plan Members dealing with chronic mental health conditions to help manage their condition and improve quality of life.

2.3.2. Partnership and Collaboration:

- **Cross-Sector Partnerships:** Foster collaboration among behavioral health professionals, primary care providers, community organizations, employers, and insurance providers to ensure coordinated and comprehensive care.
- **Support for Families and Caregivers:** Provide support resources and counseling for family members and caregivers of Plan Members with behavioral health needs, ensuring the well-being of the entire support system.
- **Engagement with Community-based Resources:** Work with community-based resources to support behavioral health programs that promote well-being, reduce stigma, and create a supportive environment.

2.3.3. Access to Care:

- **Timely Access to Services:** Ensure Plan Members have timely access to behavioral health care through efficient scheduling and streamlined referral processes. Minimize wait times for both urgent and routine care.
- **24/7 Support:** Offer round-the-clock access to behavioral health professionals through phone support, crisis intervention, and telehealth options.

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- **Geographic Accessibility:** Ensure that individuals in both urban and rural areas can access behavioral health care, expanding the network of in-person providers in underserved regions.
- **Telehealth Options:** Provide remote counseling and behavioral health services through telehealth platforms, increasing access for individuals with mobility challenges, time constraints, or those located in remote areas.

2.3.4. Multiple Methods of Communication:

- **Comprehensive Communication Channels:** Offer a variety of communication methods to connect Plan Members to behavioral health care, including phone consultations, video sessions, online chat, email, and in-person visits.
- **Personalized Communication:** Tailor communication preferences to meet the needs of Plan Members, ensuring that they can engage with the program in the way that is most comfortable for them.
- **Proactive Outreach:** Use automated reminders, check-ins, and educational resources to keep Plan Members engaged and informed about available services, as well as behavioral health tips and resources.

2.3.5. Overall Savings:

- **Cost-Effective Care:** Emphasize preventive care to reduce the need for more intensive, costly interventions. By addressing issues early, help mitigate long-term medical and psychiatric costs.
- **Reduced Absenteeism and Improved Productivity:** Implement programs that reduce absenteeism, enhance overall well-being, and increase workplace productivity by offering Plan Members access to behavioral health services that improve their overall health.
- **Utilization Management:** Monitor and optimize service utilization to ensure Plan Members receive appropriate care, reducing unnecessary treatments and maximizing the value of care provided.
- **Healthcare Savings:** Track healthcare costs related to behavioral health treatment (e.g., hospitalizations, emergency room visits) and reduce costs through early intervention and ongoing support.

2.3.6. Integration with Other Benefits:

- **Coordination with Medical Benefits:** Ensure seamless integration between behavioral health services and medical benefits to provide coordinated care across physical and mental health needs.
- **Chronic Condition Management:** Integrate behavioral health services with chronic disease management programs to address the psychological impact of conditions like diabetes, hypertension, and heart disease, for example.

2.3.7. Network Access to Providers:

- **Extensive Provider Network:** Offer a broad and diverse network of behavioral health providers, including licensed therapists, counselors, psychiatrists, and specialists, to ensure that Plan Members have access to a variety of services.
- **Provider Accessibility:** Ensure that the provider network covers a wide geographic area, with an emphasis on expanding access in underserved or rural communities through telehealth options and virtual services.
- **Quality Assurance:** Ensure that all network providers meet rigorous professional standards, undergo credentialing processes, and are regularly assessed for quality and patient satisfaction.
- **Specialized Services:** Include access to specialized providers for individuals with specific needs, such as addiction counseling, substance use treatment, trauma-informed care, child and adolescent services, and geriatric behavioral health.

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2.3.8. Continuous Evaluation and Improvement:

- **Program Monitoring:** Continuously monitor and evaluate the effectiveness of the behavioral health services, including access to care, participant satisfaction, and outcomes. Use data analytics to drive continuous improvement.
- **Outcome Tracking:** Track both short-term and long-term outcomes related to behavioral health, such as reductions in anxiety, depression, and stress, as well as improvements in quality of life and functional status.

