

Janet T. Mills  
Governor

Jeanne M. Lambrew, Ph.D.  
Commissioner



Maine Department of Health and Human Services  
Division of Contract Management  
11 State House Station  
109 Capitol Street  
Augusta, Maine 04333-0011  
Tel.: (207) 287-3707; Fax: (207) 287-5031  
TTY: Dial 711 (Maine Relay)

May-03-2024

Via Electronic Mail: [Dlouder@mcdph.org](mailto:Dlouder@mcdph.org)

MCD Global Health  
Danielle Louder, Co-Director  
105 Second Street, Suite 2A  
Hallowell, ME 04347

SUBJECT: Notice of Conditional Contract Award under RFP #202402037 Fiscal  
Intermediary for Infectious Disease Prevention Services

Dear Danielle Louder,

This letter is in regard to the subject Request for Proposals (RFP), issued by the State of Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention. The Department has evaluated the proposals received using the evaluation criteria identified in the RFP, and the Department is hereby announcing its conditional contract award to:

- MCD Global Health

The Department will be contacting MCD Global Health soon to negotiate a contract. As provided in the RFP, the Notice of Conditional Contract Award is subject to execution of a written contract and, as a result, this Notice does NOT constitute the formation of a contract between the Department and MCD Global Health. MCD Global Health shall not acquire any legal or equitable rights relative to the contract services until a contract containing terms and conditions acceptable to the Department is executed. The Department further reserves the right to cancel this Notice of Conditional Contract Award at any time prior to the execution of a written contract.

As stated in the RFP, following announcement of this award decision, all submissions in response to the RFP are considered public records available for public inspection pursuant to the State of Maine Freedom of Access Act (FOAA). 1 M.R.S. §§ 401 et seq.; 5 M.R.S. § 1825-B (6).

This award decision is conditioned upon final approval by the State Procurement Review Committee and the successful negotiation of a contract.

Any person aggrieved by this award decision may request an appeal hearing. The request must be made to the Director of the Bureau of General Services, in writing, within 15 days of notification of the contract award as provided in 5 M.R.S. § 1825-E (2) and the Rules of the Department of Administrative and Financial Services, Bureau of General Services, Division of Purchases, Chapter 120, § (2) (2).

Thank you for your interest in doing business with the State of Maine.

Sincerely,

DocuSigned by:  
*Veronica Robichaud*  
2292FAA6880E43B...

Veronica Robichaud  
Chief Operating Officer  
Maine Center for Disease Control and Prevention

DocuSigned by:  
*Debra Downer*  
5DC6307B8558482...

Debra Downer  
Deputy Director for Competitive Procurement  
Division of Contract Management

**STATE OF MAINE  
TEAM CONSENSUS EVALUATION NOTES**

**RFP #:** 202402307

**RFP TITLE:** Fiscal Intermediary for Infectious Disease Prevention Services

**BIDDER:** MCD Global Health

**DATE:** May 1, 2024

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**SUMMARY PAGE**

**Department Name:** Health and Human Services

**Name of RFP Coordinator:** Brittany Hall

**Names of Evaluators:** Robert Chicoria, Tara Thomas, Alyssa Farmer, Emily Bean, and Luke Lester

<u>Pass/Fail Criteria</u>	<u>Pass</u>	<u>Fail</u>
Section I. Preliminary Information (Eligibility)	<b>N/A</b>	<b>N/A</b>
<u>Scoring Sections</u>	<u>Points Available</u>	<u>Points Awarded</u>
Section II. Organization Qualifications and Experience	<b>30.00</b>	<b>N/A</b>
Section III. Proposed Services	<b>40.00</b>	<b>N/A</b>
Section IV. Cost Proposal		
a. Estimated Cost Amount	20.00	N/A
b. Establishment of a Secure Data Transfer System	10.00	N/A
Section IV Total	<b>30.00</b>	<b>N/A</b>
<u>Total Points</u>	<b><u>100.00</u></b>	<b><u>N/A</u></b>

**The Department awards MCD Global Health as the Sole Bidder. The Proposal was evaluated by the Evaluation Team but not scored.**

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**OVERVIEW OF SECTION I  
Preliminary Information**

Section I. Preliminary Information

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**Evaluation Team Comments:**

N/A

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**EVALUATION OF SECTION II  
Organization Qualifications and Experience**

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**Evaluation Team Comments:**

<b>Part IV. Section II. Organizational Qualification and Experience</b>
<b>1. Overview of the Organization</b>
<ul style="list-style-type: none"><li>• Maine-based global public health organization</li><li>• Founded in 1966</li><li>• Has provided services of RFP to the State for more than 15 years and supports multiple State offices</li><li>• Provides embedded staffing support to various MCDC programs</li><li>• Demonstrates a strong understanding of and compliance with Maine OIT requirements and best practices</li><li>• Experience with federal grants</li><li>• Has a continuity of operations plan</li><li>• Is a Category A Public Health Institute</li><li>• Provided three projects, all relevant to the RFP</li></ul>
<b>2. Subcontractors</b>
<ul style="list-style-type: none"><li>• None</li></ul>
<b>3. Organizational Chart</b>
<ul style="list-style-type: none"><li>• Met requirement</li></ul>
<b>4. Litigation</b>
<ul style="list-style-type: none"><li>• None indicated</li></ul>
<b>5. Financial Viability</b>
<ul style="list-style-type: none"><li>• Provided three years of audited financials</li></ul>
<b>6. Certificate of Insurance</b>
<ul style="list-style-type: none"><li>• Provided, indicating professional liability and compliance with Department's Rider B-IT</li></ul>

