

**UTAH DEPARTMENT OF HEALTH AND HUMAN SERVICES
SOLICITATION #DHHS91198**

Invitation for Applications

PART 1: OVERVIEW

Purpose: The Utah Department of Health and Human Services (“DHHS”) is issuing this Invitation for Applications (“IFA”) to seek qualified providers interested in providing breast and cervical cancer screenings to DHHS clients.

Solicitation Number: The solicitation number for this IFA is DHHS91198. Providers should include this solicitation number on all correspondence and documentation relating to this IFA.

PART 2: IFA REQUIREMENTS AND SUBMISSION INSTRUCTIONS

IFA Period: This solicitation is an open-ended invitation and does not have a set closing date. DHHS will evaluate applications as they are received.

Submission by Email only:

Providers must submit DHHS91198 application materials via email to: namitan@utah.gov.

The email subject line should state “IFA DHHS91198” and the provider’s business name. Applications submitted by any method other than email and to any other email address will not be considered.

*****DO NOT SUBMIT APPLICATIONS IN U3P*****

Qualification Requirements: To be awarded a contract, providers must demonstrate that they meet the qualifications on Form 1: Program Partnership Application.

Payment Rate: DHHS intends to award contracts at pre-established rates, as listed on the DHHS91198 Rate Table posted with this solicitation.

Documentation Requirements:

Forms are located at: <https://dhhs.utah.gov/dhhs purchasing/dhhs91198/>

Submit the required documents listed on the Submission Instructions document posted with this IFA.

Pricing: Providers should not submit pricing for this solicitation. Pricing for contracts awarded pursuant to this solicitation are based on rates established by DHHS. Rates are subject to change based upon legislative appropriations or DHHS budgetary action.

No Guarantee of Use: A contract award is not a guarantee that the contractor will be requested to provide any services.

Provider Questions: Questions regarding this solicitation must be submitted through U3P. Questions may include notifying DHHS of any ambiguity, inconsistency, scope exception, excessively restrictive requirement,

or other errors in this IFA. Questions are encouraged. Answers from DHHS will be posted on U3P and may modify requirements. Providers should review questions and answers prior to submitting an application. It is the provider's responsibility to submit their application as required by this solicitation, including any modified requirements contained in an answered question or addendum.

Protected Information: Any provider requesting that a record be protected must include with its application a completed Claim of Business Confidentiality form (<https://purchasing.utah.gov/wp-content/uploads/Business-Request-for-GRAMA-Business-Confidentiality-Claim.pdf>) including a redacted copy of the application for public release that is clearly labeled "REDACTED COPY FOR PUBLIC RELEASE". An entire application cannot be identified as confidential and if submitted as such, will not be considered unless the vendor removes the designation.

PART 3: APPLICATION EVALUATION

Evaluation: The evaluation criteria and any score thresholds are found on the Score Sheet. Upon receipt of an application submitted in response to this IFA, DHHS will evaluate the application to determine if the provider meets the qualifications set forth on the Evaluation Score Sheet and Form 1: Program Partnership Application.

Contracting: DHHS anticipates awarding contracts to all qualified providers. Contracts issued under DHHS91198 will be perpetual and have no end date.

PART 4: GENERAL TERMS

Debarment: By submitting an application, the vendor certifies that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction (contract) by any governmental department or agency. If the provider cannot certify, it must attach a written explanation for review by DHHS.

Utah Tax Liens: By submitting an application, the provider certifies that it does not have any outstanding tax liens in Utah which would prevent it from responding to this IFA under UCA § 63G-6a-905 or, if it does, it will notify the procurement officer.

Costs: All costs incurred by a provider in the preparation and submission of an application are the responsibility of the provider and will not be reimbursed.

Service Changes: DHHS may change service elements during the term of any contract resulting from the IFA in accordance with the Utah Procurement Code.