2.4 PLANNED SCHEDULE OF RFP ACTIVITIES

It is the State's intention to comply with the following schedule:

Date	Activity
February 11, 2025	Release RFP
February 14, 2025	NDA Deadline by 2:00 ET
February 14, 2025	Bidder Question Deadline by 2:00 PM ET
February 19, 2025	Bidder Questions Answered
February 27, 2025	CLOSING DATE: Electronic Proposals Posted to Proposal Tech by 2:00 PM ET
Week of March 17, 2025	Finalist Interviews (if necessary)
Week of March 24, 2025	Best and Final Offer (multiple rounds possible)
March 31, 2025	Contract Awarded
April 1, 2025	Begin Implementation
July 1, 2025	Effective Date for Contract and Live Services

- These dates represent a tentative schedule of events. The State reserves the right to modify these dates at any time, with appropriate notice to bidders.
- This RFP does not commit the State to award a contract. The State reserves the right to reject all proposals, and at its discretion, withdraw or amend this RFP at any time.
- The State reserves the right to reject any and all proposals received, for specific reasons, which include, but are not limited to, non-compliance with RFP requirements.
- Responses to this RFP will be the primary source of information used in the evaluation process. Each bidder is requested and advised to be as complete as possible in its response. The State reserves the right to contact any bidder to clarify any response or to request a presentation.

2.5 OTHER INFORMATION

Other documents and information that may be helpful in preparing a proposal may be found on the Comptroller's website [OSC.ct.gov](https://osc.ct.gov) or the State's Plan's website at carecompass...

Bidders are responsible for checking the State Contracting Portal by filtering by organization for Office of the State Comptroller at: <https://portal.ct.gov/DAS/CTSource/BidBoard/DAS> and/or the OSC website for the most up to date information at: <https://www.osc.ct.gov/vendor/rfp.html>. This information will also be posted through ProposalTech.

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Once a bidder signs a confidentiality agreement (NDA), Segal will provide geographic summary census data to the bidder.

3 Response Instructions

3.1 INSTRUCTIONS FOR SUBMITTING PROPOSALS

The State has retained The Segal Company ("Segal") to assist in the evaluation of the proposals. Segal representatives are the sole points of contact for this RFP and the individuals below are the Official Contacts for purposes of this RFP.

All contact for this RFP should be conducted using the messaging feature in Proposal Tech (www.proposaltech.com). Instructions for messaging in ProposalTech: Click on the Messaging/History in the left-hand side menu and on the following page create a "New" message and select "Individual User" to send an email.

Name: Ms. Terry DeMattie
E-Mail: tdemattie@segalco.com

Name: Ms. Staci Rossi
E-Mail: srossi@segalco.com

Detailed instructions for the completion and submission of your proposal will be found in the electronic RFP (eRFP) on ProposalTech. ProposalTech will be available to assist you with technical aspects of utilizing the system.

All sections must be answered completely and as outlined in the RFP, using ProposalTech.

Final submissions must be posted with ProposalTech at www.proposaltech.com before the Closing Date and Time, **February 27, 2025, at 2:00 pm ET**. Access to the eRFP will be locked after that time. Bidders will not be able to post or change their responses.

The State reserves the right to ask bidders follow-up questions through ProposalTech as needed to fully evaluate bidder capabilities.

3.2 RESTRICTION ON CONTACT WITH STATE PERSONNEL

Except as called for in this RFP, the Official Contact is the only authorized contact for this procurement and, as such, handles all related communications on behalf of the OSC. Bidders, prospective bidders, and other interested parties are advised that any communication with any OSC employee(s), including appointed officials, or personnel under contract to the OSC about this RFP is strictly prohibited. Bidders or prospective bidders who violate this instruction may risk disqualification from consideration.

3.3 CONFLICT OF INTEREST

The bidder shall certify in writing that no relationship exists between the bidder and the State of Connecticut that interferes with fair competition or is a conflict of interest, and no relationship exists between the bidder and another person or organization that constitutes a conflict of interest with respect to any State contract. Any successful bidder must execute a contract certifying that no such conflict of interest exists.

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The bidder shall provide assurances that it presently has no interest and shall not acquire any interest, either directly or indirectly, which will conflict in any manner or degree with the performance of its services hereunder. The bidder shall also provide assurances that no person having any such known interests shall be employed during the performance of this contract.

A bidder that is awarded all or part of the RFP is required to comply with the State of Connecticut Code of Ethics. More information can be found in the Contractors Guide to the Code of Ethics available at <https://portal.ct.gov/-/media/Ethics/Guides/2021/Contractors-Guide-to-the-Code-of-Ethics-Rev-11-2021.pdf>.

3.4 NON-DISCLOSURE AGREEMENT (NDA)

Segal will check to see if there is a current Global or Bid-Related NDA/Confidentiality Agreement on file in its system for each bidder to this RFP. No data will be issued without first having a signed NDA/Confidentiality Agreement on file.