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**EVALUATION OF SECTION III  
Proposed Services**

**Evaluation Team Comments:**

<b>Part IV, Section III Proposed Services</b>
<b>1. Services to be Provided</b>
<b>Part II</b>
<b>A. Payment Processing</b>
<ul style="list-style-type: none"> <li>• Processed 2846 payments in 2023</li> <li>• Proposed continuation of manual process, which supports Department oversight process</li> <li>• Stated ability to address anticipated increase in number of requests for payments</li> <li>• Proposed secure online data transfer system for collecting the Excel and PDF files</li> <li>• Stated it “Will make every attempt to process and mail” emergency payments within one business day of the Department’s request</li> <li>• Noted ability to process emergency electronic checks, with controlled direct withdrawals from Department’s account</li> <li>• Offered to communicate with Department when its staffing level may impact ability to make payments</li> <li>• Response to A.2 met requirement</li> </ul>
<b>B. Payment Vouchers</b>
<ul style="list-style-type: none"> <li>• Noted that it exceeded RFP requirement in last contract period</li> </ul>
<b>C. Technology Requirements</b>
<ul style="list-style-type: none"> <li>• Proposed continuing with Microsoft Azure GOV. Server 2019 or higher for OS</li> <li>• Stated financial system meets PCI standards</li> <li>• Offered support from 8-5, M-F, primarily through email</li> <li>• Bidder does not utilize SFTP, but does use HTTPS</li> <li>• Developed a secure data transfer system for electronic transmission of specific payment requests and supporting documentation, including Excel and PDF files. Instead of an FTP site that would require installing a 3rd party application to make the secure connection, this “collection” system is a simple to use secure web form, hosted on Microsoft Azure GOV</li> <li>• Bidder stated it will comply with these policies through Microsoft. However, it gives little information on items beyond the baseline security; for instance, incident response, access control, maintenance, and planning are not addressed in response</li> <li>• Response to C.4, and C.6-C.9, met requirements</li> </ul>

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<ul style="list-style-type: none"><li>• Offered limited response, though responses in previous sections appear to imply data will be protected via Microsoft Azure GOV</li><li>• Stated employees complete HIPAA training</li></ul>
<b>D. Policies</b>
<ul style="list-style-type: none"><li>• Met requirement</li></ul>
<b>E. Accounting and Record Retention</b>
<ul style="list-style-type: none"><li>• Response to E.1- E.3, met requirements</li></ul>
<b>F. Confidentiality of Client Information</b>
<ul style="list-style-type: none"><li>• Response to F.1-F.2, and F.4, met requirements</li><li>• Proposed notification within five days</li></ul>
<b>G. Reports</b>
<ul style="list-style-type: none"><li>• Response to G.1 and G.2, met requirements</li></ul>
<b>2. Staffing</b>
<ul style="list-style-type: none"><li>• Response to 2.a. and 2.b, met requirements</li><li>• Does not intend to utilize subcontractors</li></ul>
<b>3. Implementation - Work Plan</b>
<ul style="list-style-type: none"><li>• Met requirement</li></ul>

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**EVALUATION OF SECTION IV  
Cost Proposal**

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Total Estimated Cost
<b>\$223,320.00</b>
Cost for the Establishment of a Secure Data Transfer System
<b>\$15,000.00</b>

**Evaluation Team Comments:**

- Evaluation Team notes that Bidder, as contract incumbent, proposed use of existing Secure Data Transfer System, therefore cost for establishing is N/A
- Evaluation Team notes that Bidder adds two costs not included in current contract



**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

**RFP TITLE:** Fiscal Intermediary for Infectious Disease Prevention Services

**BIDDER NAME:** MCD Global Health

**DATE:** 4/29/24

**EVALUATOR NAME:** Emily Bean

**EVALUATOR DEPARTMENT:** DHHS, MaineCare, Care Coordination

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**Instructions:** *The purpose of this form is to record proposal review notes written by **individual** evaluators for this Request for Proposals (RFP) process. It is **required** that each individual evaluator make notes for each proposal that he or she reviews. No numerical scoring should take place on these notes, as that is performed only during team consensus evaluation meetings. A separate form is available for team consensus evaluation notes and scoring. Once complete, please submit a copy of this document to your Department’s RFP Coordinator or Facilitator for this RFP.*

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**Individual Evaluator Comments:**

Part IV. Section II. Organizational Qualification and Experience
<b>1. Overview of the Organization</b>
<ul style="list-style-type: none"> <li>• Founded in 1966.</li> <li>• 500 team members.</li> <li>• MCD has provided staff support for Maine CDC HIV programs since 1996.</li> <li>• Helped create and launch the Maine Public Health Association, Maine’s Emergency Management System, the Maine Dartmouth Family Practice Residency, Health InfoNet, numerous hyper-local Healthy Community Coalitions and Drug Free Community initiatives, as well as Maine’s very first distance telemedicine capacity.</li> <li>• In the 1970’s, scope expanded to include programming outside of Maine – within the U.S. and globally.</li> <li>• Audited annually by an external accounting firm.</li> <li>• Strong understanding of, and compliance with Maine OIT requirements and best practices.</li> <li>• Maintains and regularly updates an organizational emergency preparedness plan that includes continuity of service delivery and staff activities.</li> <li>• MCD currently has dozens of contracts with the State of Maine.</li> <li>• A very detailed overview of the organization was provided.</li> <li>• Three detailed project examples were provided.</li> </ul>
<b>2. Subcontractors</b>
<ul style="list-style-type: none"> <li>• None</li> <li>• Met requirement.</li> </ul>
<b>3. Organizational Chart</b>
<ul style="list-style-type: none"> <li>• Met requirement.</li> </ul>
<b>4. Litigation</b>
<ul style="list-style-type: none"> <li>• None.</li> </ul>

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<ul style="list-style-type: none"><li>• Met requirement.</li></ul>
<b>5. Financial Viability</b>
<ul style="list-style-type: none"><li>• Financial statements for December 31, 2019 through December 31, 2022 were provided.</li><li>• Met requirement.</li></ul>
<b>6. Certificate of Insurance</b>
<ul style="list-style-type: none"><li>• Met requirement.</li></ul>

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<b>Part IV, Section III Proposed Services</b>
<b>1. Services to be Provided</b>
<b>Part II</b>
<b>A. Payment Processing</b>
<ul style="list-style-type: none"> <li>• In 2023, MCD processed 2,846 payments for the ADAP and Ryan White Part B Program or about 240 payments a month (\$2,217,592 in total).</li> <li>• Long history of working with the Program has made processes efficient.</li> <li>• Equipped to handle the increased number of requests for payments to be processed over the course of the contract term for services.</li> <li>• Will use a secure online data transfer system for collecting the Excel and PDF files.</li> <li>• Will make every attempt to process and mail emergency payments within one business day of the Program's request.</li> <li>• Has the ability to process emergency electronic checks with controlled direct withdrawals from our checking account.</li> <li>• Makes sure the Program is updated in scenarios when specific employees are unavailable.</li> </ul>
<ul style="list-style-type: none"> <li>• Met requirement.</li> </ul>
<b>B. Payment Vouchers</b>
<ul style="list-style-type: none"> <li>• In 2023 a total of over 6,230 Vouchers were purchased: approximately 6,065 Food Vouchers for the Ryan White Part B Program (\$237,250), and 165 \$10-Incentive Food Cards for the TB Assistance program (\$1,650); all within 2 days of the Department's request.</li> <li>• Bidder's embedded staff within the ADAP program will purchase said vouchers.</li> </ul>
<b>C. Technology Requirements</b>
<ul style="list-style-type: none"> <li>• Currently have a streamlined payment/reimbursement, processing, tracking, and reporting system consistent with the Part B Program database. MCD IT staff maintain and update the software as a service (SaaS) system as needed.</li> <li>• Uses Azure, a cloud-based environment (always be connected to the internet at faster than 100mbps).</li> <li>• Met requirements.</li> </ul>
<ul style="list-style-type: none"> <li>• MCD IT is available M-F, 8-5 EDT for technical support via email.</li> <li>• MCD IT staff are Maine based and should there be an unlikely scenario that an issue cannot be resolved remotely, they can go on-site to assist as necessary.</li> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Developed a secure data transfer system for electronic transmission of the specific payment requests and supporting documentation, including Excel and PDF files. Instead of an FTP site that would require installing a 3rd party</li> </ul>

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<p>application to make the secure connection, this “collection” system is a simple to use secure web form, hosted on Microsoft Azure GOV.</p>
<ul style="list-style-type: none"> <li>• MCD is very familiar with the State of Maine’s (SOM) Office of Information Technology (OIT) policies, due to a history of work on other projects involving SOM data.</li> <li>• Since a number of MCD employees serve as embedded staff within Maine CDC programs, MCD often aligns many internal policies regarding privacy, business associate agreements, etc. with those of the State of Maine.</li> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• The data collection system will be hosted in Microsoft’s Azure for Government, a NIST 800-53 compliant environment. Any data that is processed will be stored in SharePoint Online.</li> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Two points of backup for the fastest available restore.</li> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• By utilizing a cloud-based provider, bidder is able to take advantage of Microsoft's Service Organization Controls standards for operational security, which includes testing of the Five Trust Services Criteria.</li> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Met requirement.</li> <li>• All staff are required to complete HIPAA training and obtain a certificate of completion. Trainings are mandatory annually through course work and competency exams completed by each staff member.</li> </ul>
<p><b>D. Policies</b></p>
<ul style="list-style-type: none"> <li>• Met requirement.</li> <li>• MCD has developed and implemented Policy Manuals and documents (e.g. Employee Manual, Bylaws, Best Practices, etc.)</li> <li>• Has confidentiality agreements for all MCD Staff who directly process consumer payments.</li> <li>• Each MCD Staff is also required to complete an annual HIPAA training.</li> <li>• Employee code of ethics</li> <li>• Board of Directors’ Code of Ethics</li> <li>• Bylaws and Policies that Include Ethics Standards or Business Conduct Practices.</li> </ul>
<p><b>E. Accounting and Record Retention</b></p>
<ul style="list-style-type: none"> <li>• Met requirement and already doing this.</li> </ul>