If there is no NDA/Confidentiality Agreement on file with Segal, a document will be issued to the interested bidder for signature. Verbiage is non-negotiable. Upon receipt of the newly signed NDA, or confirmation of an existing NDA on file, Segal will establish a secure workspace and upload the data file(s). A system-generated e-mail will be sent to the bidder's designated data recipient, containing a link to instructions for accessing the workspace.

3.5 CONFIDENTIAL RESPONSES

The identification of confidential responses feature has been turned on in Proposal Tech for this RFP. If you feel that a response to a question contains proprietary or confidential information, click the "Disclosure" tab located underneath the question and check the box for "Exemption from Disclosure." Provide a reason for the exemption in the text field provided. If you do not provide a reason for exemption, the question will not be considered answered. **DO NOT** make every response confidential. Please also provide redacted copies of any attachments you submit, if applicable. If you have any questions regarding this process, please contact Proposal Tech Support at 877-211-8316 x84. Thank you.

More detail re: FOIA.

3.6 BIDDER QUESTIONS

Any questions regarding the content of the RFI should be submitted directly to Segal using the "Ask Questions" feature of Proposal Tech on the main RFP page before the deadline to submit questions **on February 14, 2025, at 2:00 P.M. ET**. Questions submitted via ProposalTech from any bidder that is considering a response to this RFP will be answered. Questions via email or telephone will not be accepted. The State reserves the right to provide a combined answer to similar questions. Any and all questions and answers to this RFP will be posted by **February 19, 2025**, on ProposalTech and on the State's website at:

<https://portal.ct.gov/DAS/CTSource/BidBoard> DAS and the OSC website at:

<http://www.osc.ct.gov/vendor/index.html>.

Questions regarding technical issues with the eRFP should be directed to ProposalTech, by calling (877) 211-8316, ext. #84, and asking for support.

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4 Proposal Requirements

4.1 OSC GENERAL TERMS AND CONDITIONS

By submitting a proposal in response to this RFP, a bidder implicitly agrees to comply with the following terms and conditions:

- 4.1.1. Equal Opportunity and Affirmative Action.** The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment, or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate on the basis of disability in admission to, access to, or operation of its programs, services, or activities.
- 4.1.2. Preparation Expenses.** Neither the State nor OSC shall assume any liability for expenses incurred by a bidder in preparing, submitting, or clarifying any proposal submitted in response to this RFP.
- 4.1.3. Exclusion of Taxes.** OSC is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Bidders are liable for any other applicable taxes.
- 4.1.4. Proposed Costs.** No cost submissions that are contingent upon a State action will be accepted. All proposed costs must be fixed through the entire term of the contract.
- 4.1.5. Changes to Proposal.** No additions or changes to a bidder's original proposal will be allowed after submission. While changes are not permitted, OSC may request and authorize bidders to submit written clarification of their proposals, in a manner or format prescribed by OSC, and at the bidder's expense.
- 4.1.6. Supplemental Information.** A bidder's supplemental information will not be considered after the deadline submission of proposals, unless specifically requested by OSC. OSC may ask a bidder to give demonstrations, interviews, oral presentations or further explanations to clarify information contained in a proposal. Any such demonstration, interview, or oral presentation will be at a time selected and in a place provided by OSC. At its sole discretion, OSC may limit the number of bidders invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per bidder.
- 4.1.7. Presentation of Supporting Evidence.** If requested by OSC, a bidder must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFP. OSC may make onsite visits to an operational facility or facilities of a bidder to evaluate further the bidder's capability to perform the duties required by this RFP. At its discretion, OSC may also check or contact any reference provided by the bidder.
- 4.1.8. RFP Is Not an Offer.** Neither this RFP nor any subsequent discussions shall give rise to any commitment on the part of the State or OSC or confer any rights on any bidder unless and until a contract is fully executed by the necessary parties. The contract document will represent the final agreement between the bidder and OSC and will supersede all prior negotiations, representations or agreements, alleged or made, between the parties. The State shall assume no liability for costs incurred by the bidder or for payment of services under the terms of the contract until the successful bidder is notified that the contract has been accepted and approved by OSC and, if required, by the Office of the Attorney General.

Contractors responding to this RFP must include a signed transmittal letter appended to their proposal response.