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<ul style="list-style-type: none"> <li>• Met requirement.</li> <li>• Has a Document Retention and Destruction Policy administered by MCD's Finance Department.</li> </ul>
<ul style="list-style-type: none"> <li>• Described process in detail.</li> </ul>
<b>F. Confidentiality of Client Information</b>
<ul style="list-style-type: none"> <li>• MCD currently has a Business Associate Agreement with the Department.</li> <li>• All who directly processes consumer payments as well as those staff that have any role in the ADAP project sign a Confidentiality Statement annually.</li> <li>• These staff have taken part in a Health Insurance Portability and Accountability Act (HIPAA) training developed and offered by The Kansas Department of Health and Environment through the TRAIN Learning Network.</li> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• MCD will notify the Department in the event of a breach or potential breach of confidentiality within five (5) business.</li> <li>• Met requirement.</li> </ul>
<b>G. Reports</b>
<ul style="list-style-type: none"> <li>• There have never been any findings or recommendations.</li> <li>• Payment Reconciliation Report: currently submitted weekly but only charged at the agreed upon monthly rate.</li> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Met requirement.</li> <li>• Will continue to supply the Payment Reconciliation report on a weekly basis if the Department desires it.</li> </ul>
<b>2. Staffing</b>
<ul style="list-style-type: none"> <li>• Met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Met requirement.</li> <li>• No Subcontractors.</li> </ul>
<ul style="list-style-type: none"> <li>• Met requirement.</li> </ul>
<b>3. Implementation - Work Plan</b>
<ul style="list-style-type: none"> <li>• Met requirement.</li> </ul>
<b>Part IV, Section IV. Cost Proposal</b>
<ul style="list-style-type: none"> <li>• Met requirement.</li> </ul>

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**Individual Evaluator Comments:**

<b>Part IV. Section II. Organizational Qualification and Experience</b>
<b>1. Overview of the Organization</b>
<ul style="list-style-type: none"> <li>• Maine Based</li> <li>• Experience with State of Maine programs</li> <li>• In-depth overview</li> <li>• Three project examples all State of Maine projects</li> </ul>
<b>2. Subcontractors</b>
<ul style="list-style-type: none"> <li>• None</li> </ul>
<b>3. Organizational Chart</b>
<ul style="list-style-type: none"> <li>• Detailed with primary points of contact highlighted</li> </ul>
<b>4. Litigation</b>
<ul style="list-style-type: none"> <li>• None</li> </ul>
<b>5. Financial Viability</b>
<ul style="list-style-type: none"> <li>• Financially stable with good financial statements</li> </ul>
<b>6. Certificate of Insurance</b>
<ul style="list-style-type: none"> <li>• Provided</li> </ul>

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<b>Part IV, Section III Proposed Services</b>
<b>1. Services to be Provided</b>
<b>Part II</b>
<b>A. Payment Processing</b>
<ul style="list-style-type: none"> <li>• 1) Processed over 2,800 payments in the past year, Capable of requirements.               <ul style="list-style-type: none"> <li>a) Will use Microsoft’s Azure, a cloud computing platform.</li> <li>b) Meets requirements. Emergency Payments within one business day.</li> <li>c) Meets requirements.</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• 2) Invoices will be submitted in accordance with requirements</li> </ul>
<b>B. Payment Vouchers</b>
<ul style="list-style-type: none"> <li>• 1) In 2023, 6,230 vouchers were purchased within 2 business days meeting requirements.               <ul style="list-style-type: none"> <li>a) Food vouchers purchased 1 or 2 times a month and provided to the Department, meeting requirements.</li> <li>b) Will meet requirements</li> </ul> </li> </ul>
<b>C. Technology Requirements</b>
<ul style="list-style-type: none"> <li>• 1) Provides a SAAS solution.               <ul style="list-style-type: none"> <li>a) Has high-speed internet.</li> <li>b) Has anti-virus software installed.</li> <li>c) All staff have email accounts.</li> <li>d) Compliance with PCI Security Standards.</li> <li>e) Compliance with requirements.</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• 2) Maine-based support Monday- Friday 8-5 EDT with the capability to be onsite if necessary.</li> </ul>
<ul style="list-style-type: none"> <li>• 3) Secure FTP site can accept Excel and {DF files among others.</li> </ul>
<ul style="list-style-type: none"> <li>• 4) Will comply with the full suite of MaineIT policies and standards.</li> </ul>
<ul style="list-style-type: none"> <li>• 5) The proposed system Microsoft’s Azure is fully NIST 800-53 compliant. MCD also has its own standards for physical and data security.</li> </ul>
<ul style="list-style-type: none"> <li>• 6)</li> </ul>
<ul style="list-style-type: none"> <li>• 7) All files will be encrypted.</li> </ul>
<ul style="list-style-type: none"> <li>• 8) Will fully comply with requirements.</li> </ul>
<ul style="list-style-type: none"> <li>• 9) Will fully comply with requirements with reports available in request.</li> </ul>
<ul style="list-style-type: none"> <li>• 10) Will fully comply with requirements.               <ul style="list-style-type: none"> <li>a) All staff are required to complete mandatory HIPPA training annually.</li> </ul> </li> </ul>
<b>D. Policies</b>
<ul style="list-style-type: none"> <li>• 1) Fully Implemented Policy Manuals.               <ul style="list-style-type: none"> <li>a) Confidentiality Agreement For All Staff Who Process Consumer Payments/</li> <li>b) Annual HIPPA Training.</li> </ul> </li> </ul>