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- 4.1.9. Acceptance or Rejection by the State.** The State reserves the right to accept or reject any or all, in whole or in part, of proposals submitted for consideration. By responding to this RFP, applicants agree to accept the Comptroller's determinations as final.
- 4.1.10. Conformance with State and Federal Law.** Any contract awarded as a result of this RFP must be in full conformance with statutory and regulatory requirements of the State of Connecticut and the federal government.
- 4.1.11. Ownership of Proposals.** All proposals submitted in response to this RFP are to be the sole property of the State and will be subject to the applicable Freedom of Information provisions of C.G.S. §1-200 *et seq.* In addition to the completed response, any bidder that submits matter that it in good faith determines to contain trade secrets or confidential commercial or financial information must mark such materials as "CONFIDENTIAL" and so designate material through Proposal Tech's "Disclosure" tool.
- 4.1.12. Ownership of Subsequent Products.** Any product, whether acceptable or unacceptable, developed under a contract award as a result of this RFP is to be the sole property of the State of Connecticut, unless explicitly stated otherwise in the RFP or contract.
- 4.1.13. Communication Blackout Period.** Except as called for in this RFP, bidders may not communicate about the RFP with any of the following: staff of the Healthcare Policy & Benefit Services Division within the OSC or members of the HCCCC until the successful bidder (s) are selected. No bidder or bidder's representative may contact an employee of the OSC or member of the HCCCC or their representatives or State carriers including but not limited to Aetna, Anthem, Cigna, CVS Caremark, Hartford HealthCare, Intellihealth (Flyte), Quantum Health, TruData Rx, UConn Health, or Yale, regarding their proposal until final selections have been made. Until such time as final selections are made, any such contact will be considered collusion and may be grounds for disqualification of the bidder's proposal.
- 4.1.14. Availability of Records and Work Papers.** All records, work papers and data used in the process of performing this project must be available for inspection by the State of Connecticut Auditors of Public Accounts for a period of three (3) years or until audited.
- 4.1.15. Stability of Proposed Prices.** Any price offerings from bidders must be valid for a period of one hundred eighty (180) days from the due date of the bidder proposals.
- 4.1.16. Oral Agreements.** Any alleged oral agreement or arrangement made by a bidder with any OSC representative or employee will be superseded by the written contract.
- 4.1.17. Rejection for Default or Misrepresentation.** The State reserves the right to reject the proposal of any Contractor that is in default on any prior contract or for misrepresentation.
- 4.1.18. Rejection of Qualified Proposals.** Proposals are subject to rejection in whole or in part if they limit or modify any of the terms and conditions and/or specifications of the RFP.
- 4.1.19. Collusion.** By responding to this RFP, the bidder implicitly states that the proposal is not made in connection with any competing Contractor submitting a separate response to the RFP and is in all respects fair and without collusion or fraud. It is further implied that the bidder did not participate in the RFP development process, had no knowledge of the specific contents of the RFP prior to its issuance, and that no OSC representative or employee participated directly or indirectly in the bidder's proposal preparation.
- 4.1.20. Conformance to Instructions.** All responses to the RFP must conform to the instructions herein. Failure to provide required information, meet deadlines, answer all questions, follow the required format, or failure to comply with any other requirements of this RFP may be considered appropriate cause for rejection of the submission.

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4.1.21. Appearances. In some cases, bidders may be asked to appear (in person or virtually) to give demonstrations, interviews, presentations or further explanation to the RFP Review Committee.

4.1.22. Final Agreement. The contract will represent the final agreement between the bidder and the State and will supersede all prior negotiations, representations or agreements, alleged or made, between the parties. The State shall assume no liability for payment of services under the terms of the contract until the successful bidder is notified that the contract has been accepted and approved by the Office of the State Comptroller and by the Office of the Attorney General, if required. The contract may only be amended by means of a written signed agreement by the Office of the State Comptroller, the bidder, and the Office of the Attorney General, if required.

4.1.23. Receipt of Summary of State Ethics Laws. The bidder must acknowledge in its cover letter, that it has reviewed the summary of State Ethics Laws.

4.2 STANDARD CONTRACT

By submitting a proposal in response to this RFP, the bidder implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, those detailed in the State's "standard contract" a copy of which is attached to this RFP as Attachment F.

Note: OSC's standard contract includes the State Elections Enforcement Commission's ("SEEC") notice pursuant to C.G.S. § 9-612(f)(2) advising executive branch State contractors and prospective State contractors of the ban on certain campaign contributions and solicitations. If a bidder is awarded an opportunity to negotiate a contract with the State (OSC) and the resulting contract has an anticipated value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts has an anticipated value of \$100,000 or more, the bidder must inform the bidder's principals of the contents of the SEEC notice.

4.3 ADDITIONAL PROCUREMENT REQUIREMENTS

The Connecticut Department of Administrative Services ("DAS") has implemented a requirement that all organizations seeking to do business with the State must register their business on CTSource. The portal for registering a business is accessible at <https://portal.ct.gov/DAS/CTSource>. Organizations will have the ability to view, verify and update their information by logging in to their CTSource account prior to submitting responses to an RFP.

The guide to using CTSource appears at <https://portal.ct.gov/-/media/DAS/CTSource/Documents/CTsource-Supplier-Registration-Portal-User-Guide-Final.pdf>.

Additional required forms as described below must be submitted through CTSource by the deadline for submission of RFP proposals. Paper or electronic copies need not be provided with the submission to the Comptroller's office.

If you experience difficulty **establishing** your organization's account, please call DAS at 860-713- 5095 or send an email to das.ctsource@ct.gov.

If you have difficulty **accessing** your CTSource account call 1-866-889-8533 or email webprocure-support@proactis.com.

State of Connecticut Digital Behavioral Health RFP

5 Additional OSC Requirements

Below are additional requirements for submitting a proposal. By checking “Confirmed”, bidder represents the proposal submitted adheres to these requirements, unless otherwise noted in the proposal. **Failure to agree to any of these requirements may result in disqualification of proposal.** If a bidder takes exception to any of these requirements, it must be so noted in your signed cover letter Form of their proposal response. These requirements will also explicitly apply to any subcontractors used by the bidder to deliver services to the State.

5.1 Bidder will provide all labor, equipment, facilities, supplies, and services as needed/specified.

Single, Radio group.

1: Confirmed,

2: Not Confirmed, please explain: [500 words]

5.2 Bidder will allow the State to test website structure, pages, and review and approve content for usability as determined by the State; usability concerns must be resolved within two (2) business days.

Single, Radio group.

1: Confirmed,

2: Not Confirmed, please explain: [500 words]

5.3 Bidder agrees that all data, records, files and other information relating to the plan belong to the State and are subject to release to the State if the contract is terminated.

Single, Radio group.

1: Confirmed,

2: Not Confirmed, please explain: [500 words]

5.4 Bidder will provide a copy of their emergency operations/disaster recovery/business continuity/pandemic flu plan as part of their response to this RFP.

Single, Radio group.

1: Confirmed,

2: Not Confirmed, please explain: [500 words]

5.5 Bidder will provide detailed information on insurance, bonding, and guarantees offered in the event of issues caused by loss of operations due to an emergency or disaster.

Single, Radio group.

1: Confirmed,

2: Not Confirmed, please explain: [500 words]

5.6 Bidder will disclose offshore relationships, if any.

Single, Radio group.

1: Confirmed,

2: Not Confirmed, please explain: [500 words]

5.7 Bidder must receive prior approval for all communications to Plan Members. This requirement extends to all written content for the website, and electronic and analog communications including, but not limited to, media advertising and regulatory mailings required under federal and/or state law. During open enrollment periods, all media advertising including online ads and social media in Connecticut media markets must also be approved by the State in advance. Failure to comply will result in a penalty payment of 0.50% of total expenses, no less than \$30,000 and no greater than \$100,000.

Single, Radio group.

1: Confirmed,

2: Not Confirmed, please explain: [500 words]

State of Connecticut Digital Behavioral Health RFP

6 Questionnaire

6.1 General

6.1.1 State your organization's legal name, headquarters address, and state of incorporation.

500 words.

6.1.2 How long has your organization been licensed to operate?

500 words.

6.1.3 How many State Health Plan clients do you have?

500 words.

6.1.4 Has your organization experienced a recent change, such as becoming acquired by or merged with another organization in the past 24 months? If yes, please explain.

Single, Radio group.

1: Yes, explain: [500 words],

2: No

6.1.5 Is your organization anticipating restructuring or reorganizing in the next two years? (Include any major staff or office relocations or closings.)

500 words.

6.1.6 Have you had a reportable or a reported event related to breaches of your systems and/or breaches where individual information has been compromised? If so, please explain what procedures were implemented to mitigate the risk of reoccurrence.

500 words.

6.1.7 Are there any outstanding legal actions pending against your organization? If so, explain the nature and status of the action(s).

Single, Radio group.

1: Yes, explain: [500 words],

2: No

6.1.8 Provide any subcontracting and vendor arrangements you have.

500 words.

6.1.9 Do you have any offshore operations? If so, please describe.

Single, Radio group.

1: Yes, describe: [500 words],

2: No

6.1.10 Please provide references, including the names, addresses, e-mail addresses, and telephone numbers of three similar plans that currently use your organization.