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c) Board of Director's Code Of Ethics. d) Bylaws and Policies include Ethics Standards & business CONDUCT practices.
<b>E. Accounting and Record Retention</b>
<ul style="list-style-type: none"><li>• 1) Will account for funds for each reimbursement category separately.</li><li>• 2) All records will be kept a minimum of 7 years.</li><li>• 3) Provided full details on the check processing system.</li></ul>
<b>F. Confidentiality of Client Information</b>
<ul style="list-style-type: none"><li>• 1) Committed to maintain the highest standard of confidential client information.</li><li>• 2) Will comply.</li><li>• 3) Will notify the Department within 5 business days.</li><li>• 4) Will fully collaborate with the Department.</li></ul>
<b>G. Reports</b>
<ul style="list-style-type: none"><li>• Will fully comply with the requirements.</li><li>• Will fully comply with the requirements</li></ul>
<b>2. Staffing</b>
<ul style="list-style-type: none"><li>• Fully complied with the requirements.</li><li>• Not Applicable, no subcontractors.</li><li>• Fully complied with the requirements.</li></ul>
<b>3. Implementation - Work Plan</b>
<ul style="list-style-type: none"><li>• Fully complied with the requirements.</li></ul>
<b>Part IV, Section IV. Cost Proposal</b>
<ul style="list-style-type: none"><li>• Costs are reasonable and well-defined.</li></ul>



**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

**RFP TITLE:** Fiscal Intermediary for Infectious Disease Prevention Services

**BIDDER NAME:** MCD Global Health

**DATE:** 04/29/2024

**EVALUATOR NAME:** Alyssa Farmer

**EVALUATOR DEPARTMENT:** DHHS IDP

\*\*\*\*\*

**Instructions:** *The purpose of this form is to record proposal review notes written by **individual** evaluators for this Request for Proposals (RFP) process. It is **required** that each individual evaluator make notes for each proposal that he or she reviews. No numerical scoring should take place on these notes, as that is performed only during team consensus evaluation meetings. A separate form is available for team consensus evaluation notes and scoring. Once complete, please submit a copy of this document to your Department's RFP Coordinator or Facilitator for this RFP.*

\*\*\*\*\*

**Individual Evaluator Comments:**

<b>Part IV. Section II. Organizational Qualification and Experience</b>
<b>1. Overview of the Organization</b>
<ul style="list-style-type: none"><li>• P: previous experience working with Maine CDC IDP.</li></ul>
<b>2. Subcontractors</b>
<ul style="list-style-type: none"><li>• P: will not use subcontractors.</li></ul>
<b>3. Organizational Chart</b>
<ul style="list-style-type: none"><li>• Bidder met requirement.</li></ul>
<b>4. Litigation</b>
<ul style="list-style-type: none"><li>• Bidder met requirement.</li></ul>
<b>5. Financial Viability</b>
<ul style="list-style-type: none"><li>• Bidder met requirement.</li></ul>
<b>6. Certificate of Insurance</b>
<ul style="list-style-type: none"><li>• Bidder met requirement.</li></ul>

**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

**RFP TITLE:** Fiscal Intermediary for Infectious Disease Prevention Services

**BIDDER NAME:** MCD Global Health

**DATE:** 04/29/2024

**EVALUATOR NAME:** Alyssa Farmer

**EVALUATOR DEPARTMENT:** DHHS IDP

\*\*\*\*\*

<b>Part IV, Section III Proposed Services</b>
<b>1. Services to be Provided</b>
<b>Part II</b>
<b>A. Payment Processing</b>
<ul style="list-style-type: none"> <li>• P: has previously worked with the Ryan White Part B Program and has shown ability to process all required payments.</li> </ul>
<ul style="list-style-type: none"> <li>• P: has previously worked with the Ryan White Part B Program and has experience submitting invoices.</li> </ul>
<b>B. Payment Vouchers</b>
<ul style="list-style-type: none"> <li>• P: has previously worked with the Ryan White Part B Program and is able to purchase all required vouchers in a timely manner.</li> </ul>
<b>C. Technology Requirements</b>
<ul style="list-style-type: none"> <li>• Bidder met requirements.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• P: has previous experience working with the State of Maine Office of Information Technology and MainIT Policies and Standards.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirements.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<b>D. Policies</b>
<ul style="list-style-type: none"> <li>• Bidder met requirements.</li> </ul>
<b>E. Accounting and Record Retention</b>
<ul style="list-style-type: none"> <li>• Bidder met requirements.</li> </ul>
<ul style="list-style-type: none"> <li>• P: keeps physical records at State of Maine office to ensure no HIPAA compliance.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<b>F. Confidentiality of Client Information</b>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder met requirement.</li> </ul>
<b>G. Reports</b>