500 words.

State of Connecticut Digital Behavioral Health RFP

6.1.11 Please provide two references of clients that recently terminated their contracts with your organization.
500 words.

6.1.12 Briefly describe and provide an overview of the clinical leadership responsible for the proposed services.
500 words.

6.1.13 List any accreditation(s) you have.
500 words.

6.1.14 What innovative approaches do you use to encourage member engagement in the program?
500 words.

6.1.15 Provide the results of your most recent member satisfaction survey or net promotor score.
500 words.

6.2 HIPAA and Security Compliance

6.2.1 Have you had a HIPAA violation in the past three (3) years? If yes, please describe what procedures are implemented to mitigate the risk of reoccurrence.

Single, Radio group.

1: Yes, describe: [500 words] ,

2: No

6.2.2 Have you had a breach of unsecured PHI in the last three (3) years? If yes, describe the incident, explain how you investigated the incident and mitigated its effects, and indicate whether you reported the breach to the HIPAA covered entity, to affected individuals, and/or to the Department of Health and Human Services.

Single, Radio group.

1: Yes, describe: [500 words] ,

2: No

6.2.3 Do you maintain “psychotherapy notes” as defined in the HIPAA privacy rule? If so, for what purposes do you use and/or disclose these notes (with or without a HIPAA authorization)?

Single, Radio group.

1: Yes, describe: [500 words] ,

2: No

6.2.4 Are all electronic transmissions of PHI, including eligibility files, authorizations, reports, etc., encrypted or sent via secure means? Which encryption methods do you support for e-mails and file transmissions? Please describe.

Single, Radio group.

1: Yes, describe: [500 words] ,

2: No

6.2.5 Based on the proposed services, are you prepared to demonstrate compliance with applicable federal and state law, including the MHPAEA, Affordable Care Act, including Section 1557?

500 words.

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6.2.6 Do you intend to use any type of subcontractor to perform the services who would have access to the State's protected health information? If yes, identify each entity and the services it will perform, where they are located, and indicate whether you have a signed HIPAA Subcontractor/Business Associate Agreement in place with that subcontractor.

Single, Radio group.

1: Yes, describe: [500 words] ,

2: No

6.3 Service Capabilities

6.3.1 Is the initial call answered by a live or an automated attendant? If the system is automated, please indicate how long before the participant is connected to a live person.

500 words.

6.3.2 What type of staff answers the initial call?

500 words.

6.3.3 Provide a description and background of each staff that will be providing services to the State.

500 words.

6.3.4 Describe the difference between coaching vs. therapy?

500 words.

6.3.5 How do you determine who receives coaching vs. therapy?

500 words.

6.3.6 How long does the intake process take?

500 words.

6.3.7 What is the average tenure of your staff? Specify by position (i.e. clinician, coach, customer service representative).

500 words.

6.3.8 How many staff would you dedicate to the State?

500 words.

6.3.9 Please provide your organization's guidelines around minimum age requirements for coaching, therapy services, and access to digital content.

500 words.

6.3.10 Does a staff member remain with the participant throughout their experience? If so, what does this relationship entail (e.g., proactive outreach, etc.)? Is there follow-up outreach after care is completed or outside referrals are made?

Single, Radio group.

1: Yes, explain: [500 words] ,

2: No

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6.3.11 Please complete the below:

	Response
Dedicated toll-free number (customized for the State)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Member portal (customized web address for the State)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Mobile app	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Call center	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Language translations-call center (confirm languages)	<i>Compound, Pull-down list.</i> 1: Yes: [500 words], 2: No
Language translations – care team (confirm which languages)	<i>Compound, Pull-down list.</i> 1: Yes: [500 words], 2: No
Language translations – communications (confirm which languages)	<i>Compound, Pull-down list.</i> 1: Yes: [500 words], 2: No
Language translations – mobile app/online platform (confirm which languages)	<i>Compound, Pull-down list.</i> 1: Yes: [500 words], 2: No
Texting / chat with customer service support	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Texting / chat with coach	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Texting / chat with provider	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Is your texting real-time or asynchronous?	<i>Single, Pull-down list.</i> 1: Real-time, 2: Asynchronous
Is your chat real-time or asynchronous?	<i>Single, Pull-down list.</i> 1: Real-time, 2: Asynchronous
Video	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Email	<i>Single, Pull-down list.</i> 1: Yes, 2: No

State of Connecticut Digital Behavioral Health RFP

6.4 Referrals

6.4.1 What method of communication are available for participants to schedule appointment? Describe the process for scheduling an appointment.