**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

**RFP TITLE:** Fiscal Intermediary for Infectious Disease Prevention Services

**BIDDER NAME:** MCD Global Health

**DATE:** 04/29/2024

**EVALUATOR NAME:** Alyssa Farmer

**EVALUATOR DEPARTMENT:** DHHS IDP

\*\*\*\*\*

<ul style="list-style-type: none"><li>• a. P: has previously worked with the Ryan White Part B Program and has had successful site visits in the past.</li><li>• b.-d. bidder met requirements.</li></ul>
<ul style="list-style-type: none"><li>• a.-d. bidder met requirements.</li></ul>
<b>2. Staffing</b>
<ul style="list-style-type: none"><li>• Bidder met requirements.</li></ul>
<ul style="list-style-type: none"><li>• P: MCD will not use subcontractors.</li></ul>
<ul style="list-style-type: none"><li>• Bidder met requirements.</li></ul>
<b>3. Implementation - Work Plan</b>
<ul style="list-style-type: none"><li>• Bidder met requirements.</li></ul>
<b>Part IV, Section IV. Cost Proposal</b>
<ul style="list-style-type: none"><li>• Bidder met requirements.</li></ul>

**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

**RFP TITLE:** Fiscal Intermediary for Infectious Disease Prevention Services

**BIDDER NAME:** MCD Global Health

**DATE:** April 26, 2024

**EVALUATOR NAME:** Luke Lester

**EVALUATOR DEPARTMENT:** DAFS/OIT

\*\*\*\*\*

**Instructions:** *The purpose of this form is to record proposal review notes written by **individual** evaluators for this Request for Proposals (RFP) process. It is **required** that each individual evaluator make notes for each proposal that he or she reviews. No numerical scoring should take place on these notes, as that is performed only during team consensus evaluation meetings. A separate form is available for team consensus evaluation notes and scoring. Once complete, please submit a copy of this document to your Department’s RFP Coordinator or Facilitator for this RFP.*

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**Individual Evaluator Comments:**

<b>Part IV. Section II. Organizational Qualification and Experience</b>	
<b>1. Overview of the Organization</b>	<ul style="list-style-type: none"> <li>• Maine-based w/ over 500 team members</li> <li>• Bidder states they have been involved in many other ME medical programs</li> <li>• Financially audited annually</li> <li>• Public Health Institute – Category A</li> <li>• Embedded staffing support in CDC programs</li> <li>• Non-profit organization</li> </ul>
<b>2. Subcontractors</b>	<ul style="list-style-type: none"> <li>• None listed</li> </ul>
<b>3. Organizational Chart</b>	<ul style="list-style-type: none"> <li>• Organizational charts provided with names and positions</li> </ul>
<b>4. Litigation</b>	<ul style="list-style-type: none"> <li>• None Listed</li> </ul>
<b>5. Financial Viability</b>	<ul style="list-style-type: none"> <li>• It appears they are financially viable</li> </ul>
<b>6. Certificate of Insurance</b>	<ul style="list-style-type: none"> <li>• Insurance certificate provided.</li> <li>• If I am reading it properly it appears they meet the needs for these requirements.</li> </ul>

**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

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**BIDDER NAME:** MCD Global Health

**DATE:** April 26, 2024

**EVALUATOR NAME:** Luke Lester

**EVALUATOR DEPARTMENT:** DAFS/OIT

\*\*\*\*\*

<b>Part IV, Section III Proposed Services</b>
<b>1. Services to be Provided</b>
<b>Part II</b>
<b>A. Payment Processing</b>
<ul style="list-style-type: none"> <li>• 2023 – process 2846 payments</li> <li>• It sounds like the data transfer system will be a manual process. I wasn't sure if that is acceptable from the business or if that needs to be automated?</li> <li>• Bidder proposes to make "best effort" for completing emergency payments.</li> </ul>
<ul style="list-style-type: none"> <li>• Meets the requirements</li> </ul>
<b>B. Payment Vouchers</b>
<ul style="list-style-type: none"> <li>• 2023 over 6,230 vouchers were purchased within 2 days of Department's request.</li> </ul>
<b>C. Technology Requirements</b>
<ul style="list-style-type: none"> <li>• Utilize Microsoft Azure GOV. Server 2019 or higher for OS.</li> <li>• Says financial system meets PCI standards.</li> </ul>
<ul style="list-style-type: none"> <li>• Support available 8-5, M-F</li> <li>• Primary path to support is email</li> </ul>
<ul style="list-style-type: none"> <li>• Does not utilize SFTP. This would simply be a form submittal. One question that would be beneficial to understand is to confirm this would at least be using HTTPS?</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder states they will comply with these policies</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder states they will comply with these policies through Microsoft. However, they give little information on items beyond the baseline security – things like incident response, access control, maintenance, planning, etc. are missing in response.</li> </ul>
<ul style="list-style-type: none"> <li>• Meets requirements</li> </ul>
<ul style="list-style-type: none"> <li>• Bidder states they meet the requirements</li> </ul>
<ul style="list-style-type: none"> <li>• Meets requirements</li> </ul>
<ul style="list-style-type: none"> <li>• Meets requirements</li> </ul>
<ul style="list-style-type: none"> <li>• Limited information in response. Says employees complete HIPAA training. They don't specify on environment. Likely thought it was implied through the previous answers that the data will be protected via Microsoft.</li> </ul>
<b>D. Policies</b>
<ul style="list-style-type: none"> <li>• Bidder states they will meet these requirements.</li> <li>• I don't see any information on the outline of the policy manual.</li> </ul>
<b>E. Accounting and Record Retention</b>
<ul style="list-style-type: none"> <li>• Meets requirements</li> </ul>