500 words.

6.4.2 Do you have real-time availability-checking and appointment scheduling via an app or web tool?

500 words.

6.4.3 Do you offer to schedule appointments on behalf of the participant? (Only answer yes, if your team is trained to offer this support, and not just wait for the participant to ask.) If yes, please briefly describe how your process for provider placement works. Include paths to access this support. (phone, web chat, etc.)

Single, Radio group.

1: Yes, describe: [500 words] ,

2: No

6.4.4 Do you verify all referrals before giving to the participant to make sure they are taking new patients, have open appointments in a reasonable time period for situation, and matches the clinical expertise and needs the participant asked for such as:gender, cultural, language, and diversity needs, hours needed, handicapped accessible, etc.?

500 words.

6.4.5 Do participants have the option to ask for and select providers based on sex, gender identity, race, ethnicity, LGBTQA+ status, Black, Indigenous, and People of Color (BIPOC), or designated preference?

500 words.

6.4.6 Indicate which modalities a participant can use to connect to services.

Multi, Checkboxes.

1: Telephonic,

2: Mobile app,

3: Chat,

4: Website (Online),

5: Email,

6: Video,

7: Other: [20 words]

6.4.7 On average, how long is the wait between contacting providers and having an appointment with a counselor for emergency, urgent, and routine issues? Please answer separately for virtual and in-person.

500 words.

6.4.8 What percentage of cases in 2024 were telephonic vs In-Person vs video?

500 words.

6.4.9 How do you manage individuals who are initially assessed as having long-term treatment needs?

500 words.

6.4.10 Can a participant request the same provider for subsequent episodes or additional therapy?

500 words.

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6.4.11 Can your providers extend therapy services as a network behavioral health provider, billing sessions as outpatient services?

500 words.

6.4.12 What is the behavioral health (mental or substance use disorder) diagnoses or services for which your program does not treat and that necessitate referral outside your program (e.g., psychiatrist, medication management)?

500 words.

6.4.13 How do you monitor and ensure that your clinicians are providing appropriate evidence-based therapies to each participant?

500 words.

6.4.14 Describe your process if a participant needs a higher level of care (rehab, inpatient, partial hospitalization, intensive outpatient).

500 words.

6.5 Crisis-Emergency Services

6.5.1 Do you have a 24/7/365 crisis hotline in addition to basic intake?

500 words.

6.5.2 What is the procedure when a caller presents an emergency?

500 words.

6.5.3 What is your average response time to emergency calls?

500 words.

6.5.4 Is there any follow-up with the participant after an emergency? Please describe.

500 words.

6.6 Program Components

6.6.1 Which of the following components/resources/services does your organization offer as part of the quoted program?

	Response
CCBT (certified cognitive behavioral therapy) trained therapists (virtual or in-person)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
CCBT self-help Digital Cognitive Behavioral Therapy tool or app	<i>Single, Pull-down list.</i> 1: Yes, 2: No

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Clinical lead support group (on-line)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Coaching with licensed coach (not text therapy)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Coaching without licensed coach	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Coaching: If you offer coaching, please describe the credentials of your coaches.	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Coaching - virtual	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Digital exercise tool or app	<i>Single, Pull-down list.</i> 1: Yes, 2: No
E-learning courses	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Experiential workshops (e.g. guided meditation, muscular relaxation exercises and guided imagery)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
General Wellness / Life Coaching	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Interactive interventions(i.e., self-reflections, quizzes, games, self-assessment)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Management Consultation	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Meditation/mindfulness - guided; live or pre-recorded and available on web or app	<i>Single, Pull-down list.</i> 1: Yes, 2: No

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Mental Health training for Managers	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Navigation services	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Neuroscience-based training sessions	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Online assessments (depression, anxiety, stress, etc.)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Online learning modules	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Organizational assessment and consultation	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Peer group support (on-line)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Resilience training/program	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Other, please describe	<i>500 words.</i>

6.6.2 What modalities are available for a participant to connect with their coach/therapist/clinician?

	Response
Chat via web or app	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Counseling platform portal	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Email	<i>Single, Pull-down list.</i> 1: Yes, 2: No
In-Person	<i>Single, Pull-down list.</i> 1: Yes, 2: No

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In-person classes	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Live-stream classes	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Mobile App (Android/iOS)	<i>Single, Pull-down list.</i> 1: Yes, 2: No
On-demand webinars	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Tele (video) counseling sessions	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Telephonic counseling	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Telephonic coaching	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Text messaging / Text-a-Therapist / text therapy	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Videos/Tutorials	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Web-browser	<i>Single, Pull-down list.</i> 1: Yes, 2: No
Other, please describe	<i>500 words.</i>

6.7 Platform & Digital App

6.7.1 Describe your apps, digital tools, screenings, and other features.

500 words.