**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

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**DATE:** April 26, 2024

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\*\*\*\*\*

<ul style="list-style-type: none"> <li>States they keep records for 7 years per policy.</li> </ul>
<ul style="list-style-type: none"> <li>Meets requirements</li> </ul>
<b>F. Confidentiality of Client Information</b>
<ul style="list-style-type: none"> <li>BAA with department. Confidentiality Statement signatures from all involved.</li> <li>Additional training for employees</li> </ul>
<ul style="list-style-type: none"> <li>States they meet the requirements</li> </ul>
<ul style="list-style-type: none"> <li>Says in their agreement they will notify the Department within 5 days.</li> </ul>
<ul style="list-style-type: none"> <li>Limited information, but states they will collaborate with department.</li> </ul>
<b>G. Reports</b>
<ul style="list-style-type: none"> <li>Meets requirements</li> </ul>
<ul style="list-style-type: none"> <li>Meets requirements</li> </ul>
<b>2. Staffing</b>
<ul style="list-style-type: none"> <li>Meets requirements</li> </ul>
<ul style="list-style-type: none"> <li>N/A</li> </ul>
<ul style="list-style-type: none"> <li>Meets requirements</li> </ul>
<b>3. Implementation - Work Plan</b>
<ul style="list-style-type: none"> <li>Meets requirements</li> </ul>

<b>Part IV, Section IV. Cost Proposal</b>
<ul style="list-style-type: none"> <li>If I am correctly understanding that the Secure Data Transfer System is just a Microsoft Form then \$15,000 seems like a high price for that set up.</li> <li>Roughly 6.67 hours per month allotted for Tech Support. \$100 per hour is a reasonable number.</li> </ul>

**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

**RFP TITLE:** Fiscal Intermediary for Infectious Disease Prevention Services

**BIDDER NAME:** MCD Global Health

**DATE:** 4/29/24

**EVALUATOR NAME:** Tara Thomas

**EVALUATOR DEPARTMENT:** DHHS CDC

\*\*\*\*\*

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**Individual Evaluator Comments:**

<b>Part IV. Section II. Organizational Qualification and Experience</b>
<b>1. Overview of the Organization</b>
<ul style="list-style-type: none"><li>• Maine-based global public health org in business founded in 1966</li><li>• Finance dept is familiar with federal grants</li><li>• IT dept is familiar with Maine OIT requirements and best practices</li><li>• Has contracts with various Maine offices</li><li>• Has continuity of operations plans</li><li>• Has worked with this program since 1996</li><li>• Described other relevant projects with Maine CDC</li></ul>
<b>2. Subcontractors</b>
<ul style="list-style-type: none"><li>• None</li></ul>
<b>3. Organizational Chart</b>
<ul style="list-style-type: none"><li>• Included detailed organizational charts</li></ul>
<b>4. Litigation</b>
<ul style="list-style-type: none"><li>• None</li></ul>
<b>5. Financial Viability</b>
<ul style="list-style-type: none"><li>• Provided last three years of financial statements</li><li>• No concerns</li></ul>
<b>6. Certificate of Insurance</b>
<ul style="list-style-type: none"><li>• Provided. Expires at end of calendar year.</li></ul>

**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

**RFP TITLE:** Fiscal Intermediary for Infectious Disease Prevention Services

**BIDDER NAME:** MCD Global Health

**DATE:** 4/29/24

**EVALUATOR NAME:** Tara Thomas

**EVALUATOR DEPARTMENT:** DHHS CDC

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<b>Part IV, Section III Proposed Services</b>
<b>1. Services to be Provided</b>
<b>Part II</b>
<b>A. Payment Processing</b>
<ul style="list-style-type: none"> <li>• Meets requirements</li> <li>• Meets requirements</li> </ul>
<b>B. Payment Vouchers</b>
<ul style="list-style-type: none"> <li>• Meets requirements. Bidder noted that they exceeded the approximate volume listed in the RFP in 2023.</li> </ul>
<b>C. Technology Requirements</b>
<ul style="list-style-type: none"> <li>• Appears to meet requirements – will defer to OIT expertise.</li> <li>• Tech support available during business hours via email, phone, chat, and can provide in-person support if needed.</li> <li>• Meets requirements</li> <li>• Appears to meet requirements – will defer to OIT expertise.</li> <li>• Appears to meet requirements – will defer to OIT expertise.</li> <li>• Appears to meet requirements – will defer to OIT expertise.</li> <li>• Appears to meet requirements – will defer to OIT expertise.</li> <li>• Appears to meet requirements – will defer to OIT expertise.</li> <li>• Appears to meet requirements – will defer to OIT expertise.</li> <li>• Staff complete HIPAA training annually.</li> </ul>
<b>D. Policies</b>
<ul style="list-style-type: none"> <li>• Meets requirements.</li> </ul>
<b>E. Accounting and Record Retention</b>
<ul style="list-style-type: none"> <li>• Meets requirements.</li> <li>• Meets requirements.</li> <li>• Meets requirements.</li> </ul>
<b>F. Confidentiality of Client Information</b>
<ul style="list-style-type: none"> <li>• Meets requirements.</li> <li>• Meets requirements.</li> <li>• Meets requirements.</li> <li>• Meets requirements.</li> </ul>
<b>G. Reports</b>
<ul style="list-style-type: none"> <li>• Meets requirements.</li> <li>• Meets requirements.</li> </ul>
<b>2. Staffing</b>
<ul style="list-style-type: none"> <li>• Meets requirements.</li> </ul>