6.7.2 Describe your expertise in engaging diverse populations (diverse in terms of race, culture, language, gender identity, age, and sexual orientation) and individuals with disabilities.

500 words.

6.7.3 Describe any limitations about co-branding platforms, apps, and materials.

500 words.

6.7.4 What aspects of your mobile app and portal can be customized with the State's branding, content, and preferences? Please be specific in outlining what is customizable/configurable vs. hardwired and include additional fees that may apply, if any.

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500 words.

6.7.5 Do you provide a smartphone app for both Apple and Android users? Do the apps(s) provide identical content to your web platform(s)?

500 words.

6.7.6 How do you accommodate individuals without internet access?

500 words.

6.7.7 How do you accommodate individuals with disabilities?

500 words.

6.7.8 Describe in detail the educational content that is on your site.

500 words.

6.7.9 Describe minimum technology requirements for access to your proposed programs.

500 words.

6.8 Account Management

6.8.1 Will there be a dedicated account management team assigned to the State? If yes, how many people will be assigned and will they have duties to other clients simultaneously?

Single, Radio group.

1: Yes, explain: [500 words],

2: No

6.8.2 What are the responsibilities of the account management team and how will they interact with the State?

500 words.

6.8.3 Will you assign a designated account representative(s) to the State for day to day issues and resolution? Please describe.

Single, Radio group.

1: Yes, describe: [500 words],

2: No

6.8.4 Will the dedicated account management team reside in Connecticut?

500 words.

6.9 Communications

6.9.1 Please describe marketing and communications materials available to the State without additional charge. Please provide sample content and materials.

500 words.

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6.9.2 What have you found to be most effective to reduce stigma around your programs?

500 words.

6.9.3 How do your promotional efforts and services target and engage eligible family members?

500 words.

6.9.4 What differentiates your organization as it relates to communication and engagement of your program?

500 words.

6.9.5 Who creates the digital and educational content and how often is the content updated?

500 words.

6.9.6 What are the sources and credentials of the content curators?

500 words.

6.9.7 Do you subcontract any of your content? If so, please provide the name and location.

Single, Radio group.

1: Yes, explain: [500 words],

2: No

6.9.8 What strategies do you have to communicate the Program to those participants who may not have access to an electronic device or internet?

500 words.

6.9.9 Would you be willing to offer webinars or similar live outreach annually or semi-annually to showcase your offerings to interested state employees? (~30 mins)

500 words.

6.9.10 What other kinds of communications will you employ to raise awareness of your

500 words.

6.10 Reporting

6.10.1 Submit samples of your standard reports.

Single, Pull-down list.

1: Attached,

2: Not provided

6.10.2 Do you provide ad hoc reporting? If so, provide samples and indicate if there is an additional charge.

Single, Radio group.

1: Yes, attached: [500 words],

2: No

6.10.3 What is the frequency of standard reporting?

500 words.

6.10.4 How frequently would you discuss results and recommendations with the State?

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500 words.

6.10.5 What is your definition of engagement?

500 words.

6.10.6 Provide your average utilization for similar clients and size?

500 words.

6.10.7 Define your utilization formula.

500 words.

6.11 Implementation

6.11.1 Provide an implementation plan that incorporates the anticipated effective date. Provide a project overview, timeline and details on specific tasks.

500 words.

6.11.2 Are there any specific reporting or administrative procedures you would require of the State prior to implementation of your program?

500 words.

6.11.3 Do you require an eligibility file?

500 words.

6.11.4 Describe the resources and the estimated number of hours, both total and per week, needed from the State to support and manage the implementation.

500 words.

6.11.5 Briefly describe the biggest implementation risk and how risks will be mitigated.

500 words.

6.11.6 Explain how you integrate and coordinate with other health plan vendors for example EAP, medical providers including those who participate in the State's value based Primary Care Initiative.

500 words.

7 Response Documents

7.1 Complete the BH_StateofCT_Cost and PG_2025.xlsx and upload with your response.

Single, Pull-down list.

1: Attached,

2: Not provided: [200 words]

Attached Document(s): [BH_StateofCT_Cost and PG_2025.xlsx](#)