**STATE OF MAINE  
INDIVIDUAL EVALUATION NOTES**

**RFP #:** 202402037

**RFP TITLE:** Fiscal Intermediary for Infectious Disease Prevention Services

**BIDDER NAME:** MCD Global Health

**DATE:** 4/29/24

**EVALUATOR NAME:** Tara Thomas

**EVALUATOR DEPARTMENT:** DHHS CDC

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<ul style="list-style-type: none"><li>• n/a</li></ul>
<ul style="list-style-type: none"><li>• Meets requirements.</li></ul>
<b>3. Implementation - Work Plan</b>
<ul style="list-style-type: none"><li>• Meets requirements.</li></ul>

<b>Part IV, Section IV. Cost Proposal</b>
<ul style="list-style-type: none"><li>• Proposal notes in several places that the secure data transfer system already exists (and there is a \$10,000 annual fee listed in the fee schedule), so it is not clear why there is a \$15,000 fee to establish a secure data transfer system, as listed on the cover page.</li><li>• Reviewer notes an additional fee for mailing bulk checks. Not clear if this means \$50 total to process and mail bulk checks (fee 1 + 1a) or \$20 total.</li><li>• Proposal notes that staff who make the payments for vouchers are embedded staff under another contract. Need clarification on the \$30 monthly fee for purchasing vouchers.</li></ul>



STATE OF MAINE  
DEPARTMENT OF HEALTH AND HUMAN  
SERVICES

Janet T. Mills  
Governor

Jeanne M. Lambrew, Ph.D.  
Commissioner

AGREEMENT AND DISCLOSURE STATEMENT  
RFP #: 202402037

RFP TITLE: Fiscal Intermediary for Infectious Disease Prevention Services

I, Emily Bean accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

**I agree to hold confidential all information related to the contents of Requests for Proposals presented during the review process until such time as the Department formally releases the award decision notices for public distribution.**

DocuSigned by:

*Emily Bean*

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Signature

Apr-23-2024

Date



STATE OF MAINE  
DEPARTMENT OF HEALTH AND HUMAN  
SERVICES

Janet T. Mills  
Governor

Jeanne M. Lambrew, Ph.D.  
Commissioner

AGREEMENT AND DISCLOSURE STATEMENT  
RFP #: 202402037

RFP TITLE: Fiscal Intermediary for Infectious Disease Prevention Services

I, Robert Chicoria accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

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DocuSigned by:

*Robert Chicoria*

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Signature

Apr-23-2024

Date



STATE OF MAINE  
DEPARTMENT OF HEALTH AND HUMAN  
SERVICES

Janet T. Mills  
Governor

Jeanne M. Lambrew, Ph.D.  
Commissioner

AGREEMENT AND DISCLOSURE STATEMENT  
RFP #: 202402037

RFP TITLE: Fiscal Intermediary for Infectious Disease Prevention Services

I, Alyssa Farmer accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

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DocuSigned by:

*Alyssa Farmer*

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Signature

Apr-24-2024

Date



STATE OF MAINE  
DEPARTMENT OF HEALTH AND HUMAN  
SERVICES

Janet T. Mills  
Governor

Jeanne M. Lambrew, Ph.D.  
Commissioner

AGREEMENT AND DISCLOSURE STATEMENT  
RFP #: 202402037

RFP TITLE: Fiscal Intermediary for Infectious Disease Prevention Services

I, K.Luke Lester accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

**I agree to hold confidential all information related to the contents of Requests for Proposals presented during the review process until such time as the Department formally releases the award decision notices for public distribution.**

DocuSigned by:  
Luke Lester  
681202E102C4461...  
**Signature**

Apr-23-2024  
**Date**



STATE OF MAINE  
DEPARTMENT OF HEALTH AND HUMAN  
SERVICES

Janet T. Mills  
Governor

Jeanne M. Lambrew, Ph.D.  
Commissioner

AGREEMENT AND DISCLOSURE STATEMENT  
RFP #: 202402037

RFP TITLE: Fiscal Intermediary for Infectious Disease Prevention Services

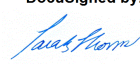
I, Tara Thomas accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

**I agree to hold confidential all information related to the contents of Requests for Proposals presented during the review process until such time as the Department formally releases the award decision notices for public distribution.**

DocuSigned by:  
  
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Signature

Apr-23-2024

Date